



U.S. Immigration  
and Customs  
Enforcement

MAY 18 2011

MEMORANDUM FOR: Marc J. Moore  
Field Office Director  
Miami Field Office

FROM: Tae D. Johnson (b)(7)(E)  
Assistant Director for Detention Management

SUBJECT: Krome Service Processing Center Annual Review

The annual review of the Krome Service Processing Center conducted on April 5-7, 2011, in Miami, Florida has been received. A final rating of **Meets Standards** has been assigned. No further action is required and this review is closed.

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

- 1) The Field Office Director, Enforcement and Removal Operations, shall notify the facility **within** five business days of receipt of this memorandum. Notification shall include copies of the Form G-324A, *Detention Facility Review Form*, the G-324A Worksheet, LCI Summary Memorandum, and a copy of this memorandum.
- 2) The next annual review will be scheduled on or before April 5, 2012.

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

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

(Acting) Deputy Assistant Director, Detention Management at (202) 73

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

cc: Official File

ICE: (b)(6), (b)(7)c 4/26/2011

(b)(7)e

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



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

5-11-09 update

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

<b>Name</b> <b>Krome Service Processing Center</b>
<b>Address (Street and Name)</b> <b>18201 S. W. 12<sup>th</sup> Street</b>
<b>City, State and Zip Code</b> <b>Miami, Florida 33194</b>
<b>County</b> <b>Dade</b>
<b>Name and Title of Chief Executive Officer (Warden/Superintendent/Facility Administrator)</b> (b)(6), (b)(7)c <b>AFOD / OIC</b>
<b>Name and Title of Lead Compliance Inspector</b> (b)(6), (b)(7)c <b>LCI</b>
<b>Date[s] of Review</b> From <b>4/5/2011</b> to <b>4/7/2011</b>
<b>Type of Review</b> <input checked="" type="checkbox"/> <b>Headquarters</b> <input type="checkbox"/> <b>Operational</b> <input type="checkbox"/> <b>Special Assessment</b> <input type="checkbox"/> <b>Other</b>

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

### What is "Performance-Based"?

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

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

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

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

### Worksheet Overview

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

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

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

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

### **Worksheet Completion**

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

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

### **Outcome Measures Completion**

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

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



## ***Table of Contents***

### **SECTION I – SAFETY**

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

### **SECTION II – SECURITY**

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

### **SECTION III – ORDER**

- Disciplinary System

### **SECTION IV – CARE**

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

### **SECTION V – ACTIVITIES**

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

### **SECTION VI – JUSTICE**

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

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

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

## **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"/>	The facility has specific written policy to comply with the requirements of this component.
2. Detainees are protected from: <ul style="list-style-type: none"> <li>Personal abuse</li> <li>Corporal punishment</li> <li>Personal injury</li> <li>Disease</li> <li>Property damage</li> <li>Harassment from other detainees</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Staff are trained to identify signs of detainee unrest. <ul style="list-style-type: none"> <li>What type of training and how often?</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility staff receive annual training as part of the "Hostage Plan", which identifies signs of detainee unrest.
4. Staff effectively disseminate information on facility climate, detainee attitudes, and moods to the Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. There is a designated person or persons responsible for emergency plans and their implementation. Sufficient time is allotted to the person or group for development and implementation of the plans.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility AFOD is responsible for emergency plan development, implementation, and distribution. Sufficient time is available to complete the required tasks.
6. Each emergency plan is assigned a number and is strictly accounted for. A list identifying the location of each emergency plan is maintained by the Chief of Security or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has seven assigned numbers for emergency plans and all are accounted for. A list is maintained by the Chief of Security, identifying the location of each.
7. All staff receive 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"/>	
8. The General Section of the emergency plans discusses alternate routes to the facility for staff to use in the event the primary route is impassable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The plans address the following issues: <ul style="list-style-type: none"> <li>Confidentiality</li> <li>Accountability (copies and storage locations)</li> <li>Annual review procedures and schedule</li> <li>Revisions</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	The facility's emergency plans are well defined for most emergency situations and include procedures for handling detainees with special needs.

### 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
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"/>	
12. The facility has cooperative contingency plans with applicable: <ul style="list-style-type: none"> <li>• Local law enforcement agencies</li> <li>• State agencies</li> <li>• Federal agencies</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has in place contingency plans with Local, State, and Federal agencies.
13. The facility conducts mock emergency exercises with agencies or departments with which they share mutual aid agreements and Memoranda of Understandings. The exercises should test specific emergency plans to assess their effectiveness.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility has not conducted any emergency exercises with mutual aid partners during the last year. The facility reports these are tentatively scheduled to occur in May 2011 and November 2011.
14. All staff receive copies of the Facility Hostage policy and procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Staff are trained to disregard instructions from hostages, regardless of rank. Within 24 hours after release, hostages are screened for medical and psychological effects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement of this component is clearly defined within written facility policy.
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"/>	Interpretive services are identified in the facility's emergency plans and available via a telephone provider.
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"/>	
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"/>	
19. Written plans illustrate locations of shut-off valves and switches for utilities (water, gas, electric).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility emergency plan has a dedicated section containing locations of shut-off valves and switches for required utilities.
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. <b>(MANDATORY)</b> Written procedures cover: <ul style="list-style-type: none"> <li>• Work/Food Strike</li> <li>• Fire</li> <li>• Environmental Hazard</li> <li>• Detainee Transportation System Emergency</li> <li>• ICE-wide Lockdown</li> <li>• Staff Work Stoppage</li> <li>• Disturbances</li> <li>• Escapes</li> <li>• Bomb Threats</li> <li>• Adverse Weather</li> <li>• Internal Searches</li> <li>• Facility Evacuation</li> <li>• Detainee Transportation System Plan</li> <li>• Hostages (Internal)</li> <li>• Civil Disturbances</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's emergency plan is well defined and comprehensive, containing all the requirements of this component.
22. The Emergency Plans specify a procedure for post-emergency debriefings and discussions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### PART 1 – 1. EMERGENCY PLANS

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

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

The facility's emergency policy and procedures were reviewed, which establish a well defined and comprehensive plan.

Training records were reviewed to establish that facility staff meet the requirements of this standard. The facility has mutual aid agreements with Local, State and Federal agencies on file.

The facility has not conducted any emergency exercises with mutual aid partners during the last year. The facility reports these are tentatively scheduled to occur in May 2011 and November 2011.

The facility plan is confidential. Overall, the facility complies with the requirements of the PBNDS.

(b)(6), (b)(7)c April 7, 2011

Reviewer's Signature

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



## PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. <b>(MANDATORY)</b> The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy KRO/11-12, Environmental Health and Safety, addresses the storing, issuing, and maintaining inventories of hazardous materials. The policy outlines the accountability and responsibilities of staff when handling hazardous materials.
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"/>	Constant inventories are maintained in each area throughout the facility. Areas inspected included maintenance, food service, laundry, medical, and several housing units.
3. The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. <ul style="list-style-type: none"> <li>The files list all storage areas, and include a plant diagram and legend.</li> <li>The MSDSs and other information in the files are available to personnel managing the facility's safety program.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures: <ul style="list-style-type: none"> <li>Wear personal protective equipment.</li> <li>Report hazards and spills to the designated official.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Protective equipment, such as gloves and protective goggles, was observed in the locations inspected. Policy requires hazards and spills to be reported.
5. The MSDS are readily accessible to staff and detainees in the work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yellow MSDS books are visible in locations throughout the facility.
6. Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> <li>Quantities are limited.</li> <li>Detainees are trained.</li> <li>Staff always supervise detainees using these substances.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All products are secured in approved lockers. Also, all products are used in accordance with the containers' labels. This was verified by interviewing several staff members.
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"/>	
10. Excess flammables, combustibles, and toxic liquids are disposed of properly in accordance with MSDS.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Staff directly supervise and account for products with methyl alcohol. Staff receive 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 allow products with 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"/>	A review of (b)(7)(E) Epyan Security staff files, (b)(7)(E) personnel files, as well as five detainee files, indicates that both staff and detainees receive training in accordance with OSHA standards.
13. <b>(MANDATORY)</b> The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association (NFPA) and the Occupational Safety and Health Administration (OSHA).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a Hazardous Communication Plan in place, as well as a Fire Prevention and Control Plan. All staff in the facility are trained regarding both of these plans.
14. A technically qualified staff member conducts fire and safety inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Miami-Dade Fire Rescue Department conducted an inspection on April 1, 2010. Minor deficiencies were noted and corrected by the facility within the week. Departmental staff are expected to return within the next week or two to conduct the next annual inspection.
15. The Safety Office (or officer) maintains files of inspection reports, including corrective actions taken.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. <b>(MANDATORY)</b> The facility has an approved fire prevention, control, and evacuation plan.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a detailed fire prevention, control and evacuation plan. The facility is in the process of having its annual fire safety inspection conducted by the Miami-Dade Fire Rescue Department. The plan has been submitted to the fire department for review and approval. This was verified by reviewing an email between the facility and the fire department.

## PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
17. The plan requires: <ul style="list-style-type: none"> <li>Monthly fire inspections.</li> <li>Fire protection equipment strategically located throughout the facility.</li> <li>Public posting of emergency plan with accessible building/room floor plans.</li> <li>Exit signs and directional arrows.</li> <li>An area-specific exit diagram conspicuously posted in the diagrammed area.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Fire drills are conducted on a monthly basis in varying locations throughout the facility and on different shifts. This was verified by reviewing the fire drill log.
19. A sanitation program covers barbering operations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Barbering services provided at the facility meet the sanitation standards. Hot and cold water, brooms, and cleaning materials for use in the barbering services are available.
20. The barbershop has the facilities and equipment necessary to meet sanitation requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot and cold water are available the barbershop.
21. The sanitation standards are conspicuously posted in the barbershop.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Written procedures regulate the handling and disposal of used needles and other sharp objects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical Operation Procedure, Chapter 7 - Sharps/ Instruments, is the medical management plan that governs the handling of used needles and other sharp objects. This policy instructs staff in the proper handling and disposal of used needles and sharps.
23. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the inventories maintained in the medical department indicate daily and weekly inventories are conducted.
24. Standard cleaning practices include: <ul style="list-style-type: none"> <li>Using specified equipment; cleansers; disinfectants and detergents.</li> <li>An established schedule of cleaning and follow-up inspections.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Spill kits are readily available.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

# **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
26. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a contract with Stericycle to remove the bio-hazardous waste.
27. Staff are 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"/>	A review of numerous staff files indicated that all staff are trained in blood borne pathogens initially and then complete refresher training each year.
28. Do the methods for handling/disposing of refuse meet all regulatory requirements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. A Licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. <ul style="list-style-type: none"> <li>At least monthly.</li> <li>The pest-control program includes preventive spraying for indigenous insects.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a contract with Guarantee Floridian Pest Control to come in on a monthly basis or as needed.
30. Drinking water and wastewater is routinely tested according to a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The water is tested by the Dade County Water Department. The results are forwarded to the maintenance department. The most recent test was conducted in April 2010.
31. Emergency power generators are tested at least every two weeks. <ul style="list-style-type: none"> <li>Other emergency systems and equipment receive testing at least quarterly.</li> <li>Testing is followed-up with timely corrective actions (repairs and replacements).</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the generator logs indicated weekly testing occurs on Fridays and load testing is conducted every 28 days.
32. The Facility appears clean and well maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Hazardous material storage rooms meet the security and structural requirements of the standard. Storage cabinets meet the physical requirements specified in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34. The Health Services Administrator has implemented a program supporting a high level of environmental sanitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35. The Health Services Administrator conducts medical-facility inspections daily. Each inspection includes noting the condition of floors, walls, windows, horizontal surfaces, and equipment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



**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
36. The assigned staff member shall: Conduct special investigations and comprehensive surveys of environmental health conditions, and provide advisory, consultative, inspection, and training services regarding environmental health conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37. The assigned staff member is responsible for developing and implementing policies, procedures, and guidelines for the environmental health program. These guidelines are intended to evaluate and eliminate or control as necessary, sources of injuries and modes of transmission of agents or vectors of communicable diseases.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38. Environmental health and safety conditions shall be maintained at a level that meets recognized standards of safety and hygiene, including those from the: <ul style="list-style-type: none"><li>• American Correctional Association,</li><li>• Occupational Safety and Health Administration,</li><li>• Environmental Protection Agency,</li><li>• Food and Drug Administration,</li><li>• National Fire Protection Association's Life Safety Code, and</li><li>• National Center for Disease Control and Prevention.</li></ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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

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

The facility has a hazardous communication plan and fire plan in place. The hazardous communication plan outlines procedures and responsibilities for inventorying, controlling, and dispensing hazardous materials. The fire control plan addresses areas such as prevention, control, and evacuation procedures for the facility in the case of a fire. The Miami-Dade Fire department is currently in the process of reviewing the facility fire control plan. This was verified through a review of an email communication between the facility and the fire department. All staff are trained and familiar with these plans which was verified through policy review as well as a review of training files and staff interviews.

The facility has a barbershop in a separate location that meets the sanitation requirements of the standard. It has a sink with hot and cold water. Facility water is tested annually by the Miami- Dade Water Authority with the most recent test occurring in April 2010. Staff stated that the facility has not received a report for 2010 test. Pest control services are managed by a contract with Guarantee Floridian Pest Control who last visited the facility March 15, 2011. Generator testing is conducted on a weekly basis every Friday, and a full load test is conducted every 28 days. All testing is documented.

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

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



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

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"/>	Policy requires transportation officers to comply with the requirements of this component. One incident was reported in the past year involving a contractual van receiving a parking ticket as a result of being double parked.
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"/>	Documentation is on file and current, requiring every transportation officer to have a commercial driver's license issued by the State of Florida.
3. Supervisors maintain records for each vehicle operated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Documentation indicating annual inspection of vehicles and annual inspection in accordance with state statutes is available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Florida Department of Transportation conducts annual inspections, as required. Documentation was available and discrepancies noted are repaired by contractual service providers.
5. Documentation indicating safety repairs are completed immediately and vehicles are not used until they have been repaired and inspected is available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Officers use a checklist during every vehicle inspection. <ul style="list-style-type: none"> <li>Officers report deficiencies affecting operability.</li> <li>Deficiencies are corrected before the vehicle goes back into service.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Transporting officers: <ul style="list-style-type: none"> <li>Limit driving time to 10 hours in any 15 hour period when transporting detainees.</li> <li>Drive only after eight consecutive off-duty hours.</li> <li>Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours.</li> <li>Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days.</li> <li>During emergency conditions (including bad weather), officers may drive as long as necessary to reach a safe area—exceeding the 10-hour limit.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy is in place and Driver Logs are available and current. The facility meets the requirements of this component.
8. (b)(7)e officers with valid Commercial Drivers Licenses, (CDL's) required in any vehicle transporting detainees. <ul style="list-style-type: none"> <li>When buses travel in tandem with detainees, there are (b)(7)e qualified officers per vehicle.</li> <li>An unaccompanied driver transports an empty vehicle.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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"/>	Each transportation officer completes a "trip ticket" prior to the trip beginning documenting the vehicle inspection occurred.
10. Positive identification of all detainees being transported is confirmed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The facility ensures that the number of detainees transported does not exceed the vehicle manufacturer's occupancy level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. (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"/>	
15. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has specific policy in place for the use and control of restraints during the transportation process.
16. Officers ensure that no one contacts the detainees. • (b)(7)(e) officer remains in the vehicle at all times when detainees are present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Meals are provided during long distance transfers. • The meals meet the minimum dietary standards, as identified by dieticians utilized by ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The longest transfer is approximately 4 hours to the Orlando, Florida area. Meals which meet dietary standards are provided in clear see through baggies.
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"/>	

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
19. Vehicles have: <ul style="list-style-type: none"> <li>• (b)(7)(E)</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE transportation vehicles and Doyon contractual vehicles are used. (b)(7)(E) (b)(7)(E)
20. The vehicles are clean and sanitary at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Personal property of a detainee transferring to another facility: <ul style="list-style-type: none"> <li>• Is inventoried.</li> <li>• Is inspected.</li> <li>• Accompanies the detainee.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The following contingencies are included in the written procedures for vehicle crews: <ul style="list-style-type: none"> <li>• Attack</li> <li>• Escape</li> <li>• Hostage-taking</li> <li>• Detainee sickness</li> <li>• Detainee death</li> <li>• Vehicle fire</li> <li>• Riot</li> <li>• Traffic accident</li> <li>• Mechanical problems</li> <li>• Natural disasters</li> <li>• Severe weather</li> <li>• Passenger list is not exclusively men or women or minors</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy is in place and addresses all the requirements of this component. In addition to written policy, transportation post orders also contain information to address the bulleted areas of this component.

