

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
December 6-8, 2011

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
December 14-16, 2010

Previous Rating
☒ Meets Standards ☐ Does Not Meet Standards

D. Name and Location of Facility

Name
Joe Corley Detention Facility

Address (Street and Name)
500 Hillbig Street

City, State and Zip Code
Conroe, Texas 77301

County
Montgomery

Name and Title of Facility Administrator
(Warden/OIC/Superintendent)
(b)(6), (b)(7)c Warden

Telephone # (Include Area Code)
936-521 (b)(6), (b)(7)c

Field Office / Sub-Office (List Office with oversight responsibilities)
Houston

Distance from Field Office
30 miles

E. ICE Information

Name of Inspector (Last Name, Title and Duty Station)
(b)(6), (b)(7)c LCI/Medical / Nakamoto Group

Name of Team Member / Title / Duty Location
(b)(6), (b)(7)c Admin. CI / Nakamoto Group

Name of Team Member / Title / Duty Location
(b)(6), (b)(7)c Safety-Food Serv. CI / Nakamoto Group

Name of Team Member / Title / Duty Location
(b)(6), (b)(7)c Security CI / Nakamoto Group

Name of Team Member / Title / Duty Location
/ /

F. CDF/IGSA Information Only

Contract Number
DROIGSA-08-0030

Date of Contract or IGSA
July 31, 2008

Basic Rates per Man-Day
63.00

Other Charges: (If None, Indicate N/A)
N/A; ;

Estimated Man-days Per Year
11,550

G. Accreditation Certificates

List all State or National Accreditation[s] received:

☒ 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
2008

Date Last Remodeled or Upgraded
N/A

Date New Construction / Bedspace Added
N/A

Future Construction Planned
☐ Yes ☒ No Date:

Current Bedspace
1287

Future Bedspace (# New Beds only)
Number: Date:

J. Total Facility Population

Total Facility Intake for previous 12 months
7374

Total ICE Mandays for Previous 12 months
4230

K. Classification Level (ICE SPCs and CDFs Only)

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

L. Facility Capacity

	Rated	Operational	Emergency
Adult Male	1287	1287	1287
Adult Female			
<input type="checkbox"/> Facility holds Juveniles Offenders 16 and older as Adults			

M. Average Daily Population

	ICE	USMS	Other
Adult Male	380	480	7
Adult Female	0	20	0

N. Facility Staffing Level

Security:

(b)(7)e

Support:

(b)(7)e

Significant Incident Summary Worksheet

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

<i>Incidents</i>	<i>Description</i>	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault: Offenders on Offenders ¹	Types (Sexual ² , Physical, etc.)	1-S, 5-P	2-P	1-S, 4-P	4-P
	With Weapon	0	0	0	0
	Without Weapon	6	2	5	4
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	0	0	0	0
	With Weapon	0	0	0	0
	Without Weapon	0	0	0	0
Number of Forced Moves, incl. Forced Cell moves ³		0	0	0	0
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		0	0	0	0
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	N\A	N\A	N\A	N\A
	Type (C=Chair, B=Bed, BB=Board, O=Other)	N\A	N\A	N\A	N\A
Number of Times Canines Used in Facility		0	0	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.		----	----	----	----
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	2	1	0	19
	# Resolved in favor of Offender/Detainee	0	0	0	19
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	N\A	N\A	N\A	N\A
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	1	2	3	2
	# Psychiatric Cases referred for Outside Care	0	1	0	0

¹ Any attempted physical contact or physical contact that involves two or more offenders

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

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

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

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

LCI Review Assurance Statement

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

Lead Compliance Inspector: (Print Name) (b)(6), (b)(7)c	Signature (b)(6), (b)(7)c
Title & Duty Location Lead Compliance Inspector, The Nakamoto Group, Inc.	Date December 8, 2011

Team Members

Print Name, Title, & Duty Location (b)(6), (b)(7)c Admin. CI, The Nakamoto Group, Inc.	Print Name, Title, & Duty Location (b)(6), (b)(7)c Security CI, The Nakamoto Group, Inc.
Print Name, Title, & Duty Location (b)(6), (b)(7)c Safety/Food Srv. CI, The Nakamoto Group, 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	Print Name, Title, & Duty Location

Recommended Rating:

☒ Meets Standards
☐ Does Not Meet Standards

Comments:

Significant Incident Summary Worksheet Clarifications:

The statistics reported by the facility are for ICE detainees only.

The two reported alleged detainee on detainee sexual assaults were not substantiated by follow up investigations.

Information on medical referrals as a result of injuries was not provided.

Data on canine use reflects use in areas occupied by ICE detainees only.

The nineteen grievances filed in the last quarter of 2010 involved complaints against one staff member who was using inappropriate language when speaking to the detainees. The staff member was disciplined and reassigned to work in another location.

This facility is operated under the management of the GEO Group, Inc.

Information on the findings of the 2010 annual PBNDS review was provided by the facility.

The facility does not have a medical co-pay system.

The facility does not use (b)(7)(e) on ICE detainees.

The facility does not use (b)(7)(e)

The facility uses a (b)(7)(e) borrowed from the local Sheriff's Office for contraband searches, but has not used the (b)(7)(e) neither in the housing units designated for ICE detainees nor in any area where ICE detainees were present.

The facility does not have automatic sprinklers in detainee housing areas. The Texas Commission on Jail Standards granted a waiver in 2006 on the requirement for this facility to have sprinklers installed in these areas. In December 2010, the ICE/DSCU determined and documented that this facility is in compliance with PBNDS by meeting the intent of the Environmental Health and Safety Standard with regard to Expected Practices - Fire Prevention and Control by using alternative means for fire suppression.

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



U.S. Immigration
and Customs
Enforcement

JUL 9 2012

MEMORANDUM FOR:

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

(Acting) Field Office Director
Dallas Field Office

FROM:

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

(A) *AO*

Assistant Director for Custody Management

SUBJECT:

Joe Corley Detention Facility Annual Review 2011

The annual review of the Joe Corley Detention Facility conducted on December 6 – 8, 2011, in Conroe, TX has been received. A final rating of **Meets Standards** has been assigned and this review is now closed.

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

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

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

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

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

cc: Official File

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Condition of Confinement Inspection Worksheet

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

This Form is to be used for Inspections of Facilities used over 72 Hours



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

5-11-09 update

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

REVISED

Name <i>Joe Corley Detention Facility</i>
Address (Street and Name) <i>500 Hillbig Street</i>
City, State and Zip Code <i>Conroe, Texas 77301</i>
County <i>Montgomery</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 <i>Lead Compliance Inspector</i>
Date[s] of Review From <i>12/06/2011</i> to <i>12/08/2011</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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- Detention Files
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- Staff Training
- Transfer of Detainees

Performance-Based National Detention Standards

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"/>	Detainees are not allowed to exercise control over other detainees.
2. Detainees are protected from: <ul style="list-style-type: none"> Personal abuse Corporal punishment Personal injury Disease Property damage Harassment from other detainees 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are protected from abuse, corporal punishment, injury, disease, damage to personal property, and harassment from others.
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 receive training on identifying signs of detainee unrest during pre-service and annual in-service training.
4. Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The climate and mood of the facility is communicated to the Warden through a shift activity reports prepared every eight hours.
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 Risk Management Administrator is responsible for the emergency plans in this facility and is allotted sufficient time to administer the plans.
6. Each emergency plan is assigned a number and is strictly accounted for. A list identifying the location of each emergency plan is maintained by the Chief of Security or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The emergency plans are numbered, stored in four secure locations and are the responsibility of the Chief of Security.
7. All staff receives training in the emergency plans during their orientation training as well as during their annual training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff receive training on the emergency plans during pre-service and annual in-service training.
8. The General Section of the emergency plans discusses alternate routes to the facility for staff to use in the event the primary route is impassable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Chapter one of the emergency plans addresses alternate routes to the facility if the primary route is closed.
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"/>	Chapter one of the emergency plans addresses response procedures applicable to most emergencies and outlines the manner detainees with special needs are managed.
11. Contingency plans include a procedure for notification of neighbors residing in close proximity to the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, local residents are notified in the event of an emergency.
12. The facility has cooperative contingency plans with applicable: <ul style="list-style-type: none"> Local law enforcement agencies State agencies Federal agencies 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has cooperative plans with the local fire department and Sheriff.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility recently conducted an emergency mock drill with the local fire department.
14. All staff receives copies of the Facility Hostage policy and procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff in this facility receive copies of the hostage policy during pre-service training.
15. Staff is trained to (b)(7)e within 24 hours after release, hostages are screened for medical and psychological effects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff in this facility are instructed to (b)(7)e Hostages receive immediate medical and psychological screening upon release.
16. The facility maintains a list of translator services in the event one is needed during a hostage crisis.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Translator services at this facility are provided by a local contractor.
17. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff and detainees at this facility would receive immediate medical treatment during and after an event.
18. The Food Service Department maintains at least 3-days' worth of emergency meals for staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Food Service Department in this facility maintains a minimum three-day supply of emergency meals.
19. Written plans illustrate locations of shut-off valves and switches for utilities (water, gas, electric).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A manual outlining the (b)(7)(e) (b)(7)(e)
20. Written plans include a Staff Work Stoppage procedure. This procedure is available for limited supervisory review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 1 – 1. EMERGENCY PLANS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
21. (MANDATORY) Written procedures cover: <ul style="list-style-type: none"> • Work/Food Strike • Fire • Environmental Hazard • Detainee Transportation System Emergency • ICE-wide Lockdown • Staff Work Stoppage • Disturbances • Escapes • Bomb Threats • Adverse Weather • Internal Searches • Facility Evacuation • Detainee Transportation System Plan • Hostages (Internal) • Civil Disturbances 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The emergency plans have detailed instructions for responding to a work/food strike, Fire, environmental hazard, detainee transportation system emergency, ICE-wide lockdown, and staff work stoppage. The plans also cover disturbances, escapes, bomb threats, adverse weather, internal searches, facility evacuation, emergencies involving the detainee transportation program, hostages, 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"/>	Facility policy clearly addresses a procedure for post-emergency meetings and discussions.

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 to effectively resolve critical events and provide for a safe environment. Staff are trained to properly respond to emergencies, and the emergency plans are reviewed at least annually. If needed, the facility would use the Hostage Negotiation Team from the Sheriff's Office. The emergency plans were reviewed, and the Chief of Security, Captain, Compliance Administrator, and Inspector were interviewed.

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

/ December 8, 20

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 sets out the guidelines for storing, issuing, and maintaining inventories of hazardous chemicals.
2. Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each area of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inventories are maintained on all toxic chemicals within the facility. Flammable and combustible substances are stored outside of the secure facility.
3. The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. <ul style="list-style-type: none"> 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"/>	The Material Safety Data Sheet (MSDS) binders were up-to-date and contained the proper site maps listing the locations of all storage areas. The binders were readily available in all areas where hazardous chemicals are utilized.
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"/>	Areas using hazardous chemicals such as Food Service and Laundry had personal protective equipment readily available. Staff is instructed to report any hazards 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"/>	Spray bottles are filled with pre-metered, diluted chemicals in the laundry and sent to the housing units for sanitation of the detainee living areas. Detainees are not authorized to use hazardous chemicals. However, staff supervises detainees using diluted chemicals as well. Staff and detainees receive hazardous communication training.
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"/>	Flammable and combustible materials are stored in the maintenance department, which is outside of the facility and not subject to inspection.
8. Lighting fixtures and electrical equipment are installed in storage rooms and other hazardous areas and meet the National Electrical Code requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. All toxic and caustic materials stored in their original containers in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All toxic and caustic materials are stored in their original containers and locked in a secure area.
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"/>	Facility policy dictates that excess chemicals are disposed of according to the MSDS guidelines.
11. Staff directly supervise and account for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, for example, shoe dye. All such products are clearly labeled as such. "Accountability" includes issuing such products to detainees in the smallest workable quantities.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not utilize any products containing methyl alcohol.
12. Every employee and detainee using flammable, toxic, or caustic materials receives advanced training, in accordance with OSHA standards, in their use, storage, and disposal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. (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"/>	A Fire Inspection Survey Report was received from the City of Conroe Fire Marshal's Office on August 18, 2011. The report documented that an inspection of the facility was conducted which revealed no violations.
14. A technically qualified staff member conducts fire and safety inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Fire and Safety Manager conducts the fire and safety inspections. The manager has completed 520 hours of fire science training with the city of Houston. He also worked for the Houston Fire Department for twenty-five years.
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"/>	All safety files are maintained in the Fire and Safety Manager's office.
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 is in receipt of an approval letter from the City of Conroe, Fire Marshal's Office, approving the facility's fire plan. The approval letter is dated November 17, 2011.

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>17. The plan requires:</p> <ul style="list-style-type: none"> Monthly fire inspections. Fire protection equipment strategically located throughout the facility. Public posting of emergency plan with accessible building/room floor plans. Exit signs and directional arrows. An area-specific exit diagram conspicuously posted in the diagrammed area. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has smoke detection throughout, a smoke extraction system, strobe and audio fire alarms, 21 fire hoses, 26 fire extinguishers and cameras. The fire hose cabinets contain a 100', 1 1/2 inch diameter fire hose and are located so that each housing unit is fully accessible. Each of the hose cabinets also contains one of the 26 fire extinguishers with the remaining five extinguishers located in the laundry and food service departments. Monthly fire inspections are conducted by the Fire and Safety Manager. Area specific exit diagrams, exit signs and evacuation postings are available in all areas of the facility.
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"/>	Monthly fire drills are conducted in all areas of the facility. The drills are rotated to ensure that staff on all three shifts participate in a fire drill, in each area, at least annually.
19. A sanitation program covers barbering operations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy outlines the sanitation requirements of the barbershop operation.
20. The barbershop has the facilities and equipment necessary to meet sanitation requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The barbershop is a dedicated room used only for barbering. The barbershop has the proper facilities to meet the sanitation requirements as set forth in the standard.
21. The sanitation standards are conspicuously posted in the barbershop.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The sanitation standards are conspicuously posted on the wall in the barbershop.
22. Written procedures regulate the handling and disposal of used needles and other sharp objects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management policy at the facility regulates the handling of sharps and used needles.
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"/>	Facility policy requires that nurses maintain a working inventory with documentation on each shift.

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
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 has an established cleaning schedule using approved cleansers, disinfectants and detergents. The facility is clean and well maintained.
25. Spill kits are readily available.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spill kits are maintained in the medical department.
26. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A licensed contractor provides disposition of infectious/bio-hazardous waste services to the facility.
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"/>	Staff receives training in universal precautions, personal protective equipment, biohazard waste material and CPR/First Aid. Each of these courses deals with different aspects of preventing contact with blood and other body fluids. These courses are conducted during the staff's initial orientation training. During the staff's annual in-service training, universal precautions training and bio-hazardous waste training is conducted as refresher training.
28. Do the methods for handling/disposing of refuse meet all regulatory requirements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. A Licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. <ul style="list-style-type: none"> At least monthly. The pest-control program includes preventive spraying for indigenous insects. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A licensed is contractor provides a monthly pest control service within the facility. Preventive spraying for indigenous insects is conducted during each monthly visit.
30. Drinking water and wastewater is routinely tested according to a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The incorporated City provides the facility with an Annual Drinking Water Quality Report. The facility maintains a copy of the water quality report on file.
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 policy requires that the emergency power generator is tested under load for one hour twice a month. The test will begin at 9:00 am and end at 10:00 pm.

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
32. The Facility appears clean and well maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All areas of the facility were clean and well maintained.
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"/>	The Fire Safety Manager at this facility is responsible for the environmental sanitation program. Sanitation levels within the facility were well maintained.
35. The Health Services Administrator conducts medical-facility inspections daily. Each inspection includes noting the condition of floors, walls, windows, horizontal surfaces, and equipment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Health Services Administrator documents the daily medical facility inspections. The inspections require noting the level of sanitation as well as maintenance related issues.
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"/>	These duties are assigned to the Fire Safety Manager.
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"/>	These duties are assigned to the Fire Safety Manager. The inspector determined that the policies were adequate to control the sources of injuries and the transmission of communicable diseases.
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"/>	At the time of the inspection, the inspector determined that the facility meets the recognized safety and hygiene standards of all the bulleted regulatory agencies listed in this component.

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

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

This facility has a smoke detection and extraction system, strobe and audio fire alarms, 21 fire hoses, 26 fire extinguishers and cameras. The fire hose cabinets contain a 100', 1 1/2 inch diameter fire hose and are located so that each housing unit is fully accessible. Each of the hose cabinets also contains one of the 26 fire extinguishers with the remaining five extinguishers located in the laundry and food service departments. Administrative offices, corridor areas, booking cells, and cells in the medical department have sprinkler protection. The facility does not have automatic sprinklers in the other detainee housing areas, or in the foyer areas between the secure hallway doors and the secure unit entrance doors. On November 02, 2006, the Texas Commission on Jail Standards granted a waiver to approve Montgomery County's request that sprinklers not be required in detainee housing areas in what would become this facility. In December 2010, the ICE/DSCU determined and documented that this facility is in compliance with PBNDS by meeting the intent of the standard with regard to Expected Practices - Fire Prevention and Control by using alternative means for fire suppression.

(b)(6), (b)(7)c December 8, 2011
Reviewer's Signature / Date

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



PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses a staff transport qualifications file to document compliance with all required 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"/>	All transport staff possess a Class B Commercial Driver's License.
3. Supervisors maintain records for each vehicle operated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All vehicle records are maintained by the Maintenance Supervisor.
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"/>	Vehicle repair forms are used to address needed repairs and to prevent usage until the vehicle is inspected to confirm the repairs corrected the concern.
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 vehicle inspection form is used to address the status of all vehicles. Problems are resolved before the vehicle is put into service.
7. Transporting officers: <ul style="list-style-type: none"> Limit driving time to 10 hours in any 15 hour period when transporting detainees. Drive only after eight consecutive off-duty hours. Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours. Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days. During emergency conditions (including bad weather), officers may drive as long as necessary to reach a safe area—exceeding the 10-hour limit. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A travel log is used to ensure compliance with all Department of Transportation rules concerning driving times. The inspector reviewed the log and did not find any discrepancies.
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"/>	(b)(7)(e) officers with Commercial Drivers Licenses (CDLs) per vehicle are always assigned to transport detainees (b)(7)(e) officer with a CDL is assigned to drive an empty vehicle.

PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. The transporting officer inspects the vehicle before the start of each detail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Every vehicle is inspected before use.
10. Positive identification of all detainees being transported is confirmed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The identification of detainees occurs with a picture and a name listed on a transport roster
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"/>	Detainees are searched and pass through a metal detector before being placed in a vehicle.
12. The facility ensures that the number of detainees transported does not exceed the vehicle manufacturer's occupancy level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Occupancy levels of detainees in vehicles do not exceed the manufacturer's rated capacity.
13. (b)(7)e	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
14. The vehicle crew conducts a visual count once all passengers are on board and seated. • Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transport staff count detainees prior to departure. Additional visual counts are made during the trip and always during a scheduled or unscheduled stop.
15. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transport policy addresses the use of restraints in all vehicles.
16. Officers ensure that no one contacts the detainees. • (b)(7)e officer remains in the vehicle at all times when detainees are present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are never allowed contact with the public during transports.
17. Meals are provided during long distance transfers. • The meals meet the minimum dietary standards, as identified by dieticians utilized by ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are fed before transport. Most trips are less than four hours; however, provisions are made to provide meals during trips if necessary.
18. The vehicle crew inspects all Food Service meals before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). • Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative. • Basins, latrines, and drinking-water, containers, dispensers are cleaned and sanitized on a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meals and related equipment are thoroughly inspected before acceptance and prior to being issued to detainees. Any issues are resolved prior to departure. Staff clean all vehicles and food equipment after every trip.

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
19. Vehicles have: <div style="border: 1px solid black; height: 100px; width: 300px; margin: 10px auto; text-align: center; color: gray;">(b)(7)e</div>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
20. The vehicles are clean and sanitary at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The inspected vehicles were clean and sanitary. This cleaning occurs after each transport.
21. Personal property of a detainee transferring to another facility: <ul style="list-style-type: none"> • Is inventoried. • Is inspected. • Accompanies the detainee. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The following contingencies are included in the written procedures for vehicle crews: <ul style="list-style-type: none"> • Attack • Escape • Hostage-taking • Detainee sickness • Detainee death • Vehicle fire • Riot • Traffic accident • Mechanical problems • Natural disasters • Severe weather • Passenger list is not exclusively men or women or minors 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The transport post orders contain emergency plans that address an attack, escape, hostage-taking, detainee sickness and death, vehicle fire, riot, traffic accident, mechanical problems, natural disasters and severe weather. The plans only address male detainees, as females and juveniles are not subject to transport by staff at this facility.

PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

The facility has established a transportation program for detainees to ensure safe movement to other facilities and to protect staff and the public. Transports are made with (b)(7)e buses.

Detainees are also transported in (b)(7)e Transporting staff comply with all state and federal regulations applicable to this program. Detainees are supervised during transport, provided with their property upon arrival and fed a meal during long trips. The vehicles were inspected and found to be clean, and all documentation relevant to their operation was reviewed and found to be accurate. The Transportation Captain and an ICE Deportation Officer were interviewed concerning this standard.

(b)(6), (b)(7)c / December 8, 2011
Reviewer's Signature / Date

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

1a/

Section II SECURITY

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

PART 2 – 4. ADMISSION AND RELEASE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Admission processing includes an orientation of the facility. The orientation includes; unacceptable activities and behavior, and corresponding sanctions. How to contact ICE. The availability of pro-bono legal services and how to pursue such services. Schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The orientation at this facility includes the classification supervisor/staff giving an orientation briefing to all new detainees. The orientation briefing is supplemented with both the ICE and facility detainee handbooks which are given to detainees upon admittance.
2. Medical screenings are performed by medical staff <u>or</u> persons who have received specialized training for the purpose of conducting an initial health screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical screenings are done by the medical staff in a large room with cubicles. Medical screening staff were licensed nursing staff who also reviewed medications that were transported with the detainees.
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"/>	In this facility, detainees are processed and classified before being taken to a housing unit. Documents are used to identify and classify each detainee. Classification and file material was reviewed and was found to be an integral part of the classification process.
4. All new arrivals are searched in accordance with the "Detainee Search" standard. An officer of the same sex as the detainee conducts the search and the search is conducted in an area that affords as much privacy as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All new detainee arrivals are searched using a metal detection chair system, and are pat searched. Clothing items are searched by the officer prior to being stored in the detainee's property. When observed, the officer conducting the pat search was of the same gender as the detainee.
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"/>	Per facility staff, detainees are not strip searched. If probable cause existed for such a search, ICE would be contacted for approval. A Deportation Officer confirmed that guidance would be offered in the event a strip search became necessary. In this facility, any strip search is approved by a supervisor and documented.