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

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

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

Available policy and procedures were reviewed as well as log books. Individual driver logs and training records were also reviewed.

Driver's certification of transport staff was reviewed and found to be current and contained all required licenses.

The facility uses both ICE and contractual vehicles from Doyon. Vehicles were inspected, and the loading of detainees was observed. Overall, the facility complies with the PBNDS regarding Transportation.

(b)(6), (b)(7)c April 7, 2011

Reviewer's Signature / Date

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

## **Section II SECURITY**

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

## PART 2 – 4. ADMISSION AND RELEASE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Admission processing includes an orientation of the facility. The orientation includes; unacceptable activities and behavior, and corresponding sanctions. How to contact ICE. The availability of pro-bono legal services and how to pursue such services. Schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An orientation video is shown in each holding room on a continuous basis. The video rotates languages that include English, Spanish, and Creole. Each detainee signs for the facility handbook. This handbook is available in English, Spanish, and Creole. The ICE National Detainee Handbook is also provided to each detainee.
2. Medical screenings are performed by medical staff <u>or</u> persons who have received specialized training for the purpose of conducting an initial health screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical screenings are conducted in a medical intake screening area that is adjacent to the processing area. All screenings are conducted by DIHS medical staff.
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"/>	
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"/>	A form is used to document the type of search to which a detainee is subjected.
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"/>	Reasonable suspicion is the basis used to conduct strip searches at this facility. Policy is very detailed and appropriate documentation is maintained. There have been six occasions since July 2010 where strip searches have been conducted. Five of these occasions involved individual detainees. The other involved 68 detainees housed in a particular housing unit. The strip search log book was reviewed, and the documentation was sufficient to meet the requirements for conducting strip searches. The logbook also had extra copies of the strip search policy for review, if needed, to ensure that policy requirements are met.



## 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 prepare a complete inventory of each detainee's possessions. The detainee receives a copy. All identity documents are inventoried and given to ICE staff for placement in the A-file. All funds and valuables are safeguarded in accordance with ICE Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Staff complete Form I-387 or similar form for CDFs and IGSAs for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. All releases are coordinated with ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Staff complete 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"/>	A signed receipt was observed in every detention file reviewed.
12. The facility has a system to maintain accurate records and documentation for admission, orientation, and release.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. ICE staff enter 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"/>	
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"/>	

## 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 processing area is a 24 hour a day, seven day a week operation. Over 10,500 detainees were processed into the facility during the past year. The admissions and release process appeared well organized and staff interviewed were knowledgeable of their duties. Based on the documentation reviewed and by observation, it was determined the admission and release process is operating pursuant to the requirements of the PBNDS.

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

April 7, 2011

Reviewer's Signature / I

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

## PART 2 – 5. CLASSIFICATION SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. SPC and CDF facilities use the required Objective Classification System. IGSAs use an objective classification system or similar system for classifying detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A fact based objective instrument is used for classification.
2. The facility classification system includes: <ul style="list-style-type: none"> <li>Classifying detainees upon arrival.</li> <li>Separating individuals who cannot be classified upon arrival from the general population.</li> <li>The first-line supervisor or designated classification specialist reviews every classification decision.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Classification is completed before detainees are assigned to a housing unit.
3. The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Staff use only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/ unconfirmed reports may be filed but are not used to score detainee classification.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Housing assignments are based on classification-level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. A detainee's classification-level does not affect his or her recreation opportunities. Detainees recreate with persons of similar classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Detainee work assignments are based upon classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The classification process includes reassessment/reclassification. The First Reassessment is to be completed 60 days to 90 days after the initial assessment. Subsequent reassessments are completed at 90 day to 120 day intervals. Special Reassessments are completed within 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At the time of classification, each detainee file is marked with the specific date that a review is to be conducted. Reviews are conducted at 45, 165, 285, and 405 days from date of admission. Policy was revised to require a classification review of every detainee once he is released from the SHU. On the first day of the inspection, documentation was reviewed regarding one detainee being released from a SHU. The detainee's classification was reviewed in accordance with the policy requirements.

## PART 2 – 5. CLASSIFICATION SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. The classification system includes standard procedures for processing new arrivals' appeals. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
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"/>	
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 handbook describes work assignment restrictions based on classification levels. The restrictions are found under the section regarding work assignments, as opposed to classification levels.
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"/>	

## PART 2 – 5. CLASSIFICATION SYSTEM

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

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

The facility has a three level classification system. Detainees wear either a blue, orange, or red uniform and matching wrist band. This denotes their classification as a low risk level 1, medium risk level 2, or highest risk level 3. Detention file covers are also coded with the same color designations.

Since the last inspection, classification reviews have been initiated regarding detainees being released from a SHU. Initial assessments are completed in a timely manner and are reviewed by a supervisor. The facility has sufficient housing units to facilitate required separation. The facility has a fourteen bed SHU unit.

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

April 7, 2011

Reviewer's Signature / Date

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

## PART 2 – 6. CONTRABAND

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility follows a written procedure for handling contraband. Staff inventories, holds, and reports it when necessary to the proper authority for action/possible seizure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a written contraband policy which specifies how staff are to process, inventory, hold, and report seized contraband to command staff for any action or seizure.
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"/>	
3. Staff return 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"/>	Facility policy specifies property not required as evidence will be returned to the proper authority.
4. Altered property is destroyed following documentation and using established procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Facility policy requires the AFOD "shall generally consult religious authorities about handling religious items prior to confiscation".
6. Staff follow written procedures when destroying hard contraband that is illegal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Hard contraband that is illegal (under criminal statutes) is retained and used for official use, e.g. training purposes. <ul style="list-style-type: none"> <li>If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use.</li> <li>Soft Contraband is mailed to a third party or stored in accordance with the Detention Standard on Funds and Personal Property.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hard contraband, that is illegal, may be retained and used for official training purposes. The facility has specific written procedures in place and secures hard contraband in the facility armory or contraband locker. Soft contraband is processed as required by this component.
8. Detainees receive notification of contraband rules and procedures in the Detainee Handbook and notified when property is identified and seized as contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Facilities with Canine Units only use them for contraband detection.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no canine unit.

## 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's written policy and procedures were reviewed, which establish a well defined policy consistent with the expectations of this standard. The facility handbook was reviewed and addressed detainee notification. The facility is in compliance with this standard.

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

April 7, 2011

**Reviewer's Signature / Date**

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



## PART 2 – 7. FACILITY SECURITY AND CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility administrator or assistant administrator and department heads visit detainee living quarters and activity areas weekly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of facility logbooks indicated the facility administrator is making the required weekly visits to detainee living and activity areas.
2. At least one male and one female staff are on duty where both males and females are housed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Male and female staff are available in the intake area. The intake area is the only area where female detainees are temporarily housed.
3. Comprehensive annual staffing analysis determines staffing needs and plans.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An annual staffing analysis is completed between ICE and the contractual security provider, Doyon.
4. Essential posts and positions are filled with qualified personnel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Every Control Center officer receives specialized training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Policy restricts staff access to the Control Center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Detainees do not have access to the Control Center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Communications are centralized in the Control Center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Facility security and safety will be monitored and coordinated by a secure, well-equipped, and continuously staffed control center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The Control Center maintain employee Personal Data Cards (Form G-74 or contract equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	While not in place during last year's inspection, the facility has currently placed the required G-74 forms (i.e. personal data cards) within the Control Center.
11. Recall lists include the current home telephone number of each employee. Phone numbers are updated as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Recall lists are available in the Control Center. The lists were reviewed and appeared to be updated and current with information regarding contractual and ICE staff.
12. Staff make watch calls every half-hour between 6 PM and 6 AM.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Information about routine procedures, emergency situations, and unusual incidents will be continually recorded in permanent post logs and shift reports.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The front-entrance officer checks the ID of everyone entering or exiting the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. All visits officially recorded in a visitor logbook or electronically recorded.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All visits are officially recorded in a visitor logbook.
16. The facility has a secure, color-coded visitor pass system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



## PART 2 – 7. FACILITY SECURITY AND CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
17. Officers monitor all vehicular traffic entering and leaving the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: <ul style="list-style-type: none"> <li>The driver's name</li> <li>Company represented</li> <li>Vehicle contents</li> <li>Delivery date and time</li> <li>Date and time out</li> <li>Vehicle license number</li> <li>Name of employee responsible for the vehicle during the facility visit</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Officers thoroughly search each vehicle entering and leaving the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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 a written contraband policy in place to prevent the introduction of contraband into the facility.
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"/>	The front entry is staffed within a secure building where vehicles enter and are stopped. Staff check identification which is then surrendered. Vehicles inspected and then allowed entry thru a secure pass gate.
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"/>	
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"/>	Security staff posts are within the living units. As observed, staff have direct observation and can hear detainees by virtue of the post assignment. Personal contact/interaction with detainees is encouraged and as observed, does occur.
26. There are post orders for every security officer post.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. Detainee movement from one area to another area is controlled by staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainee movement, as observed, occurs with a security staff escort.

## 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
28. Living areas are constructed to facilitate continuous staff observation of cell or room fronts, dayrooms, and recreation space.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. Every search of the SMU and other housing units is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30. The SMU entrance has a sally port.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Special Management Unit has a secure double door entry.
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"/>	
32. The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> <li>• Posts to be inspected</li> <li>• Required inspection forms</li> <li>• Frequency of inspections</li> <li>• Guidelines for checking security features</li> <li>• Procedures for reporting weak spots, inconsistencies, and other areas needing improvement</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Facility post orders are in place, which require security checks of assigned areas. Log books are in place which document these inspections.
34. Documentation of security inspections is kept on file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36. Tools being taken into the secure area of the facility are inspected and inventoried before entering and prior to departure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tools brought into the facility kitchen were inspected and inventories were current and accurate.
37. Storage and supply rooms; walls, light and plumbing fixtures, accesses, and drains, etc. undergo frequent, irregular searches. These searches are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The contractual security provider (i.e. Doyon) conducts inspections of (b)(7)(E) (b)(7)(E) The results are logged by Central Control staff.

## 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
39. Daily procedures include: <ul style="list-style-type: none"> <li>Perimeter alarm system tests.</li> <li>Physical checks of the perimeter fence.</li> <li>Documenting the results.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40. Visitation areas receive frequent, irregular inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. An officer is assigned responsibility for ensuring the security inspection process covers all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42. The Maintenance Supervisor and Chief of Security or equivalent make monthly fence checks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The on-site ICE SIEA is responsible for completing and documenting (b)(7)(E) fence checks.

### 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 has a secure, staffed entry for all vehicles. All vehicles are stopped at a control point, identification is reviewed, surrendered, and a visitor color coded pass is issued. Vehicles are inspected entering and exiting the facility.

Perimeter and fence checks, completed by Doyon contractual staff, were on file in the Control Center and were reviewed.

The facility has two sally ports, one is used for deliveries and the other is used for law enforcement entry and transportation vehicles. Facility log books were reviewed and contained information to comply with the requirements of the PBNDS.

The Control Center is staffed continuously by trained staff.

Facility policy, procedures, and documentation is in place supporting compliance with this standard.

(b)(6), (b)(7)c April 7, 20

**Reviewer's Signature**

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

## PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainee funds and valuables are properly separated and stored. Detainee funds and valuables are accessible to designated supervisor(s) only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Funds and valuables are secured behind two doors and are placed in a locked file cabinet.
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 valuable items are secured in the 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"/>	
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"/>	A review of form G-598 in several files indicates that (b)(7)e officers process the funds and valuables. A supervisor reviews the form and verifies the staffs' work and signs off.
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"/>	The facility is an SPC and utilizes forms G -589 and I -77.
6. Staff give 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"/>	
7. Staff forward an arriving detainee's medicine to the medical staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All incoming medicine is forwarded to the medical unit for review and handling.
8. Staff search arriving detainees and their personal property for contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Property discrepancies are immediately reported to the Chief of Security or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Staff follow written procedures when returning property to detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. CDF/IGSA facility procedures for handling detainee property claims are similar to the ICE standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility is an SPC and follows the ICE standard with regard to 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"> <li>By sending written notice to the detainee's last known address; via certified mail;</li> <li>The notice states that the detainee has 30 days in which to claim the property, after which it will be considered abandoned.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



## 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
13. Staff obtain a forwarding address from each detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is obtained from detainees upon entry into the facility. The detainee's forwarding address is placed in the detention file.
14. It is standard procedure for (b)(7) officers to be present when removing/documenting the removal of funds from a detainee's possession.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Staff issue and maintain property receipts (G-589s) in numerical order.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Staff complete and distribute the G-589 in accordance with the ICE standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	This inspector reviewed the G-589 logbook which demonstrated compliance with this component.
18. Staff tag large valuables with both a G-589 and an I-77.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. The supervisor verifies the accuracy of every G-589.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The supervisor ensures that: <ul style="list-style-type: none"> <li>• Detainee funds are, without exception, deposited into the cash box;</li> <li>• Every property envelope is sealed.</li> <li>• All sealed property envelopes are placed in the safe.</li> <li>• Large, valuable property is kept in the secured locked area.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Staff tag 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"/>	The facility's system maintains the I-77 form which has a photo of the detainee on the form.
22. Staff secure every container used to store property with a tamper-proof numbered strap.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All tamper proof tags are numbered and recorded along with the I-77 form.
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"/>	The logbook was reviewed and supports compliance with this component.
24. In SPCs, the Supervisory Immigration Enforcement Agent, accompanied by a detention staff member conducts a comprehensive weekly audit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Weekly audits are conducted by the Doyon Security Supervisors and ICE staff.



**PART 2 - 8. FUNDS AND PERSONAL PROPERTY**

This Detention Standard ensures that detainees' personal property is safeguarded and controlled, specifically including funds, valuables, baggage and other 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
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"/>	A review of the quarterly audits was conducted and was in compliance with the requirements of this component.
26. The facility positively identifies every detainee being released or transferred.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. Staff routinely inform 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"/>	
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"/>	

**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.)

Overall, the facility complies with the PBNDS regarding Funds and Personal Property. Funds are stored behind two secured doors in a secured file cabinet. Forms G-589 and I-77 are used and were observed in the detainee files. Weekly and quarterly audits are conducted and recorded.

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

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The hold room is situated in a location within the secure perimeter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The hold rooms are clean, in good repair, well ventilated, well lit, and all activating switches located outside the room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility hold rooms appeared clean, in good repair, well lit and ventilated. All activating switches were located outside the rooms.
3. The hold rooms contain sufficient seating for the number of detainees held.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
5. Hold room walls and ceilings are escape and tamper resistant.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility hold rooms appear to be escape and tamper resistant.
6. Detainees are not held in hold rooms for more than 12 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Available log books were reviewed which established detainees are being held for more than 12 hours.
7. Male and females detainees are segregated from each other at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A female detainee was observed behind a privacy screen in a single cell that was separated from male detainees.
8. Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. If the hold room is not equipped with toilet facilities, an officer is posted within visual or audible range to allow detainees access to such on a regular basis.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The hold cells 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"/>	
11. When the last detainee has been removed, the hold room is inspected for the following: <ul style="list-style-type: none"> <li>Cleaning.</li> <li>Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirements of this component are documented in the log books.
12. <b>(MANDATORY)</b> There is a written evacuation plan. <ul style="list-style-type: none"> <li>There is a designated officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Specific written post orders are in place designating security staff responsible for evacuating the hold rooms in case of a fire, building evacuation, or any other 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"/>	The facility has a compliment of DIHS staff that serve as first responders. A local 911 agreement with Dade county is in place for any additional medical emergency.
14. Single occupant hold rooms contain a minimum of 37 square feet (7 unencumbered square feet for the detainee, 5 square feet for a combination lavatory/toilet fixture, and 25 square feet for a wheelchair turn-around area). <ul style="list-style-type: none"> <li>If multiple-occupant hold rooms are used, there is an additional 7 unencumbered square feet for each additional detainee.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has specific documentation on file, provided by the American Correctional Association, which established that the facility hold rooms have square footage, as required, per occupant.
15. In SPCs designed after 1998 the hold rooms are equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They are: <ul style="list-style-type: none"> <li>Compliant with the American Disabilities Act.</li> <li>Small hold rooms (1 to 14 detainees) have at least one combi-unit.</li> <li>Large hold rooms (15 to 49 detainees) are provided with at least two combi-units.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. In SPCs designed after 1998 the hold rooms have floor drain(s).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. In SPCs designed after 1998, the door to the hold room swings outward and the door complies with the specifications outlined in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Family units, persons of advanced age (over 70), females with children, and unaccompanied juvenile detainees (under the age of 18) are not placed in hold rooms.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not house family units and juveniles. Females are held for a short period of time in hold rooms prior to transfer. Special provisions are in place for any detainee over the age of 70.
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"/>	The facility does not house juveniles.
20. Each detention facility maintains a detention log (manually or by computer) for each detainee placed in a hold cell. <ul style="list-style-type: none"> <li>The log includes the required information specified in the standard.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility maintains a log book which was reviewed and meets the requirements of this component.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
21. Officers provide a meal to any detainee detained in a hold room for more than six hours. <ul style="list-style-type: none"> <li>Juveniles, babies and pregnant women have access to snacks, milk or juice.</li> <li>Meal are served to juveniles regardless of time in custody</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meals were observed being provided to detainees within the hold rooms. The facility does not house juveniles, babies, or pregnant women.
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"/>	Any detainee having a significant disability will be housed within the facility's medical hold rooms. A detainee with an artificial limb may be housed in the general holding area.
23. The maximum occupancy for the hold room will be posted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Before placing a detainee in a room, an officer shall observe each individual to screen for obvious mental or physical problems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Staff does not permit detainees to smoke in a hold room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is a non-smoking facility.
26. Officers closely supervise hold rooms through direct supervision, to ensure: <ul style="list-style-type: none"> <li>Continuous auditory monitoring, even when the hold room is not in the officer's direct line of sight, and</li> <li>Visual monitoring at irregular intervals at least every 15 minutes, each time recording in the detention log, the time and officer's printed name and any unusual behavior or complaints under "Comments."</li> <li>Constant surveillance of any detainee exhibiting signs of hostility, depression, or similar behaviors.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The hold rooms are in the constant direct line of sight of assigned security staff. In addition, 15 minutes checks are conducted and logged as required. Any detainee exhibiting signs of hostility, depression, or similar behaviors is placed under constant observation and the results are recorded.

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

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

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

The facility has six large hold rooms which hold a maximum of 25 detainees. In addition, there are 4 single cell rooms. After intake processing, detainees are moved to medical hold rooms which consist of two (2) 25 capacity cells. This is where a medical assessment and x-rays are completed.

During this inspection, female detainees were observed in the hold rooms. The facility accepts short term female placements from ICE or surrounding counties prior to transfer. A female detainee is placed in a single cell. The cell is protected with a privacy screen is marked as "Female". An inspection of intake logs from March 17, 2011, to the present indicates the facility has temporarily housed 50 female detainees within the time period. The log noted seven females had been received and the average stay was approximately five hours. The longest stay of a female detainee was approximately 10 1/2 hours and the shortest stay was 2 1/2 hours. Facility policy and post orders indicate provisions are in place for processing female detainees. After a review of facility hold rooms as well as associated documentation, it was determined the facility complies with the requirements of the PBNDS.

(b)(6), (b)(7)c April 7, 2011

Reviewer's Signature /

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



# **PART 2 – 10. KEY AND LOCK CONTROL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The security officer[s], or equivalent, has attended an approved locksmith training program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility locksmith has attended locksmith training provided by the Bureau of Prisons.
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"/>	
3. The security officer, or equivalent, provides training to all employees in key and lock control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The locksmith provides the curriculum and ICE security staff provide the training.
4. The security officer, or equivalent, maintains inventories of all keys, locks and locking devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inventories for keys, locks, and locking devices were current at the time of the inspection.
5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Facility policies and procedures address the issue of compromised keys and locks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The security officer, or equivalent, develops policy and procedures to ensure safe combinations integrity.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are (7) (7) safes, some within the facility and some outside the secure perimeter. Locations are on file and procedures are in place to ensure the integrity of safe combinations.
8. Only dead bolt or dead lock functions are used in detainee accessible areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Non-authorized locks (as specified in the Detention Standard) are not used in detainee accessible areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The facility does not use grand master keying systems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has no grandmaster keys in use.
11. All worn or discarded keys and locks cut up and properly disposed of.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The locksmith cuts up keys, grinds all keys, cuts off the shank, and disposes in an outside security dumpster.
12. Padlocks and/or chains are not used on cell doors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to <ul style="list-style-type: none"> <li>Occupational Safety and Environmental Health Manual, Chapter 3</li> <li>National Fire Protection Association Life Safety Code 101.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
14. The operational keyboard sufficient to accommodate all the facility key rings including keys in use is located in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses the (b)(7)(E) system. All employees have a (b)(7)(E). Keys are identifiable, the number of keys are cited, and keys cannot be removed from the secure key rings.
15. Procedures in place to ensure that key rings are: <ul style="list-style-type: none"> <li>Identifiable</li> <li>Numbers of keys on the ring are cited?</li> <li>Keys cannot be removed from issued key rings</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Emergency keys are available for all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency keys are stored in the (b)(7)(E). The keys were inventoried and access is limited.
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"/>	The facility uses a restricted key form which requires ICE approval prior to restricted keys being issued.
19. Individual gun lockers are provided. <ul style="list-style-type: none"> <li>They are located in an area that permits constant officer observation.</li> <li>In an area that does not allow detainee or public access.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires keys to be inventoried (b)(7)(E) and documented on a key inventory form.
21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> <li>Issued keys are returned immediately in the event an employee inadvertently carries a key ring home.</li> <li>When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified.</li> <li>Detainees are not permitted to handle keys assigned to staff.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Locks and locking devices are continually inspected, maintained, and inventoried.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
23. Each facility has the position of Security Officer. If not, a staff member appointed the collateral duties of security officer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a locksmith and a dedicated ICE Building Management Specialist.
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"/>	
25. The splitting of key rings into separate rings is not authorized.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## PART 2 – 10. KEY AND LOCK CONTROL

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

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

The facility has a specially trained locksmith supported by an ICE Building Maintenance Specialist.

The facility uses

(b)(7)(E)

(b)(7)(E)

Keys are issued on a secure ring, are identifiable, and the number of keys cited.

Inventories were inspected, as well as the emergency keys located at (b)(7)(e) all of which were consistent with policy.

After reviewing policy and procedure, it was determined the facility complies with the PBNDS and has adequate controls in place for key and locks.

(b)(6), (b)(7)(c) April 7, 2011

Reviewer's Signature / I

(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 conduct 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"/>	Facility counts are conducted at 8 AM, 7 PM, 10 PM, and 4 AM. The 10 PM count is a face-to-photo count.
2. Activities cease or are strictly controlled while a formal count is being conducted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All activities cease while count is in process.
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"/>	
4. Formal counts in all units take place simultaneously.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Formal counts do occur simultaneously at the facility.
5. Officers do not allow detainee participation in the count.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. A face-to-photo count follows each unsuccessful recount.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A photo log is maintained on each living unit. Additionally, each detainee has a photo identification bracelet. Any unsuccessful count results 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"/>	
8. Written procedures cover informal and emergency counts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The control officer (or other designated position) maintains an "out-count" record of all detainees temporarily out of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No official out-count is maintained, since detainees are either at the facility or transferred. Provisions are in place if an emergency occurs requiring temporary out-of-facility housing.
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"/>	Contractual security staff from Doyon are provided training prior to beginning employment, and by ICE during in-service training.

### PART 2 – 11. POPULATION COUNTS

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

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

The 8 AM morning count was observed. It was conducted in accordance with the requirements of the standard. Sufficient staff is available for a simultaneous count.

Count is reconciled in Central Control and maintained as current documentation. Since this is an SPC, the facility reports no out count since detainees are either at the facility or have been transferred.

Provisions are in place for a face-to-photo count, if required. A book with detainee pictures is available on living units if staff need a reference. Detainees are also issued a photo bracelet which they are required to wear.

Available policy and procedure was reviewed which support compliance with this standard.

(b)(6), (b)(7)c April 7, 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"/>	Fixed posts were inspected, and each contained required post orders signed by current staff.
2. In SPCs and CDFs, Post Orders are arranged in the required six-part folder format.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility post orders are specifically arranged in the six part folder format.
3. Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Facility policy designates this responsibility to the ICE SDDO.
5. Review, updating, and reissuing of Post Orders occurs regularly and at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The facility administrator authorizes all Post Order changes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The facility administrator has signed and dated the last page of every section.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. A Post Orders master file is available to all staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The post order master file is available to all staff and is secured with the <span style="background-color: #cccccc;">(b)(7)(E)</span>
9. Procedures keep Post Orders and logbooks secure from detainees at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Copies of the applicable Post Orders are retained at the post only if secure from detainee access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Supervisors ensure that officers understand the Post Orders, regardless of whether the assignment is temporary, permanent, or due to an emergency.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any post filled by security staff requires an understanding and written acknowledgment of the established post orders.
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"/>	
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"/>	Armed posts require documentation of weapon qualification prior to the post being assumed.
14. Post Orders for armed posts, and for posts that control access to the institution perimeter, clearly state that: <ul style="list-style-type: none"> <li>▪ Any staff member who is taken hostage is considered to be under duress, and</li> <li>▪ Any order issued by such a person, regardless of his or her position of authority, is to be disregarded.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## 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
15. Post Orders for armed posts provide instructions for escape attempts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Instructions for escape attempts are provided in facility policy and within the post orders for any armed post.
16. The Post Orders for housing units track the daily event schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Post orders include instructions regarding completion of the detainee event log maintained in each living unit.

## PART 2 – 12. POST ORDERS

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

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

Facility post orders were reviewed within housing units; found to be current; and signed by assigned staff

Master post orders were reviewed and found to be current, secure, and available to staff.

At the time of the inspection, armed post were filled with staff having current weapons qualification. Armed posts observed during the inspection included transportation and main gate security staff.

Documentation as well as policy and procedure were reviewed to determine the facility complies with the PBNDS regarding Post Orders.

(b)(6), (b)(7)c April 7, 201  
Reviewer's Signature /

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

### PART 2 – 13. SEARCHES OF DETAINEES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There are written policy and procedures governing searches of housing areas, work areas and of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a detailed search policy and procedures.
2. Written policy and procedures require staff to employ the least intrusive method of body search practicable, as indicated by the type of contraband and the method of suspected introduction or concealment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Written policy and procedures require staff to avoid unnecessary force during searches and to preserve the dignity of the detainee being searched, to the extent practicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Written policy and procedures require staff to leave a searched housing area, work area and detainee property in its original order, to the extent practicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees are pat searched and screened by metal detectors routinely to control contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Strip Searches are conducted only when there is reasonable belief or suspicion that contraband may be concealed on the person, or a good opportunity for concealment has occurred, and when properly authorized by a supervisor.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility maintained appropriate documentation for the few occasions when strip searches were conducted during the past year.
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"/>	
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"/>	A cell in the SHU is designated if a "dry cell" is needed. Staff reported that there has been no need for a dry cell during the past year.
9. Contraband that may be evidence in connection with a violation of a criminal statute is preserved, inventoried, controlled, and stored so as to maintain and document the chain of custody.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Canines are not used in the presence of detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Canines have not been used at this facility during the past year.

### 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.)*

The facility has adequate policies and procedures to ensure that searches of detainees are conducted in accordance with the requirements of the standard. Documentation of the type of search each detainee receives during admission is maintained. The strip search log book contains the required information. It was noted that the need to strip search detainees occurs infrequently at this facility. Extra copies of the facility strip search policy is maintained with the logbook which provides another tool to assist staff with policy compliance.

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

April 7, 2011

Reviewer's Signature

(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"/>	Written facility policy provides compliance with this component.
2. For SPCs and CDFs, the written policy and procedure has been approved by the Field Office Director.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The written facility policy and procedures have been approved, signed and dated on January 1, 2011, by the Field Office Director and facility OIC.
3. Tracking statistics and reports are readily available for review by the inspectors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy requires tracking statistics and reports are generated, maintained, and readily available. An interview with the program coordinator and a review of reports indicated practice is consistent with policy.
4. All staff are 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"/>	Written facility policy provides the authority for compliance with this component. Interviews with the ICE staff training officer and the contractual staff training manager as well as a random review of staff training files indicated practice is consistent with policy.
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"/>	The program is described in the detainee handbook, which is available in English, Spanish, and Creole. Additionally, the program is described in the detainee facility orientation video which is also available in these languages.
6. The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A tour of housing unit dayrooms provided proof of compliance with this component.
7. The Sexual Assault Awareness Information brochure is available for detainees. (Required in SPCs and CDFs.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The brochure is provided during the intake process. Practice is consistent with facility written policy.
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"/>	Written facility policy provides the authority for compliance with this component. A review of the intake screening form indicates "high risk" sexual assaultive and victimization history is being assessed.



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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. All incidents of sexual abuse or assault by a detainee on a detainee have been documented in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy requires documentation. A review of files indicated there have been no reported incidents of detainee-on-detainee sexual abuse or assault.
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"/>	Written facility policy requires documentation. A review of files indicated two reported incidents during the past year. One incident was withdrawn by the detainee and the other remains under investigation. A review of the incidents indicated there was no allegation of sexual abuse or assault, but staff harassment instead.
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"/>	Written facility policy requires prompt reporting through the chain-of-command. Two incidents reported during the past year were reviewed via the chain-of-command.
12. When there is an alleged sexual assault, staff conduct a thorough investigation, gather and maintain evidence, and make referrals to appropriate law enforcement agencies for possible prosecution.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy requires a thorough investigation. Two incidents reported during the past year either have been or continue to be under 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"/>	Written facility policy requires prompt notifications.
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"/>	Written facility policy requires the utilization of specialized community resources if determined to be appropriate by the facility Clinical and Mental Health Directors. There have been no referrals during the past twelve months.
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"/>	Written facility policy, an interview with the program coordinator, and a review of the sexual abuse or assault incident log provided the evidence of compliance with this component.

**SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION**

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

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

A review of policy and procedure, training files, the detainee handbook, assault and/or abuse incident report forms, and tracking log occurred. Interviews with the ICE staff training coordinator, contractual staff training manager, back-up sexual assault/abuse program coordinator, and a random tour of housing unit days rooms occurred. It was determined that at the time of the inspection, the facility complies with the requirements of the PBNDS.

At the time of the inspection, it was reported there were two allegations of staff sexual harassment of a detainee during the past twelve months. One allegation was withdrawn by the detainee, and the second remains under investigation.

(b)(6), (b)(7)c April 7, 2009  
Reviewer's Signature

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

## PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Written policy and procedures are in place for special management units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Specific written policy is in place governing the facility's special management unit.
2. A detainee is placed in protective custody status in Administrative Segregation only when there is documentation that it is warranted and that no reasonable alternatives are available.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. A detainee will be placed in Disciplinary Segregation only after a finding by a Disciplinary Hearing Panel that the detainee is guilty of a prohibited act or rule violation classified at a "Greatest", "High", or "High-Moderate" level, as defined in the Detention Standard on Disciplinary System.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. <b>(MANDATORY)</b> Health care personnel are immediately informed when a detainee is admitted to an SMU to provide assessment and review as indicated by health care protocols.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Specific written policy requires that the department of DIHS be notified every time a detainee is placed in the SMU.
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"/>	Post orders are in place and were reviewed which meet the requirements of this component.
6. The number of detainees confined to each cell or room does not exceed the capacity for which it was designed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility special management unit has seven cells, which may be double bunked to achieve a capacity of 14, if needed.
7. Cells and rooms are well ventilated, adequately lit, appropriately heated and maintained in a sanitary condition at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Permanent housing logs are maintained in SMUs to record pertinent information on detainees upon admission to and release from the unit, and in which supervisory staff and other officials record their visits to the unit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inspected housing logs document this requirement being met.
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"/>	Logs are in place as well as completed I-888 forms which comply with the requirements of this component.