PART 2 – 4. ADMISSION AND RELEASE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
6. The "Contraband" standard governs all personal property searches. IGSAs and CDFs use or have a similar contraband standard. Staff prepares a complete inventory of each detainee's possessions. The detainee receives a copy. All identity documents are inventoried and given to ICE staff for placement in the A-file. All funds and valuables are safeguarded in accordance with ICE Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility staff inventories all property. All detainees verify and sign for their property. A copy of the inventory is maintained in the detainee's detention file until release, and is then transferred to the A-file. Funds and valuables are receipted by (b)(7)(c) facility staff and the detainee, and are immediately secured.
7. Staff completes Form I-387 or similar form for CDFs and IGSAs for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any claims regarding missing property are logged and handled by the captain in charge of transportation. He conducts an investigation, including reviewing any video tapes, and interviews with staff. He then forwards his investigation report to the Warden for review and action. Per a Deportation Office, property missing from another facility is handled by ICE.
8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are issued appropriate clothing, bedding, and personal hygiene items.
9. All releases are coordinated with ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As verified by a Deportation Office assigned to this facility, the facility does not release any detainees unless paperwork is received from ICE.
10. Staff completes paperwork/forms for release as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Each detainee receives a receipt for personal property secured by the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees receive a receipt for all personal property collected during admission and sign a receipt for their property when released.
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"/>	The facility maintains a hard copy of records and documentation for admission. The facility also uses a password protected computer program which is accessible to staff as needed.

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The inspector was informed by a Deportation Officer that all release, removal, or transfer information is entered into the EDAM in a timely manner.
14. All orientation material shall be provided in English, Spanish, and other language(s) as determined by the Field Office Director.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All orientation materials are in English and Spanish.

PART 2 – 4. ADMISSION AND RELEASE

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

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

The facility's Admission and Release department processes detainees in accordance with the standards. Detainees are searched through use of a metal detecting chair system, and are pat searched upon admission. When observed, the officer conducting the search was of the same gender as the detainee. Strip searches are not conducted on detainees at this facility. The classification supervisor/staff gives an orientation briefing to all new detainees while they are in the Intake area hold rooms. The orientation briefing is supplemented with both the ICE and facility detainee handbooks given to the detainee upon admission. Funds, valuables and property are receipted and the detainee receives a copy. Detainees are immediately classified and a housing assignment is given by the Classification Officer prior to the detainee being placed in general population. The rating of this standard was based on a review of detainee files and interviews with classification and admissions staff, and a Deportation Officer.

(b)(6), (b)(7)c / December 8, 201
Reviewer's Signature / Date

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

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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"/>	This facility uses an objective classification system that assigns points based on factual information including the detainee's history, current charge, gang and medical information, and any substantiated/documented institutional information.
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"/>	Detainees are immediately classified before leaving the Intake area. All relevant classification materials are reviewed during the classification process, and the classification supervisor reviews every classification decision. There are currently three classification specialists and one classification supervisor assigned to this facility.
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"/>	All substantiated and background information is reviewed when processing a detainee for classification. If information is unavailable, the classification supervisor immediately contacts ICE for the necessary information.
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"/>	Opinions and unsubstantiated reports are not used when determining classification assignments.
5. Housing assignments are based on classification-level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees are assigned housing based on their respective classification levels. The facility uses a three tier system to ensure detainees are not inappropriately mixed.
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"/>	Level one detainees are never in contact with level three detainees. All detainees receive the same recreation privileges and recreate with similarly classified detainees.
7. Detainee work assignments are based upon classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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"/>	This facility completes reassessments every 60 to 90 days. A file review confirmed these assessments are done. Special reassessments are completed within 24 hours.
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"/>	In this facility, detainees have an opportunity to appeal their classification level by utilizing the established grievance process.
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"/>	Detainees in this facility are notified of the appeal outcome within 10 days. The appeal is answered by staff and sent to the Warden within five days for review. Per the Classification Supervisor, the detainee receives a response within ten days. There have been no classification appeals within the past 12 months.
11. Classification designations may be appealed to a higher authority such as the Facility Administrator or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility, classification appeals are sent to the Warden for final action.
12. The Detainee Handbook or equivalent for IGSA's explains the classification levels, with the conditions and restrictions applicable to each.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility detainee handbook explains the classification levels and restrictions.
13. In SPCs and CDFs detainees are assigned color-coded uniforms and IDs to reflect classification levels. In IGSA's a similar system is utilized for each level of classification.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility uses a color-coded system for identification. Blue indicates level one, green indicates level two, and red is used for level three detainees.

PART 2 – 5. CLASSIFICATION SYSTEM

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

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

This facility uses an objective classification system that assigns points based on factual information including the detainee's history, current charge, security threat group information (gang affiliation), medical status, separation needs, and any relevant institutional information. All detainees are assigned housing based on their respective classification levels before leaving the Intake area. The facility uses a three tier system to ensure detainees are not inappropriately mixed. Detainees may appeal their classification through the administrative grievance process, and a response is given to the detainee within ten days. The rating of this standard was based on a review of the classification process materials and 15 classification files, on personal observations and on interviews with the classification staff.

(b)(6), (b)(7)c December 8, 2011
Reviewer's Signature / Date

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

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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"/>	Facility policy addresses the identification, seizure, and disposition of all contraband.
2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All contraband in this facility is retained for evidence if necessary for disciplinary reasons or criminal prosecution
3. Staff returns property not needed as evidence to the proper authority. Written procedures cover the return of such property.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, contraband is returned to the proper authority and documented according to facility policy.
4. Altered property is destroyed following documentation and using established procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All altered property is considered contraband, documented, and destroyed in accordance with policy.
5. Before confiscating religious items, the Facility Administrator or designated investigator contacts a religious authority.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, local religious authorities are consulted as necessary concerning such contraband before confiscation.
6. Staff follows written procedures when destroying hard contraband that is illegal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Illegal hard contraband is destroyed according to facility policy.
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"/>	Soft contraband is returned to the detainee, mailed to family or friends or given to an approved visitor.
8. Detainees receive notification of contraband rules and procedures in the Detainee Handbook and notified when property is identified and seized as contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility detainee handbook outlines contraband seizure rules. Detainees are notified when contraband is seized.
9. Facilities with Canine Units only use them for contraband detection.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility does not maintain a canine unit. Canines units borrowed from another facility are used only for contraband detection.

PART 2 – 6. CONTRABAND

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

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

The facility has an established program to identify, seize, document and dispose of contraband to ensure a safe environment for staff and detainees. The facility Master Contraband Log listed various forms of illegal items and documented their disposition. All areas of the facility are searched on a regular and irregular basis. The Chief of Security, Administrative Captain and Compliance Administrator were interviewed concerning this standard.

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

December 8, 2011

Reviewer's Signature / Date

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

12/8/11

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"/>	The Warden and facility department heads visit housing and activity areas weekly.
2. At least one male and one female staff are on duty where both males and females are housed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Female ICE detainees are not housed at this facility.
3. Comprehensive annual staffing analysis determines staffing needs and plans.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility conducts an annual staffing analysis, which was reviewed.
4. Essential posts and positions are filled with qualified personnel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Only properly trained and qualified staff are assigned to critical posts.
5. Every Control Center officer receives specialized training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Control Center assigned officers receive on-the-job and specialized training.
6. Policy restricts staff access to the Control Center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, only approved staff may enter the Control Center.
7. Detainees do not have access to the Control Center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in this facility are never allowed into the Control Center for any reason.
8. Communications are centralized in the Control Center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All communications in this facility are centralized in the Control Center.
9. Facility security and safety will be monitored and coordinated by a secure, well-equipped, and continuously staffed control center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are (b)(7)e officers assigned to the Control Center from 8 AM until midnight, and (b)(7)e assigned to the post from midnight to 8 AM. The Control Center was secure and well equipped to effectively operate the facility and to monitor safety and security.
10. The Control Center maintain employee Personal Data Cards (Form G-74 or contract equivalent).	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	In this facility, staff information cards are maintained in the shift supervisor's office.
11. Recall lists include the current home telephone number of each employee. Phone numbers are updated as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, staff phone numbers are listed on information cards and updated as needed.
12. Staff makes watch calls (b)(7)e between 6 PM and 6 AM.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility operates a watch call program between 6 PM and 6 AM, with staff contacting the control center (b)(7)e
13. Information about routine procedures, emergency situations, and unusual incidents will be continually recorded in permanent post logs and shift reports.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Shift Activity Log documents all activity occurring on all eight hour shifts. The Post Log documents all incidents or activities occurring in a housing unit.

PART 2 – 7. FACILITY SECURITY AND CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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 identification of all individuals entering and leaving the facility is checked by the lobby officer.
15. All visits officially recorded in a visitor logbook or electronically recorded.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All visitors sign into a logbook
16. The facility has a secure, color-coded visitor pass system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses red or yellow passes for visitors.
17. Officers monitor all vehicular traffic entering and leaving the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility monitors all vehicle traffic entering and leaving the facility.
18. The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: <ul style="list-style-type: none"> • The driver's name • Company represented • Vehicle contents • Delivery date and time • Date and time out • Vehicle license number • Name of employee responsible for the vehicle during the facility visit 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The back gate (rear entrance to the secure perimeter) officer documents the vehicle driver's name, company represented, vehicle contents, date, time, date and time out, license number, and the employee responsible for the vehicle.
19. Officers thoroughly search each vehicle entering and leaving the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, staff search every vehicle entering and leaving the facility.
20. The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has established written policy to prevent the introduction of contraband.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Housing unit searches in this facility occur at irregular times.
25. Security officer posts located in or immediately adjacent to detainee living areas to permit officers to see or hear and respond promptly to emergency situations. Personal contact and interaction between staff and detainees is required and facilitated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Housing unit officers called "rovers" monitor activity through large Plexiglas windows, enter the units when necessary and talk to detainees when needed.
26. There are post orders for every security officer post.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are post orders for every security assignment.

PART 2 – 7. FACILITY SECURITY AND CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
27. Detainee movement from one area to another area is controlled by staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff physically escort detainees from one area to another.
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"/>	Housing unit officers called "rovers" monitor activity through large Plexiglas windows, enter the units when necessary and talk to detainees when needed. Recreation areas are also monitored in this manner.
29. Every search of the SMU and other housing units is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Special management unit searches are documented.
30. The SMU entrance has a sally port.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The special management unit designated for use if needed for ICE detainees has a sally port, with access to the unit requiring the passage through (b)(7)e (b)(7)e
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"/>	All tools used in and removed from the special management units are inventoried and inspected.
32. The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> • Posts to be inspected • Required inspection forms • Frequency of inspections • Guidelines for checking security features • Procedures for reporting weak spots, inconsistencies, and other areas needing improvement 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has a comprehensive security inspection program listing all areas to be inspected. Daily inspections are completed in secure areas such as housing units. A Common Area Search Log is used to document searches in other areas. Work requests are forwarded to the Maintenance Department to correct problems and are monitored by the Chief of Security.
33. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All officers in this facility conduct security checks of their areas every shift and document this activity in the Post Log.
34. Documentation of security inspections is kept on file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chief of Security maintains a file of all security inspections.
35. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, the Chief of Security addresses recurring problems with the Maintenance Supervisor.

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
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"/>	All tools brought into the facility, through either the back gate or front entrance, are inspected and inventoried. The same tools are also inspected and inventoried before removal.
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"/>	Supply rooms, plumbing fixtures, drains, and other administrative areas are searched on an irregular basis. These searches are documented in the Common Area Search Log.
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"/>	All outside areas are inspected every shift.
39. Daily procedures include: <ul style="list-style-type: none"> • Perimeter alarm system tests. • Physical checks of the perimeter fence. • Documenting the results. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All outside areas, including the perimeter fence and alarm system, are inspected every shift. The inspection results are documented in the Shift Activity Log.
40. Visitation areas receive frequent, irregular inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Visiting Room is inspected on an irregular basis.
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 providing oversight to the security inspection process which covers all areas of the facility.
42. The Maintenance Supervisor and Chief of Security or equivalent make monthly fence checks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Maintenance Supervisor and Chief of Security inspect the perimeter fence monthly, on different days.

FACILITY SECURITY AND CONTROL

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

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

The facility employs a security inspection program to ensure the safety of staff, detainees, volunteers, the public, and contractors. All areas of the institution are searched in an organized manner, so as not to set a predictable pattern to allow detainees to defeat the purpose of the program. Staff conduct security processes, document their actions, and establish systems of problem resolution. Special emphasis is placed on the Control Center, tools and vehicles entering the facility, and the perimeter fence. Facility policy was reviewed, and the Chief of Security, Administrative Captain and Compliance Administrator were interviewed concerning this standard.

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

December 8, 2011

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

Reviewer's Signature / Date

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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"/>	Detainee funds and valuables are properly itemized, separated and stored. Funds and valuables are secured in separate safes that are only accessible by designated supervisors.
2. Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Large valuables are tagged with a property receipt and stored in the secure property room.
3. Staff search and itemize the baggage and personal property of arriving detainees, including funds and valuables, using a personal property inventory form that meets the ICE standard, in the presence of the detainee unless otherwise instructed by the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff searches all property and baggage of arriving detainees, including funds and valuables. The detainee's property is then itemized on a property form.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility, policy requires that (b)(7)e officers verify funds and valuables.
5. For IGSA's and CDFs, Is the facility using a personal property inventory form that meets the ICE standard?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Staff gives the detainee the original inventory form, filing copies in the detainee's detention file and the personal property container.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility staff gives the detainee the original inventory form and distributes the copies to the detainee's file and property containers.
7. Staff forwards an arriving detainee's medicine to the medical staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires that any incoming medications be confiscated and forwarded to medical staff.
8. Staff searches arriving detainees and their personal property for contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires that detainees be scanned using a body orifice scanning system and then pat searched. Policy also requires that the Intake Officer shall receive, search and inventory the detainee's personal property.
9. Property discrepancies are immediately reported to the Chief of Security or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility, policy requires that any property discrepancies be immediately reported to the chief of security.

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. Staff follows written procedures when returning property to detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy outlines written procedures for returning property to detainees upon release.
11. CDF/IGSA facility procedures for handling detainee property claims are similar to the ICE standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	According to on site ICE staff, in the event of a property discrepancy, ICE staff handles the property claims.
12. The facility attempts to notify an out-processed detainee that he/she left property in the facility. <ul style="list-style-type: none"> By sending written notice to the detainee's last known address; via certified mail; The notice states that the detainee has 30 days in which to claim the property, after which it will be considered abandoned. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Staff obtains a forwarding address from each detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. It is standard procedure for (b)(7)(e) officers to be present when removing/documenting the removal of funds from a detainee's possession.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility it is standard procedure for (b)(7)(e) staff to be present and witness the removal of funds from a detainee's possession.
15. Staff issue and maintain property receipts (G-589s) in numerical order.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff at this facility maintain property receipts in numerical order.
16. Staff complete and distribute the G-589 in accordance with the ICE standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Property forms at this facility are completed and distributed to the detainee, the detainee's file and the cash envelope according to standard.
17. The processing officer records each G-589 issuance in a G-589 logbook. The record includes the initials and star numbers of receipting officers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility, the processing officer initials and signs the property receipt logbook.
18. Staff tags large valuables with both a G-589 and an I-77.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Large valuables at this facility are appropriately tagged.
19. The supervisor verifies the accuracy of every G-589.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility, the booking supervisor verifies the accuracy of property receipt forms.

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
20. The supervisor ensures that: <ul style="list-style-type: none"> • Detainee funds are, without exception, deposited into the cash box; • Every property envelope is sealed. • All sealed property envelopes are placed in the safe. • Large, valuable property is kept in the secured locked area. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility the booking supervisor ensures that funds are deposited into the drop safe, the envelopes are properly sealed and that large property is kept in a secured, locked area.
21. Staff tags every baggage/facility container with an I-77, completed in accordance with the ICE standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff tags all baggage containers (mesh bags) with a completed I-77 tag.
22. Staff secures every container used to store property with a tamper-proof numbered strap.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility staff secures every container with a tamper-proof, numbered strap.
23. A logbook records detainee name, A-number/detainee-number, baggage-check/ I-77 number, security tie-strap number, property description, date issued and date returned.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility staff utilizes a logbook to record the detainee's name, A-number, property description, date issued and date returned.
24. In SPCs, the Supervisory Immigration Enforcement Agent, accompanied by a detention staff member conducts a comprehensive weekly audit.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Staff does not conduct weekly audits at this facility.
25. The Facility Administrator has established quarterly audits of baggage and non-valuable property as facility policy, the audits occur each quarter and audits are verified and entered in the log.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility staff conduct quarterly audits of baggage and non-valuable property.
26. The facility positively identifies every detainee being released or transferred.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires that each detainee released or transferred is positively identified.
27. Staff routinely informs supervisors of lost/damaged property claims. Claims are properly investigated and missing or damaged property claim reports are filed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff at the facility report all property claims. Claims are properly investigated and claim reports are filed.
28. Every lost/damaged property report completed in accordance with the ICE standard on an I-387 (or equivalent). The Facility Administrator receives a copy and staff place the original in the detainee's A-file, retaining a copy in the detainee's detention file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All lost or damaged property reports are documented and placed in the detainee's detention file.

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

A review of the policies, procedures and practices at this facility indicate that controls are sufficient to ensure that detainee property is safeguarded. Staff interviews and the observation of the intake and release procedures verify that the processing of funds, valuables and non-valuable property is conducted under conditions that enhance the security of detainee property.

(b)(6), (b)(7)c / December 8, 2011

Reviewer's Signature / Date

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

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PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The hold room is situated in a location within the secure perimeter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hold rooms in this facility are found 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"/>	In this facility, hold rooms are large, clean, well ventilated, well lit with large observation windows, and have activating switches outside of the entrance door.
3. The hold rooms contain sufficient seating for the number of detainees held.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is sufficient seating in each hold room for the number of detainees held.
4. No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside hold rooms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sleeping structures or other apparatuses are not permitted in hold rooms.
5. Hold room walls and ceilings are escape and tamper resistant.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The hold room walls and ceilings in this facility are escape and tamper resistant.
6. Detainees are not held in hold rooms for more than 12 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are normally held no more than four hours in a hold room.
7. Male and females detainees are segregated from each other at all times.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Female ICE detainees are not held at this facility.
8. Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Upon arrival, detainees are provided with basic hygiene items.
9. If the hold room is not equipped with toilet facilities, an officer is posted within visual or audible range to allow detainees access to such on a regular basis.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The hold rooms are equipped with toilet facilities.
10. All detainees are given a pat down search for weapons or contraband before being placed in the hold room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are pat searched and pass through a metal detector before being placed in hold rooms.
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"/>	When detainees are removed from hold rooms, staff inspect and clean the area. Problems are documented and reported to the shift supervisor.
12. (MANDATORY) There is a written evacuation plan. <ul style="list-style-type: none"> There is a designated officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's written evacuation plan requires the Intake officer to remove detainees in case of any emergency.

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
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"/>	On-site medical staff would respond immediately to the scene of the emergency and, if indicated, an emergency squad would be summoned.
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). ▪ If multiple-occupant hold rooms are used, there is an additional 7 unencumbered square feet for each additional detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The hold rooms in this facility are large multi-occupant areas that have sufficient room for the rated capacity.
15. <u>In SPCs designed after 1998</u> the hold rooms are equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They are: ▪ Compliant with the American Disabilities Act. ▪ Small hold rooms (1 to 14 detainees) have at least one combi-unit. ▪ Large hold rooms (15 to 49 detainees) are provided with at least two combi-units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The hold rooms in this facility are equipped with stainless steel lavatory/toilet fixtures that comply with the Americans With Disabilities Act.
16. <u>In SPCs designed after 1998</u> the hold rooms have floor drain(s).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hold rooms at this facility have floor drains.
17. <u>In SPCs designed after 1998</u> , the door to the hold room swings outward and the door complies with the specifications outlined in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The doors to all hold rooms at this facility 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy prohibits males over seventy from being placed in a hold room. The facility does not house females or juveniles.
19. Minors (under 18) are confined apart from adults, except for immediate relatives or guardians.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Minors are not housed at this facility.
20. Each detention facility maintains a detention log (manually or by computer) for each detainee placed in a hold cell. ▪ The log includes the required information specified in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility maintains a manual detention log for detainees placed in a hold room.
21. Officers provide a meal to any detainee detained in a hold room for more than six hours. ▪ 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"/>	Detainees are normally held in hold rooms for less than four hours. The facility does not house females or juveniles.

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
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 maximum number of detainees allowed in a hold room is listed in a memo outside the entrance 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"/>	The Intake officer screens all new arrivals for obvious mental or physical problems.
25. Staff does not permit detainees to smoke in a hold room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The hold rooms, and the entire facility, are non-smoking.
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"/>	

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

The facility houses detainees in hold rooms pending further processing in a safe, secure, and reasonably comfortable environment. Detainees are normally held less than four hours, and are continuously observed. The Chief of Security, Administrative Captain and Compliance Administrator were interviewed. The hold rooms were also inspected.

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

/ December 8, 2011

Reviewer's Signature / Date

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

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PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The security officer[s], or equivalent, has attended an approved locksmith training program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Key Control Officer is a certified locksmith. The training file was reviewed to confirm this level of training.
2. The security officer, or equivalent, has responsibility for all administrative duties and responsibilities relating to keys, locks etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Key Control Officer administers the entire key and lock control and maintenance program.
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"/>	All staff, including contractors, are trained by the Key Control Officer as to key and lock control.
4. The security officer, or equivalent, maintains inventories of all keys, locks and locking devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Key Control Officer maintains all locking device inventories. These inventories were inspected and found to be accurate.
5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Key Control Officer follows a quarterly and annual preventive maintenance schedule. The Preventive Maintenance Log was reviewed and found to be accurate.
6. Facility policies and procedures address the issue of compromised keys and locks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Compromised keys and locks are immediately removed from service, replaced, and destroyed.
7. The security officer, or equivalent, develops policy and procedures to ensure safe combinations integrity.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy indicates safe combinations are secured in the (b)(7)(C) and only the Key Control Officer, with the Warden's approval, can change safe combinations. The secured combinations were observed.
8. Only dead bolt or dead lock functions are used in detainee accessible areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Only dead bolt locks, with a sliding bar to secure the door, are used in detainee accessible areas.
9. Non-authorized locks (as specified in the Detention Standard) are not used in detainee accessible areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The facility does not use grand master keying systems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. All worn or discarded keys and locks cut up and properly disposed of.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Worn, damaged, or discarded keys and locks are destroyed and removed from the facility.

PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. Padlocks and/or chains are not used on cell doors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are housed in open dormitories with no cell doors. Padlocks and chains are not used on the doors to these housing units. Padlocks and chains cannot be used on special management unit cell doors.
13. The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to <ul style="list-style-type: none"> Occupational Safety and Environmental Health Manual, Chapter 3 National Fire Protection Association Life Safety Code 101. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The housing units hold no more than thirty detainees.
14. The operational keyboard sufficient to accommodate all the facility key rings including keys in use is located in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
15. Procedures in place to ensure that key rings are: <ul style="list-style-type: none"> Identifiable Numbers of keys on the ring are cited? Keys cannot be removed from issued key rings 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An inspection of the key rings and inventory log indicated the keys are identifiable, the ring has an attached metal emblem stamped with the number of keys assigned to that ring and that keys cannot be removed.
16. Emergency keys are available for all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency keys were inspected and found to allow access to all areas of the facility.
17. The facility uses a key accountability system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Authorization is necessary to issue any restricted key.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Individual gun lockers are provided. <ul style="list-style-type: none"> They are located in an area that permits constant officer observation. In an area that does not allow detainee or public access. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gun lockers are found inside a secure area outside of the facility, and under camera monitoring. Neither detainees nor the public have access to these areas.
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 key accountability program in this facility requires that all keys be counted at midnight every day.

PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> • 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"/>	All staff and contractors in this facility are trained as to proper key control.
22. Locks and locking devices are continually inspected, maintained, and inventoried.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Key Control Officer monitors, inspects, maintains, and keeps an inventory of all locks and locking devices.
23. Each facility has the position of Security Officer. If not, a staff member appointed the collateral duties of security officer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Key Control Officer is considered 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, only the Key Control Officer can add or remove a key from a ring.
25. The splitting of key rings into separate rings is not authorized.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Key rings in this facility are permanently connected and cannot be split.

PART 2 – 10. KEY AND LOCK CONTROL

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

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

The facility has established a key and lock control program that, by ensuring keys and locks are properly controlled and maintained, facilitates safety and security. The Key Control Officer inventories, maintains, and services all locking devices on a regular basis, trains staff on key control techniques, and maintains an inventory of all locks and keys. Keys are stored in a secure area and can only be retrieved by approved staff. The Chief of Security, Administrative Captain, and Compliance Administrator were interviewed. Key storage areas and the Lock shop were inspected.

(b)(6), (b)(7)c / December 8, 2011

Reviewer's Signature / Date

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

PART 2 – 11. POPULATION COUNTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Staff conducts a formal count at least once each 8 hours (no less than three counts per day). At least one of these counts shall be a face to photo count.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff count detainees eight times (8) in a twenty-four hour period, with two (2) face-to-photo counts.
2. Activities cease or are strictly controlled while a formal count is being conducted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility allows no activities during counts.
3. There is a system for counting each detainee, including those who are outside the housing unit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each detainee in this facility is counted in a housing unit, and those outside that area are counted with an "out count".
4. Formal counts in all units take place simultaneously.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All counts in this facility occur at the same time.
5. Officers do not allow detainee participation in the count.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees do not participate in any count in this facility.
6. A face-to-photo count follows each unsuccessful recount.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unsuccessful recounts in this facility result in a face-to-photo count.
7. Officers positively identify each detainee before counting him/her as present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Officers in this facility are required during every count to confirm that each person counted is a live body.
8. Written procedures cover informal and emergency counts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility conducts a count if there is suspicion of an escape or other emergency.
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 Classification Office maintains the "out count" of detainees temporarily outside of the facility.
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"/>	

PART 2 – 11. POPULATION COUNTS

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

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

The facility counts detainees eight times a day to ensure good order and accountability. Staff are trained in the counting process and identify detainees with a photo comparison twice a day to further the level of accountability. A count was observed during this review, and the Chief of Security was interviewed.

(b)(6), (b)(7)c / December 8, 2011
 Reviewer's Signature / Date

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

PART 2 – 12. POST ORDERS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Every fixed post has a set of Post Orders.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each post was assigned a hard copy of the relevant post orders.
2. In SPCs and CDFs, Post Orders are arranged in the required six-part folder format.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	This facility uses a five -part format for all post orders.
3. Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Post Orders were observed to contain updates and revisions inside the front cover.
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 Compliance Administrator is responsible for maintaining all Post Orders.
5. Review, updating, and reissuing of Post Orders occurs regularly and at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All Post Orders are reviewed annually.
6. The facility administrator authorizes all Post Order changes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Facility Administrator signs each Post Order.
7. The facility administrator has signed and dated the last page of every section.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, the Warden signs each Post Order.
8. A Post Orders master file is available to all staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A master file of Post Orders can be retrieved from the Chief of Security.
9. Procedures keep Post Orders and logbooks secure from detainees at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post Orders and logbooks are stored at the officer's station outside of the housing units. Detainees have no access.
10. Copies of the applicable Post Orders are retained at the post only if secure from detainee access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post Orders and logbooks are stored at the officer's station outside of the housing units. Detainees have no access.
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"/>	Before an officer reports to any assignment, supervisors ensure the officer has read and signed the appropriate Post Order.
12. In SPCs and CDFs, each time an officer receives a different post assignment, he or she is required to read, sign, and date those Post Orders to indicate he or she has read and understands them.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, before an officer reports to any assignment, supervisors ensure the officer has read and signed the appropriate Post Order.
13. Anyone assigned to an armed post qualifies with the post weapons before assuming post duty.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Only staff with firearms certification are assigned to 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"> (b)(7)e 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Post Orders for armed posts provide instructions for escape attempts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post Orders for the armed posts include instructions as to how to address escape attempts.
16. The Post Orders for housing units track the daily event schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, the Daily Activity Log tracks all activities and events.
17. Housing unit post officers record all detainee activity in a log. The Post Orders include instructions on maintaining the logbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, the Daily Activity Log tracks all activities and events. The Post Orders explain how entries are made to the log.

PART 2 – 12. POST ORDERS

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

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

The facility uses Post Orders to explain policies and to ensure consistency, which enhances security and good order and protects the staff, the detainees and the public. The Post Orders are specific to the assignment, cover all activities, are reviewed annually, and are kept in a secure location. The Post Orders were reviewed, and the Administrative Captain was interviewed.

(b)(6), (b)(7)c December 8, 2011

Reviewer's Signature / Date

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

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PART 2 – 13. SEARCHES OF DETAINEES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There are written policy and procedures governing searches of housing areas, work areas and of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has written policy governing searches of housing areas, work areas, and detainees. The policy was current and reviewed by facility staff on October 24, 2011.
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"/>	Strip searches and body cavity searches are not conducted on ICE detainees at this facility. All new detainee arrivals are searched using a metal detecting chair system, and are pat searched. When observed, the officer conducting the search was of the same gender as the detainee. Detainees were observed being pat searched at various times throughout this review.
3. Written policy and procedures require staff to avoid unnecessary force during searches and to preserve the dignity of the detainee being searched, to the extent practicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Written policy and procedures require staff to leave a searched housing area, work area and detainee property in its original order, to the extent practicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees are pat searched and screened by metal detectors routinely to control contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are pat searched and screened per use of the metal detecting chair system. These searches are used to control contraband.
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"/>	The facility does not strip search detainees, but indicated if probable cause existed for such a search, ICE would be contacted for approval. A Deportation Officer confirmed that guidance would be offered in the event a strip search became necessary.
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"/>	This facility has never authorized a body cavity search.

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"/>	Facility policy establishes procedures for the use of dry cells, but none have been used for ICE detainees. Per the Assistant Warden, if use of a dry cell was indicated, one of the observation cells in the medical unit would be used as these cells include video cameras for continuous monitoring.
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"/>	The facility has procedures in place for maintaining and documenting chain-of-custody for evidence.
10. Canines are not used in the presence of detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy allows canines to be used for contraband detection, but their use for intimidation, control, search of detainees, or involvement in a use of force is prohibited. Canines have been used to search for contraband in other parts of the facility, but have never been used in the ICE detainee housing units. Per the Assistant Warden, should there ever be just cause for the canines to search the detainee housing units for contraband; the detainees would be moved to the recreation area while the search was conducted.

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.)

Strip searches and body cavity searches are not conducted on ICE detainees at this facility. All new detainee arrivals are searched for contraband per use of a metal detection chair system, and are pat searched. Per observations during the review, the officer conducting the search was of the same gender as the detainee. Detainees were observed being pat searched throughout this review. Canines have not been used to search the ICE detainee housing units or in the presence of ICE detainees. The rating of this standard is based on personal observations, on a review of the facility policy on searches, and on interviews with the Warden, the Assistant Warden and the Chief of Security.

(b)(6), (b)(7)c / December 8, 2011
 Reviewer's Signature / Date

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a Sexual Abuse and Assault Prevention and Intervention Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy establishes a Sexual Abuse and Assault Prevention and Intervention Program that includes staff training, detainee education, intake screening to identify those at risk for sexual assault and those who are potentially assaultive, monitoring of detainee activity with requirements to report any suspected abuse or assault and to intervene if indicated, prompt protection of any alleged victim with immediate referral to medical staff and transport to a local hospital if indicated for evaluation, treatment, counseling and the collection of forensic evidence. Facility policy also requires that ICE be notified of any incidents involving ICE detainees, that all allegations be investigated, that the county Sheriff's office be notified and that statistical tracking of all alleged incidents be maintained.
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"/>	In this IGSA facility, the policy is approved by the Warden.
3. Tracking statistics and reports are readily available for review by the inspectors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Statistics are tracked on a Performance Monitoring Instrument. Reports for the two alleged sexual assaults logged during the past twelve months were available for review.
4. All staff is trained, during orientation and in annual refresher training, in the prevention and intervention areas required by the Detention Standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the facility Training Administrator, and as confirmed per a review of class sign-in logs, all staff receive training on sexual abuse and assault prevention and intervention during orientation and annual in-service training. Refresher training is provided four times each year.

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
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"/>	Information on the sexual abuse and assault prevention program is included in the facility detainee handbook, which is available in both English and Spanish. As confirmed per a review of completed forms, detainees document receipt of the facility detainee handbook during intake.
6. The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observations in the detainee housing units confirmed the availability of the Sexual Assault Awareness Notice, which is included in a packet of information hung near the detainee telephones.
7. The Sexual Assault Awareness Information brochure is available for detainees. (Required in SPCs and CDFs.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, sexual assault awareness information is included in the facility detainee handbook.
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"/>	Classification staff interview each newly arrived detainee and complete a Sexual Assault/PREA (Prison Rape Elimination Act) Screening checklist to identify those at high risk for sexual assaultive or sexual victimization potential. Information on those so identified is forwarded to the Warden for review. If confirmed to be at high risk, the detainee is housed in the medical unit until a cell becomes available in a location that does not expose the detainee to the general population. Per the Warden, in the past twelve months, three ICE detainees have been so identified and housed.
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"/>	Two alleged incidents of detainee on detainee sexual assault were reported in the past twelve months. Per the Health Services Administrator (HSA), and as confirmed by the PREA Coordinator, there have been no other allegations.

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
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"/>	Per the PREA Coordinator, there have been no incidents of sexual abuse or assault by staff on a detainee during the past twelve months.
11. There is prompt and effective intervention when any detainee is sexually abused or assaulted and policy and procedures for required chain-of-command reporting.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with facility policy and as confirmed per a review of documentation on two allegations of detainee on detainee sexual assault in the past twelve months, prompt chain-of-command notifications were made. The detainees involved were immediately referred to medical staff for evaluation and placed in safe housing pending further investigation.
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"/>	In accordance with procedures established in facility policy, and as confirmed by the PREA Coordinator and a review of documentation on two allegations of detainee on detainee sexual assault, the county Sheriff's office was promptly notified and responded to the facility to initiate an investigation.
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"/>	In accordance with facility policy and as confirmed by the PREA Coordinator and a review of documentation on two allegations of detainee on detainee sexual assault, notifications were promptly made to facility administration, local law enforcement and ICE. Sexual assault was not proven in either case.

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
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 facility policy, and as confirmed per the HSA, a victim of sexual assault would be referred to a community hospital for treatment and the gathering of forensic evidence. Of the two detainees alleging sexual assault in the past twelve months, one reported the incident two months later, and his report was inconsistent with known facts. The second report was made five days after the alleged incident. This detainee was transported to a community hospital where treatment and counseling was provided and an attempt to gather forensic evidence was made.
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"/>	The PREA Coordinator maintains files on allegations of sexual abuse or assault. An administrative assistant to the Warden logs these incidents on a computerized Performance Monitoring Instrument.

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.)

Sexual Assault Awareness information was observed to be readily available to the detainee population. Per a review of completed reports and tracking documentation, and interviews with the Health Services Administrator and the PREA Coordinator, there were two allegations of detainee on detainee sexual assault in the past twelve months and no allegations of staff on detainee sexual abuse or assault.

On March 21, 2011, an 18 year old male detainee alleged that five days previous he had been raped by another detainee in the food service bathroom. The alleged perpetrator was placed in Segregation and the alleged victim was transported to the Herman Memorial Hospital of the Woodlands for evaluation, counseling and the attempted gathering of forensic evidence. Upon return to the facility, the detainee was placed in a medical observation cell pending follow up with mental health staff and the physician. Facility chain-of command and ICE officials were notified. The county Sheriff's office was notified, responded to the facility and initiated an investigation. No physical or forensic evidence to support the allegation was found. The case was presented to the Grand Jury, but no indictment was issued.

On September 29, 2011, a 50 year old male detainee alleged he had been assaulted in July 2011. He was referred to medical staff, and the Sheriff's office and ICE officials were notified. The detainee was placed in a medical observation cell pending follow up with mental health staff. Further investigation revealed his alleged attackers had been transferred out of the facility a month before

the reported incident allegedly occurred. No evidence of the alleged assault could be found, and the investigation was closed.

The standard's rating was based on a review of facility policies, the facility detainee handbook and incident reports and other documentation related to the two alleged incidents of sexual assault, on interviews with the Warden, the Assistant Warden, the Health Services Administrator and the Training Administrator/PREA Coordinator, and on observations in the medical unit and the detainee housing units.

(b)(6), (b)(7)c / December 8, 2011
Reviewer's Signature / Date

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

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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"/>	As confirmed per a review of the documents, the facility has extensive policy and procedures in place to govern Special Management Unit (SMU) operations.
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"/>	Detainees are placed in the SMU, with appropriate documentation, only as a last resort to protect their safety.
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"/>	Detainees are only placed in Disciplinary Segregation status after an Institutional Disciplinary Panel hearing. This placement requires a guilty finding to an act which would allow such placement.
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"/>	Prior to being placed in the SMU, detainees are taken to the medical unit for a screening assessment.
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"/>	Written policy requires that all items brought into and removed from the SMU be inspected, and if necessary, inventoried.
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"/>	No more than one detainee is housed in each cell in the SMU.
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 cells were observed to be well ventilated, well lit and sanitary.
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"/>	A Unit Log is maintained to document all activities in and visitors to the SMU.
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 required information is included in the logs maintained by this facility. A Unit Log is maintained for all activities and visitors to the SMU.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>10. In SPCs and CDFs, a separate log is maintained in the SMU that all persons visiting the unit must sign and record:</p> <ul style="list-style-type: none"> ▪ The time and date of the visit, and ▪ Any unusual activity or behavior of an individual detainee, with a follow-up memorandum sent through the facility administrator to the detainee's file. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The SMU Unit Log in this facility documents the date and time staff enter and leave the unit. Unusual activity is noted in the log.
<p>11. A Special Management Housing Unit Record is maintained on each detainee in an SMU:</p> <ul style="list-style-type: none"> ▪ In SPCs form I-888 (Special Management Housing Unit Record) is prepared immediately upon the detainee's placement in the SMU. ▪ In CDFs and IGSA facilities form I-888 or a comparable form is used. <p>In SPCs and CDFs:</p> <ul style="list-style-type: none"> ▪ By the end of each shift, the special housing unit officer records: <ul style="list-style-type: none"> ○ Whether the detainee ate, showered, exercised, and took any medication, and ○ Any additional information, for example, if the detainee has a medical condition, has exhibited suicidal or assaultive behavior, etc. ▪ When a health care provider visits an SMU detainee, he or she signs that individual's record, and the housing officer initials the record after all medical visits are completed and no later than the end of the shift. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A Detention Log (similar to the I-888) and Cell Card are initiated for all detainees placed in the SMU. Facility practice is also consistent with the other portions of this component.
<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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, all records related to a detainee's placement in the SMU are forwarded to the Classification Office upon a detainee's release from the unit.
<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"/>	Facility policy lists property to be retained by detainees when placed on Administrative or Disciplinary Segregation status.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
14. There are written policy and procedures concerning privileges detainees may have in each type of segregation. (In Administrative Segregation, detainees generally receive the same general privileges as detainees in the general population, as is consistent with available resources and safety and security considerations.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy lists privileges to be retained by detainees on Administrative or Disciplinary Segregation status. Detainees in Administrative Segregation receive the same privileges as those in general population consistent with available resources and safety and security considerations.
15. Detainees in Administrative Segregation are provided opportunities to spend time outside their cells (over and above the required recreation periods), for such activities as socializing, watching TV, and playing board games and may be assigned to work details (for example, as orderlies in the SMU).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in Administrative Segregation receive approximately four hours of time outside their cell daily to watch TV or recreate.
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"/>	All detainees receive an irregular thirty minute visual check. Detainees exhibiting unusual behavior are transferred to an observation cell in the medical unit.
17. The shift supervisor sees each segregated detainee daily, including weekends and holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Shift supervisors visit the SMU every shift, if detainees are present. The facility has a designated SMU for ICE detainees. No detainees were housed in this SMU during the review.
18. The facility administrator (or designee) visits each SMU daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chief of Security would visit the designated SMU daily, if detainees were present. No detainees were in the designated SMU during the review.
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"/>	In this facility, when a detainee is housed in the designated SMU, nursing staff make rounds in the unit twice each day and document those visits on detainee-specific segregation records. Any actions taken are documented on a medical form designed for this purpose. There were no detainees in the designated SMU during the review.
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"/>	SMU detainees receive the same meal as the general population

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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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"/>	Detainees may shave and shower daily, and do receive the same basic services as the general population receives.
22. Only for documented medical or mental health reasons are detainees denied such items as clothing, mattress, bedding, linens, or a pillow. If a detainee is so disturbed that he or she is likely to destroy clothing or bedding or create a disturbance risking harm to self or others, the medical department is notified immediately and a regimen of treatment and control instituted by the medical officer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. Detainees in an SMU may write and receive letters the same as the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the SMU have the same correspondence privileges as those in the general population.
24. Detainees in an SMU ordinarily retain visiting privileges.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the SMU may receive visits.
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Visits are not restricted or disallowed at this facility. All visitation is non-contact.
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Visits are not restricted or disallowed at this facility. All visitation is non-contact.
27. Under no circumstances is a detainee permitted to participate in general visitation while in restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees do not visit in restraints.
28. In SPCs and CDFs, detainees in protective custody and violent and disruptive detainees are not permitted to use the visitation room during normal visitation hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All visits are non-contact. The facility would restrict visits when circumstances require.
29. In SPCs and CDFs, violent and disruptive detainees are limited to non-contact visits and, in extreme cases, not permitted to visit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All visits in this facility are non-contact.
30. Ordinarily, detainees in SMUs are not denied legal visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Legal visitation is never denied.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
31. There are policy and procedures for a situation where special security precautions for legal visitation have to be implemented and for advising legal service providers and assistants prior to their visits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy allows for legal services providers to be advised of special circumstances; however, non-contact visitation normally resolves this potential issue.
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"/>	Visits by clergy are always allowed.
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 facility library provides reading material on a rotating basis.
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"/>	A LexisNexis computer is available for use by detainees housed in the SMU. Generally, legal material is allowed in the cell without limit, and upon request, legal material in the detainee's property is immediately provided.
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"/>	There are no restrictions to law library access for detainees in the SMU.
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"/>	Facility policy states legal material will be brought to detainees on Disciplinary Segregation status upon request
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"/>	
38. Recreation for detainees in the SMU is separate from the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Recreation occurs in the SMU in an area outside of the unit. General population detainees have no access to this area.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
39. The facility has policy and procedures to ensure detainees who must be kept apart never participate in activities in the same location at the same time. (For example, recreation for detainees in protective custody is separated from other detainees.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The SMU recreation area has separate, secure areas to keep detainees away from each other. When necessary, the detainees can also be placed in different secure areas at least fifty feet apart.
40. Detainees in the SMU are offered at least one hour of recreation per day, scheduled at a reasonable time, at least five days per week. Where cover is not provided to mitigate inclement weather, detainees are provided weather-appropriate equipment and attire.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the SMU are allowed one hour of recreation daily, indoors or outdoors as conditions dictate, at least five days per 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"/>	Recreation would only be denied if the detainee was violent or disruptive. If necessary, the shift supervisor would approve an immediate denial. For longer periods, the Warden would approve the denial. No ICE detainees have been denied recreation in this facility.
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 Chief of Security would review the denial when conducting seven day reviews of the status of all detainees in the SMU, and then make a recommendation to the Warden. No ICE detainees have been denied recreation in this facility.
43. Denial of recreation privileges for more than 15 days requires the concurrence of the facility administrator and the health authority. It is expected that such denials shall rarely occur, and only in extreme circumstances. The facility notifies ICE/DRO when a detainee is denied recreation privileges for more than 15 days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approval by the Warden would be required for any recreation denial of over fifteen days. No ICE detainees have been denied recreation in this facility.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>44. Ordinarily, detainees in Administrative Segregation have telephone access similar to detainees in the general population, in a manner consistent with the special security and safety requirements of an SMU.</p> <p>Detainees in Disciplinary Segregation may be restricted from using telephones to make general calls as part of the disciplinary process; however, ordinarily, they are permitted to make direct and/or free and legal calls as described in the Detention Standard on Telephone Access, except for compelling and documented reasons of safety, security, and good order.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the SMU generally have full telephone access. Any restriction would be the result of disciplinary action. Legal calls would not be restricted.
<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"/>	

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>47. A copy of the decision and justification for each review is given to the detainee, unless, in exceptional circumstances, this provision would jeopardize security. The detainee is given an opportunity to appeal a review decision to a higher authority within the facility.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The detainee does not receive a copy of the decision, but is advised verbally. The detainee is allowed to appeal the decision.
<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"/>	The detainee may appeal the decision of the Chief of Security at any time.
<p>49. If a detainee has been in Administrative Segregation for more than 30 days and objects to this status, the facility administrator reviews the case to determine whether that status should continue, taking into account the views of the detainee. A written record is made of the decision and the justification.</p> <p>A similar review is done every 30 days thereafter.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chief of Security, after completing and documenting the required thirty-day review, makes a recommendation to the Warden as to continuing or discontinuing the detainee's status. The Warden makes the final decision.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
50. When a detainee has been held in Administrative Segregation for more than 30 days, the facility administrator notifies the Field Office Director, who notifies the ICE/DRO Deputy Assistant Director, Detention Management Division.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Warden would advise the Field Office Director of any detainee held in the SMU over thirty days.
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"/>	Only the Institutional Disciplinary Panel may place a detainee in Disciplinary Segregation status, and only after a hearing resulting in a finding the detainee committed a prohibited act. Disciplinary Segregation status is limited to sixty days.
53. After the first 30 days in Disciplinary Segregation, the facility administrator sends a written justification to the Field Office Director, who may decide to transfer the detainee to a facility where he or she could be placed in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
54. Before a detainee is placed in Disciplinary Segregation, a written order is completed and signed by the chair of the IDP (or equivalent). A copy is given to the detainee within 24 hours (unless delivery would jeopardize safety, security, or the orderly operation of the facility). The IDP chairman (or equivalent) prepares the Disciplinary Segregation Order (I-883 or equivalent), detailing the reasons for Disciplinary Segregation and attaching all relevant documentation. When the detainee is released from the SMU, the releasing officer records the date and time of release on the Disciplinary Segregation Order, and forwards the completed order to the chief of security or supervisor for insertion into the detainee's detention file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

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

The facility maintains a Special Management Unit (SMU) to segregate detainees from the general population when necessary to maintain good order, safety and security. Placement in the SMU is used to protect detainees from others, prior to transfer to prevent disruptive behavior, or to correct prohibited behavior. The SMU designated for housing ICE detainees when necessary consists of ten single occupancy cells in a secure area, with two (2) separate recreation areas. There were no detainees housed in this status during the review. A tour of the area, examination of policy pertaining to SMU operations and interviews with the Chief of Security and Compliance Administrator, however, confirmed that detainees would be properly cared for if placement was required.

(b)(6), (b)(7)c / December 8, 2011
Reviewer's Signature / Date

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

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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"/>	Visits by ICE staff to each ICE detainee housing unit occur at least once a week. Visit schedules are posted in the housing units. Announced visits occur on Tuesdays, Wednesdays and Thursdays. Unannounced visits are documented on an ICE form.
2. Detention Staff and Deportation Staff conduct scheduled weekly visits with detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Announced visits occur on Tuesdays, Wednesdays and Thursdays. Per interviews with detainees in five (5) housing units, ICE staff are accessible. Detainees expressed no concerns regarding communication with ICE staff.
3. Scheduled visits are posted in ICE/DRO detainee housing areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per direct observation, schedules were posted in the housing units.
4. Visiting ICE staff observes and note current climate and conditions of confinement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation of unannounced visits reflected that ICE staff observe sanitation, general detainee morale, the phone system and the law library, and review conditions in the special housing units.
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 are stored in bins in the hallways near the ICE request drop boxes. Detainees have daily access to these forms when escorted to recreation.
6. The facility treats detainee correspondence to ICE/DRO staff as Special Correspondence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. A secure box is located in an accessible location for detainee's to place their Detainee Request Forms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Secure boxes for the collection of detainee requests to ICE are located in the hallways. Only ICE staff have a key to unlock these boxes.
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"/>	

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
9. ICE/DRO staff responds to a detainee request from a facility within 72 hours and document the response in a log.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE attempts to respond to detainee requests within 24 hours. The log is kept electronically and response times reviewed were within 72 hours.
10. ICE/DRO detainees are notified in writing upon admission to the facility of their right to correspond with ICE/DRO staff regarding their case or conditions of confinement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Notification of a detainee's right to correspond with ICE staff regarding conditions of confinement is in the handbook and is discussed by the classification staff during intake orientation.
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"/>	OIG Hotline posters were observed throughout the facility.
12. Daily telephone serviceability checks are documented in the housing unit logbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Telephone checks are completed daily.

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.)

There are (b)(7)(e) ICE staff and (b)(7)(e) ICE supervisor located at this facility. Weekly announced visits by ICE staff are occurring. Weekly schedules are posted in the housing units, and all detainees have access to ICE staff during those visits. Announced visits occur on Tuesdays, Wednesdays and Thursdays in the various housing units. Unannounced visits, along with observations on levels of sanitation, the phone system, the law library, general observations and a review of the conditions in the special housing units are documented. Five (5) detainee housing units were visited, and all detainees interviewed indicated that they had access to ICE staff on a regular basis and expressed no concerns with the communication between facility ICE staff and detainees. This standard's rated was based on a review of ICE logs, on personal observations and on interviews with ICE staff and detainees.

(b)(6), (b)(7)(c) December 8, 2011

Reviewer's Signature / Date

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

PART 2-17. TOOL CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. (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 Maintenance Supervisor is the Tool Control Officer at this facility. He developed a system of inventory and accountability in policy that applies to all staff.
2. If the warehouse is located outside the secure perimeter, the warehouse receives all tool deliveries. If the warehouse is located inside the secure perimeter the facility administrator shall develop site-specific procedures, for example; storing tools at the rear sally port until picked up and receipted by the tool control officer. The tool control officer immediately places certain tools (band saw blades, files and all restricted tools) in secure storage.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tools in this facility are received in the maintenance shop, located outside of the facility.
3. (MANDATORY) The use of tools, keys, medical equipment, and culinary equipment is controlled.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All tools, keys, medical equipment, and food service equipment are inventoried, classified as to whether dangerous or not, inspected, and counted on a routine 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses a "chit" (a small metal tag with a name or number embossed) to indicate who has possession of the item. Chits are placed on a "shadow board", a large piece of plywood with hooks on which to hang tools. The hooks identify the key or tool with a number, and an outline or shadow of the tool is painted in the board.
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 Maintenance Supervisor and department maintain inventories for maintenance, medical, and food service.
6. Tool Inventories are conspicuously posted on all tool boards, tool boxes and tool kits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility maintains inventories posted with all shadow boards, tool boxes, and tool kits.

PART 2-17. TOOL CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	All tools are inventoried each day the department with tools is open.
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"/>	This facility classifies tools as AA (extremely dangerous), A (dangerous), or B (not dangerous).
9. Department heads are responsible for implementing proper tool control procedures as described in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Department heads in this facility are responsible for tools assigned to their area.
10. There are policies and procedures in place to ensure that all tools are properly marked and readily identifiable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tools are marked as to their classification.
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"/>	Most tools used in this facility are stored outside the facility's secure perimeter. Tools inside the facility are stored on shadow boards, and missing tools can be easily noticed.
12. Tools removed from service have their shadows removed from shadow boards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility removes shadows when tools are removed.
13. Tools not adaptable to a shadow board are stored in a locked drawer or cabinet.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, tools not placed on a shadow board are locked in a drawer.
14. Sterile packs are stored under lock and key.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, sterile packs are stored in a secure area in the dental office.
15. Each facility has procedures for the issuance of tools to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy establishes procedures for the issuance of tools to staff. Tools are not issued to detainees.

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
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"/>	
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"/>	Broken or worn out tools are removed from service and destroyed.
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"/>	
19. Hoses longer than three feet in length are classified as a restricted tool.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, hoses over three feet in length are considered Class A (dangerous) tools.
20. Scissors used for in-processing detainees are tethered to the furniture (e.g. table, counter, etc.) where they are used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All tools used in the Intake area of this facility are attached by a tether to the officer's desk.

PART 2-17. TOOL CONTROL

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

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

The facility protects staff, detainees, contractors, and visitors by establishing a tool control policy that requires the inventory, secure storage, classification and proper use of all tools. The Maintenance Supervisor is responsible for the program, and maintains a facility-wide inventory that is checked on a regular basis. Tools remain under strict supervision by staff, are secured when not in use and are disposed of when necessary. The Maintenance Supervisor was interviewed, and all tool storage areas and inventories were inspected.

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

December 8, 2011

Reviewer's Signature / Date

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

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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"/>	The facility has a comprehensive Use of Force policy requiring this action to be used only as a last resort, with trained staff, medical staff involvement and a careful recording of the event.
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"/>	Staff can respond to an immediate-use-of-force situation without a supervisor's approval.
3. When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, policy requires that staff must try to resolve the situation without resorting to force.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When a detainee is in a secure area, staff must attempt to resolve the situation first without the use of force.
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 calculated rather than immediate use of force is always the preferred action.
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 always attempts to use verbal or non-force resolution techniques to resolve situations.
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"/>	
7. Staff members are trained in the performance of the Use-of-Force Team Technique.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff are trained in the Use-of-Force team techniques during pre-service and annual in-service training.
8. All use-of-force incidents are documented and reviewed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility requires all use-of-force incidents to be documented.
9. All use of force incidents are properly documented and forwarded for review use of force documentation at a minimum, shall include the medical examination through the conclusion of the incident. All calculated uses of force incidents must be audio visually recorded in its entirety from the beginning of the incident to its conclusion. Any breaks in recording, e.g., dead batteries, tape exhausted, are fully explained on the video.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility requires all use-of-force incidents to be documented. Calculated use-of-force incidents are recorded with the use of a camcorder. Functioning problems are explained. At the end of the incident, the detainee is taken to the medical unit for examination.

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"/>	Facility policy requires that force not be used as punishment, that staff first try to talk the detainee into compliance, that only the minimal force necessary be used and that restraints be used only as a last resort.
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"/>	Any use of medication for restraint only occurs under a doctor's order. Per the Health Services Administrator, medications for restraint purposes would not be used on ICE detainees.
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"/>	Staff involved in use-of-force actions are trained to use puncture resistant gloves, head protection, pads and coveralls, and to not participate if they have an open wound.
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(b)(7)e
14. The shift supervisor monitors the detainee's position/condition every two hours. He/she allows the detainee to use the restroom at these times under safeguards.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(b)(7)e
15. All detainee checks are logged.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(b)(7)e

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	In immediate-use-of-force incidents, the detainee would be taken to the medical unit once brought under control.
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"/>	Medical staff would always be consulted and would review the detainee's medical record to determine if the use of pepper spray would be permitted. (b)(7)e (b)(7)e
18. Intermediate Force Weapons, when not in use are stored in areas where access is limited to authorized personnel and to which detainees have no access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
19. If Intermediate Force Weapons are stored in the Special Management Unit (SMU), they are stored and maintained the same as Class R tools.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(b)(7)e
20. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> Medical personnel are consulted 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Female ICE detainees are not housed at this facility.
21. Protective gear is worn when restraining detainees with open cuts or wounds.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff involved in use-of-force actions are trained to use (b)(7)e (b)(7)e and to not participate if they have an open wound.
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"/>	Staff thoroughly document all use-of-force actions and note what type of restraints were used.
23. It is standard practice to review any use of force and the non-routine application of restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Warden reviews all use-of-force incidents.
24. All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. <ul style="list-style-type: none"> Specialized training is given to officers ensuring they are certified in all devices approved for use. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All officers receive self-defense, use of force, and confrontation-avoidance training during pre-service and annual in-service training.
25. All staff authorized to use (b)(7)e receive training not only in its use, but also (b)(7)e (b)(7)e This training must be documented in the staff training record.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
26. The use of canines is restricted to contraband detection purposes only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Canines are used only for contraband detection, and are not used in view of ICE detainees.

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
27. The officers are thoroughly trained in the use of soft and hard restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff are trained in the use of all restraints.
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 facility uses a Use of Force review form to document staff's review of the incident.

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 comprehensive facility Use of Force policy requires staff to talk to detainees first to gain compliance, and if unsuccessful, to use trained and protected staff to bring the detainee under control. Only the minimal force needed is to be used to resolve an incident. Medical staff are always used to provide services and advice if necessary. Facility policy was reviewed, restraints were inspected, and the Chief of Security, Administrative Captain, and Compliance Administrator were interviewed. No ICE detainees were subject to use of force actions during the last twelve months. The facility does not use (b)(7)e Per an interview by the Lead Compliance Inspector with the Warden, the facility does not use (b)(7)e on ICE detainees. Although the facility has other less lethal equipment, only (b)(7)e is authorized to be used to control a detainee. (b)(7)e has not been used on an ICE detainee in the last twelve months.

(b)(6), (b)(7)c / December 8, 2011

Reviewer's Signature / Date

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

Performance-Based National Detention Standards

Section III ORDER

19 Disciplinary System

PART 3 – 19. DISCIPLINARY SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has written policy outlining a progressive level of discipline and allowing a detainee the opportunity to appeal a decision.
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 corporal punishment, food service deviations, clothing and bedding deprivation, the denial of personal hygiene items, the loss of correspondence privileges, the deprivation of legal access and materials, and the deprivation of 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"/>	Rules pertaining to the discipline program are posted in the housing units and are included in the facility detainee handbook. This information is also provided in a new admission orientation video.
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"/>	
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy states the informal resolution of issues should first be attempted before the imposition of discipline.
7. Incident Reports and Notice of Charges are promptly forwarded to the designated supervisor.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, incident reports are forwarded immediately to the shift supervisor.

PART 3 – 19. DISCIPLINARY SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. Incident Reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before investigations end.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy states investigations are to be completed within twenty four hours. No hearing can be held before the investigation is completed.
9. An intermediate disciplinary process is used to adjudicate minor infractions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's intermediate discipline program is the Unit Discipline Committee (UDC), which hears minor infractions. This committee is chaired by the (b)(6), (b)(7)c (b)(6), (b)(7)c
10. A disciplinary panel (or equivalent in IGSAs) adjudicates infractions. The panel: <ul style="list-style-type: none"> • Conducts hearings on all charges and allegations referred by the UDC • Considers written reports, statements, physical evidence, and oral testimony • Hears pleadings by detainee and staff representative • Bases its findings on the preponderance of evidence • Imposes only authorized sanctions 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The (b)(6), (b)(7)c is the chairperson of the multi-member Institution Discipline Panel (IDP). This panel hears allegations of serious infractions which may be referred by the UDC. The panel considers all evidence and statements from the detainee and the staff representative, bases findings on a preponderance of evidence and imposes appropriate authorized sanctions.
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"/>	Policy permits the use of a staff representative.
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"/>	Discipline hearings may be postponed for good reason. Reasons are documented.
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"/>	Disciplinary Segregation placement cannot exceed sixty days per offense.
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 utilizes a separate policy which governs the use of confidential informants. Policy requires the use of additional evidence to verify information provided by a confidential informant.

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
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"/>	Discipline forms are distributed to the detainee and forwarded to the Classification Office for placement in the detainee's file.

PART 3 – 19. DISCIPLINARY SYSTEM

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

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

The facility has established a detainee discipline program to correct prohibited behavior, enhance security and good order, set standards for consistent punishment and protect staff. Three levels of discipline are used: informal resolution, the Unit Discipline Committee, and the Institutional Discipline Panel. These levels provide for a progressive increase in discipline as nature of the prohibited behavior becomes more serious. The program allows a detainee to defend himself at a hearing and to file an appeal. The Administrative Captain and Lieutenant were interviewed, and several discipline reports were reviewed.

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

December 8, 2011

Reviewer's Signature / Date

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

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Performance-Based National Detention Standards

Section IV CARE

- 20 Food Service**
- 21 Hunger Strikes**
- 22 Medical Care**
- 23 Personal Hygiene**
- 24 Suicide Prevention and Intervention**
- 25 Terminal Illness, Advance Directives, and Death**

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The food service program is under the direct supervision of a professionally trained and certified Food Service Administrator (FSA). The Responsibilities of cooks and cook foremen are in writing. The FSA determines the responsibilities of the Food Service Staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Food Service Director has a degree in Food Service and Restaurant Management, is Serve-Safe certified and has also obtained an Associate of Applied Science of Dietetic Technology degree. The responsibilities of the food service staff are delineated in the form of post orders and job descriptions. The Food Service Director determines the responsibilities of the food service staff.
2. The Cook Foreman is on duty on days when the FSA is off duty and vice versa.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The Food Service Director is the only member of management in the Food Service Department. No food service manager is on duty when the Food Service Director is not.
3. The FSA provides food service employees with training that specifically addresses detainee-related issues. In ICE Facilities this includes a review of the "Food Service" standard	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. (MANDATORY) Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device. Knives and keys are inventoried and stored in accordance with the Detention Standard on Tool Control	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Knives are not utilized in the facility.
5. All knives not in a secure cutting room are physically secured to the workstation and staff directly supervises detainees using knives at these workstations. Staff monitor the condition of knives and dining utensils	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Knives are not utilized at this facility. Staff secures food service utensils in an expanded metal cage and monitors their condition. Staff monitors the use of utensils using an inventory system. All utensils are on inventory, etched and maintained on a shadow board.
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"/>	Sugar is maintained in the secure portion of the dry goods storeroom, and an inventory is maintained.
7. Operating procedures include daily searches (shakedowns) of detainee work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The post orders for the kitchen officer require daily searches of detainee work areas. An afterhours daily search of the food service department is conducted by a correctional officer and documented on the Common Area Search log.

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
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"/>	Detainee counts performed in the food service department are conducted by the correctional staff assigned to the food service security post. Food service staff do not participate in the count procedures.
9. (MANDATORY) There is adequate health protection for all detainees and staff in the facility, and for all persons working in food service. Detainees and other persons working in food service are monitored each day for health and cleanliness by the food service supervisor or designee. Detainee clothing and grooming comply with the "Food Service" standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff and detainees working in the food service department receive medical clearance prior to being assigned to the shift. The facility's medical department conducts the food handler's exams on detainees and staff. Staff also receives tuberculosis screenings from a local clinic. Detainee clothing and grooming meets the "food service standard" and workers are monitored each day for personal hygiene.
10. The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff document that newly assigned detainees are trained on the rules and procedures of the food service department. The training is included in their initial orientation and is on file in each detainee's detention file.
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"/>	Newly assigned detainees are trained in safe work practices, equipment training and in the use of hazardous chemicals.
13. The Cook Foreman documents all training in individual detainee detention files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All food service training is documented and filed in each detainee's detention file.
14. Detainees at SPCs and CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSA's are subject to local and State rules and regulations regarding detainee pay.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility detainees are paid (b)(7)(e) dollars a day in accordance with local rules regarding detainee pay.

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
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"/>	Detainees receive three (3) hot meals a day. The evening meal is served at 5:00 pm and the breakfast meal the following day is served at 4:00 am.
16. For cafeteria-style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are no detainee cafeteria style operations at the facility. There is an Officer's Dining Room that feeds cafeteria style meals and is equipped with sneeze guards; however, it is currently not in operation.
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"/>	This facility utilizes a six week, forty-two day menu for meal rotation.
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"/>	A complete nutritional analysis was conducted on September 08, 2011 using the Axxya Systems Nutritionist Pro software. All menus are certified and signed by the registered dietitian prior to being incorporated into the program.
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"/>	Armed Forces Recipe cards are utilized to standardized the preparation of prepared foods on the cycle menu.
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 Production Supervisor has the authority to change the menu when necessary. Each substitution and the justification for it are documented with a copy to the Food Service Director.
21. All staff and volunteers know and adhere to written "food preparation" procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>22. A Common Fare menu available to detainees, at no charge, whose dietary requirements cannot be met on the main.</p> <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"/>	<p>A Common Fare Program is available for detainees at no charge. The Common Fare Program is rarely requested by ICE detainees due to the high incidence of Catholic detainees in the predominantly El Salvadoran ICE detainee population. The facility does, however, have a Common Fare Program available that meets the bulleted requirements of this standard.</p>
<p>23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>A detainee's request for a religious diet is routed through the Chief of Security or Assistant Warden and referred to the Food Service Director.</p>
<p>24. A supervisor at the command level must approve a detainee's removal from the Common Fare Program.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The Chief of Security or the Assistant Warden must approve a detainee's removal from the Common Fare Program.</p>
<p>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.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The facility has a religious ceremonial meal calendar for the following calendar year.</p>

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
<p>26. The Common Fare Program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year.</p> <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"/>	<p>Although it is available, there has not been a need to utilize the Common Fare Program to accommodate detainees' special religious observances during prescribed times of the year. Ramadan has been accommodated through allowing fasting and providing meals prior to sunrise and after sunset. Kosher for Passover meals are not a part of the Common Fare Program as there are special requirements for Passover foods. The meals provided for Ash Wednesday and on Fridays during Lent are accommodated by simply providing meatless meals. There have been no requests from ICE detainees for Common Fare accommodation during these observances.</p>
27. The food service program addresses medical diets.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical diets are provided as ordered by medical staff.
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"/>	Observation of food temperatures taken during the lunch meal on December 6, 2011 verified that all foods were maintained within the proper temperature ranges.
30. All meals provided in nutritionally adequate portions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. Food is not used to punish or reward detainees based upon behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy prohibits staff from using food to punish or reward detainees based upon behavior.
<p>32. The food service staff instruct detainee volunteers on:</p> <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"/>	Detainees working in the food service department receive training on personal hygiene, sanitary techniques for preparing, storing and serving food and the sanitary operation, care and maintenance of equipment.
33. Everyone working in the food service department complies with food safety and sanitation requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
34. (MANDATORY) The facility implements written procedures for the administrative, medical, and/or dietary personnel conducting the weekly inspections of all food service areas, including dining, storage, equipment, and food-preparation areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical department conducts weekly documented inspections of all food service areas. The Food Service Director and the Production Supervisor also conduct separate, independent inspections of the department on a weekly basis.
35. Reports of discrepancies are forwarded to the Facility Administrator or designated department head and corrective action is scheduled and completed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36. (MANDATORY) Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal, in accordance with the Detention Standard on Food Service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Dish machine temperatures are observed and recorded during each meal.
37. (MANDATORY) Staff documents the results of every refrigerator/ freezer temperature check, in accordance with the Detention Standard on Food Service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff documents the taking of refrigerator and freezer temperatures. Temperatures are recorded during the morning and evening shifts.
38. The cleaning schedule for each food service area is conspicuously posted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cleaning schedules were conspicuously posted with items to be cleaned grouped by frequency of cleaning.
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"/>	All storage areas were observed to be secure during the physical plant inspection.
41. Food service personnel conduct shakedowns along with detention staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food service staff assists correctional staff in conducting shakedowns within the food service department.
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"/>	There are no dining room facilities at this facility.
43. Menus are certified by a registered dietitian prior to being incorporated into the Food Service Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All menus are certified and signed by the registered dietitian prior to being incorporated into the program.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	The Food Service Director does not budget separately for the Common Fare Program.
45. When required, only food service staff prepare the sack lunches for detainee transportation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
46. Air curtains or comparable devices are used on outside doors where food is prepared, stored, or served to protect against insects and other rodents.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is one outside door which opens into the food preparation area. It is equipped with a functional air curtain to prevent pests from freely entering the 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"/>	During the physical plant inspection, the housekeeping in the dry goods storeroom and the refrigerators and freezers complied with the standard requirements.
50. Dining room facilities and operating procedures will provide sufficient space and time for detainees to eat meals in a relatively relaxed, unregimented atmosphere.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are no detainee dining room operations at this facility. Detainees eat their meals in the housing units.
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 facility is inspected annually by the Montgomery County Health Department. The health department prepared the Montgomery County Environmental Health Service Inspection Report on September 26, 2011.
52. Personnel inspecting the food service department shall note needed corrective action(s), if any, in a written report to the Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Warden receives a copy of the Montgomery County Environmental Health Service Inspection Report.
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"/>	The number of chemicals utilized in the food service department is kept to a minimum. MSDS files are available on all substances used within the department.
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"/>	Outback Wild Animal and Pest Control Service is contracted to perform monthly pest control within the food service department.

FOOD SERVICE

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

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

As of October 01, 2011, the facility is transitioning from employing a contractor to provide food service to operating their own

food service department. The Food Service Director has been on board for approximately six weeks.

Detainees are fed via a satellite feeding system using insulated feeding trays. Detainees eat their meals in their housing units. The food service department prepares approximately 2000 trays each meal. In addition to the 1000 trays served at this facility, another 1000 trays are prepared for the adjacent Montgomery County Jail. In addition to the meals served on trays, the facility also prepares an estimated 150-200 sack lunches daily for the same entities.

Meals were observed to be properly plated under sanitary conditions. The portions were consistent with the planned master cycle menu and presentation was acceptable as well.