## 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"> <li>▪ The time and date of the visit, and</li> <li>▪ Any unusual activity or behavior of an individual detainee, with a follow-up memorandum sent through the facility administrator to the detainee's file.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>11. A Special Management Housing Unit Record is maintained on each detainee in an SMU:</p> <ul style="list-style-type: none"> <li>▪ In SPCs form I-888 (Special Management Housing Unit Record) is prepared immediately upon the detainee's placement in the SMU.</li> <li>▪ In CDFs and IGSA facilities form I-888 or a comparable form is used.</li> </ul> <p>In SPCs and CDFs:</p> <ul style="list-style-type: none"> <li>▪ By the end of each shift, the special housing unit officer records: <ul style="list-style-type: none"> <li>○ Whether the detainee ate, showered, exercised, and took any medication, and</li> <li>○ Any additional information, for example, if the detainee has a medical condition, has exhibited suicidal or assaultive behavior, etc.</li> </ul> </li> <li>▪ When a health care provider visits an SMU detainee, he or she signs that individual's record, and the housing officer initials the record after all medical visits are completed and no later than the end of the shift.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The form I-888 is in completed for every detainee housed within the Special Management Unit. Assigned security staff complete the logs and I-888 forms to comply with the requirements of this component.</p>
<p>12. Upon a detainee's release from the SMU, the releasing officer attaches the entire housing unit record to the Administrative Segregation Order or Disciplinary Segregation Order and forwards it to the Supervisor for inclusion in the detainee's detention file.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>13. There are written policy and procedures concerning the property detainees may retain in each type of segregation.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>This is in addressed via the detainee handbook, specific post orders, and written facility policy.</p>
<p>14. There are written policy and procedures concerning privileges detainees may have in each type of segregation.</p> <p>(In Administrative Segregation, detainees generally receive the same general privileges as detainees in the general population, as is consistent with available resources and safety and security considerations.)</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
15. Detainees in Administrative Segregation are provided opportunities to spend time outside their cells (over and above the required recreation periods), for such activities as socializing, watching TV, and playing board games and may be assigned to work details (for example, as orderlies in the SMU).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A dayroom is available containing a television, general reading material, dominoes, and checkers. Detainees who were interviewed detainees indicated they had full access to this room. Log books provided documentation.
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"/>	Logbooks reviewed supported 30 minute rounds by security staff. The facility policy requires 15 minute checks for any detainee when warranted as described in this component.
17. The shift supervisor sees each segregated detainee daily, including weekends and holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Logbooks were checked and cross referenced with I-888 forms for each detainee. This requirement is being met.
18. The facility administrator (or designee) visits each SMU daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. A health care provider visits every detainee in an SMU at least three times a week, and detainees are provided any medications prescribed for them. In SPCs and CDFs, a nurse, doctor or other appropriate health care professional visits the SMU at least once each workday and questions each detainee to identify any medical problems or requests. Any action taken is documented in a separate logbook, and the medical visit is recorded on the detainee's SMU Housing Record (Form I-888).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Detainees in SMUs are provided three nutritionally adequate meals per day, ordinarily from the general population menu.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Detainees in SMUs may shave and shower three times weekly and receive other basic services (laundry, hair care, barbering, clothing, bedding, linen) on the same basis as the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the SMU are allowed daily shave and showering opportunities. Laundry is exchanged daily and bedding every Wednesday. This is consistent with what is provided to the general population.



## PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
22. Only for documented medical or mental health reasons are detainees denied such items as clothing, mattress, bedding, linens, or a pillow. If a detainee is so disturbed that he or she is likely to destroy clothing or bedding or create a disturbance risking harm to self or others, the medical department is notified immediately and a regimen of treatment and control instituted by the medical officer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. Detainees in an SMU may write and receive letters the same as the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Detainees in an SMU ordinarily retain visiting privileges.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Adequate documentation was generated for any restricted or disallowed general visits for a detainee in an SMU who violated visiting rules or whose behavior indicated the detainee would be a threat to the security or good order of the visiting room in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	While none could be recalled by facility staff, they advised any such denial would require documentation and ICE review.
26. Adequate documentation was generated, for any restricted or disallowed general visitation for a detainee in Administrative Segregation status because the detainee was charged with, or committed, a prohibited act having to do with visiting guidelines or otherwise acted in a way that indicated the detainee would be a threat to the orderly operation or security of the visiting room in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. Under no circumstances is a detainee permitted to participate in general visitation while in restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy prohibits this.
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"/>	
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"/>	
30. Ordinarily, detainees in SMUs are not denied legal visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any detainee in the SMU retains the same visiting privileges as those detainees in general population.
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"/>	

## 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
32. Detainees in SMUs are allowed visits by members of the clergy, upon request; unless it is determined a visit presents a risk to safety, security, or orderly operations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clergy visits were observed and documentation noted.
33. Detainees in SMUs have access to reading materials, including religious materials. In SPCs and CDFs, the Recreation Specialist offers each detainee soft-bound, non-legal books on a rotating basis, provided no detainee has more than two books (excluding religious material) at any one time.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34. Detainees in SMUs have access to legal materials, in accordance with the Detention Standard on Law Libraries and Legal Material. Detainees are permitted to retain a reasonable amount of personal legal material in the SMU, provided it does not create a safety, security and/or sanitation hazard.  Detainee requests for access to legal material in their personal property are accommodated as soon as possible and always within 24 hours of a detainee's request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A detainee in this status was observed using the law library. Access is the same as that which the general population has. Detainees may retain a reasonable amount of legal material and request any stored material, which is generally provided the same day of the request.
35. Detainees in Administrative Segregation or Disciplinary Segregation have the same law library access as the general population, unless compelling and documented security concerns require limitations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36. Policy and procedures provide for legal material to be brought to individuals in Disciplinary Segregation under certain circumstances.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37. Any denial of access to the law library is always: <ul style="list-style-type: none"> <li>▪ Supported by compelling security concerns,</li> <li>▪ For the shortest period required for security, and</li> <li>▪ Fully documented in the SMU housing logbook.</li> <li>▪ ICE/DRO is notified every time law library access is denied.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38. Recreation for detainees in the SMU is separate from the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Special Management Unit has a separate recreation area.
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"/>	All services, except law library, are singularly provided. Law library access allows 2 detainees, similarly classified, to attend at the same time.

## 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
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 per day, weather permitting. Detainees are provided weather appropriate clothing and equipment.
41. The recreation privilege is denied or suspended only if it would unreasonably endanger safety or security.  Ordinarily, a detainee is denied recreation privileges only with the facility administrator's written authorization that documents why the detainee poses an unreasonable risk even when recreating alone. For an immediate safety or security situation, the shift supervisor may verbally authorize denial of an instance of recreation.  When a detainee in an SMU is deprived of recreation (or any usual authorized items or activity), a report of the action is forwarded to the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility reports this has not occurred. However, if it did a review by the assistant Field Office Director would occur and subsequent documentation. In an immediate safety/security situation, the shift supervisor/OIC may deny an instance of recreation, with documentation subject to review.
42. The case of a detainee denied recreation privileges is reviewed at least once each week, as part of the reviews required for all detainees in SMU status. The reviewer documents whether the detainee continues to pose a threat to self, others, or facility security and, if so, why.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
43. Denial of recreation privileges for more than 15 days requires the concurrence of the facility administrator and the health authority. It is expected that such denials shall rarely occur, and only in extreme circumstances.  The facility notifies ICE/DRO when a detainee is denied recreation privileges for more than 15 days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. Ordinarily, detainees in Administrative Segregation have telephone access similar to detainees in the general population, in a manner consistent with the special security and safety requirements of an SMU. Detainees in Disciplinary Segregation may be restricted from using telephones to make general calls as part of the disciplinary process; however, ordinarily, they are permitted to make direct and/or free and legal calls as described in the Detention Standard on Telephone Access, except for compelling and documented reasons of safety, security, and good order.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in this status retain telephone privileges identical to general population detainees.

## PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>45. Ordinarily, a written order is completed and approved by a supervisor before a detainee is placed in Administrative Segregation. If exigent circumstances make that impracticable, the order is prepared as soon as possible.</p> <p>A copy of the order is given to the detainee within 24 hours, unless delivery would jeopardize the safety, security, or orderly operation of the facility.</p> <p>If the segregation is for protective custody, the order states whether the detainee requested the segregation and whether the detainee requests a hearing.</p> <p>The order remains on file in the SMU until the detainee is released from the SMU, at which point the releasing officer records the date and time of release on the order and forwards it to the chief of security or supervisor for the detainee's detention file.</p> <p>(An Administrative Segregation Order is not required for a detainee awaiting removal, release, or transfer within 24 hours.)</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written policy is in place that establishes all the requirements of this component.
<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"/>	

## PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
47. A copy of the decision and justification for each review is given to the detainee, unless, in exceptional circumstances, this provision would jeopardize security. The detainee is given an opportunity to appeal a review decision to a higher authority within the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The detainee is provided a copy, unless it would jeopardize security. The detainee is allowed, by policy, to appeal to the facility administrator.
48. After seven consecutive days in Administrative Segregation, the detainee may exercise the right to appeal to the facility administrator the conclusions and recommendations of any review conducted. The detainee may use any standard form of written communication (for example, detainee request form), to file the appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49. If a detainee has been in Administrative Segregation for more than 30 days and objects to this status, the facility administrator reviews the case to determine whether that status should continue, taking into account the views of the detainee. A written record is made of the decision and the justification. A similar review is done every 30 days thereafter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A detainee who objects to his placement past 30 days has his case reviewed by the Assistant Field Office Director, as required. A written record is maintained, as required. Similar reviews are completed, as required.
50. When a detainee has been held in Administrative Segregation for more than 30 days, the facility administrator notifies the Field Office Director, who notifies the ICE/DRO Deputy Assistant Director, Detention Management Division.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
51. When a detainee is held in Administrative Segregation for more than 60 days, the Field Office Director notifies, in writing, the Deputy Assistant Director, Detention Management Division, for consideration of whether it would be appropriate to transfer the detainee to a facility where he or she may be placed in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
52. A detainee is placed in Disciplinary Segregation only by order of the Institutional Disciplinary Panel (IDP), or equivalent, after a hearing in which the detainee has been found guilty of a prohibited act. The maximum of a 60 day sanction in Disciplinary Segregation for a violation associated with a single incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The written facility disciplinary policy addresses the requirements of this component. The maximum disciplinary placement per violation is 60 days.
53. After the first 30 days in Disciplinary Segregation, the facility administrator sends a written justification to the Field Office Director, who may decide to transfer the detainee to a facility where he or she could be placed in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



### 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>54. Before a detainee is placed in Disciplinary Segregation, a written order is completed and signed by the chair of the IDP (or equivalent). A copy is given to the detainee within 24 hours (unless delivery would jeopardize safety, security, or the orderly operation of the facility).</p> <p>The IDP chairman (or equivalent) prepares the Disciplinary Segregation Order (I-883 or equivalent), detailing the reasons for Disciplinary Segregation and attaching all relevant documentation.</p> <p>When the detainee is released from the SMU, the releasing officer records the date and time of release on the Disciplinary Segregation Order, and forwards the completed order to the chief of security or supervisor for insertion into the detainee's detention file.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All the requirements of this component are addressed in written facility policy and supported by required forms.
<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 has a specific segregated unit containing seven cells, which may be doubled.

The log books and associated required forms were specifically inspected for detainees housed within the Special Management Unit.

Required service delivery was reviewed in conjunction with supporting documentation.

Detainee interviews and log book reviews supported the use of the recreation room.

The facility is in compliance with this standard.

(b)(6), (b)(7)c April 7, 2011

Reviewer's Signature / Date

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

## PART 2 – 16. STAFF-DETAINEE COMMUNICATION

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The ICE/DRO Field Office Director ensures that weekly announced and unannounced visits occur.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A logbook was reviewed that documents that these checks are being made.
2. Detention Staff and Deportation Staff conduct scheduled weekly visits with detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Deportation Officers were observed in several locations making their scheduled weekly visits and interacting with detainees.
3. Scheduled visits are posted in ICE/DRO detainee housing areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Visiting ICE staff observe and note current climate and conditions of confinement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. ICE/DRO Detainee Request Forms are available for use by ICE/DRO detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The facility treats detainee correspondence to ICE/DRO staff as Special Correspondence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. A secure box is located in an accessible location for detainee's to place their Detainee Request Forms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees place request forms in a locked box located in the dining room.
8. Only ICE staff are able to retrieve the contents of the secure box containing Detainee Request Forms,	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The request forms are retrieved each morning, Monday through Friday, by an IEA who serves as the Request / Grievance Officer.
9. ICE/DRO staff respond 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"/>	
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"/>	
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"/>	
12. Daily telephone serviceability checks are documented in the housing unit logbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The logbook documenting these checks was reviewed and no issues were noted.

## 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.)*

Deportation officers were observed making their scheduled weekly visits. Some ICE staff have offices in the administrative area of the facility, others are located in the processing area, and some are located in an office near the dining room. Each member of the inspection team observed frequent interaction between ICE staff and in locations throughout the facility.

The facility has a comprehensive accountability and documentation system for the handling of detainee request forms.

Detainee interviews, observation, and a review of documentation confirmed that the requirements of this standard are being met.

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

April 7

Reviewer's Signature /

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

### PART 2-17. TOOL CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. <b>(MANDATORY)</b> There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	While tools are located outside the secure facility perimeter within the warehouse, the designated ICE Building Management Specialist is responsible for developing a tool control procedure and inspection system.
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"/>	
3. <b>(MANDATORY)</b> The use of tools, keys, medical equipment, and culinary equipment is controlled.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tools inspected in dietary, medical and in tool kits brought into the facility were controlled. All keys were strictly controlled at the time of the inspection.
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"/>	
5. Tool inventories are required for: <ul style="list-style-type: none"> <li>• Facility Maintenance Department</li> <li>• Medical Department</li> <li>• Food Service Department</li> <li>• Electronics Shop</li> <li>• Recreation Department</li> <li>• Armory</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has no electronics shop and no tools within the recreation area. The maintenance shop and armory are located outside the secure perimeter. Tool inventories were present, inspected, and current within medical and the food service area. Tool kits brought into the facility had current inventories which were checked upon entry and exit.
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"/>	



### PART 2-17. TOOL CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>7. The facility has a policy for the regular inventory of all tools.</p> <ul style="list-style-type: none"> <li>The policy sets minimum time lines for physical inventory and all necessary documentation.</li> <li>ICE facilities use AMIS bar code labels when required.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires weekly inventory of food service tools, and a monthly inventory of tools in the medical area and those in maintenance. The inventory is documented and kept on file. Some tools were reported as requiring AIMIS bar coding, but they were not observed since they are kept in tool storage which is outside the secure perimeter.
<p>8. The facility has a tool classification system. Tools are classified according to:</p> <ul style="list-style-type: none"> <li>Restricted (dangerous/hazardous)</li> <li>Non Restricted (non-hazardous).</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Restricted tools are classified as A, and non-restricted tools are classified as B.
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"/>	
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"/>	
<p>11. The facility has an approved tool storage system.</p> <ul style="list-style-type: none"> <li>The system ensures that all stored tools are accountable.</li> <li>Tools are stored on shadow boards in which the shadows resemble the tool.</li> <li>Shadow boards have a white background.</li> <li>Restricted tools are shadowed in red.</li> <li>Non-restricted tools are shadowed in black.</li> <li>Commonly used tools (tools that can be mounted) are stored in such a way that missing tools are readily noticed.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Maintenance tools are stored outside the secure perimeter. Food service tools were accountable and placed on a shadow board with a white background. Restricted tools were shadowed in red and non-restricted tools in black. Tools were stored in a manner that supports quick identification of any missing tools.
12. Tools removed from service have their shadows removed from shadow boards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
14. Sterile packs are stored under lock and key.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical tools were essentially within sterile pack and stored under lock and key within a secure room. Inventories checked were accurate.
15. Each facility has procedures for the issuance of tools to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**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"> <li>• Verbal and written notification.</li> <li>• Procedures for detainee access.</li> <li>• Necessary documentation/review for all incidents of lost tools.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedure are in place to address any lost tools. Immediate written and shift supervisor notification is required. Detainees may access tools under "intermittent" staff supervision.
17. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. All private or contract repairs and maintenance workers under contract with ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility. The inventory is reviewed and verified prior to the contractor entering/departing the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Hoses longer than three feet in length are classified as a restricted tool.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires hoses in excess of three feet to be classified as restricted.
20. Scissors used for in-processing detainees are tethered to the furniture (e.g. table, counter, etc.) where they are used.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No scissors were observed or reported as being used in the in-processing unit.

**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 tool storage system and armory are located outside the secure perimeter.

The facility has designated staff responsible for developing and implementing tool control procedures and an inspection system, as required by the standard.

Tools inventories were reviewed in the food service and medical departments. Tools in food service were inventoried, accounted for, and stored on shadow boards with the required color coding. Log books noting inventory of these areas were accurate based on the tools in these areas. A catheter count was conducted in the medical department and the inventory was accurate.

Tool kits brought into the facility were checked and the inventories were accurate.

No scissors were observed or reported as being used within the in-processing unit.

Overall, the facility is in compliance with this standard.

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

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. <b>(MANDATORY)</b> The facility has a Use of Force Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a comprehensive Use of Force policy.
2. Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy permits facility staff to respond in an immediate use of force situation without supervisory presence or direction.
3. When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, policy requires that staff must try to resolve the situation without resorting to force.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Written facility policy is in place requiring calculated rather than immediate use of force, when feasible.
5. The facility subscribes to the prescribed Confrontation Avoidance Procedures. • Ranking detention official, health professional, and others confer before every calculated use of force.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. When a detainee must be forcibly moved and/or restrained and there is time for a calculated use of force, staff use the Use-of-Force Team Technique. • Under staff supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is a detailed use of force team technique policy in place for forcible detainee movement or restraint. Policy requires the staff supervisor on duty to respond before any use of force.
7. Staff members are trained in the performance of the Use-of-Force Team Technique.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. All use-of-force incidents are documented and reviewed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. All use of force incidents are properly documented and forwarded for review use of force documentation at a minimum, shall include the medical examination through the conclusion of the incident. All calculated uses of force incidents must be audio visually recorded in its entirety from the beginning of the incident to its conclusion. Any breaks in recording, e.g., dead batteries, tape exhausted, are fully explained on the video.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and use of force incident reports were reviewed and supported that incidents were documented and forwarded for supervisory review. Medical examination is required at the incident's conclusion. Calculated use of force incidents are visually recorded, and any break in the recording is explained via incident report forms.

## 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
<b>10. Staff:</b> <ul style="list-style-type: none"> <li>Does not use force as punishment.</li> <li>Attempts to gain the detainee's voluntary cooperation before resorting to force</li> <li>Uses only as much force as necessary to control the detainee.</li> <li>Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>11. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>12. (MANDATORY) Use-of-Force Teams follow written procedures that attempt to prevent injury and exposure to communicable disease(s).</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy details written procedures in an attempt to prevent injury and exposure to communicable disease(s).
<b>13. Standard procedures associated with using four/five point restraints include:</b> <ul style="list-style-type: none"> <li>Soft (nylon/leather) restraints.</li> <li>Dressing the detainee appropriately for the temperature.</li> <li>A bed, mattress, and blanket/sheet.</li> <li>Checking the detainee at least every 15 minutes.</li> <li>Logging each check.</li> <li>Repositioning detainee often enough to prevent soreness or stiffness.</li> <li>Medical evaluation of the restrained detainee twice per eight-hour shift.</li> <li>When qualified medical staff are not immediately available, staff position the detainee "face-up."</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy is in place which addresses all the requirements of this component. (b)(7)(E) (b)(7)(E)
<b>14. The shift supervisor monitors the detainee's position/condition every two hours.</b> He/she allows the detainee to use the restroom at these times under safeguards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>15. All detainee checks are logged.</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>16. In immediate-use-of-force situations, officers contact medical staff once the detainee is under control.</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy states "staff shall seek medical or mental health assistance upon gaining detainee control".



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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
17. When the Facility Administrator authorizes use of non-lethal weapons: <ul style="list-style-type: none"> <li>Medical staff are consulted before staff use pepper spray/non-lethal weapons.</li> <li>Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility administrator authorizes the use of non-lethal weapons. Medical staff is consulted and review the detainee's medical file before the use of non-lethal weapons unless escalating tension makes such action unavoidable.
18. Intermediate Force Weapons, when not in use are stored in areas where access is limited to authorized personnel and to which detainees have no access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. If Intermediate Force Weapons are stored in the Special Management Unit (SMU), they are stored and maintained the same as Class R tools.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> <li>Medical personnel are consulted</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's use of force policy provides direction when restraining pregnant detainees and requires medical staff be consulted.
21. Protective gear is worn when restraining detainees with open cuts or wounds.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Staff document every use of force, including what type of restraints was used during the incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. It is standard practice to review any use of force and the non-routine application of restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. <ul style="list-style-type: none"> <li>Specialized training is given to officers ensuring they are certified in all devices approved for use.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All security staff receive 40 hours of annual training in self defense, confrontation avoidance and the use of force. The Disturbance Control Team members receive 40 hours annual training and 8 additional hours of specialized training every month.
25. All staff authorized to use OC spray receive training not only in its use, but also in the decontamination of individuals exposed to it. This training must be documented in the staff training record.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. The use of canines is restricted to contraband detection purposes only.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has not used canines during the past year.
27. The officers are thoroughly trained in the use of soft and hard restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. In SPCs, the Use of Force form is used. In other facilities (IGSAs / CDFs) this form or its equivalent is used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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



☒ Meets Standard

☐ Does Not Meet Standard

☐ N/A

☐ Repeat Finding

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

The facility's use of force policy is comprehensive.

Annual training is provided to security staff regarding self defense, confrontation avoidance, and the use of force. The Disturbance Control Team receives 40 hours of annual training supplemented by 8 hours of specialized training every month.

The facility has not used canines during the past year.

Approximately 20 random files related to use of force were reviewed. All contained a complete use of force form, and videos (i.e. CDs) of use of force events.

Calculated use of force incidents require a review team to conduct post incident reviews and prepare a final report that is sent to the Field Office Director. These review summaries were noted in the files which were reviewed. Immediate use-of-force incidents do not require this review. However, ICE staff indicated that a post incident review was going to be initiated for all use-of-force incidents at the facility.

Documentation is maintained, as evidenced by a review of incidents recorded in the facility's use-of-force log. The need for the use-of-force is infrequent at this facility. Overall, the facility complies with the PBNDS regarding Use of Force and Restraints.

(b)(6), (b)(7)c April 7, 20

Reviewer's Signature

(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 a written disciplinary system with progressive levels of reviews and appeals. The disciplinary system is posted in living units and provided to detainees via the facility handbook.
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"> <li>• corporal punishment</li> <li>• deviations from normal food service</li> <li>• clothing deprivation</li> <li>• bedding deprivation</li> <li>• denial of personal hygiene items</li> <li>• loss of correspondence privileges</li> <li>• deprivation of legal access and legal materials</li> <li>• deprivation of physical exercise</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff are specifically prohibited by policy from imposing these listed sanctions.
4. The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The following items are conspicuously posted in Spanish and English or other dominate languages used in the facility: <ul style="list-style-type: none"> <li>• Rights and Responsibilities</li> <li>• Prohibited Acts</li> <li>• Disciplinary Severity Scale</li> <li>• Sanctions</li> </ul>	<input 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"/>	Written policy encourages informal resolution of minor rule violations or prohibited acts.
7. Incident Reports and Notice of Charges are promptly forwarded to the designated supervisor.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	

### 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
9. An intermediate disciplinary process is used to adjudicate minor infractions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Unit Disciplinary Committee is responsible for adjudicating minor disciplinary infractions.
10. A disciplinary panel (or equivalent in IGSA's) adjudicates infractions. The panel: <ul style="list-style-type: none"> <li>• Conducts hearings on all charges and allegations referred by the UDC</li> <li>• Considers written reports, statements, physical evidence, and oral testimony</li> <li>• Hears pleadings by detainee and staff representative</li> <li>• Bases its findings on the preponderance of evidence</li> <li>• Imposes only authorized sanctions</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has an Institutional Disciplinary Committee (3 persons) that conducts hearings on referred charges, considers written reports, statements, physical evidence, and oral testimony. The committee hears pleadings, allows staff representation, bases its findings on a preponderance of evidence, and imposes only 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"/>	
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"/>	
13. The duration of punishment set by the Facility Administrator, as recommended by the disciplinary panel does not exceed established sanctions. The maximum time in disciplinary segregation does not exceed 60 days for a single offense.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility administrator who establishes the punishment following a recommendation by the Institutional Disciplinary Committee does not exceed established sanctions. The maximum time in disciplinary segregation for a single offense does not exceed 60 days.
14. Written procedures govern the handling of confidential-source information. Procedures include criteria for recognizing "substantial evidence".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### 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 a two part disciplinary process with specific committees reviewing minor and major disciplinary offenses.

A review of approximately 20 detainee files contained incident reports and a notice of charges and all had a supervisory review. Included in the files were investigative reports, detainee requests for staff representation forms, a disciplinary checklist, and reclassification instruments, if appropriate. All reports reviewed were completed, dated, and signed within the parameters required by the disciplinary policy.

After a review of policy and procedure as well as disciplinary files, it was determined the facility is in compliance with this standard.

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

April 7, 2011

Reviewer's Signature /

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



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

# **Section IV CARE**

**20 Food Service**

**21 Hunger Strikes**

**22 Medical Care**

**23 Personal Hygiene**

**24 Suicide Prevention and Intervention**

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

**PART 4 – 20. FOOD SERVICE**

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The food service program is under the direct supervision of a professionally trained and certified Food Service Administrator (FSA). The Responsibilities of cooks and cook foremen are in writing. The FSA determines the responsibilities of the Food Service Staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility Food Service Administrator (FSA) is certified by the National Registry of Food Safety Professionals in the State of Florida.
2. The Cook Foreman is on duty on days when the FSA is off duty and vice versa.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A cook foreman is always on duty when the FSA 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. <b>(MANDATORY)</b> Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device. Knives and keys are inventoried and stored in accordance with the Detention Standard on Tool Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The knife cabinet is kept behind a cage in a secured room. Knives are inventoried each shift and are signed out when in use. These tools are also identifiable by an etching mark classifying them as a Class A or restricted tools.
5. All knives not in a secure cutting room are physically secured to the workstation and staff directly supervises detainees using knives at these workstations. Staff monitor the condition of knives and dining utensils	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All knives and tools are only used by facility staff in a secured cutting room and are tethered when in use. Staff monitors the condition of knives and dining utensils.
6. Special procedures (when necessary) govern the handling of food items that pose a security threat.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Operating procedures include daily searches (shakedowns) of detainee work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The FSA monitors staff implementation of the facility population count procedures. These procedures are in writing. Staff are trained in count procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. <b>(MANDATORY)</b> There is adequate health protection for all detainees and staff in the facility, and for all persons working in food service. Detainees and other persons working in food service are monitored each day for health and cleanliness by the food service supervisor or designee. Detainee clothing and grooming comply with the "Food Service" standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are evaluated each day by the food service staff to insure there are no grooming, sanitation or health issues.
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"/>	A review of several detainee voluntary work program files revealed that training is conducted and documentation is included in the files.

**PART 4 – 20. FOOD SERVICE**

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. During orientation and training session(s), the Cook Supervisor (CS) explains and demonstrates: <ul style="list-style-type: none"> <li>Safe work practices and methods.</li> <li>Safety features of individual products/ pieces of equipment.</li> <li>Training covers the safe handling of hazardous material[s] the detainee are likely to encounter in their work.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The Cook Foreman documents all training in individual detainee detention files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Several files were reviewed and found in compliance.
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"/>	Detainees are paid \$1.00 per day.
15. Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are served two hot meals a day with the meal times not exceeding the 14 hour time period. Breakfast is served at 4:30 AM; lunch is served at 11:00 AM; and dinner is served at 4:00 PM.
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"/>	
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"/>	
18. <b>(MANDATORY)</b> A registered dietitian shall conduct a complete nutritional analysis that meets U.S. Recommended Daily Allowances (RDA), at least annually, of every master-cycle menu planned by the FSA. The dietitian must certify menus before they are incorporated into the food service program. If necessary, the FSA shall modify the menu in light of the nutritional analysis to ensure nutritional adequacy. The menu will need to be revised and re-certified by the registered dietitian in that event.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility provides a well balanced meal to the detainee population. The nutritional analysis meets the RDA requirements and is reviewed and approved by a registered dietitian.
19. The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The Cook Foreman has the authority to change menu items if necessary. <ul style="list-style-type: none"> <li>If yes, documenting each substitution, along with its justification, with copy to the FSA</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. All staff and volunteers know and adhere to written "food preparation" procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 4 – 20. FOOD SERVICE**

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"> <li>Changes to the planned Common Fare menu can be made at the facility level.</li> <li>Hot entrees are offered three times a week.</li> <li>The Common Fare menus satisfy nutritional recommended daily allowances (RDAs).</li> <li>Staff routinely provide hot water for instant beverages and foods.                             <ul style="list-style-type: none"> <li>Common Fare meals are served with:</li> <li>Disposable plates and utensils.</li> <li>Reusable plates and utensils.</li> </ul> </li> <li>Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the Common Fare diet items.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a Common Fare program and a Common Fare menu is in place that meets the standard's requirements.
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The chaplain reviews all requests for religious diets and forwards a recommendation to the FSA.
24. A supervisor at the command level must approve a detainee's removal from the Common Fare Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility camp supervisor is the one who reviews all requests for removal.
25. The Facility Administrator, in conjunction with the chaplain and/or local religious leaders provides the FSA a schedule of the ceremonial meals for the following calendar year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<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"> <li>Muslims fasting during Ramadan receive their meals after sundown.</li> <li>Jews who observe Passover but do not participate in the Common Fare Program receive the same Kosher-for- Passover meals as those who do participate.</li> <li>Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Common Fare program facilitates all religious meals.
27. The food service program addresses medical diets.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical diets are coordinated with the Health Services Administrator.
28. Satellite-feeding programs follow guidelines for proper sanitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Satellite feeding in the medical unit and SHU meet the proper sanitation guidelines.
29. Hot and cold foods are maintained at the prescribed, "safe" temperature(s) as served. See Detention Standard on Food Service for guidance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 4 – 20. FOOD SERVICE**

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
30. All meals provided in nutritionally adequate portions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Portions exceed the daily requirements.
31. Food is not used to punish or reward detainees based upon behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. The food service staff instruct detainee volunteers on: <ul style="list-style-type: none"> <li>Personal cleanliness and hygiene;</li> <li>Sanitary techniques for preparing, storing, and serving food, and;</li> <li>The sanitary operation, care, and maintenance of equipment.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Everyone working in the food service department complies with food safety and sanitation requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34. <b>(MANDATORY)</b> The facility implements written procedures for the administrative, medical, and/or dietary personnel conducting the weekly inspections of all food service areas, including dining, storage, equipment, and food-preparation areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has procedures in place requiring administrative and food service staff to conduct weekly inspections of the food service area. Medical staff conducts monthly inspections.
35. Reports of discrepancies are forwarded to the Facility Administrator or designated department head and corrective action is scheduled and completed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36. <b>(MANDATORY)</b> Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal, in accordance with the Detention Standard on Food Service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Temperature checks are conducted on all dishwashing machines and are documented. A review of daily temperature checks on various days each month since the last inspection occurred.
37. <b>(MANDATORY)</b> Staff document the results of every refrigerator/ freezer temperature check, in accordance with the Detention Standard on Food Service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Food service Department also conducts daily temperature checks on refrigerators/freezers. All documented checks reviewed met the standard requirement of 40 or below for refrigerators and -15 for freezers.
38. The cleaning schedule for each food service area is conspicuously posted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39. Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40. Storage areas are locked when not in use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. Food service personnel conduct shakedowns along with detention staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42. <u>In SPCs only:</u> The ICE supervisor on duty ensures that ICE officers participate in dining room supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE officers are present in the dining room at various points during meals.



**PART 4 – 20. FOOD SERVICE**

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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 were reviewed and approved by a registered dietitian.
44. In SPCs only: the FSA prepares quarterly cost estimates for the Common Fare Program. This quarterly estimate is factored into the quarterly budget.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45. When required, only food service staff prepare the sack lunches for detainee transportation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Air curtains or comparable devices are used on outside doors where food is prepared, stored, or served to protect against insects and other rodents.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Air curtains are located at every entry and exit point of the kitchen.
47. Staff comply 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 comply with all ICE Housekeeping, Storeroom/Refrigerator requirements. Identify and explain any shortcomings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
50. Dining room facilities and operating procedures will provide sufficient space and time for detainees to eat meals in a relatively relaxed, unregimented atmosphere.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The dining area is large with adequate space for detainees to eat.
51. <b>(MANDATORY)</b> An independent, external source shall conduct annual inspections to ensure that the food service facilities and equipment meet governmental health and safety codes. Corrective action is taken on deficiencies, if any.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An independent inspector from the Customs Border Protection conducts an annual inspection of the food service area. The last inspection was completed on April 30, 2010, with only minor violations noted that were corrected.
52. Personnel inspecting the food service department shall note needed corrective action(s), if any, in a written report to the Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
53. Only those toxic and caustic materials required for sanitary maintenance of the facility, equipment, and utensils shall be used in the food service department. Material Safety Data Sheets (MSDSs) will be maintained on all flammable, toxic, and caustic substances used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The food service area has a separate closet where all chemicals are distributed through an Ecolab system. So, detainees do not have direct access to chemicals. All MSDS forms are in place for all chemicals in this area.
54. <b>(MANDATORY)</b> The FSA is responsible for pest control in the food service department, including contracting the services of an outside exterminator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has contract with Guarantee Floridian Pest Control, monthly service, or as needed. The most recent visit was on March 15, 2011.