Detainee training within the department was extensive. Sanitation was acceptable during the review process. Chemicals were properly secured and detainees are prohibited from handling any hazardous chemicals. Wherever possible, chemicals are distributed through metered dispensing equipment, resulting in detainees handling only the diluted, non-hazardous cleaning solutions.

All menus were properly analyzed by a Registered Dietitian. There are no knives utilized in the department and tools were properly stored and controlled. All staff and detainees receive pre-employment and subsequent annual food handler exams. Medical and Food Service staff conduct weekly sanitation inspections of all food service areas, and staff properly monitor and document freezer, refrigerator and dish machine temperatures. Additionally, the facility is inspected annually by the Montgomery County Health Department and corrective action is taken if necessary.

The inspector reviewed facility policy, interviewed staff, observed work processes and performed a visual inspection of the physical plan.

(b)(6), (b)(7)c / December 8, 2011
Reviewer's Signature / Date

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

10/1

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"/>	Per the Health Services Administrator (HSA), medical staff are notified any time a detainee refuses a meal or declares a hunger strike. Medical staff promptly counsel the detainee, encourage him to eat and monitor his status. If the detainee continues to refuse food, the full hunger strike protocol will be implemented after 72 hours.
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"/>	In accordance with facility policy and as confirmed by the HSA and the Supervisory Detention and Deportation Officer (SDDO), ICE is notified immediately of any detainee hunger strike. Per the HSA, there have been no hunger strikes in this facility in the past twelve months.
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"/>	Procedures established in facility policy require prompt referral to, and evaluation by, medical and mental health staff, isolation of the hunger striker, monitoring of meal refusals, and attempts to persuade the detainee to eat.
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"/>	Facility policy requires placement of a hunger striker in one of the observation cells in the medical unit where he will be monitored by security and medical staff.
5. Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The HSA and the Director of Nursing confirmed they have the authority to place a hunger striker in one of the medical observation cells.
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"/>	In accordance with facility policy and medical protocol, and as confirmed by the HSA, a hunger striker's vital signs and weight are checked and documented twice each day. Nursing staff use these opportunities to encourage the detainee to eat and drink.

PART 4 – 21. HUNGER STRIKES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
7. The facility medical authority obtains a hunger striker's consent before medical treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per HSA and as confirmed per a review of detainee medical records, each detainee signs a general consent for medical treatment during intake. In accordance with facility policy, a hunger striker would be asked to sign a procedure-specific consent if a medically invasive procedure was needed.
8. A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment, or (b)(7)(e) staff/provider signatures indicating detainee refusal to sign form.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with facility policy, any detainee refusing medical evaluation or treatment is required to sign a refusal of medical treatment form. As confirmed per a review of documentation in detainee medical records, if the detainee refuses treatment and refuses to sign the form, the refusal is documented by (b)(7)(e) staff signatures.
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"/>	In accordance with facility policy and as confirmed by the HSA, hunger strikers are offered three (3) meals each day. Meal acceptance or refusal is documented on a Hunger Strike Monitoring Form I-839.
10. Staff maintains the hunger striker's supply of drinking water/other beverages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the HSA, staff provide beverages with each meal. As confirmed per direct observation of the medical observation rooms, a hunger striker would maintain independent access to drinking water via the wash basin and is encouraged by medical staff at least every two hours to take a drink of water.
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"/>	In accordance with policy and as confirmed by the HSA, a detainee is not permitted to maintain possession of food purchased from the commissary when he is moved to a medical observation 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"/>	In accordance with facility medical protocol, a hunger striker's fluid intake and food consumption are to be documented on a Hunger Strike Monitoring Form I-839.

PART 4 – 21. HUNGER STRIKES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. The medical staff has written procedures for treating hunger strikers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policies and medical protocol establish procedures for treating hunger strikers. These include initial and follow-up medical evaluations, monitoring and encouragement of fluid intake and food consumption and referral to the physician and to mental health staff.
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"/>	In accordance with facility policy and as confirmed by the HSA, all treatment attempts, including counseling, would be documented in the detainee's 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"/>	Per the Training Administrator, and as confirmed per a review orientation and in-service course curriculums and staff sign-in sheets, staff receive training on the identification of hunger strikes during their initial training and at least annually thereafter during in-service training. Per the HSA, medical staff receive training on the medical hunger strike protocol.

PART 4 – 21. HUNGER STRIKES

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

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

Policies and procedures for identifying and responding to a hunger strike are in place. Training on the identification and medical evaluation and treatment of hunger strikers is provided.

Per the Health Services Administrator (HSA), there have been no detainee hunger strikes in this facility in the past twelve months. Although several non-ICE detainees threatened hunger strikes, all resumed eating within one (1) day. As there were no pertinent detainee medical records available for review, the inspector was unable to confirm if the actual practices of this facility fully comply with this standard. The standard's rating was based on a review of established policies and forms, on interviews with the HSA, the Training Administrator and the Supervisory Detention and Deportation Officer, on a review of staff training documentation and on observations in the medical unit.

(b)(6), (b)(7)c / December 8, 2011
Reviewer's Signature / Date

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

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility operates a health care facility in compliance with state and local laws and guidelines.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per a review of credentialing files maintained by the Health Services Administrator (HSA), the licenses and certifications of all medical staff are current. As confirmed per a review of posted documentation, the facility pharmaceutical operation is certified as a Class E pharmacy. Per the HSA, the responsible pharmacist conducts on-site inspections of the facility pharmacy once every three months to ensure consistent compliance with state pharmacy law. As confirmed per review of a posted CLIA (Clinical Laboratory Improvement Amendment) waiver certificate, the facility is also certified through the Centers for Medicare & Medicaid Services to collect medical specimens and run simple laboratory tests. Per the HSA, the medical facility is not subject to other state or local inspections.
2. The facility's in-processing procedures of arriving detainees include medical screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the HSA and the Director of Nursing, and as confirmed per a review of detainee medical records, nursing staff complete an intake medical screening on all detainees within twelve hours of arrival. A review of twenty detainee medical records confirmed consistent timely intake screenings.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
3. (MANDATORY) The essential positions needed to perform the health services mission and provide the required scope of services are described in a staffing plan that is reviewed at least annually by the health authority.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility staffing plan includes, in addition to the HSA, (b)(7)(e) registered nurses (RNs), (b)(7)(e) of which is the Director of Nursing, (b)(7)(e) licensed vocational nurses (LVNs), (b)(7)(e) Certified Medication Aides (CMAs) and (b)(7)(e) clerical staff. (b)(7)(e) of the LVNs serves as the infectious disease nurse and (b)(7)(e) serves as the chronic care nurse. Additional staff include (b)(7)(e) physician on site three days each week and (b)(7)(e) full time dentist and dental assistant. (b)(7)(e) physician and dentist are on call when not on site. Mental health services are provided by (b)(7)(e) full time licensed professional counselor (LPC) and (b)(7)(e) psychiatrist who provided services once a week via telemedicine. (b)(7)(e) psychiatrist is on call for mental health emergencies. The medical staffing plan was last reviewed on November 7, 2011 and approved by the physician, the HSA and the Warden.
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"/>	Per the HSA, newly arriving detainees are informed about how to access health services and, as confirmed per a review of detainee medical records, sign a form documenting receipt of this written information. The information is provided in both English and Spanish. The information is also included in the facility detainee handbook, available in English and Spanish. Bilingual staff and a telephone-based interpretation service are available as needed to ensure understanding of the information presented.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
5. Detainees will have access to and receive specified 24-hour emergency medical, dental, and mental health services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Nursing staff are on duty twenty-four hours a day seven days a week and maintain certification in cardiopulmonary resuscitation (CPR) and automated external defibrillator (AED) use. Emergency medical equipment is available for use by nursing staff responding to a medical emergency. A physician, dentist and psychiatrist are on call for consultation in the event of a health care emergency. The LPC is available to respond to the facility in the event of a mental health crisis. All detention staff are trained in first aid and certified in CPR. Community emergency medical response and transport services (EMS) are available as needed through Montgomery County, and hospital-based emergency services are available through the Conroe Regional Medical Center. Documentation of the provision of urgent medical care was noted in a detainee medical record.
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"/>	As confirmed per a review of documentation in personnel files maintained by the Human Resources department, all new direct care staff are tested for Tuberculosis (TB) upon initial employment and annually thereafter. Per documentation in the personnel records, all new staff are also offered the hepatitis B vaccination series.
7. Health care services will be provided by trained and qualified personnel, whose duties are governed by job descriptions and who are properly licensed, certified, credentialed, and/or registered in compliance with applicable state and federal requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of credentialing files maintained by the HSA confirmed health care staff are appropriately licensed, certified and credentialed to perform their assigned duties. Job descriptions are on file for all positions.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. The facility provides each detainee, upon admittance, a copy of the detainee handbook or equivalent, in which procedures for access to health care services are explained (in a language they can understand).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Instructions for accessing health care are included on page five of the facility detainee handbook, English and Spanish versions of which are available. As confirmed per a review of applicable documentation, detainees sign a form to verify receipt of the handbook.
9. In SPCs and CDFs, medical personnel credentialing and verification complies with the standards established by the NCCHC and Joint Commission.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, licenses and certifications are verified, and medical personnel credentialing files are maintained, by the HSA.
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"/>	Per the HSA and the Director of Nursing, and as confirmed per a review of detainee medical records, medical, mental health and dental screenings conducted by medical staff within twelve hours of a detainee's arrival. The medical and mental health screenings are conducted by nursing staff. The LPC reviews all mental health screens completed by the nurses. The dentist conducts the dental intake screening if he is on site, and has trained nurses to complete this screening in his absence. Intake health screening is never conducted by detention officers.
11. (MANDATORY) If language difficulties prevent the health care provider/officer from sufficiently communicating with the detainee for purposes of completing the medical screening, the officer obtains translation assistance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spanish-speaking staff are available to communicate with non-English speaking detainees. If a staff member is not available to translate, or the detainee speaks a language other than English and Spanish, a telephone-based interpretation services is available for use. Documentation in detainee medical records confirmed the use of interpreters when needed.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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 facility includes an appropriately equipped examination room. The dental clinic is in a separate room. A private office is available for use by mental health staff when seeing detainees. As confirmed per direct observation, other areas are available within the medical unit for nurse's sick call and other medical encounters. Although these are not enclosed areas, only one detainee at a time is in each area. Detainees waiting to be seen are held in waiting rooms not within sight or sound of the treatment areas. Officers maintain visual supervision of the detainees. A large room in the intake area is designated for use by medical staff conducting intake screenings and is divided into cubicles to afford privacy to detainees being screened.
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"/>	Access to the medical unit, located within the secure perimeter, is limited to authorized staff and to detainees escorted to the unit for medical treatment. Access is electronically controlled by officers working in Central Control.
14. The medical facility entrance includes a holding/waiting room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical unit includes one large holding/waiting room and six observation cells, some of which are used as additional holding/waiting rooms when detainees waiting to be seen must be kept separate.
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"/>	As confirmed per direct observation, detention officers maintain supervision of all detainees escorted to the medical unit, including those in the holding rooms.
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"/>	As confirmed per direct observation, a toilet and drinking fountain are available in each room used to hold detainees waiting to be seen by medical staff.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>17. Medical records are kept apart from other files. They are:</p> <ul style="list-style-type: none"> Secured in a locked area within the medical unit. With physical access restricted to authorized medical staff. Procedurally, no copies made and placed in detainee files. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per direct observation, detainee medical records are stored in a secure medical records room within the medical unit. Per the HSA, the room is locked when medical staff are not in the room. With the exception of ICE staff auditing for timely completion of physical examinations, access to medical records is limited to medical staff. Copies of medical records are made only pursuant to a detainee's signed release of information authorization and are not made for placement in non-medical detainee files.
<p>18. (MANDATORY) A signed and dated consent form is obtained from a detainee before medical treatment is administered.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per HSA and as confirmed per a review of detainee medical records, each detainee signs a general consent for medical treatment during the intake process. Procedure-specific consent forms are used for invasive diagnostic tests, dental extractions, surgery, mental health treatment and psychotropic medications.
<p>19. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the HSA, detainees would sign an authorization for release of medical information form to authorize the release of confidential medical records to outside sources, but seldom request to do so. No completed authorization forms were seen in the reviewed detainee medical records.
<p>20. The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the HSA and as confirmed per a review of notifications provided by ICE, the medical unit normally receives notice two days prior to the transfer or removal of detainees.
<p>21. A detainee's medical records will be transferred as appropriate. All detainees will be transferred with a copy of their transfer summary.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per a review of completed forms, a Medical Summary of Federal Prisoner/Alien in Transit form is completed for transfer with a detainee. The full medical record is maintained by the facility.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	As confirmed by a description of the procedure provided by the HSA, medical records prepared for transport with a detainee are placed in a sealed and appropriately labeled envelope.
23. Medical screening includes a Tuberculosis (TB) test.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with facility policy, any detainee arriving without documentation of previous recent testing for TB is given a chest x-ray. Per the HSA, the majority of detainees transferred to this facility have already been screened and cleared for transport as non-infectious. Per a review of twenty detainee medical records, nineteen detainees arrived with documentation of a recent TB skin test or chest x-ray. The remaining detainee was given a chest x-ray on the day of his admission to the facility.
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"/>	Per the HSA and as confirmed per a review of detainee medical records, nursing staff complete a mental health screening on each detainee within twelve hours of his admission to the facility and before the detainee's assignment to a housing unit. As confirmed per his signature on the documents, the LPC reviews all mental health screening forms completed by nursing staff. As confirmed per a review of twenty detainee medical records, intake mental health screenings are consistent timely completed on all detainees.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
25. The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the HSA and the Director of Nursing, intake screening forms completed by an LVN are reviewed by an RN. The physician reviews all completed intake screening forms. If the screening form indicates the detainee has a chronic illness, that detainee is schedule for an appointment with the physician. The LPC reviews all completed mental health screening forms.
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"/>	Registered nurses trained and credentialed by the physician to conduct physical examinations conduct a health appraisal and physical exam on detainees immediately following completion of the intake screening if that screening does not identify a chronic illness or other significant medical concern. The physician reviews and signs off on the assessments/examinations completed by an RN. Confirmation of the RN's training and credentialing was seen in files maintained by the HSA. If a medical concern is identified during intake screening, the detainee is referred to the physician for the health appraisal and physical examination. Per a review of twenty detainee medical records, six assessments/physical examinations were completed by an RN within 24 hours of a detainee's arrival. The remaining fourteen were completed by the physician within eleven days of the detainee's 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
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"/>	In accordance with facility policy, detainees housed in the special management unit have equal access to medical care through the submission of sick call requests and through direct requests to staff for more urgent concerns. As confirmed per a review of detainee-specific segregation logs and medical records of segregation rounds maintained by medical staff, nursing staff make documented rounds in the segregation unit twice each day. The licensed professional counselor also makes daily rounds.
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 Request forms are available in the hallway through which detainees pass when going to and from recreation. Forms are also available upon request during medication administration rounds and from officers in the housing units. Health Request forms include instructions in English and Spanish. Completed requests are deposited in a locked box and picked up twice daily by medical staff. Requests are triaged and logged on the Sick Call Request Log. Per a review of the log and of completed requests filed in detainee medical records, detainees submitting requests to be seen are usually scheduled for an appointment within 24 to 48 hours.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
29. (MANDATORY) The facility has a written plan for the delivery of 24-hour emergency health care when no medical personnel are on duty at the facility, or when immediate outside medical attention is required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff are on duty twenty-four hours a day, seven days a week. Facility policies establish procedures for the delivery of twenty-four-hour emergency health care when immediate outside medical attention is required. In the event of an emergency, nursing staff respond to the scene with appropriate emergency equipment including an automatic external defibrillator (AED). Emergency treatment is provided, the on-call provider is notified and, if indicated, the detainee is transported, per ambulance or per facility vehicle, to a local hospital emergency room. Per the HSA, medical staff contact the emergency room to provide medical summary information needed for continuity of care.
30. The plan includes an on-call provider.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The physician is on call for consultation on medical emergencies. The psychiatrist is on call for 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"/>	EMS services are summoned per a 911 call. A comprehensive listing of other emergency contact information for the hospital and medical providers is available to staff in the medical unit.
32. The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policies establish procedures for the coordination of medical and security responses to a medical emergency. Detention staff provide security for medical staff responding to emergencies and accompany any detainee transported to the hospital emergency room.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
33. (MANDATORY) Detention and health care personnel will be trained, at least annually, to respond to health-related situations within (b)(7)(e) and to properly use first aid kits, available in designated areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the Training Administrator, and as confirmed per a review of orientation and in-service class schedules and staff sign-in sheets, all staff are trained in first aid and certified in CPR during their initial training. Refresher first aid training is provided annually. CPR certifications are renewed every other year. During a medical emergency drill conducted on October 14, 2011, staff responded in less than two minutes. Medical staff are the designated first responders and, when responding to an emergency within the facility, bring emergency medical equipment staged in the medical unit. First aid kits are available in each transport vehicle.
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"/>	Medications in this facility are administered or distributed by medical staff. Officers do not distribute medications.
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"/>	Bulk non-prescription medications are stored in locked cabinets in the medical unit's pharmacy room. Prescription medications are stored in medication carts secured in the pharmacy room when not in use for medication administration rounds. Medications are dispensed by licensed pharmacists. The handling of pharmaceuticals on site is monitored by the responsible pharmacist who conducts quarterly on-site inspections. Medications dispensed to nursing staff for administration to detainees are administered in accordance with accepted medical standards under the supervision of the Director of Nursing and the HSA.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>36. (MANDATORY) Each facility has written policy and procedures for the management of pharmaceuticals that include:</p> <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"/>	<p>The facility pharmaceuticals policy series establishes procedures for the management of pharmaceuticals. The facility utilizes the ICE formulary. Per the HSA, facility providers would submit a Treatment Authorization Request if the need for a non-formulary medication was identified. No such requests have been submitted in the last twelve months. Medications are prescribed and renewed only when clinically indicated. Medications are ordered electronically or per fax. The bar codes on prescriptions received are scanned into the computer which tracks the facility medication inventory. Expired and other unusable medications are destroyed when the responsible pharmacist is on site for one of the quarterly inspections. Nursing staff document medication administration on detainee-specific Medical Administration Records (MARs). Perpetual inventories are maintained on all syringes and needles place in active use and on Drug Enforcement Administration (DEA) Schedule II-V controlled substances. These inventories are verified accurate per counts conducted each shift. Sealed boxes of bulk needles and syringes are also inventoried, secured in locked cabinets and counted weekly. Spot checks of all inventories confirmed their accuracy.</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
<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>As confirmed by direct observation, pharmaceuticals are stored in a secure pharmacy room within the medical unit. Access is through an outer secure medical supply room. The pharmacy room includes solid floor to ceiling walls, a solid ceiling and a steel door with a high security lock. Access is limited to authorized medical staff. Prescription medications are secured in locked medication carts stored in the pharmacy room when not in use for medication administration rounds. Non-prescription medications are stored in locked cabinets within the pharmacy room.</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 pharmacy in this facility does not have a pass-through window. Pharmaceuticals are provided by an off-site pharmacy vendor and are stored, distributed and administered in compliance with state and federal law under the supervision of the responsible pharmacist. As confirmed per a review of detainee medical records and staff credentialing files, and per observations in the medical unit, medications are timely administered by appropriately trained and credentialed health care staff under the supervision of the HSA and in accordance with the orders of a licensed provider.</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
39. Distribution of medication is in accordance with specific instructions and procedures established by the health care provider. Written records of all medication given to detainees are maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per a review of detainee medical records, medications are administered pursuant to a written order by the physician, psychiatrist or dentist or in accordance with physician-approved nursing protocols. As confirmed per a review of detainee medical records, observations in the medical unit and interviews with certified medication aides, the administration of medication is documented on detainee-specific Medication Administration Records. The distribution of medication for self-administration by the detainee is also documented on the MAR. When completed, MARs are filed in the applicable detainee's medical record.
40. Medication may not be delivered or administered by detainees. <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"/>	Medical staff are on duty in this facility twenty-four hours a day. All medications are administered directly by medical staff or are distributed by medical staff to specific detainees in packets with up to a 30-day supply for self-administration. Detainees are not involved in the delivery or the administration of medications to other detainees.
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 in this facility do not distribute medications. All medications are distributed by medical staff.
42. The Warden/Facility receives notification that a detainee has special medical needs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per documentation in detainee medical records, a Health Summary for Classification form is used in this facility to provide notification of a detainee's special medical needs.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
43. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the HSA, any request by a detainee for an examination by an independent medical service provider or expert would be referred to ICE. If the request was approved by ICE and the detainee assumed responsibility for any associated costs, the facility would accommodate the request. No such requests have been received from ICE detainees.
44. (MANDATORY) Each facility has a written plan (or plans) that address the management of infectious and communicable diseases, including prevention, education, identification, surveillance, immunization (when applicable), treatment, follow-up, isolation (when indicated), and reporting to local, state, and federal agencies. Plans include: <ul style="list-style-type: none"> • Coordination with public health authorities; • Ongoing education for staff and detainees; • Control, treatment, and prevention strategies; • Protection of individual confidentiality; • Media relations; • Management of tuberculosis, hepatitis A, B, and C, HIV infection, avian influenza, and • Reporting communicable diseases to local and/or state health departments in accordance with local and state regulations. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility infectious disease policy series establishes procedures for the management of infectious and communicable diseases, inclusive of prevention, education, identification, surveillance, immunization, treatment, isolation, and reporting requirements. Procedures include coordination with the county public health department, education of staff and detainees, control, treatment and prevention strategies, and protection of confidentiality. The plans address management of TB, hepatitis, HIV, and influenza. Data on communicable diseases is reported to the county health department. All media contacts are handled by the GEO corporate public relations office.
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"/>	Facility policy establishes procedures for the isolation, when clinically appropriate, of a detainee diagnosed with a communicable disease. The six observation rooms in the medical unit are constructed as negative air flow/respiratory isolation rooms and are available as needed for medical isolation.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
46. All new arrivals receive TB screening in accordance with guidelines of the Centers for Disease Control (CDC). Unless a chest x-ray is the primary screening method, the PPD (mantoux method) is the primary screening method. (For a detainee on whom the PPD is contraindicated; a chest x-ray will be needed. Detainees not screened are housed separate from the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with facility policy, any detainee arriving without documentation of previous recent testing for TB is given a chest x-ray, the primary TB screening method used in this facility. Per the HSA, the majority of detainees transferred to this facility have already been screened and cleared for transport as non-infectious. Per a review of twenty detainee medical records, nineteen detainees arrived with documentation of a recent TB skin test or chest x-ray. The remaining detainee was given a chest x-ray on the day of his admission to the facility. Pending the results of the digital chest x-ray, any detainee arriving without a recent documented TB test will be held in one of the medical unit observation cells until cleared for general population housing by the results of the x-ray.
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"/>	Any detainee identified as potentially infectious would be placed in one of the facility's six negative pressure/respiratory isolation rooms pending further medical evaluation. None of the ICE detainees whose records were reviewed were identified as potentially infectious.
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"/>	Per the HSA and as confirmed per a listing of scheduled outside medical appointments, transportation is available for scheduled appointments. Facility policy also establishes procedures for the transport of detainees, via EMS or a facility vehicle, when urgent or emergent outside treatment is needed. As confirmed per a review of detainee medical records, applicable medical information is transferred with the detainee when outside medical resources are utilized.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
49. Detainee who requires close, chronic or convalescent medical supervision will be treated in accordance with a plan approved by licensed physician, physician assist, nurse practitioner, dentist, or mental health practitioner that includes directions to health care and other involved personnel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with facility policy and as confirmed per documentation in detainee medical records, treatment plans are established and implemented for detainees who require close, chronic or convalescent medical supervision.
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"/>	In accordance with facility policy, and as confirmed per a review of detainee medical records and discussions with the chronic care nurse, detainees with chronic conditions are enrolled in the onsite chronic care system and scheduled for periodic follow up with the physician. As confirmed per documentation in the records, this follow up includes laboratory and other diagnostic testing, patient education and periodic examinations by the physician.
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"/>	As confirmed per a review of documentation in detainee medical records, a Health Summary for Classification form is used to notify designated staff regarding detainee special medical and/or mental health needs.
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"/>	As confirmed per a review of detainee medical records and per direct observations in the medical unit, dental care is provided on site by and under the direction of a licensed dentist. Per the HSA, the dentist provides urgent care, including extractions, on site five days a week and is on call to address dental emergencies.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	Per discussions with medical and mental health staff and as confirmed per a review of detainee medical records, referrals to mental health are received subsequent to needs identified during intake screening, pursuant to staff observation of detainee behavior after admission and per request by detainees. Documentation of mental health referral, diagnosis, treatment and follow-up were noted in detainee medical records.
55. Crisis intervention services are available for detainees who experience acute mental health episodes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The licensed professional counselor (LPC) and the psychiatrist are on call to respond to mental health crises. If not on site, the LPC responds to the facility if necessary, evaluates the detainee and consults with the psychiatrist. Observation rooms in the medical unit are available for use as needed. As confirmed per documentation in a detainee medical record, if more extensive mental health intervention is needed, the detainee is transferred to an outside psychiatric facility for evaluation and treatment.
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"/>	Per direct observation within the medical unit, medical examinations and procedures are conducted in a private examination room. A private office is available for mental health interviews. The facility does house female ICE detainees.
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"/>	Per a review of documentation in detainee medical records, detainees referred for mental health treatment are normally evaluated by the LPC within twenty-four to forty-eight hours. Those referred to the psychiatrist for significant mental health concerns are seen in the next scheduled weekly telemedicine psychiatry clinic.