**FOOD SERVICE**

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

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

The facility food service staff are contract employees with Doyan Security Services. All staff are properly trained in the ServSafe food service training course. The detainees are provided with a well balanced diverse menu that meets the daily nutritional requirements. Examples of menu items include tacos, fish, and barbecued chicken. The master menu is reviewed and approved by a registered dietician. Interviews conducted with the detainees indicated that the population was happy with the food and the significant portion sizes.

The knives and tool control shadow boards are secured behind a cage in a closet. Tools are inventoried and signed in and out. Knives which are tethered are used only by staff in a secure cutting room. Detainees are monitored daily to insure compliance with sanitation and grooming standards. Weekly inspections of food service areas are conducted by administrative, medical, and food service staff. Temperature checks of dishwashers, refrigerators and freezers are conducted at each meal and recorded. An independent Health and Safety Inspector from the Customs Border Patrol conducted a health and safety inspection on April 30, 2010. Only minor issues were found which were then corrected.

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

April 7, 2011

Reviewer's Signature / [

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

# **PART 4 – 21. HUNGER STRIKES**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. When a detainee has refused food or observed to have not eaten for 72 hours, it is standard practice for staff to refer him or her to the medical department.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy provides the authority for compliance with this component. Staff interviews indicated practice consistent with policy.
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"/>	Pursuant to facility policy, reporting proceeds from the Health Services Administrator to the Assistant Field Office Director to the Field Office Director.
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"/>	Written facility policy provides compliance with this component. Interviews with two Detention Officers in building A-Upper, Pods 4 and 5, indicated practice consistent with policy.
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"/>	Pursuant to established, written facility policy, hunger-striking detainees are either placed in the Special Management Unit (SMU) or the Short Stay Unit (SSU) in the medical area.
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"/>	Written facility policy provides the authorization for medical staff to place a detainee in the SMU or SSU.
6. Medical staff record 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"/>	Written facility policy provides the authority for compliance with this component. A review of previous hunger-striking detainee medical records indicated practice consistent with policy.
7. The facility medical authority obtains a hunger striker's consent before medical treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy and actual observed practice of previous hunger strike records document compliance with this component.
8. A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment, or two staff/provider signatures indicating detainee refusal to sign form.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy provides the compliance with this component.
9. Unless otherwise directed by the medical authority, staff deliver 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"/>	Written facility policy provides the authority for compliance with the component. A review of previous hunger-striking detainee medical records indicated practice is consistent with policy.

# **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
10. Staff maintain the hunger striker's supply of drinking water/other beverages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy provides the compliance with this component. Interviews with the Health Services Administrator, Assistant Health Services Administrator, and a Special Housing Unit detention officer indicated practice consistent with policy.
11. During a hunger strike, staff remove all food items from the hunger striker's living area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy provides compliance with this component. An interview with the Health Services Administrator (HSA) and a Special Housing Unit detention officer indicated practice consistent with policy.
12. Staff are 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"/>	Written facility policy provides the authority for compliance with this component. A review of previous hunger-striking detainee medical records indicated practice consistent with policy.
13. The medical staff have written procedures for treating hunger strikers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hunger strike treatment plans are developed by the facility Clinical Director in conjunction with the Department of Immigration Health Services (DIHS) Medical Director.
14. Staff document 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"/>	A review of previous hunger-striking detainee medical records indicated compliance with this component.
15. All staff receive orientation and annual training on recognizing the signs of a hunger striker and on the procedures for referral for medical assessment. Medical staff receive 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"/>	Written facility policy requires staff training during new-employee orientation and annually. A review of ten randomly selected training files indicated practice is consistent with policy. An interview with the Health Services Administrator indicated medical staff receive training during new-employee orientation and annually thereafter. A random review of medical staff employee records indicated practice is consistent with policy.

# **PART 4 – 21. HUNGER STRIKES**

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

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

A review of policy and procedure, training files and curriculum, previous hunger-striking detainee medical records occurred. Interviews were conducted with the Health Services Administrator, Assistant Health Services Administrator, ICE staff training coordinator, contractual staff training manager, Short Stay Unit registered nurse, a Special Housing Unit detention officer, and building A-Upper, Pod 4 & 5 officers. A tour of the medical unit, including the Short Stay Unit, and the Special Housing Unit occurred. Overall, it was determined the facility is in compliance with the components of the standard.

At the time of the inspection, the Health Services Administrator reported there were seventeen hunger strikes during the past twelve months. It was further reported none of the hunger-striking detainees required treatment outside the facility or force-feeding. Each of the hunger-striking detainees self-terminated their hunger strike.

At the time of the inspection, no hunger strikes were in progress.

The facility complies with the PBNDS regarding Hunger Strikes.

(b)(6), (b)(7)c / April 7, 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"/>	The facility is accredited by the National Commission on Correctional Health Care (NCCHC) through 2014 and the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) through 2013. Professional medical staff are all licensed by the State. There is a current pharmacy license and Clinical Laboratory Improvement Amendment (CLIA) waiver certificate through 2012, authorizing limited laboratory testing.
2. The facility's in-processing procedures of arriving detainees include medical screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy requires the in-processing procedures to include a medical screening. Observation of intake verified a medical screening is conducted by licensed medical staff within twelve hours of a detainee's arrival.
3. <b>(MANDATORY)</b> The essential positions needed to perform the health services mission and provide the required scope of services are described in a staffing plan that is reviewed at least annually by the health authority.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An interview with the Health Services Administrator (HSA), and a review of the staffing plan signed and dated September 2010 by the Department of Immigration Health Services (DIHS) provide compliance with this component.
4. <b>(MANDATORY)</b> Newly admitted detainees will be informed, orally and in writing (in a language they can understand), about how to access health services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff orally explain the process during the medical intake. Additionally, the process is explained in the detainee handbook, which is written in English, Spanish and Creole and the process is again explained in an orientation video.
5. Detainees will have access to and receive specified 24-hour emergency medical, dental, and mental health services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff are on-duty twenty four hours a day, seven days a week, to address non-emergent and emergent medical, dental, and mental health needs.
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"/>	An interview with the Health Services Administrator (HAS), and a random review of medical unit staff files indicated tuberculosis testing is included as part of the pre-employment requirements.

# **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
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"/>	All professional medical staff are licensed by the State. A random review of medical staff files indicated current licenses and signed job descriptions.
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"/>	Written facility policy requires providing each detainee a handbook during the intake process. Observation of the process indicated practice is consistent with policy. The handbook is available in English, Spanish, and Creole.
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"/>	A review of professional medical staff files indicated the credentialing and verification process complies with standards established by the National Commission on Correctional Health Care (NCCHC) and the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO).
10. Within 12 hours of arrival, all newly admitted detainees receive initial medical, dental and mental health screening by a health care provider or a detention officer specially trained to perform this function. <ul style="list-style-type: none"><li>When screening is performed by a detention officer, the facility maintains documentation of the officer's special training.</li></ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy provides the authority for compliance with this component. Observation of the intake process and a random review of detainee medical records indicated practice is consistent with policy. Screenings are only conducted by licensed medical staff.
11. <b>(MANDATORY)</b> If language difficulties prevent the health care provider/officer from sufficiently communicating with the detainee for purposes of completing the medical screening, the officer obtains translation assistance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility, the greater majority of detainees are Spanish speaking, and there are many Spanish speaking employees. Additionally, if needed, the facility utilizes a language interpretation service.
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"/>	Multiple tours of the medical unit indicated a large, clean, well equipped facility with more than sufficient space to afford each detainee privacy when receiving health care.
13. The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical unit is a restricted-access area located well within the secure perimeter of 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
14. The medical facility entrance includes a holding/waiting room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical unit entrance includes two dedicated holding/waiting rooms.
15. The medical facility's holding/waiting room under the direct supervision of custodial staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Security staff assigned to the medical unit directly supervise detainees in the holding/waiting 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"/>	There is a toilet in each holding/waiting room and a drinking fountain immediately outside the holding/waiting rooms, which detainees can access via a request to the officer.
17. Medical records are kept apart from other files. They are: <ul style="list-style-type: none"> <li>Secured in a locked area within the medical unit.</li> <li>With physical access restricted to authorized medical staff.</li> <li>Procedurally, no copies made and placed in detainee files.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility utilizes an Electronic Medical Record (EMR) with a password restricted system accessible only by medical staff.
18. <b>(MANDATORY)</b> A signed and dated consent form is obtained from a detainee before medical treatment is administered.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy requires a signed and dated consent form be obtained at the time of intake. Observation of the intake process verified practice consistent with policy. In the event a medical or dental procedure is needed, the detainee is required to sign another consent to treatment form.
19. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An interview with a Medical Record Technician confirmed the use of the I-813 form.
20. The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An interview with a Medical Record Technician indicated that a one to two day notice of transfers is received.
21. A detainee's medical records will be transferred as appropriate. All detainees will be transferred with a copy of their transfer summary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pursuant to written facility policy, a transfer summary is completed and provided for each transferring detainee. An interview with a Medical Record Technician indicated practice is consistent with policy. Additionally, the detainee's medical record is only provided if requested by the receiving 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"/>	An interview with a Medical Record Technician verified facility practice provides compliance with this component.
23. Medical screening includes a Tuberculosis (TB) test.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy requires a screening TB chest x-ray be performed during the intake screening process of each detainee. A review of detainee medical records indicated 100% compliance with policy.
24. All detainees receive a mental-health screening upon arrival. It is conducted: <ul style="list-style-type: none"> <li>• By a health care provider or specially trained officer;</li> <li>• Before a detainee's assignment to a housing unit.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy requires each detainee, during the intake screening process, receive a mental health screening prior to assignment to a housing unit. At this facility, the mental health screening is conducted by licensed medical staff.
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"/>	Since licensed medical staff complete the I-794 and identify detainees requiring medical attention at the time of the screening, an additional review is unnecessary.
26. <b>(MANDATORY)</b> Each facility's health care provider conducts a health appraisal and physical examination on each detainee within 14 days of arrival. If there is documentation of one within the previous 90 days, the facility health care provider may determine that a new appraisal is not required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy requires a health appraisal and physical examination of each detainee within fourteen days of arrival. A random review of detainee medical records indicated compliance is well within the fourteen day timeframe.
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"/>	Just as with detainees in general population, detainees housed in the Special Management Unit (SMU) can at any time request, complete, and submit a sick call request slip. Licensed medical staff are in the SMU multiple times per day to administer medication. Additionally, each evening medical staff conduct "wellness checks" of each detainee in the SMU.

# **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>28. Staff provide detainees with health- services (sick call) request slips daily, upon request.</p> <ul style="list-style-type: none"> <li>Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population.</li> <li>Service-request slips are delivered in a timely fashion to the health care provider.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At any time, a detainee can request a sick call request slip from detention staff. Once completed, the detainee places the slip in a locked sick call request box located in the dining hall. Only medical staff have access to the box and collect the slips each day. Sick call slips are evaluated the same day and detainees are either evaluated immediately or the next day. Sick call request slips are printed in English, Spanish, and Creole.
<p>29. <b>(MANDATORY)</b> The facility has a written plan for the delivery of 24-hour emergency health care when no medical personnel are on duty at the facility, or when immediate outside medical attention is required.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a written policy for delivery of twenty-four hour emergency health care. Medical staff are on-duty twenty-four hours a day, seven days a week.
<p>30. The plan includes an on-call provider.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Since medical staff are on-duty twenty-four hours a day, seven days a week, in the event of an emergency, detention staff contact medical staff. Medical staff have the option of contacting the on call physician, mid-level provider, or EMS.
<p>31. The plan includes a list of telephone numbers for local ambulances and hospital services.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Telephone numbers for the on call medical providers and community hospitals are posted in the medical unit.
<p>32. The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The written facility plan includes medical staff advising and cooperating with facility staff in the provision of emergency health care.
<p>33. <b>(MANDATORY)</b> Detention and health care personnel will be trained, at least annually, to respond to health-related situations within four minutes and to properly use first aid kits, available in designated areas.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy, a review of training curriculum, and a random review of staff training files indicated compliance with the requirements of this component.
<p>34. Where staff are used to distribute medication, a health care provider properly trains these officers.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pursuant to written policy, only licensed medical staff distribute or administer medications.



# **PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
35. Pharmaceuticals and nonprescription medicines will be stored, inventoried, dispensed, and administered in accordance with sound standards and facility needs for safety and security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy provides the authority for compliance with this component. An interview with the facility pharmacist and a random review of purchase, receipt, and inventory records indicated practice is consistent with policy.
36. <b>(MANDATORY)</b> Each facility has written policy and procedures for the management of pharmaceuticals that include: <ul style="list-style-type: none"> <li>• A formulary of all prescription and nonprescription medicines stocked or routinely procured from outside sources.</li> <li>• A method for obtaining medicines not on the formulary.</li> <li>• Prescription practices, including requirements that medications are prescribed only when clinically indicated and that prescription are reviewed before being renewed.</li> <li>• Procurement, receipt, distribution, storage, dispensing, administration, and disposal of medications.</li> <li>• Secure storage and perpetual inventory of all controlled substances (DEA Schedule II-V), syringes, and needles.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy provides the compliance for all the listed requirements of the component. A facility formulary is available for all physicians and mid-level practitioners to reference when prescribing medications. The formulary provides a method for obtaining medicines not on the formulary. A random review of medication purchases, receipts, inventory, dispensing, and disposal records indicated full compliance. In cooperation with the facility pharmacist, a random review of controlled substances, syringes, and needles indicated accurate inventories.
37. All pharmaceuticals are stored in a secure area with the following features: <ul style="list-style-type: none"> <li>• A secure perimeter;</li> <li>• Access limited to authorized medical staff (never detainees);</li> <li>• Solid walls from floor to ceiling and a solid ceiling;</li> <li>• A solid core entrance door with a high security lock (with no other access); and</li> <li>• A secure medication storage area.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All pharmaceuticals are stored in the facility medical unit pharmacy. Since the pharmacy is located in the controlled-access medical unit, it is well within the secure perimeter of the facility. Access to the pharmacy is controlled and limited to pharmacy and authorized medical staff. The pharmacy is constructed with solid walls from floor to ceiling, a solid ceiling, and a solid core entrance door with a high security lock. Controlled substances are stored in a locked box within the controlled access pharmacy. Access to the lock-box is limited to (b)(7)(E) (b)(7)(E)

# **PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>38. In SPCs and CDFs, the pharmacy has a locking pass-through window.</p> <ul style="list-style-type: none"> <li>Administration and management in accordance with state and federal law.</li> <li>Supervision by properly licensed personnel.</li> <li>Administration of medications by personnel properly trained and under the supervision of the health services administrator, or equivalent.</li> <li>Accountability for administering or distributing medications in a timely manner and according to physician orders.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility pharmacy includes a locking pass-through window. Administration and management of pharmaceuticals is in accordance with state and federal law and supervised by the facility full-time licensed pharmacist. Medications are only administered by licensed medical staff under the supervision of a Health Services Administrator. A random review of Medication Administration Records (MARs) indicated medications are administered or distributed at the appropriate times and according to the physician orders.
<p>39. Distribution of medication is in accordance with specific instructions and procedures established by the health care provider. Written records of all medication given to detainees are maintained.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility written policy provides for compliance with this component. A random review of Medication Administration Records (MARs) indicated administration of medication as ordered by the physician or mid-level practitioner. There is a MAR for each detainee receiving medication.
<p>40. Medication may not be delivered or administered by detainees.</p> <ul style="list-style-type: none"> <li>In facilities that are medically staffed 24 hours a day, the health care provider distributes medication.</li> <li>In facilities that are not medically staffed 24 hours a day, medication may be distributed by detention officers, who have received proper training by the health care provider, only when medication must be delivered at a specific time when medical staff are not on duty.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Only licensed medical staff that are on-duty twenty-four hours a day, seven days a week, distribute or administer medication. Pursuant to written facility policy, at no time do detainees deliver or administer medication.
<p>41. The facility maintains documentation of the training given any officer required to distribute medication, and the officer has available for reference the training syllabus or other guide or protocol provided by the health authority.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Only licensed medical staff administer medication at this facility.