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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>As confirmed by the Warden and Assistant Warden, restraints for medical or mental health purposes are not used in this facility. A detainee whose mental health condition might warrant use of such restraints would be admitted to an off-site mental health facility if not transferred by ICE.</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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Per the HSA, involuntary psychotropic medications are not administered at this facility. A detainee whose mental health condition might warrant use of involuntary psychotropic medications would be admitted to an off-site mental health facility if not transferred by ICE.</p>
<p>60. An initial dental screening exam should be performed within 14 days of the detainee's arrival. If no on-site dentist is available, the initial dental screening may be performed by a physician, physician's assistant, nurse practitioner or trained RN.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Per the HSA, an initial dental screening is normally conducted by the dentist or a specially trained nurse within twelve hours of admission as part of the medical intake process. When not conducted during the intake process, the screening is performed within fourteen days. Per a review of twenty detainee medical records, fifteen screenings were conducted during intake. The remaining five were conducted three to twelve days after admission.</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
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"/>	Per the HSA, a decision was made not to place first aid kits in any location within the facility outside the medical unit. Medical staff, available twenty-four hours a day, seven days a week, are the designated first responders and are available to respond with emergency medical equipment any time a medical emergency is identified. The warden confirmed his approval of placing first aid kits only in the facility transport vehicles.
62. An automatic external defibrillator should be available for use at the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An AED is stored in the medical unit and carried by medical staff when responding to a medical emergency elsewhere within the facility.
63. If a detainee refuses treatment, ICE/DRO will be consulted in determining whether forced treatment will be administered, except in emergency circumstances, in which case, ICE/DRO will be notified as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with facility policy, a signed refusal of treatment form is required from any detainee refusing medical treatment. Per the HSA, ICE would be notified of any detainee refusing needed medical treatment and that detainee would be transferred from the facility.
64. In SPCs and CDFs, the Facility Administrator and health services administrator will meet at least quarterly and include other facility and medical staff as appropriate.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per a review of meeting minutes and meeting sign-in sheets, quarterly administrative meetings are held.
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"/>	Biohazard waste is collected in appropriately constructed and labeled containers and disposed of through a contract with Stericycle. An autoclave in the dental clinic is used to sterilize non-disposable dental and medical tools. A review of spore test monitoring logs confirmed the consistent effectiveness of the autoclave sterilization process.

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"/>	In accordance with facility policy and as confirmed per a review of quality assurance/quality improvements (QA/QI) chart audits, monitoring logs and minutes of QA meetings, the facility has implemented a system of internal review and quality assurance.

PART 4 – 22. MEDICAL CARE

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

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

The medical unit in this facility has six (6) medical observation cells but does not include an inpatient infirmary. The facility provides out-patient, emergency and chronic care medical services, outpatient dental services and outpatient and crisis evaluation mental health services. The medical unit is appropriately staffed and equipped for the level of medical services provided. All needed health care not available on site is provided through the use of community healthcare providers and services.

The standard's rating was based on a review of established policies, procedures, protocols and forms, on a review of twenty detainee medical records, other medical documentation, staff training documentation, and the facility detainee handbook, on observations in the medical unit, detainee housing units, and the intake area and during health care encounters with medical, dental and mental health staff, and on interviews with health care staff including the Health Services Administrator, Director of Nursing, staff nurses, the physician, the dentist and the Licensed Professional Counselor, and with the Warden, the Assistant Warden, the GEO Assistant Regional Director, the Training Administrator and Human Resources staff. Observations of medical staff and detainee encounters confirmed responsiveness on the part of medical staff to detainee medical requests and concerns. Routine and urgent medical care is timely provided. Detainees with chronic medical problems are treated and monitored. Detainees voiced no complaints about medical care. The facility physician and dentist concurred that adequate resources are available to meet the needs of the detainee population. Per the COTR (Contract Officer's Technical Representative), ICE receives few medical complaints from detainees housed in this facility. No significant unresolved medical concerns were identified through medical record reviews and a review of detainee grievances.

(b)(6), (b)(7)c December 8, 2011
Reviewer's Signature / Date

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

PART 4 – 23. PERSONAL HYGIENE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There is a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items. The supply of these items exceeds the minimum required for the number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policies establish procedures for the issuance and exchange of clothing, bedding, linens, towels and personal hygiene items. As confirmed per direct observation, adequate daily supplies of these items are maintained within the facility. Per the Warden, additional supplies that exceed the minimum required are stored in the facility warehouse.
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"/>	In accordance with facility policy and as confirmed per a review of completed Intake-Inmate Issue Acknowledgement forms, in this facility new detainees are issued two uniform shirt and pants sets, two pairs of socks, two pairs of underwear and one pair of canvas shoes. Per direct observation in the housing units, the clothing is presentable and temperature appropriate.
3. Additional clothing is available for changing weather conditions and as is seasonally appropriate.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, as confirmed by administrative staff, sweatshirts are issued to detainees when the weather is cool.
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"/>	In accordance with facility policy and as confirmed per a review of completed Intake - Inmate Issue Acknowledgement forms, before leaving the intake area in this facility new detainees are issued a mattress, pillow, pillow case, towel, wash cloth and blanket and two sheets. An additional blanket is issued in the winter months. All linens are laundered prior to reissue. Mattresses and pillows are disinfected before reissue.

PART 4 – 23. PERSONAL HYGIENE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
5. The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE detainees are not charged for these items.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per information in the facility detainee handbook and as confirmed per an officer assigned to the warehouse, all new detainees are issued a hygiene kit that includes deodorant, toothpaste, shampoo, two bars of soap, a soap dish, a toothbrush and toothbrush case, and toothpaste. Replacement items are available weekly on a one for one exchange at no cost to ICE detainees. Toilet paper rolls are issued twice weekly. A comb is available per request during the weekly hygiene item exchanges. Razors are issued daily in exchange for the detainee's identification badge and collected again after use. The facility houses only male ICE detainees.
6. Toilet facilities are: <ul style="list-style-type: none"> Clean Adequate in number and can be used without staff assistance 24 hours per day when detainees are confined in their cells or sleeping areas. ACA Expected Practice 4-ALDF-4B-08 requires that toilets be provided at a minimum ratio of one for every 12 male detainees or one for every 8 female detainees. For males, urinals may be substituted for up to one-half of the toilets.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per observations in the housing units, toilet facilities are clean and accessible without staff assistance. The ratio of facilities to detainees is one toilet for every eight to ten male detainees.
7. Bathing facilities are: <ul style="list-style-type: none"> Clean Operable with temperatures between 100 and 120 degrees Fahrenheit. ACA Expected Practice 4-ALDF-4B-08 requires one washbasin for every 12 detainees. ACA Expected Practice 4-ALDF-4B-09 requires a minimum ratio of one shower for every 12 detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per observations in the housing units, bathing facilities are clean. One sink and one shower are available for every eight to ten detainees. Per an interview with the Maintenance Superintendent, the temperature of the hot water in the housing units is checked weekly and is running 100 to 101 degrees. Documentation of these temperature checks is not maintained.

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
8. Detainees with disabilities are provided adequate facilities, support, and assistance needed for self-care and personal hygiene.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One of the medical observation cells is constructed with toilet and shower handrails and extra floor space to accommodate the needs of a detainee with disabilities. Per the Assistant Warden and the Supervisory Detention and Deportation Officer (SDDO), however, detainees are prescreened before assignment to this facility. Detainees with significant medical needs have not been, and normally would not be, transferred to this facility. Should such an event occur, however, the detainee would be housed in this designated medical observation cell pending transfer.
9. Detainees are provided clean clothing, linen and towels. <ul style="list-style-type: none"> • Socks and undergarments - daily. • Outer garments - twice weekly. • Sheets - weekly. • Towels - weekly. • Pillowcases - weekly. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with facility policy and as confirmed per the posted Laundry Schedule, socks and undergarments are laundered five days per week. Uniforms are laundered three (3) times a week. Towels, wash clothes and sweatshirts are laundered twice weekly and sheets are laundered once each week.
10. Food service detainee volunteer workers are permitted to exchange outer garments daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per facility policy, ICE detainee food service workers are permitted to exchange their white uniforms daily.
11. Volunteer detainee workers are permitted to exchanges of outer garments more frequently.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the Warden and the Assistant Warden, all detainee workers are permitted to exchange their uniforms daily.

PART 4 – 23. PERSONAL HYGIENE

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

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

Per observations in the detainee housing units, bathing and toilet facilities were clean and in good working order. No detainees were observed having to wait to use the facilities. Detainees were clean and appropriately dressed. Per a review of the grievance log, no unresolved complaints were submitted regarding bathing and toilet facilities, clothing, bedding or personal hygiene supplies. The standard's rating was based on interviews with the Warden, Assistant Warden, GEO Assistant Regional Director, an

officer assigned to the warehouse, the Supervisory Detention and Deportation Officer and the Maintenance Superintendent, on observations in the detainee housing units, the medical unit and the laundry, and on a review of facility policies, the facility detainee handbook, completed Intake - Inmate Issue Acknowledgement forms, and the posted laundry schedule.

(b)(6), (b)(7)c / December 8, 2011
Reviewer's Signature / Date

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

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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 establish a suicide prevention and intervention program. The plan is signed by the facility administrator and health authority and has been reviewed annually.
2. At a minimum, the Program shall include procedures to address: <ul style="list-style-type: none"> • Intake screening and referral requirements; • The identification and supervision of suicide-prone detainees; • Staff training requirements; • The management and reporting of suicidal incidents, suicide watches, and deaths; • Provision of safe housing for suicidal detainees; • Debriefing of any suicides and suicide attempts by administrative, security, and health services staff; • Guidelines for returning a previously suicidal detainee to a facility's general population, upon written authorization of the clinical director. • Reporting guidelines for facility personnel when suspected suicidal behavior is observed; and Written procedures for the proper handling of detainees who exhibit suicidal behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Procedures included in the suicide prevention and intervention program established per facility policy include intake screening, identification and reporting of detainees at risk for suicide, and the referral of those detainees to medical/mental health staff. The program establishes procedures for the placement and monitoring of detainees who exhibit suicidal behavior on suicide watch, with initial continuous monitoring until the detainee is evaluated by mental health staff. Detainees may be released from suicide watch upon authorization by the psychiatrist subsequent to a mental health evaluation. Policy also requires suicide prevention training for new employees with refresher training at least annually and annual mock suicide emergency drills. A critical incident debriefing is required for staff and detainees witnessing a suicide.
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"/>	Per the Training Administrator, and as confirmed per a review of orientation and annual in-service training schedules and attendee sign-in sheets, training on suicide prevention is provided during orientation and annual in-service training. Quarterly refresher training on suicide prevention is also provided.

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"/>	As confirmed per a review of the PowerPoint presentation used by the Licensed Professional Counselor (LPC) when he teaches the suicide prevention classes, the suicide prevention training includes 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"/>	As confirmed per a review of completed documentation, screening for suicide potential is included in the intake health screening completed by medical staff within twelve hours of a detainee's admission. Officers do not conduct the screenings. As confirmed per a review of twenty detainee medical records, screening for suicide potential is consistently timely completed by medical staff. Completed screening forms are reviewed by the LPC.

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
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"/>	In accordance with facility policy, any staff member recognizing verbal and behavioral cues that indicate potential suicide, or being made aware of suicide threats made by a detainee, is to immediately notify medical staff. The detainee is placed on suicide watch pending evaluation by a mental health professional. Interviews with the Health Services Administrator (HSA) and the LPC confirmed implementation of these procedures. None of the detainees whose medical records were reviewed were identified as at risk for suicide. One (1) non-ICE detainee was on suicide watch during the inspection.
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"/>	In accordance with facility policy and as confirmed by the HSA, the psychiatrist, after considering information gathered during a clinical evaluation conducted by the LPC, authorizes a detainee's release from suicide watch. Only the psychiatrist has this authority. In accordance with policy, mental health staff will continue to monitor the status of the detainee following release to general population.
8. The facility has a designated isolation room for evaluation and treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation rooms #459, 461 and 462 in the medical unit have been designated for the evaluation and treatment of detainees at risk for suicide.

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The designated rooms include wall-mounted desks supported by an angled bracket. Room #459 also includes hand rails by the toilet and shower and a wall-mounted sink. These structures have the potential to be used to support the end of a noose in a suicide attempt by hanging. Per facility policy, and as confirmed by medical and other staff and by direct observation of a detainee on suicide watch during the inspection, any detainee identified as at risk for suicide is given only a tear-resistant gown and blanket and is not permitted to retain possession of clothing or bedding from which strips of cloth could be torn. The designated cells are also monitored by video cameras allowing for continuous monitoring by an officer posted outside of the designated cells. As confirmed by the Warden, any detainee placed on suicide watch is initially placed on continuous observation until evaluated by mental health staff.
10. Medical staff have approved the room for this purpose.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per her signature on facility policy listing the designated cells, the psychiatrist has approved their use for suicide watches.
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"/>	In accordance with procedures established in facility policy, and as confirmed per direct observation of a suicide watch in progress during the inspection, the status of a detainee on suicide watch is check and documented by detention staff at least once every fifteen minutes.

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
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"/>	In accordance with procedures established in facility policy, and as confirmed per direct observation of a suicide watch in progress during the inspection, the status of a detainee on suicide watch is check and documented by detention staff at least once every fifteen minutes. Per facility policy, medical staff complete a full assessment of the detainee once on each twelve hour shift. Additional status checks by medical staff are made in accordance with the frequency ordered by the psychiatrist. On-duty medical staff also frequent the area adjacent to the designated cells while completing their other duties and make frequent undocumented observations of any detainee on suicide watch.
13. In CDFs or IGSAs, and/or at facilities where there is not twenty-four hour medical staff, the facility administrator shall report to ICE/DRO any detainee who has been identified as suicidal. ICE/DRO, shall consult with the CD or designated medical authority for immediate evaluation (with constant observation until evaluation), or for transfer to a local psychiatric facility or emergency room by ambulance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per facility policy and as confirmed by the HSA and the Supervisory Detention and Deportation Officer (SDDO), ICE is notified of any detainee who has been identified as suicidal. In accordance with facility policy, facility mental health staff would conduct a mental health evaluation and determine if transfer to a local psychiatric facility or emergency room by ambulance is clinically indicated.
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"/>	In accordance with facility policy and as confirmed by the HSA, a mortality review and critical incident debriefings would be conducted in the event of any completed suicide or serious suicide attempt. There have been no detainee suicides or serious suicide attempts in this facility in the past twelve months.

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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

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

The rooms designated for housing detainees placed on suicide watch include wall-mounted desks supported by angled brackets. One of the rooms also includes hand rails by the toilet and shower and a wall-mounted sink. These structures have the potential to be used to support the end of a noose in a suicide attempt by hanging. Any detainee placed on suicide watch is given only a tear-resistant gown and blanket and is not permitted to retain possession of clothing or bedding from which strips of cloth could be torn. The designated cells are also monitored by video camera allowing for continuous monitoring by an officer posted outside of the designated cells.

Per the Health Services Administrator and facility administrative staff, there have been no suicides and no suicide attempts in this facility in the past twelve months. No ICE detainees have been placed on suicide watch. One non-ICE detainee was on suicide watch during the inspection.

The standard's rating was based on a review of established policies and training documentation, on interviews with the Health Services Administrator, the Director of Nursing, the Licensed Professional Counselor, the Training Administrator and the Supervisory Detention and Deportation Officer, on observations in the medical unit and intake area, on a review of detainee medical records and completed suicide watch logs, on an inspection of the designated suicide watch cells and the video monitoring system, and on direct observations of a suicide watch in progress during the inspection.

(b)(6), (b)(7)c / December 8, 2011
Reviewer's Signature / Date

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

for

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"/>	Per the Supervisory Detention and Deportation Officer (SDDO), detainees are prescreened before assignment to this facility. Those who are severely or terminally ill are not transferred to this facility. Per Health Services Administrator (HSA) and as confirmed by the SDDO, ICE is promptly notified of any detainee already housed in the facility whose medical condition significantly deteriorates. The medical unit does not include an inpatient infirmary. Any detainee whose medical needs exceed the level of care available within the facility is transported to a community hospital for treatment as needed pending transfer from the 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"/>	Per the HSA, ICE is notified of any significant detainee medical concerns. The SDDO confirmed that ICE would make other notifications when indicated in accordance with the requirements of this standard.
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not receive severely or terminally ill detainees. Any detainee whose medical condition would warrant implementation of advanced directives would not be housed at this facility. Per the HSA, any request received from a detainee interested in signing an advanced directive would be referred to ICE.

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
4. There is a policy addressing "Do Not Resuscitate Orders"	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Severely or terminally ill detainees are not housed at this facility. Per the HSA, although a policy on Do Not Resuscitate orders is available, it has not been implemented in this facility. ICE would be notified of any detainee whose medical condition deteriorated to the extent that a DNR order might be appropriate, and that detainee would be transferred from the facility. There have been no such instances in this facility in the past twelve months.
5. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Severely or terminally ill detainees including those with a DNR order would not be housed at this facility. In accordance with facility policy, should a detainee with a DNR order be temporarily housed within the facility, he would receive maximum therapeutic efforts short of resuscitation.
6. The facility notifies ICE/DRO Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSA's, this notification is made through the local ICE representative.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Severely or terminally ill detainees including those with a DNR order would not be housed at this facility. ICE would be notified immediately should a detainee housed in the facility advise staff of the existence of 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 on organ donation is applicable only to organ donations upon death. Per ICE staff, the average length of stay for detainees in this facility is less than thirty days which would not be sufficient time for any organ donation request to be processed. Per the HSA, any request to donate organs received from an ICE detainee would be referred to ICE.

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
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"/>	Facility policy establishes procedures for the notification of ICE in the event of a detainee death. Per the Contract Officer's Technical Representative (COTR) assigned to this facility, ICE would make other notifications in accordance with the requirements of this standard.
9. The facility has a policy and procedure to address the death of a detainee while in transport.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with facility policy, in the event of any medical emergency during a detainee transport, facility policy requires immediate notification of the facility Central Control and local law enforcement and transport of the detainee to the nearest hospital. In the event the medical emergency results in a death, the coroner is to be notified. ICE would be notified immediately in accordance with the facility policy on deaths.
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"/>	Per the COTR, ICE would ensure disposal of a detainee's remains in accordance with the requirements of this standard.
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"/>	Per the COTR, ICE would arrange for the burial of an unclaimed detainee's remains in accordance with the requirements of this standard.
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"/>	Per the COTR, ICE would place an original or certified copy of the death certificate in the detainee's A-file in accordance with the requirements of this standard.
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"/>	Facility policy establishes procedures for notification of the local medical examiner in the event of a detainee death and for requesting an autopsy. The death certificate is to be acquired from the funeral home and a copy given to ICE.

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
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"/>	Per the COTR, ICE would close the case of a deceased detainee in accordance with the requirements of this standard.

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.)

Per the Health Services Administrator, the facility does not accept or continue to house detainees who are severely or terminally ill due to its limited medical resources. The facility has no inpatient medical infirmary. Per the Contract Officer's Technical Representative (COTR) assigned to this facility, ICE would transfer out of any detainee identified as medically inappropriate for this facility. There have been no deaths in this facility in the past twelve months. As confirmed per a review of facility policies and interviews with the COTR and facility medical and administrative staff, procedures for appropriately responding to the death of an ICE detainee in the facility or while in transport are in place.

(b)(6), (b)(7)c / December 8, 2011
Reviewer's Signature / Date

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

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Performance-Based National Detention Standards

Section V ACTIVITIES

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

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has written policy and procedures concerning correspondence and other mail. The rules for correspondence and other mail are posted in each housing or common area or provided to each detainee via a detainee handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, the rules for correspondence are included in the facility detainee handbook. The facility policy on detainee mail was reviewed and updated on October 24, 2011.
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"/>	Key information is provided 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"/>	Incoming correspondence is distributed to detainees within 24 hours Monday through Friday.
4. Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Staff maintains a logbook-recording acceptance of priority, priority overnight, and certified mail delivered to the facility for a detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility maintains a log book for the mail categories listed in the component.
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Facility staff open and inspect general correspondence for contraband without the detainee being present. The facility's procedure is inclusive of all general correspondence and does not include specific conditions under which general correspondence and other mail may be opened without the detainee present.
7. Staff does not read incoming general correspondence without the Facility Administrator's prior approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff do not read incoming general correspondence at this facility. If a determination is made to read a detainees' incoming correspondence, this must be approved by the Warden. The mail clerk will document each instance and maintain a record.
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"/>	The detainee is present when any incoming Special Correspondence is opened.
9. Staff is prohibited from reading or copying incoming and outgoing Special Correspondence without the detainee present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. Staff is only authorized to inspect outgoing correspondence or other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility does not inspect outgoing mail.
11. Correspondence to a politician or to the media is processed as Special Correspondence and is not read or copied.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mailroom staff verified that correspondence to a politician or the media is processed as special correspondence and is not read or copied.
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"/>	This facility uses a form to document the reason for the rejection of any mail and sends a copy of that form to the detainee and the sender.
13. The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Staff maintains a written record of every item removed from detainee mail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A written record is made of any item removed from detainee mail. When cash is received through the mailroom, the money is returned to the sender via certified mail.
15. The Facility Administrator or designee monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The mailroom maintains a contraband box which is emptied weekly. The applicable detainee is given an opportunity to send nuisance contraband back to the sender at the detainee's expense. Records reviewed were accurate and current.
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"/>	Cash removed from a detainee during admission is counted by two officers, and a receipt is given to the detainee. There were no discrepancies noted during the review. When cash is received by the mailroom, the money is returned to the sender via certified mail. The facility accepts only money orders and certified checks.

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
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"/>	Facility staff immediately remove and forward any identification documents to local ICE staff. This is documented on a facility form, a copy of which is given to the detainee.
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"/>	Requests for identification documents are processed by ICE.
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"/>	A master log is maintained and contraband is disposed of in accordance with facility policy.
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"/>	Indigent detainees receive five stamps per week. If additional stamps are needed, the detainee may submit a request to the facility staff. Postage for legal material is provided to all indigent detainees regardless of cost. Writing materials are also provided.
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"/>	Stamps are available for purchase in the commissary. Indigent detainees receive five stamps per week. If additional stamps are needed, the detainee makes a request to the facility staff. The facility does have procedures in place for Special Correspondence and for the mailing of five pieces of general correspondence.
22. The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. SMU detainees have the same correspondence privileges as general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Detainees have access to outside publications.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Outside publications must be sent directly from a bookstore, a magazine company, or pursuant to a newspaper subscription.

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

The facility has a current policy on detainee and general mail. Incoming correspondence is distributed to detainees within one (1) business day. Indigent detainees receive five (5) stamps per week. If additional stamps are needed, a request to the facility staff is made by the detainee. Postage for legal material is provided to all indigent detainees regardless of cost. Writing materials are also

provided.

Facility staff open and inspect general correspondence for contraband without the detainee being present. Referencing the need to maintain a safe environment for staff and detainees, a Supervisory Detention and Deportation Officer gave the facility written authorization to open and inspect all incoming general correspondence. Instructions issued by the ICE/DSCU in November 2011 specified that a blanket authorization by the Warden/Jail Administrator is permissible, but must clearly identify the conditions (such as excessive weight, which may indicate the presence of a weapon) under which general correspondence and other mail may be opened without the detainee present, and that normal letter correspondence containing nothing other than paper and ink is not to be opened without the detainee present. The facility's procedure is inclusive of all general correspondence and does not specify conditions under which general correspondence and other mail may be opened without the detainee present.

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

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

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

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

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

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

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

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

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

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

Remarks: (Record significant facts, observations, other sources used, etc.)
ICE staff handle all non-medical emergency trips.

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PART 5 – 28. MARRIAGE REQUESTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Field Office Director or Facility Administrator considers detainee marriage requests on a case-by-case basis.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All requests for ICE detainee marriages are routed to the Warden. Facility policy requires that when an ICE detainee submits a marriage request, the ICE COTR shall be notified and consulted regarding approval or denial.
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"/>	There have not been any requests to marry submitted by an ICE detainee at this facility.
3. It is standard practice to require a written request for permission to marry.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy states that the ICE standard on Marriage Requests shall be the governing policy and shall be adhered to regarding any marriage request received from an ICE detainee. Policy requires a written request be submitted for consideration of a request to marry.
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"/>	The facility detainee handbook requires that the detainee and intended spouse submit either jointly or separately, a written request to the Warden, who will then forward the request to ICE.
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"/>	Facility staff would provide the detainee and their legal representative with a written copy of the marriage request decision.
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"/>	There have been no requests processed; however, facility policy requires that the detainees be notified of their appeal rights along with the justification for the basis of the decision.
7. The Facility Administrator provides the detainee with a place and time to make wedding arrangements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no detainee marriages to date. Staff state that any marriage ceremony would take place in the visiting room.
8. The detainee handbook explains the marriage request process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. In SPCs the Facility Administrator or highest ranking ICE official on-site is the only officer authorized to approve a request to marry.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility the Warden would seek concurrence with ICE on any potential marriage request approval.

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's policy requires that staff accept all detainee marriage requests and the requests are then forwarded to ICE. The ICE Field Office and the Warden will concur regarding the decision on approval or non-approval and facility staff will proceed to execute all notifications according to the standard. There have been no requests for marriage at this facility within the last twelve months. A review of policy and interviews with staff were conducted to determine that the facility's policy and procedures were in compliance with the standard.

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PART 5 - 29. RECREATION

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Facility provides: <ul style="list-style-type: none"> An indoor recreation program. An outdoor recreation program. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's recreation program consists of both indoor and outdoor recreation activities.
2. A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a Recreation Specialist to tailor recreation activities to the detainee population.
3. Regular maintenance keeps recreational facilities and equipment in good condition.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All recreation areas are well maintained and the equipment is in good condition.
4. The recreational specialist or trained equivalent supervises detainee recreation workers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The recreation specialist does not have detainees assigned to him as recreation workers; however, he does supervise hall orderlies in the cleaning of the recreation areas.
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"/>	The recreation activities available to detainees in the unit's day rooms consist of board games, chess, checkers, playing cards, television viewing, and dominoes. Detainees also have access to the leisure library.
7. Outside activities are restricted to limited-contact sports.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Activities in the outside recreation are limited to basketball, soccer, handball and cardio-vascular recreation.
8. Each detainee has the opportunity to participate in daily recreation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees have the opportunity to participate in daily recreation in their units and in the outdoor recreation areas.
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"/>	The recreation specialist inspects the equipment for damage and condition on a daily basis.
11. Staff conducts searches of recreation areas before and after use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff conducts searches of the recreation areas before and after each use by detainees.

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
12. Recreation areas are under constant staff supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Recreation Specialist and, if needed, correctional staff, provide constant supervision of the outdoor recreation areas. Staff working in the Special Management Unit provide supervision for detainees recreating in the individual recreation areas adjacent to the Special Management Unit.
13. Supervising staff are equipped with radios.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff that supervise the recreation areas are equipped with radios.
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"/>	Detainees housed in the Special Management Unit receive one hour of outdoor recreation a day, seven days a week.
15. Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his or her recreation privileges.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Loss of recreation privileges is not used as a disciplinary sanction at this facility.
16. Special programs or religious activities are available to detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Upon request, the Recreation Specialist has organized handball and basketball tournaments for the detainee population.
17. All volunteers have completed an orientation program with documentation required before entering a secure portion of the facility where detainees are present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All volunteers complete an orientation program prior to entering the secure portion of 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"/>	
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.
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.
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.
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.
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.
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.

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
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.
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.
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.

PART 5 - 29. RECREATION

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

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

Observation of recreation activities, interviews with staff and a review of facility policy indicate that the facility gives detainees access to exercise and recreational activities within the constraints of safety, security and good order. The facility affords all detainees access to recreation for a minimum of one hour a day, seven days per week.

The facility's recreation program includes indoor recreation activities within the housing unit consisting of table games, card playing, television viewing and access to the leisure library, as well as outdoor recreation programs provided in one of many outdoor recreation rooms. Detainees housed in the Special Management Unit participate in outdoor recreation through the utilization of fourteen individual recreation cages outside of the Special Management Unit. General population detainees participate in outdoor recreation in one of three outdoor recreation areas. Each of the three outdoor recreation areas provides a different activity such as basketball or handball in the smaller recreation areas and soccer in the larger recreation area. The space allotted within the three recreation areas is adequate to afford detainees daily access to recreation activities.

Each of the three outdoor recreation rooms utilized by the general population has four solid walls, and a semi-solid ceiling. The

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openings allow fresh air and sunlight into the recreation areas.

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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"/>	Volunteer clergy are used to provide religious services to the detainee population. Volunteers have been recruited who speak English and Spanish which are the major languages spoken within the facility.
2. Space is available for detainees to participate in religious services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The facility allows detainees to observe the major "holy days" of their religious faith. • List any exceptions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has observed Ramadan, Christmas, Lent, Ash Wednesday and Good Friday holy days.
4. The facility accommodates recognized holy-day observances by: • Providing special meals, consistent with dietary restrictions. • Honoring fasting requirements. • Facilitating religious services. • Allowing activity restrictions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility accommodates the detainees' observance of holy days through the provision of special meals, honoring fasting requirements, facilitating religious services and allowing activity restrictions.
5. Each detainee is allowed religious items in his/her immediate possession; refer to the Funds and Personal Property Standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are allowed access to personal religious property consistent with the safety, security and orderly operation of the facility.
6. Volunteer's credentials are checked and verified before allowing participation in detainee programs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires all volunteers to be subjected to a clearance process. This process includes verifying their credentials and background before they are permitted to participate in the program.
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"/>	Facility policy allows for detainees housed in the Special Management Unit to participate in religious activities. The detainees housed in the Special Management are afforded the opportunity to have access to individualized religious counsel in the unit, by the religious volunteer clergy.
RELIGIOUS PRACTICES				

☒ Meets Standard

☐ Does Not Meet Standard

☐ N/A

☐ Repeat Finding

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

A review of facility policy and interviews with staff indicate that detainees at the facility are allowed reasonable and equitable opportunities to pursue the practice of their religious faith. Volunteer clergy are utilized to provide religious study classes and religious services to the detainees in their housing units. Services are provided in both English and Spanish languages. The detainees housed in the Special Management Unit are afforded the opportunity to have access to individualized religious counsel in the unit, by the religious volunteer clergy.

The religious dietary needs of the detainee population are met through the availability of religious diets, providing religious ceremonial meals and observing the high holy days through allowing fasting and work proscriptioin.

(b)(6), (b)(7)c December 8, 2011

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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"/>	Telephones are available 24 hours per day. A TTY device is maintained in the law library.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's telephone access policy is discussed during the facility orientation program and is included in the facility detainee handbook.
3. Notification explaining the facilities telephone policy is in the Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Access rules, including updated telephone and consulate number, are posted in housing units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A laminated binder containing the required information is maintained in each ICE housing unit.
5. The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Information is provided 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"/>	Two (2) telephones are located in each ten man housing unit and four (4) telephones are in 30-man housing units.
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"/>	Telephone inspections are conducted and documented on a daily log. All telephones checked during the review were in good working order. The facility has a telephone service provider representative on-site who provides immediate assistance whenever possible. If breakage occurs that cannot be fixed on site, the representative immediately submits a repair work request.
8. Telephones are located a reasonable distance from televisions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The reporting of out-of-service telephones is documented in a log that was reviewed by the compliance inspector. ICE staff also inspect the telephones weekly.
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"/>	

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
11. Detainees are afforded a reasonable degree of privacy for legal phone calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees may use telephones located in the unit for legal calls. They must notify staff of the attorney client relationship, which is verified. The telephone service provider representative then programs a non-monitored telephone connection for the respective detainee for attorney privacy. Detainees may also request a confidential legal call which is made from a staff office under visual observation.
12. A procedure exists to assist a detainee who is having trouble placing a confidential call.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The facility provides the detainees with the ability to make non-collect (special access) calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-collect Special Access calls are permitted. Each housing unit contains a book with numbers for pro bono attorneys, consulates, and the Office of the Inspector General (OIG).
14. Special Access calls are at no charge to the detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Detainees in this facility have the ability to make special access calls at no charge.
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"/>	Arrangements for detainees to speak by telephone with an immediate family member detained in another facility are made through the facility and ICE.
18. All telephone restrictions are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no telephone restrictions for any ICE detainees within the past year.

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
19. The facility has a system for taking and delivering emergency detainee telephone messages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy establishes procedures for the taking and delivering of emergency detainee telephone messages. Incoming calls are forwarded to the Shift Supervisor's office for verification; the detainee is notified and given an opportunity to make a return phone call.
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"/>	Detainees housed in special management units receive the same telephone privileges as the general population.
23. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are permitted to make calls to consular/embassy officials.
24. Detainees in disciplinary segregation are allowed phone calls for family emergencies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees housed in disciplinary segregation follow the same emergency procedures as the general population. Incoming calls are forwarded to the Shift Supervisor's office for verification; the detainee is notified and given an opportunity to call the party at the phone number provided.
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"/>	Detainees housed in special management units receive the same telephone privileges as the general population. There were no ICE detainees housed in administrative or disciplinary segregation during the review.
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 OIG number is programmed into the telephone system. The compliance inspector verified the number was operable.

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
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"/>	Weekly phone inspections are conducted by ICE staff. Documentation of the inspections is maintained in a folder.

PART 5 – 31. TELEPHONE ACCESS

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

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

The facility has a telephone service provider representative on-site who provides immediate assistance whenever possible. If breakage occurs that cannot be fixed locally, the representative immediately submits a work request for repair. All telephones checked during the review were in good working order. Detainees have access to telephones 24 hours per day. Detainees housed in special management units receive the same telephone privileges as the general population. The OIG number is programmed into the system and the compliance inspector verified the number was operable. Daily telephone inspections are conducted by facility staff and weekly phone inspections are conducted by ICE staff. Documentation is maintained of all inspections. The rating of this standard was based on a review of documentation, personal observations, and interviews with facility staff, the telephone service provider representative and an ICE Deportation Officer.

(b)(6), (b)(7)c / December 8, 2011

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PART 5 – 32. VISITATION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There is a written visitation procedure, schedule, and hours for general visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has written policy, a visitation schedule, and hours for general visiting. Visiting for ICE detainees is on Friday and Saturday from 8:00 AM to 5:00 PM and on Sunday from 8:00 AM until 2:00 PM. Legal visits are permitted 24 hours a day.
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"/>	All visiting is non-contact and is limited to 60 minutes.
3. The visitation schedule and rules are available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The visiting schedule and rules are posted on the wall by the visitor's waiting area.
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"/>	The visiting schedule and rules for all categories are posted on the wall by the visitor's waiting area.
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"/>	The rules and hours for visiting are in both English and Spanish.
6. A general visitation log is maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A general electronic visiting log is maintained and located in the front lobby.
7. Detainees are permitted to retain authorized personal property items specified in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are allowed to maintain simple religious items such as a rosary or religious head gear, legal materials, photographs, a wedding band, and items valued at less than \$50.00.
8. A visitor dress code is available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A dress code is posted in the visitor's waiting area.
9. Visitors are searched and identified according to standard requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visitors are not permitted to bring any items, including bags, purses and other personal items, into the facility.
10. The requirement on visitation by minors is complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Minors age 16 and below are allowed to visit. Visiting is non-contact.
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"/>	This facility allows minor children to visit when accompanied by an adult over the age of 18.

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
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"/>	This facility allows minors to visit when accompanied by an adult over the age of 18.
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"/>	Per the Associate Warden, visits are normally not denied and there have been no denials within the past year. Visiting restrictions would only occur pursuant to a disciplinary sanction, and the detainee would receive a copy of that action.
14. Detainees in special housing are afforded visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in special housing are afforded the same visitation privileges as the general population.
15. Legal visitation is available seven (7) days a week, including holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is unlimited access for legal visitation. Visits may occur 24 hours per day, year round.
16. On regular business days legal visitation hours provide for a minimum of eight (8) hours per day and a minimum of four hours per day on weekends and holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are afforded the opportunity to continue a meeting with a legal representative through a scheduled meal. The meal is saved and offered to the detainee upon his return to the unit.
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"/>	Attorneys are offered a private no-contact visiting room. Attorneys and detainees can exchange documents by presenting them to supervising staff. After checking to ensure no contraband is included, the documents are passed to the detainee or attorney as appropriate.
19. There are written procedures governing detainee searches.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Legal representatives and assistants are subject to a non-intrusive search – such as a pat-down search of the person or a search of the person's belongings - at any time for the purpose of ascertaining the presence of contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Legal visits occur only on a non-contact basis. Attorneys are processed into the facility through a metal detector. Belongings are searched for contraband.
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"/>	As confirmed per direct observation, attorneys and their staff are required to submit the proper identification.

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
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"/>	A list of pro bono legal organizations is maintained in each detainee housing unit.
23. SPCs and CDFs shall submit written requests for tours from domestic or international organizations and associated with detention issues to the appropriate Field Office Director for approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has not had any requests for tours.
24. Provisions for NGO visitation as stated in the Detention Standards are complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no NGO visits within the past 12 months.
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"/>	All requests for law enforcement officials to visit are forward to ICE for approval.
26. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the Facility Administrator or ICE Field Office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the Assistant Warden, former detainees or aliens in proceedings are not permitted to visit without approval of ICE. An ICE Deportation Officer stated they would review any requests, but to date have received none.

PART 5 – 32. VISITATION

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

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

The facility has written policy, a visitation schedule, and hours for general visiting. Visiting occurs Friday and Saturday from 8:00 AM to 5:00 PM, and on Sunday from 8:00 AM until 2:00 PM. Legal visitation hours are 24 hours per day. The rules and hours for visiting are in both English and Spanish. Rules are also included in the facility detainee handbook, and are addressed in detainee orientation during the admission process. A representative from the Houston area El Salvador Consulate was at the facility during the review to interview detainees and to process travel documents for repatriation. The rating of this standard was based on a review of the facility visitation policy, visitation logs, personal observation, and interviews with the Warden, Assistant Warden and Classification Supervisor.

(b)(6), (b)(7)c / December 8, 2011
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 outlines the procedures and requirements of the voluntary work program.
2. Detainee housekeeping meets acceptable levels of neatness, cleanliness and sanitation standards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Housekeeping meets acceptable levels throughout the facility.
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"/>	Detainees are not authorized to work outside of the secure perimeter.
4. Written procedures govern selection of detainees for the Voluntary Work Program. • The same procedures apply for replacement workers as for "new" workers. • Staff follows written procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy outlines the procedures and requirements of the voluntary work program.
5. Where possible, physically and mentally challenged detainees participate in the program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The facility complies with work-hour requirements for detainees, not exceeding: • Eight hours a day. • Forty hours a week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy limits work schedules to eight hours a day and forty hours a week.
7. Detainee volunteers ordinarily work according to a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All volunteer workers are placed on fixed schedules.
8. If a detainee is removed from a work detail, staff places the written justification for the action in the detainee's detention file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are required to complete a voluntary work program orientation that clearly states the detainees' responsibilities regarding the work program.
10. The voluntary work program meets: • OSHA standards • NFPA standards • ACA standards	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's voluntary work program does meet OSHA, NFPA and ACA standards.

PART 5 – 33. VOLUNTARY WORK PROGRAM

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Medical staff screen and formally certifies detainee food service volunteers; <ul style="list-style-type: none">• Before the assignment begins• As a matter of written procedure	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are medically screened prior to being assigned to the food service department. The medical clearance forms are maintained in the detainees' detention files.
12. Detainees receive safety equipment/ training sufficient for the assignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees receive well documented safety and equipment training.
13. Proper procedure is followed when an ICE detainee is injured on the job.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The ICE COTR is notified in the event of any ICE detainee work injury.

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 provides detainees an opportunity to work and earn money through the Volunteer Work Program. Facility policy prohibits detainees from handling hazardous materials and diluted chemicals. Chemicals are dispensed through metered distribution systems. Food service detainees are properly screened for medical conditions that would preclude them from working in the food service department. Adequate job specific safety training is conducted as required. Work schedules are generally fixed and consist of eight (8) hour days culminating in a forty hour work week. A review of policy and interviews with staff indicate that the facility meets the standard by allowing detainees the opportunity to work under conditions that meet PBNDS, OSHA, NFPA and ACA standards.

(b)(6), (b)(7)c December 8, 2011
Reviewer's Signature / Date

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

Performance-Based National Detention Standards

Section VI JUSTICE

34 Detainee Handbook

35 Grievance System

36 Law Libraries and Legal Material

37 Legal Rights Group Presentations

PART 6 - 34. DETAINEE HANDBOOK

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a detainee handbook. Each detainee receives a copy of the local handbook and the ICE National Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All ICE detainees receive a facility detainee handbook as well as a copy of the ICE National Detainee Handbook. The handbooks are available in English or Spanish.
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"/>	Both the facility detainee handbook and the ICE National Detainee Handbook are available in English and Spanish which are the languages spoken by the majority of detainees in the facility.
3. A procedure for requesting interpretive services for essential communication has been developed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has access to the AT&T Language Line interpretive service as needed.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A facility orientation video has been developed in English and Spanish and is shown to detainees in the holding cells during the intake process.
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 last revision to the facility detainee handbook occurred in November of 2011. In the event that revisions are necessary, detainees are advised through postings in the unit and staff is notified via email and memorandums.
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"/>	Personal items permitted to be retained by the detainee and the issuance of hygiene items are outlined in the facility detainee handbook. The initial issuance of clothing is discussed in the handbook. Directions on how to access care are delineated in the facility handbook
9. The detainee handbook states in clear language basic detainee responsibilities.	<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
10. The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Both the local detainee handbook and the ICE National Detainee Handbook delineate the methods for classification of detainees and explain each level of the classification process. The facility detainee handbook explains the facility's process for detainees appealing the classification process.
11. The handbook states when a medical examination will be conducted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility detainee handbook explains that a medical exam will be conducted within fourteen days of arrival.
12. The handbook describes the facility, housing units, dayrooms, In-dorm activities and special management units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The handbook describes: official count times and count procedures, meal times, feeding procedures, procedures for medical or religious diets, smoking policy, clothing exchange schedules and if authorized, clothes washing and drying procedures and expected personal hygiene practices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The official count times, count procedures, meal times, feeding procedures, diet procedures and the smoking policy are listed in facility detainee handbook. Clothing exchange procedures and the expected hygiene practices for detainees are delineated in the facility detainee handbook.
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 procedures for obtaining disposable razors and the authorization to shave prior to attending court are outlined in the facility detainee handbook.
15. The handbook describes barber hours and hair cutting restrictions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The barber hours are listed in the facility detainee handbook. The hair cutting restrictions are not included in the handbook; however, there is no requirement for this information in either the standard on Detainee Handbook or the standard on Environmental Health and Safety.

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
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"/>	The facility detainee handbook describes the telephone policy, debit card purchase procedures, the availability of direct and free calls, the location of the telephones, the facility policy when telephone demand is high and the policy and procedures for placing and receiving emergency phone calls.
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"/>	The facility detainee handbook states the commissary times and procedures. There are no vending machines for detainee use at this facility.
19. The handbook describes the detainee voluntary work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The handbook describes the library location and hours of operation and law library procedures and schedules.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The location of the library is not included in the facility detainee handbook; however, all detainee movement is escorted. Staff will escort detainees to and from the library. The schedule and the procedures for accessing the library are listed.
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"/>	The facility detainee handbook describes the attorney and regular visitation policies and procedures and the location of the Pro Bono Legal Organization lists, and discusses the schedules and sign up procedures for the group legal presentations.
22. The handbook/supplement provides local ICE contact information.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff assigned to this facility maintain offices on site. The handbook describes how to correspond with ICE staff.
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"/>	The facility detainee handbook describes the visiting hours, schedules and rules and regulations. This information is also posted in the facility lobby.