# **PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
42. The Warden/Facility receives notification that a detainee that has special medical needs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy provides compliance with this component. An interview with the Health Services Administrator indicated she informs the facility Officer in Charge (OIC) verbally, by e-mail, and in writing with a completed Special Needs form.
43. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy provides the compliance with this component.
44. <b>(MANDATORY)</b> Each facility has a written plan (or plans) that address the management of infectious and communicable diseases, including prevention, education, identification, surveillance, immunization (when applicable), treatment, follow-up, isolation (when indicated), and reporting to local, state, and federal agencies. Plans include: <ul style="list-style-type: none"> <li>• Coordination with public health authorities;</li> <li>• Ongoing education for staff and detainees;</li> <li>• Control, treatment, and prevention strategies;</li> <li>• Protection of individual confidentiality;</li> <li>• Media relations;</li> <li>• Management of tuberculosis, hepatitis A, B, and C, HIV infection, avian influenza, and</li> <li>• Reporting communicable diseases to local and/or state health departments in accordance with local and state regulations.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy and a detailed Infection Control Manual, both of which address all the requirements of this component, provide evidence of compliance with this component. An interview with the Infection Control Coordinator indicated practice is consistent with policy.
45. Detainees diagnosed with a communicable disease are isolated according to local medical operating procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees diagnosed with a communicable disease are housed in the Short Stay Unit (SSU) in the medical area and, if necessary, placed in a negative-air pressure isolation room.
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"/>	Pursuant to written facility policy, all newly arriving detainees receive a chest x-ray as the primary TB screening method immediately upon arrival at 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
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"/>	Pursuant to written facility policy, any detainee with symptoms suggestive of TB is immediately placed in a negative-air pressure isolation room within the medical unit. There are six negative-air pressure isolation rooms located in the Short Stay Unit (SSU).
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"/>	Pursuant to written facility policy, when needed, medical staff determine the transportation method and coordinate the transfer with facility staff. Appropriate medical information is provided for the transfer.
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"/>	Pursuant to written facility policy, at the time of intake screening, any detainee identified as requiring close, chronic, or convalescent care is immediately referred to the physician. The detainee is evaluated the same day with the fourteen day health appraisal being conducted the next day at which time the physician develops a treatment plan. Follow-up physician appointments occur at a minimum every thirty days.
50. <b>(MANDATORY)</b> Female detainees have access to pregnancy testing and pregnancy management services that include routine high-risk prenatal care, addiction management, comprehensive counseling and assistance, nutrition, and postpartum follow-up.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No female detainees are admitted to this facility.
51. <b>(MANDATORY)</b> Detainees with chronic conditions (such as hypertension and diabetes) will receive periodic care and treatment that includes monitoring of medications, laboratory testing, and chronic care clinics, and others will be scheduled for periodic routine medical examinations, as determined by the health authority	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pursuant to written facility policy, at the time of intake, detainees identified with a chronic condition are immediately referred to the physician for evaluation which occurs the same day. The fourteen day health appraisal is conducted the next day at which time the physician formulates a treatment plan. Follow-up physician appointments occur at a minimum every thirty days.

# **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
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"/>	An interview with the Health Services Administrator indicated she notifies the Officer in Charge (OIC) verbally, by e-mail, and with a completed Special Needs form.
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"/>	There is a full-time, licensed dentist on-staff. Detainees submit sick call request slips to access dental care. An interview with the dentist indicated there is no dental back log, and detainees are evaluated either the same day or no later than the next day after the request slip has been received. Request slips are collected daily.
54. <b>(MANDATORY)</b> Detainees with mental health problems will be referred to a mental health provider as needed for detection, diagnosis, treatment, and stabilization to prevent psychiatric deterioration while confined.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility employs a full-time psychiatrist, psychologist and licensed social worker. At the time of the intake mental health screening, any detainee identified with a mental health need is immediately referred to mental health staff.
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 facility employs a full-time psychiatrist, psychologist and licensed social worker. Detainees who experience acute mental health episodes are managed by one to all three of the mental health staff.
56. Medical and mental health interviews, examinations, and procedures will be conducted in settings that respect detainees' privacy, and female detainees will be provided female escorts for health care by male health care providers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation of the intake area and medical unit examination rooms indicated areas with more than adequate privacy for interviews, examinations and procedures. No females are housed at the facility.
57. <b>(MANDATORY)</b> Any detainee referred for mental health treatment receives a comprehensive evaluation by a licensed mental health provider within 14 days of the referral.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy provides the authority for compliance with this component. A random review of mental health referrals indicated the evaluation occurred well within the fourteen day timeframe.



# **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. <b>(MANDATORY)</b> Restraints for medical or mental health purposes may be authorized only by a qualified medical or mental health provider, after reaching the conclusion that less restrictive measures are not successful. The facility has written procedures that specify:</p> <ul style="list-style-type: none"> <li>The conditions under which restraints may be applied;</li> <li>The types of restraints to be used;</li> <li>How a detainee in restraints is to be monitored;</li> <li>The length of time restraints are to be applied;</li> <li>Requirements for documentation, including efforts to use less restrictive alternatives; and</li> <li>After-incident review.</li> <li>The medical authority or mental health provider completes a Post-Restraints Observation Report form DIHS-867 or similar form.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detailed written facility policy and the medical policy address all the required items listed in the component. Interviews with mental health staff indicated practice is consistent with policy. An interview with the Health Services Administrator and Clinic Director indicated there has been no application of therapeutic restraints during the past twelve months.
<p>59. <b>(MANDATORY)</b> 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"> <li>Specify the duration of therapy;</li> <li>Obtain an order authorizing the administration of the drug from a Federal District Court.</li> <li>Document that less restrictive intervention options have been exercised without success;</li> <li>Detail how the medication is to be administered;</li> <li>Monitor the detainee for adverse reactions and side effects; and</li> <li>Prepare treatment plans for less restrictive alternatives as soon as possible.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detailed written facility policy and procedures address the items listed in this component and provide compliance. An interview with the Health Services Administrator and Clinical Director indicated there were no cases of involuntary administration of psychotropic medications during the past twelve months.
<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"/>	There is a full-time dentist employed at the facility. A random review of detainee medical records indicated the initial dental screening examination is performed well within the fourteen day timeframe.
<p>61. In each detention facility, the designated health authority and Facility Administrator determines the contents, number, location(s), use protocols, and procedures for monthly inspections of first aid kits.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	An interview with the facility ICE Health and Safety Officer indicated the decision has been made not to have first aid kits located throughout 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
62. An automatic external defibrillator should be available for use at the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are three automated external defibrillators (AEDs) located in the facility, all of which are in the medical unit. The medical unit staff supervise the use and maintenance of the AEDs.
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"/>	Written facility policy details the procedures to be taken and provides the compliance with this component. An interview with the Health Services Administrator indicated this situation has not occurred during the past year.
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"/>	Pursuant to written facility policy, a multi-disciplinary team, including facility administration, the Health Services Administrator, and other staff as deemed appropriate, meet at least quarterly for a Quality Assurance meeting. A review of meeting minutes indicated practice consistent with policy.
65. <b>(MANDATORY)</b> Biohazardous waste will be managed and medical and dental equipment decontaminated in accordance with sound medical standards and compliance with applicable local, state, and federal regulations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a contractual agreement with SteriCycle for biohazard waste disposal. Interviews with the Health Services Administrator and Dentist indicated appropriate medical and dental equipment and instrument decontamination and sterilization.
66. <b>(MANDATORY)</b> The health authority will implement a system of internal review and quality assurance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pursuant to written facility policy, a multi-disciplinary Quality Assurance team meets at least quarterly. A review of meeting minutes indicated practice consistent with policy.

# **PART 4 – 22. MEDICAL CARE**

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

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

A review of policy and procedure, the detainee handbook, the Special Housing Unit (SHU) log, medical staff job descriptions and licenses, the medical unit staffing plan, pharmacy records and formulary, random detainee medical records, and medication administration records occurred. Tours of the medical unit, intake area and SMU occurred. Interviews with multiple staff and detainees housed in both the medical unit Short Stay Unit and general population were conducted. Overall, the facility is in compliance with the components of the standard.

At the time of the inspection, it was reported there was one detainee death during the past year.

(b)(6), (b)(7)c male from (b)(6), (b)(7)c was transferred to the facility from the (b)(6), (b)(7)c At the time of intake, the detainee provided a history of non-insulin dependent diabetes controlled with oral medication, which was confirmed by medical staff. As a result of the history of diabetes, the detainee was immediately evaluated by the physician and received a health appraisal and examination the next day. The health appraisal was negative for any other findings. The detainee was seen by medical staff each day for blood-sugar monitoring. On December 22, 2010, the detainee was evaluated in sick call for complaints of a sore throat and cough of two days duration. The detainee was provided over-the-counter sinus medication and cough syrup. At 6:44 a.m., December 23, 2010, the detainee complained to his housing unit detention officer of having shortness of breath and coughing-up blood. The medical unit was contacted; a Registered Nurse reported to the housing unit and transferred the detainee by wheelchair to the medical unit. Upon arrival in the medical unit, the detainee became severely short of breath and rapidly progressed to no responsiveness. Emergency Management Services (EMS) was immediately contacted and despite multiple life-saving measure attempts by both facility and EMS staff, the detainee was pronounced dead at 7:16 a.m. An autopsy indicated death was due to severe coronary artery disease.

(b)(6), (b)(7)c April 7,  
Reviewer's Signature

(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"/>	Written facility policy provides the compliance with this component.
2. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive, at a minimum: <ul style="list-style-type: none"> <li>One uniform shirt and one pair of uniform pants or one jumpsuit.</li> <li>One pair of socks.</li> <li>One pair of underwear (daily change).</li> <li>One pair of facility-issued footwear.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An interview with a clothing officer indicated compliance with the component.
3. Additional clothing is available for changing weather conditions and as is seasonally appropriate.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Jackets or sweaters are issued, as needed.
4. New detainees are issued clean bedding, linens and towels, at a minimum: <ul style="list-style-type: none"> <li>One mattress</li> <li>One blanket</li> <li>Two sheets</li> <li>One pillow</li> <li>One pillowcase</li> <li>One towel</li> <li>Additional blankets, based on local weather conditions.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy provides the authority for compliance with this component. An interview with a clothing room officer indicated practice is consistent with policy.
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"/>	Only males are housed at this facility.
6. Toilet facilities are: <ul style="list-style-type: none"> <li>Clean</li> <li>Adequate in number and can be used without staff assistance 24 hours per day when detainees are confined in their cells or sleeping areas.</li> </ul> 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"/>	A tour of building A-upper, pods 4 and 5, indicated a clean area with an appropriate number of toilets for the detainee population.

### PART 4 – 23. PERSONAL HYGIENE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>7. Bathing facilities are:</p> <ul style="list-style-type: none"> <li>Clean</li> <li>Operable with temperatures between 100 and 120 degrees Fahrenheit.</li> </ul> <p>ACA Expected Practice 4-ALDF-4B-08 requires one washbasin for every 12 detainees.</p> <p>ACA Expected Practice 4-ALDF-4B-09 requires a minimum ratio of one shower for every 12 detainees.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A tour of building A-upper, pods 4 and 5, indicated a clean area with an appropriate number of showers and washbasins for the detainee population. A test of washbasin and shower water temperatures was within normal limits.
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"/>	Written facility policy provides the authority for compliance with this component. An interview with the Health Services Administrator and a random tour of housing units indicated practice is consistent with policy.
<p>9. Detainees are provided clean clothing, linen and towels.</p> <ul style="list-style-type: none"> <li>Socks and undergarments - daily.</li> <li>Outer garments - twice weekly.</li> <li>Sheets - weekly.</li> <li>Towels - weekly.</li> <li>Pillowcases - weekly.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An interview with the Laundry I Supervisor indicated compliance with this component.
10. Food service detainee volunteer workers are permitted to exchange outer garments daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Volunteer detainee workers are permitted to exchanges of outer garments more frequently.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### PART 4 – 23. PERSONAL HYGIENE

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

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

A review of policy and procedure and the facility laundry schedule occurred. Interviews with the Health Services Administrator, Laundry I Supervisor, housing unit officers, and the clothing room officer were conducted. Measurements of housing unit washbasin and shower water temperatures were taken. A tour of housing units, the facility laundry and facility clothing room occurred. Overall, it was determined the facility is in compliance with the PBNDS regarding Personal Hygiene.

(b)(6), (b)(7)c April 7,  
Reviewer's Signature

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



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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a written suicide prevention and intervention program approved and signed by the health authority and Facility Administrator and reviewed annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy signed and dated January 1, 2011, by the facility Assistant Field Office Director and the Health Services Administrator (HSA) provide the compliance with this component.
2. At a minimum, the Program shall include procedures to address: <ul style="list-style-type: none"> <li>• Intake screening and referral requirements;</li> <li>• The identification and supervision of suicide-prone detainees;</li> <li>• Staff training requirements;</li> <li>• The management and reporting of suicidal incidents, suicide watches, and deaths;</li> <li>• Provision of safe housing for suicidal detainees;</li> <li>• Debriefing of any suicides and suicide attempts by administrative, security, and health services staff;</li> <li>• Guidelines for returning a previously suicidal detainee to a facility's general population, upon written authorization of the clinical director.;</li> <li>• Reporting guidelines for facility personnel when suspected suicidal behavior is observed; and</li> </ul> Written procedures for the proper handling of detainees who exhibit suicidal behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy and the training curriculum provide the compliance with this component.
3. Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation and annual training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pursuant to written policy, training is required during new-employee orientation and annually. A review of training files indicated practice is consistent with policy. Random interviews with Detention Officers indicated training is appropriately conducted.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>4. Training prepares staff to:</p> <ul style="list-style-type: none"> <li>Effective methods for identifying the warning signs and symptoms of impending suicidal behavior,</li> <li>Demographic, cultural, and precipitating factors of suicidal behavior,</li> <li>Responding to suicidal and depressed detainees,</li> <li>Effective communication between correctional and health care personnel,</li> <li>Necessary referral procedures,</li> <li>Housing observation and suicide-watch level procedures,</li> <li>Follow-up monitoring of detainees who have already attempted suicide, and</li> <li>Reporting and written documentation procedures.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interviews with the ICE training coordinator and contractual staff training manager occurred. A review of the training curriculum and power point training presentation occurred. Additionally, random interviews with security officers indicated they had received training and were knowledgeable regarding the subject matter. The training provided to staff complies with the requirements of this component.
<p>5. A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process.</p> <ul style="list-style-type: none"> <li>Screening does not occur later than one working day after the detainee's arrival.</li> <li>Documentation exists that "specially trained officers" have completed training in accordance with a syllabus approved by the medical authority.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pursuant to written policy and practice, only licensed medical staff conduct the intake medical and mental health screening. Additionally, pursuant to written policy and practice, the intake screening is conducted within twelve hours of arrival at the facility.
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"/>	Written facility policy provides the compliance with this component.
7. Written procedures include returning a previously suicidal detainee to the general population, upon written authorization of the clinical director or appropriate health care professional.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy provides the compliance with this component.
8. The facility has a designated isolation room for evaluation and treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pursuant to written policy and actual practice, any detainee on suicide observation or watch is housed in the Short Stay Unit (SSU), which is located within the medical unit. The SSU is a thirty bed unit with ten beds designated for detainees with mental health issues.
9. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inspection of the observation rooms indicated compliance with the component.
10. Medical staff have approved the room for this purpose.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The observation rooms are located within the medical unit.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Staff observe 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"/>	Written facility policy and a review of completed suicide observation and watch forms indicated compliance with this component.
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"/>	Medical staff are on-duty twenty-four hours a day, seven days a week. Pursuant to written facility policy, security staff conduct and document fifteen minute observations. Medical staff document the detainee's status in the medical record at a minimum of every two hours.
13. In CDFs or IGSAs, and/or at facilities where there is not twenty-four hour medical staff, the facility administrator shall report to ICE/DRO any detainee who has been identified as suicidal. ICE/DRO, shall consult with the CD or designated medical authority for immediate evaluation (with constant observation until evaluation), or for transfer to a local psychiatric facility or emergency room by ambulance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This is a Service Processing Center (SPC) and medical staff are on-duty twenty-four hours a day, seven days a week.
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"/>	Written facility policy provides the authority for compliance with this component. An interview with the Health Services Administrator indicated suicides or serious suicide attempts are discussed during multi-disciplinary quarterly Quality Assurance Meetings. Additionally, a mortality review is conducted of all deaths.