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"/>	The facility detainee handbook describes the complete detainee disciplinary policy to include prohibited acts and severity scale sanctions, the time limits in the disciplinary process and a summary of the discipline process.
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"/>	At this facility, detainees can appeal a grievance directly with ICE. All bulleted requirements of this component are included in the grievance section of the handbook.
28. The handbook describes the medical sick call procedures for general population and segregation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Detainees are required to sign the Orientation Acknowledgement Form to verify that they have received both the facility detainee handbook and the ICE National Detainee Handbook upon admission to the facility.

PART 6 - 34. DETAINEE HANDBOOK

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

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

PART 6 - 34. DETAINEE HANDBOOK

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

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

Observation of the intake process indicated that upon admission to the facility, every ICE detainee receives a copy of the facility detainee handbook and the ICE National Detainee Handbook. Both handbooks are available in English or Spanish as is the facility orientation video that supplements the handbooks.

A review of the ICE National Detainee Handbook and the facility detainee handbook, along with interviews of staff, indicated that the handbooks are comprehensive in describing the facility's rules, programs, procedures and requirements for the detainees during their detention. The handbooks accurately describe the programs offered by the facility, ICE and outside groups as required by the standard.

(b)(6), (b)(7)c / December 8, 2011
Reviewer's Signature / Date

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

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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"/>	The facility's detainee handbook informs detainees that there are informal and formal avenues to resolve grievances.
2. The admissions process includes providing each new arrival with a copy of the detainee handbook (or equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees arriving at the facility receive a facility detainee handbook as well as an ICE National Detainee Handbook. Each of the handbooks is available in English and Spanish.
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"/>	All the bulleted items within this component are addressed in the facility detainee handbook and/or the ICE National Detainee Handbook.
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"/>	The ICE National Detainee Handbook informs detainees that they should present their oral complaint or informal grievance within five (5) days from the date of the underlying event, incident or condition that became a concern.
5. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. <ul style="list-style-type: none"> • Detainees may seek help from other detainees or facility staff when preparing a grievance. • Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Facility has written procedures for identifying and handling a time-sensitive emergency grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy outlines the procedures for handling an emergency grievance. Policy requires that any emergency grievance be immediately brought to the attention of the Warden and that the Grievance Officer respond to the grievance within twenty-four hours.

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
7. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Staff shall not harass, discipline, punish or otherwise retaliate against a detainee who files a complaint or grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy prohibits staff from retaliating against a detainee who files a complaint.
9. Procedures include maintaining a Detainee Grievance Log. <ul style="list-style-type: none"> If not, an alternative acceptable record keeping system is maintained. "Nuisance complains" are identified in the records. For quality control purposes, staff document nuisance complaints received but not filed. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility maintains a manual grievance log. The facility receives very few ICE detainee grievances. All grievances from ICE detainees are accepted and processed regardless if they are "nuisance" grievances. Also, all grievances are forwarded to ICE for informational purposes regardless of the nature of the complaint.
10. If a detainee who establishes a pattern of filing nuisance complaints or otherwise abusing the grievance system, the Facility Administrator may authorize staff to refuse to process subsequent complaints. This authority may not be delegated, even to an acting Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses the abuse of the detainee grievance process. The caveat that the authority to place a detainee on "abuse" status cannot be delegated below the Facility Administrator is not required in the Detention Standard for Detainee Grievances. In this facility, the Warden does not delegate this authority.
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 Grievance Officer's post orders requires that he shall report all allegations, made by any individual, concerning incidents or staff misconduct immediately to the ICE COTR as stipulated in the Federal Contract.
12. Informal resolution of a written grievance is documented in the detainee's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Staff complies with the requirement to report allegations of officer misconduct to a supervisor or higher-level official in his or her chain of command, and/or to ICE/DRO Office of Professional Responsibility and/or the DHS Inspector General.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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
14. In SPCs and CDFs, when a Detainee does not accept the grievance committee's decision, he/she files an appeal with the ICE Facility Administrator. <ul style="list-style-type: none"> In all facilities written procedures cover detainee appeals and are included in the detainee handbook 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility allows detainees to submit level two grievance appeals directly to the Warden. If the detainee is not satisfied with the Warden's response, the appeal can be filed with ICE. Facility policy covers the detainee appeal process and it is included in the facility detainee handbook.
15. In SPCs/CDFs, the detainee has a reasonable timeframe after the incident or informal-grievance outcome to file a formal grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility allows detainees five days in which to pursue a formal grievance.

PART 6 – 35. GRIEVANCE SYSTEM

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

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

Since the last inspection, there have been twenty-two grievances filed. Nineteen of the twenty-two grievances were regarding the same incident. The incident in question was concerning the unprofessional conduct of a correctional officer. The incident was investigated and the grievance committee ruled in favor of the detainees. The officer in question was disciplined. ICE was notified of the incident and processed copies of the grievances as required.

(b)(6), (b)(7)c December 8, 2011
Reviewer's Signature / Date

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

10/11

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility provides a designated law library for detainee use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a designated law library with five computer work stations and one laptop. Library hours are Monday through Friday from 8:00 AM to 5:00 PM.
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 maintains hard copies of legal materials and law books. The LexisNexis electronic law library is also available for detainee use.
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"/>	The law library has five computer stations and one laptop. The computers are connected to a network printer that is monitored by staff. Photocopiers are available for detainees and the facility maintains limited supplies for both. Detainees may receive ten free photocopies. Additional copies are ten cents a page.
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"/>	The library is quiet, well lit, contains appropriate furniture and provides a pleasant work environment.
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"/>	Detainees may save work on the computer with password protected software. Only the detainee and legal library supervisor have access to each detainee's legal work.
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"/>	Updates are received when applicable. The law library supervisor indicates all updates are current, and he maintains the older version on file.
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"/>	Facility policy authorizes outside persons and organizations to submit published or unpublished materials. The legal library supervisor stated all materials are screened by ICE for approval before inclusion into the law library.

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
9. There is a designated ICE or facility employee who inspects, updates, and maintain/replace legal material and equipment on a routine basis. The designee properly disposes outdated supplements and replaces damaged or missing material promptly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff visit the law library to ensure updates are implemented, LexisNexis is current, and detainees are allowed access to the library.
10. Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees have access to the law library a minimum of five (5) hours per week and additional time if needed. Facility policy specifies that detainees are not required to choose between recreation and use of the law library.
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"/>	If requested materials are available, copies are made and normally provided to the detainee within one business day.
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"/>	Detainees may assist other detainees in researching and preparing legal documents. If needed, the facility provides an interpreter service through the AT&T language service.
13. Staff ensures that illiterate or non-English-speaking detainees without legal representation receive more than access to English-language law books after indicating their need for help.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees may keep legal materials in their assigned locker in their housing unit. If additional space is needed, the facility has plastic bins which are issued to the detainee for storage of legal materials.
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"/>	A laptop computer loaded with LexisNexis is available to any detainee housed in either Administrative or Disciplinary Segregation. The condition of the computer is checked for damage before and after detainee use. If additional legal materials are needed, legal library staff will make the appropriate copies.

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
16. All denials of access to the law library fully documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no denials of detainee use in the law library. The law library supervisor does maintain a log if a denial should occur. This was verified with a Deportation Officer
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"/>	As verified by a Deportation Officer assigned to this facility, no detainees have been denied access to the law library or law materials in this facility.
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"/>	No detainee is subjected to reprisals, retaliation, or penalties for seeking judicial relief. The legal library supervisor stated he was unaware of any incidents of this nature.
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"/>	Indigent detainees receive free envelopes and stamps to mail legal materials.

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

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

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

The facility has a designated law library with five computer work stations and one laptop. Library hours are Monday through Friday from 8:00 AM to 5:00 PM. The library is quiet, well lit, contains appropriate furniture, and provides a pleasant work environment. Approximately ten male detainees were observed working in the law library during the review. Staff provide photocopies when needed or requested, and will fax detainee legal briefs to the court if a deadline is approaching. Detainees are offered a minimum of five (5) hours of law library use per week and can request additional time through the inmate request system. Detainees facing court deadlines are given priority. LexisNexis was current and had been installed during the week of December 2, 2011. A laptop computer loaded with LexisNexis is available for use by any detainee housed in Administrative or Disciplinary Segregation. If additional legal materials are needed, staff will make the appropriate copies. The standard's rating was based on review of the facility policy, interviews with the Legal Library Supervisor and a Deportation Officer, and personal observations.

(b)(6), (b)(7)c
 December 8, 2011
 Reviewer's Signature / Date

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

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PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS

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

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

PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<input checked="" type="checkbox"/> Check here if No Group Presentations were conducted within the past 12 months. Mark Standard as Acceptable overall and continue on with next portion of worksheet.				
12. Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee, and the reasons for suspension are documented. The Headquarters Office for Detention and Removal, Field Operations and Detention management Division is notified when a group or individual is suspended from making presentations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The facility plays ICE/DRO-approved videotaped presentations on legal rights, at regular opportunities at the request of outside organizations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. The facility maintains equipment for viewing approved electronically formatted presentations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS

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

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

There have been no legal rights group presentations within the past year. The majority of the detainee population is from El Salvador. These detainees are awaiting final return to their country. The average detainee length of stay is less than 60 days.

(b)(6), (b)(7)c / December 8, 2011
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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"/>	Detention files are created immediately upon a detainee's arrival.
2. The detainee Detention File contains either originals or copies of documentation and forms generated during the admissions process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of 15 detainee detention files confirmed the inclusion of appropriate classification documentation and forms generated during the admission process. These forms included property inventory, receipt of the handbook and orientation, forms for voluntary work assignments and medical clearance for work assignments.
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"/>	Detainee grievance forms, requests to staff members, visiting lists and valuable/funds receipts were also found in detainee detention files.
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"/>	In this facility, detainee files are kept in locked cabinets in the Intake office. The room is secured when the office is closed.
5. The Detention File remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent and other documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The detainee's detention file remains active throughout the detainee's stay at this facility. As was verified during a file review, copies of release documents and signed property forms are added to the file upon release.
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"/>	As confirmed per observations during the review, the officer makes a notation in the file stating the file is complete. The file is kept in a locked file cabinet for six (6) months before being archived.
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"/>	

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
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"/>	Detention files may be checked out by the Warden, Assistant Warden and Chief of Security. The classification supervisor is responsible for ensuring files are appropriately logged in and out.
9. Electronic record-keeping systems and data are protected from unauthorized access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Some electronic record keeping is maintained. Staff have varying levels of access based on their job functions. Staff cannot change anything in the electronic system unless they are granted specific rights for that level. As examples, only Medical staff can change medical information; custody staff can review a detainee's visiting list but not implement changes to the list.
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"/>	Detainees must sign a release of information authorization before the release of any information. A copy will be maintained in the detainee's detention file. The Classification Supervisor stated she was unaware of any requests for release of information.
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"/>	The facility has three (3) copiers for the general facility and one for medical staff. Supplies are ordered through the Business Office. Equipment appears to be well maintained and functioning properly.
13. The Detention Operations Supervisor or equivalent can direct certain documents be added to a detainee's detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Archived files are purged after six years by shredding or burning.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has only been in operation for three (3) and one-half years. No files have been purged or destroyed.

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
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"/>	A Deportation Officer indicated that appropriate materials are forwarded from the facility for inclusion into the detainee's A-file. The A-file is forwarded to the records depository. The facility has been in operation for three and one-half years. No facility files have been purged or destroyed.

PART 7 – 38. DETENTION FILES

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

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

Detention files are created immediately upon a detainee's arrival. Per a file review, detention files combined with information available in an electronic format contain all significant information about a detainee. A total of 15 files were reviewed and contained all admission paperwork, classification sheets, property and orientation receipts, grievances, requests to staff members, medical clearance forms for work assignments and visiting lists. Some electronic record keeping is maintained. Staff have varying levels of access to this computer program based on their job functions. The standard's rating was based on a review of detainee files and information on the electronic system, personal observation of archiving procedures and interviews with classification and records staff.

(b)(6), (b)(7)c / December 8, 2011
 Reviewer's Signature / Date

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

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PART 7 - 39. NEWS MEDIA INTERVIEWS AND TOURS

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

Components	Meets Standards	Does Not Meet Standards	N/A	Remarks
1. The ICE/DRO Field Office Director approved all interviews by reporters, other news media representatives, academics and others not covered by the Detention Standard on Visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the Warden and an assigned Deportation Officer, all requests for interviews would be forwarded to ICE for approval or disapproval by the Field Office Director. The facility received no requests for interviews in the past twelve months.
2. All personal interviews are documented with the News Interview Authorization form (or equivalent) and filed in the detainee's A-file with a copy in the facility's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All requests for personal interviews would be forwarded to ICE to process in accordance with this standard. There have been no media requests for detainee interviews.
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"/>	The facility received no requests for detainee interviews in the past twelve months.
4. Signed released forms are obtained and retained in the detainee's a-file from any media representatives who photographed or recorded any detainee in any way that would individually identify him or her.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no media requests for detainee interviews. Facility policy establishes procedures which addresses this issue.
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 have been no media requests for detainee interviews or tours of the facility. Press pools have not been established.

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.)

Per interviews with the Warden and a Deportation Officer, if requests for interviews or tours were received, the facility would immediately contact ICE. The Field Office Director would review and approval or disapprove the request. If approved, ICE staff would coordinate the interview or tour. There have been no media requests for detainee interviews or tours of the facility in the

past twelve months. The rating of this standard is based on a review of facility policy on news media and on interviews with the Warden and a Deportation Officer.

(b)(6), (b)(7)c / December 8, 2011
Reviewer's Signature / Date

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

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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"/>	The facility conducts a comprehensive training program for all staff, contractors and volunteers. Training is provided in the form of an initial orientation and subsequent annual in-service training.
2. The amount and content of training is consistent with the duties and function of each individual and the degree of direct supervision that individual receives.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. At least one qualified individual with specialized training for the position coordinates and oversees the staff development and training program. At a minimum, full-time training personnel complete a 40-hour training-for-trainers course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Training Administrator has completed eighty hours of "Training for Trainers" courses.
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 current 2011 training plan was approved by the Warden on October 29, 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"/>	Individual training files are maintained for all staff in individual folders, as well as in the Learning Management System computerized database.

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>6. Each new employee, contractor, and volunteer is provided an orientation prior to assuming duties. While tailored specifically for staff, contractors, and volunteers, the orientation programs include, at a minimum:</p> <ul style="list-style-type: none"> • Working conditions • Cultural diversity/understanding staff & detainees • Code of ethics • Personnel policy manual • Employees' rights and responsibilities • Drug-free Workplace • Health-related emergencies • Signs of Suicide risk and precautions • Suicide prevention and intervention • Hunger strikes • Use of Force • Keys and Locks • Overview of the criminal justice system • Tour of the facility • Facility goals and objectives • Facility organization • Staff rules and regulations • Sexual harassment/sexual misconduct awareness • Personnel policies • Program overview • Orientation and training on detainee handbook and detainee rights. • Requirement of special-needs detainees. • National Detention Standards 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>All new employees, contractors and volunteers are provided an orientation course prior to assuming their duties. The orientation course covers all twenty-three course requirements identified in this 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>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"/>	All clerical and/or support staff receive training that covers all sixteen course topics required in 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
<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"/>	Professional and support employees, including contractors, receive training that covers all twenty-two courses identified in 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
<p>9. Full-time health care employees receive at least 40 hours of formal orientation before undertaking their assignments. At a minimum, the orientation program includes:</p> <ul style="list-style-type: none"> • The purpose, goals, policies and procedures for the facility and parent agency security and contraband regulations • Key control; appropriate conduct with detainees • Responsibilities and rights of employees • Standard precautions • Occupational exposure • Personal protective equipment • Bio-hazardous waste disposal • Overview of the detention operations. • National Detention Standards. • Medical grievance procedures and protocol. • Requirement for special needs detainees. • Code of Ethics • Drug free workplace • Hostage situations and staff conduct if taken hostage. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Full time health care employees receive at least 40 hours of formal orientation before undertaking their assignments. The orientation training covers all fourteen of the courses required in this 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>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, receive training on all twenty-four courses required by this component.
<p>11. Situation Response Teams (SRTs) receive:</p> <ul style="list-style-type: none"> • Specialized training before undertaking their assignments. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
<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"/>	

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. (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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personnel authorized to use firearms receive firearms training before being assigned any post requiring their use.
14. (MANDATORY) All personnel authorized to use firearms demonstrate competency in their use at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
15. (MANDATORY) Personnel authorized to use chemical agents receive training in the use of chemical agents and in the treatment of individuals exposed to a chemical agent before being assigned to a post involving their possible use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
16. All staff receives orientation and annual training on the facility's drug-free workplace program. Typical contents are: <ul style="list-style-type: none"> • Staff, contractors, and volunteers prohibited from: • Using illegal drugs. • Possessing illegal drugs except in the authorized performance of official duties. • Procedures to be used to ensure compliance. • Opportunities available for treatment and/or counseling for drug abuse. • Penalties for violation of the policy. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff receive pre-service and in-service training on the facility's drug free workplace program. Staff receive the initial training during their initial Human Resources training prior to the orientation course. In-service training is conducted annually. The training covers all topics required by the PBNDS.
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"/>	All staff receive pre-service and in-service training on the facility's code of ethics. Staff receive the initial training during their initial Human Resources training prior to the orientation course. In-service training is conducted annually. The training covers all topics required by the PBNDS.

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
19. New staff are required to acknowledge in writing that they have reviewed and understand facility work rules, ethics, regulations, conditions of employment, and related documents, and a copy of the signed acknowledgement is maintained in that person's personnel file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. (MANDATORY) All staff in frequent contact with detainees is trained at least annually to respond to health-related emergencies within four minutes. The training is provided by a responsible medical authority in cooperation with the facility administrator and includes: <ul style="list-style-type: none"> Recognizing of signs of potential health emergencies and the required responses. Administering first aid and cardiopulmonary resuscitation (CPR). Obtaining emergency medical assistance through the facility plan and its required procedures. Recognizing signs and symptoms of mental illness, suicide risk, retardation, and chemical dependency. The facility's established plan and procedures for providing emergency medical care including, when required, the safe and secure transfer of detainees for appropriate hospital or other medical services, including by ambulance when indicated. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The training on health-related emergencies is conducted by medical staff. The training is provided in pre-service and annual in-service training. The training covers all topics required by this component.
21. All staff in frequent contact with detainees are trained at least annually on the facility's Sexual Abuse and Assault Prevention and Intervention Program, to include: <ul style="list-style-type: none"> Understanding that sexual abuse or assault is never an acceptable consequence of detention. Recognizing housing or other situations where sexual abuse or assault may occur. Recognizing the physical, behavioral, and emotional signs of sexual abuse or assault and ways to prevent such occurrences. Knowing how to report knowledge or suspicion of sexual abuse or assault and make intervention referrals in the facility's program. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff receive Prison Rape Elimination Act (PREA) training quarterly. The training covers all of the components identified in 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
<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"/>	All staff are trained in pre-service and in-service training on the facility's suicide prevention and intervention program. The training covers all topics required by this component. Due to the serious nature of this issue, staff training is given quarterly.
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"/>	All staff receive key control training during initial orientation and during in-service training. The course is taught by the Tool Control Officer.
<p>25. Through ongoing (at least annual) training, all detention facility staff is made aware of their responsibilities to control situations involving aggressive detainees. At a minimum, training shall include:</p> <ul style="list-style-type: none"> The requirements of this Detention Standard The use of force continuum Communication techniques Cultural diversity Dealing with the mentally ill Confrontation-avoidance techniques Approved methods of self-defense Force cell-move techniques Communicable diseases, particularly precautions to be taken for use of force Application of restraints (progressive and hard) Reporting procedures. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff receive annual training on handling aggressive detainees. The training covers all the courses required by 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"/>	The facility has scholarship programs and tuition reimbursement programs in place. The facility also encourages staff professional development through its willingness to accommodate staff schedules for approved courses.

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 staff training department has a comprehensive training program. The facility conducts pre-service and regular in-service training for all staff, contractors and volunteers. The amount and content of training is sufficient and consistent with the duties and functions of each employee. The Training Manager is well qualified with specialized "training for trainers" courses.

(b)(7)e

All staff are trained at least annually in health-related emergencies. Sexual abuse and suicide prevention and intervention training is conducted quarterly.

A review of the facility's annual training plan, course requirements, and training documentation indicate that staff are receiving the required training. Staff interviews further verified course content and training received.

(b)(6), (b)(7)c / December 8, 2011
Reviewer's Signature / Date

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

[Handwritten Signature]

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"/>	Per a Deportation Officer assigned to the facility, ICE notifies the legal counsel when applicable per the requirements of this standard.
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"/>	ICE notifies a detainee of his scheduled transfer.
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"/>	As verified by a Deportation Office, the issue of responsibility for notification of family members is covered in the detainee orientation. ICE notifies the detainee's attorney.
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"/>	The bulleted requirements are met by the facility policy and procedures. ICE notifies a detainee of his scheduled transfer only after the detainee no longer has access to a telephone.
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"/>	ICE provides the necessary paperwork for a detainee's removal from the facility. This facility will not release a detainee until a hard copy of the paperwork is received.
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"/>	Medical transfers are handled by ICE and coordinated through Houston Field Office. As confirmed by the Health Services Administrator, a medical transfer summary is completed on all medical transfer cases. Detainees are transferred with at least a seven day supply of essential medications.

PART 7 - 41. TRANSFER OF DETAINEES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. Detainees are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number and the envelope is marked Medical Confidential.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. For medical transfers, transporting officers receive instructions regarding medical issues.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Instructions are received prior to the detainee departing on the transport.
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"/>	All funds and property are transported with the detainee.
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"/>	Telephones are located in holding rooms in Intake. All detainees have access to make a telephone call at the government's expense.
14. Meals are provided when transfers occur during normally schedule meal times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sack lunches are provided when necessary.
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"/>	As confirmed by the on-site Deportation Officer who maintains the files, the A-File accompanies the detainee when he is transferred to a different Field Office or sub-office.
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"/>	Per an on-site Deportation Officer, A-Files are forwarded when a temporary file is maintained and the original A-File has not been received by the facility.

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.)

Detainees are transferred in accordance with the PBNDS guidelines. ICE provides the paperwork necessary for a detainee's removal from the facility. This facility will not release a detainee until a hard copy of the paperwork is received. ICE notifies the legal counsel of a detainee's transfer and provides transfer information to the detainee only after the detainee no longer has access to a telephone. This standard's rating was based on review of the facility policy on transfers and on interviews with the Transportation Captain and a Deportation Officer assigned to the facility.

(b)(6), (b)(7)c / December 8, 2011
Reviewer's Signature / Date

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

for