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

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

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

A review of policy and procedure, training curriculum and files, blank and completed suicide observation and watch forms, quarterly Quality Assurance Meeting minutes occurred. Observation of the intake process occurred as well as tours of the medical unit and Short Stay Unit, holding cells and observation cells. Interviews with the Health Services Administrator, ICE staff training coordinator, contractual staff training manager and random officers occurred. Overall, it was determined that at the time of the inspection, the facility is in compliance with the components of the standard.

No suicides were reported during the past year. The Health Services Administrator indicated there had been two superficial suicide attempts both occurring on March 23, 2011. Apparently unhappy in regard to their immigration status, two detainees stated they each swallowed an undisclosed number of unidentified over-the-counter medications. Since their claim could not be disproven, each detainee was transported to a community emergency room where blood and urine were collected for toxicology tests. Each of the tests for each detainee was reported as being completely within normal limits and negative for any foreign substances. Additionally, a physical examination of each detainee was reported as completely within normal limits. As a result, each of the detainees was transferred back to the facility. Each of the detainees was placed in the medical unit Short Stay Unit for twenty-four hour observation and, due to no reported physical problems, were released after the twenty-four hour period. Each detainee had reported no mental health history during intake, and neither was on the mental health case load. There were forty-nine suicides observations.

At the time of the inspection, no close observations or suicide watches were in progress.

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

April 7, 2011

Reviewer's Signature

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

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees, who are chronically or terminally ill, are transferred to an appropriate off-site medical facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy and interviews with the Health Services Administrator and Clinical Director provided compliance with this component.
2. The facility or appropriate ICE office promptly notifies the next-of-kin of the detainee's: medical condition. <ul style="list-style-type: none"> <li>The detainee's location.</li> <li>The visiting hours and rules at that location.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The notification process flows from the Health Services Administrator to the Assistant Field Office Director (AFOD) to the family.
3. There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives. <ul style="list-style-type: none"> <li>These guidelines include instructions for detainees who wish to have a living will.</li> <li>These guidelines provide the detainee the opportunity to have a private attorney prepare the documents, at the detainee's expense.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy provides the compliance for all the requirements of this component.
4. There is a policy addressing "Do Not Resuscitate Orders"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy provides the compliance for this component.
5. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy requirements and an interview with the Health Services Administrator provided the compliance with this component.
6. The facility notifies ICE/DRO Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSA's, this notification is made through the local ICE representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Notification is made by the facility Clinical Director to the Department of Immigration Health Services (DIHS) Medical Director. The Health Services Administrator (HSA) provides notification to the facility AFOD who notifies legal counsel.
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"/>	Written facility policy provides the compliance with this component.
8. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in custody.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is an ICE-operated facility and notifications are made by ICE facility administration.
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"/>	Written facility medical and transportation policies provide the compliance for this component.



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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy and interviews with ICE staff provide the compliance with this component.
11. In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. • If the detainee is a U.S. military veteran, the Department of Veterans Affairs notified.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy and interviews with ICE administrative staff confirmed compliance with this component.
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"/>	Written facility policy provides the authority, and inspection of an A-file demonstrated the practice to support compliance with this component.
13. The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as; • Performance of an autopsy. • Person(s) to perform the autopsy. • Obtaining State approved death certificates. • Local transportation of the body.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy details the requirements for compliance with this component. A review of the documentation pertaining to a detainee death indicated practice to be consistent with policy.
14. ICE staff follow established procedures to properly close the case of a deceased detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An interview with ICE administrative staff, and the review of documentation of a detainee death indicated compliance with this component.

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

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

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

Following a review of policy and procedure, an A-file and documentation pertaining to a detainee death and interviews with the Health Services Administrator, Clinical Director and ICE administrative staff, it was determined that the facility is in compliance with the components of the standard.

It was reported that during the past twelve months there had been no Advanced Directives/Living Wills, Do Not Resuscitate orders or organ donor requests nor were there any Living Wills or Do Not Resuscitate orders in-force at the time of the inspection.

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

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

## **Section V ACTIVITIES**

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has written policy and procedures concerning correspondence and other mail. The rules for correspondence and other mail 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"/>	
2. The facility provides key information in English, Spanish, and other languages spoken by a significant number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility handbook describes mail procedures. The handbook is available in English, Spanish, and Creole.
3. Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mail is distributed 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 maintain 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"/>	A bound logbook is maintained. Staff were observed making entries into this logbook during the inspection.
6. Staff do not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized in writing by the Facility Administrator or equivalent for prevailing security reasons.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees come to the mail office to receive their mail. The process was observed.
7. Staff do not read incoming general correspondence without the Facility Administrator's prior approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Staff do 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"/>	Adherence to this component was observed during mail distribution.
9. Staff are prohibited from reading or copying incoming and outgoing Special Correspondence without the detainee present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Staff are 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"/>	
11. Correspondence to a politician or to the media is processed as Special Correspondence and is not read or copied.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**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
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 maintain a written record of every item removed from detainee mail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. The Facility Administrator or designee monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The procedure for safeguarding cash removed from a detainee protects the detainee from loss of funds and theft. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are present when the mail is opened and at that time they receive a receipt for any type of funds.
17. Original identity documents (for example, passports, and birth certificates) are immediately removed and forwarded to ICE staff for placement in the A-files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Staff provide the detainee a copy of his or her identity document(s) upon request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Staff dispose of prohibited items found in detainee mail in accordance with the Detention Standard on "Contraband".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Every indigent detainee has the opportunity to mail, at government expense: At least five pieces of special correspondence per week; Three one ounce letters per week; Packages deemed necessary by ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. The facility has a system for detainees to purchase stamps and for mailing all Special Correspondence and a minimum of 5 pieces of general correspondence per week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. SMU detainees have the same correspondence privileges as general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Detainees have access to outside publications.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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

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

Detainees pick-up their mail at the mail room. All mail is opened in the detainee's presence and receipts are issued accordingly. Detainees sign a sheet acknowledging receipt of the mail. As needed, staff make entries into logbooks. This process was observed during the inspection and no issues were noted.

The facility offers very limited access to outside publications. Detainees may receive various catalogs and one magazine per month. A detainee was observed having to choose between one of two magazines. He selected one, and the other was returned to sender. Depending on the circumstances, an item which is not permitted will be returned at the facility's expense, or it may be placed with the detainee's property.

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

April

Reviewer's Signature

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



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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Field Office Director considers and approves, on a case-by-case basis, trips to an immediate family member's: <ul style="list-style-type: none"> <li>Funeral</li> <li>Deathbed</li> </ul>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The FOD will consider and approve trips of this nature. If he is absent, the SDDO will conduct the review.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy defines immediate family member as, "parent, including step-parent, foster parent, child, spouse, sister or brother".
3. The CDF/IGSA facility notifies ICE of all detainee requests for non-medical escorts.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This is an ICE facility.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees who require overnight housing are placed in approved IGSA facilities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy allows placement in a "suitable secure facility".
6. Each escort detail includes at least (b)(7)(E) officers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Escort security ratio is at (b)(7)(E) staffing pattern.
7. The detainee remains under constant, direct visual supervision of escorting staff.	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The escorting team Lead Officer would contact the facility, report the situation to the ranking supervisor and follow instructions, as provided.
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 checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Escort officers ensure that detainees: <ul style="list-style-type: none"> <li>Conduct themselves in a manner that does not bring discredit to ICE/DRO.</li> <li>Do not violate federal, state, or local laws.</li> <li>Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants.</li> <li>Do not arrange to visit family or friends unless approved before the trip.</li> <li>Make no unauthorized phone calls.</li> <li>Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return to the facility.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires that the elements of this components be met. ICE staff are subject to random, unannounced search, breathalyzer, and urinalysis testing.
12. The facility routinely subjects a detainee returning from an escorted trip to a search, urinalysis, breathalyzer, etc.	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The Field Office Director is the approving official for all non-medical escorted trips.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Field Office Director usually approve trips of this nature unless he is. Then, the Supervisory Detention Deportation Officer would be responsible for approval.
15. Facility procedures comply with the following ICE Standards: <ul style="list-style-type: none"> <li>Transportation (Land Transportation</li> <li>Restraints applied strictly in accordance with the Use of Force Standard.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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

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

The facility has policy which addresses the requirements of the PBNDS regarding Escorted Trips for Non-Medical Emergencies.

The Field Office Director is specified as the approving authority. However, in his absence, the Supervisory Detention Deportation Officer makes the final decision.

Documentation maintained regarding funeral furloughs reviewed. Also reviewed was documentation of an approved funeral furlough and a critical illness furlough.

(b)(6), (b)(7)c April 7, 2011

Reviewer's Signature / Date

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

### PART 5 – 28. MARRIAGE REQUESTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Field Office Director or Facility Administrator considers detainee marriage requests on a case-by-case basis.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All requests are reviewed by the Deputy Field Office Director.
2. The Field Office Director reviews every marriage request rejected by a Facility Administrator or IGSA. Rejections are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. It is standard practice to require a written request for permission to marry.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All requests for marriage must be submitted in writing by the detainee.
4. The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The Facility Administrator provides a written copy of his or her decision to the detainee and his or her legal representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. When permission is denied, the Facility Administrator states the basis for his or her decision along with instructions on how the detainee can file an appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A letter is issued to the detainee giving the specific reason(s) for the denial of the marriage request and how to file an appeal.
7. The Facility Administrator provides the detainee with a place and time to make wedding arrangements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The marriage arrangements are facilitated by the ICE staff and the Religious Service Coordinator. A location is designated and guidelines are established for how the marriage will take place.
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"/>	

### PART 5 – 28. MARRIAGE REQUESTS

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

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

Detainees are allowed to marry within the facility. A written request from the detainee must be submitted for review and approval. Once approved, the SDDO and the Chaplain assist in facilitating the marriage. If the marriage request is denied, then the detainee is provided documentation as to why a denial occurred. Information is also provided to the detainee regarding the appeal process. During the past year, the facility received eleven requests for marriage and all were approved.

(b)(6), (b)(7)c / April 7, 2011

Reviewer's Signature

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

# **PART 5 - 29. RECREATION**

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Facility provides: <ul style="list-style-type: none"> <li>An indoor recreation program.</li> <li>An outdoor recreation program.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility provides both indoor and outdoor recreational activities. Indoor activities include board games, cards, TV, and reading materials. Outdoor activities consist of soccer, cardio, basketball, and volleyball.
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"/>	A recreational specialist coordinates tournaments and programs for the population.
3. Regular maintenance keeps recreational facilities and equipment in good condition.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The recreational specialist or trained equivalent supervises detainee recreation workers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The recreational specialist or trainee equivalent oversees recreation programs for Special Management Unit and special-needs detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Outside activities are restricted to limited-contact sports.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All outdoor activities are minimal contact sports.
8. Each detainee has the opportunity to participate in daily recreation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Detainees have access to recreation activities outside the housing units for at least one hour daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Staff check all items for damage and condition when equipment is returned.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The recreation specialist inspects all equipment when it is issued and returned.
11. Staff conduct searches of recreation areas before and after use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Security staff conduct searches of all areas where detainees recreate before and after use.
12. Recreation areas are under constant staff supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Supervising staff are equipped with radios.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The facility provides detainees in the SMU at least one hour of outdoor recreation time daily, five times per week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his or her recreation privileges.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Special programs or religious activities are available to detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



### PART 5 - 29. RECREATION

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

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

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

### PART 5 - 29. RECREATION

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

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

The facility provides ample opportunities for the detainee population to recreate. Indoor recreation areas were quiet and clean at the time of the inspection. Detainees can play games, read or watch television. Outside recreation is provided and basketball, baseball, and volleyball games were observed with numerous detainees actively participating.

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

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



# **PART 5 – 30. RELIGIOUS PRACTICES**

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

Components	Meets Standards	Does Not Meet Standards	N/A	Remarks
1. Detainees are allowed to engage in religious services. When available, these services are provided in major languages spoken within the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are allowed to practice their faith in services conducted by the Chaplain and various religious volunteers. Whenever possible, services are conducted in the detainee's primary language.
2. Space is available for detainees to participate in religious services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Most services are provided either in the cafeteria or a multi-purpose room.
3. The facility allows detainees to observe the major "holy days" of their religious faith. • List any exceptions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The facility accommodates recognized holy-day observances by: • Providing special meals, consistent with dietary restrictions. • Honoring fasting requirements. • Facilitating religious services. • Allowing activity restrictions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility provides meals and services for detainees and honors all of the other requirements of this component.
5. Each detainee is allowed religious items in his/her immediate possession; refer to the Funds and Personal Property Standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Items such as prayer beads, religious head coverings, prayer rugs, etc. are allowed in accordance with the Funds and Personal Property Standard.
6. Volunteer's credentials are checked and verified before allowing participation in detainee programs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Members of faiths not represented by clergy may request to present their own services within security allowances.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Detainees in the Special Management Unit may participate in religious practices unless otherwise documented for the safety and security of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility chaplain visits the SHU at least once weekly and sometimes more often.

## **RELIGIOUS PRACTICES**

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

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

The facility has a Religious Services Coordinator who facilitates numerous religious services for the detainee population. Catholic, Protestant, Muslim, and Jehovah Witnesses services are provided. Volunteers also assist in providing religious services. All volunteers must complete a background check and a facility orientation prior to entry into the facility.

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

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

# **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"/>	Except during counts and transfers, housing unit telephones are available approximately seventeen hours per day.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Notification explaining the facilities telephone policy is in the Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility handbook has a very detailed explanation of telephone policies and procedures.
4. Access rules, including updated telephone and consulate number, are posted in housing units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility handbook is available in English, Spanish, and Creole.
6. Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The minimum telephone ratio is exceeded.
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"/>	On the night shift, housing unit officers perform a telephone check and note this in the shift log.
8. Telephones are located a reasonable distance from televisions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The facility administration monitors repair progress and takes appropriate measures to ensure that the required repairs are begun and completed timely.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Detainees are afforded a reasonable degree of privacy for legal phone calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. A procedure exists to assist a detainee who is having trouble placing a confidential call.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The facility provides the detainees with the ability to make non-collect (special access) calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Special Access calls are at no charge to the detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility meets the telephone requirements.
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"/>	

### 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
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"/>	
18. All telephone restrictions are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. The facility has a system for taking and delivering emergency detainee telephone messages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Phone call messages are given to detainees as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Detainees are allowed to return emergency phone calls as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Detainees in disciplinary segregation are allowed phone calls for family emergencies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Detainees in administrative segregation and protective custody are afforded the same telephone privileges as those in general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. When detainee phone calls are monitored, notification is posted by detainee telephones, including a recorded message on the phone system, that phone calls made by the detainees may be monitored. Special Access calls are not monitored.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility telephone system allows detainees to identify the telephone number of their attorneys. Detailed instructions are provided to detainees to ensure that those calls are not subject to monitoring.
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"/>	A detainee in housing unit 4, at the request of the inspector, made calls to the OIG and the Cuba Consular Office. Another detainee in housing unit 11 made calls to the Peru Consular Office and the OIG. All calls were completed successfully and no issues were noted.
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"/>	A logbook review confirmed that weekly telephone service ability reports are being completed by ICE staff.

### 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 complies with the PBNDS regarding Telephone Access.

The facility's detainee telephone policies and procedures are detailed and well explained in the facility handbook as well as via postings near all telephones. All aspects of the standard's requirements are addressed. Test calls were easily completed to the OIG and consular offices using instructions posted near the telephones. Each detainee receives a pin number during the admission process which includes a free three minute phone call. Detainees that were interviewed expressed no complaints regarding the telephones. Throughout the inspection, detainees were observed making use of the telephones in the housing unit and in the outdoor recreation area.

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

April 7, 2011

Reviewer's Signature / Date

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

# **PART 5 – 32. VISITATION**

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

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



### PART 5 – 32. VISITATION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
18. Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Attorneys may request non-contact visits, if desired. There are seven contact visit rooms.
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 visitors are subject to the same search as general visitors, which includes walking through a metal detector.
21. Per the Standard, prior to each visit, legal service providers and assistants are identified.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. SPCs and CDFs shall submit written requests for tours from domestic or international organizations and associated with detention issues to the appropriate Field Office Director for approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Provisions for NGO visitation as stated in the Detention Standards are complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Law enforcement officials, requesting to visit with a detainee, are referred to the ICE Facility Administrator for approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the Facility Administrator or ICE Field Office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### PART 5 – 32. VISITATION

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

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

General visitation is non-contact at this facility. There are thirty non-contact visitation booths, and visits of one hour are permitted under normal circumstances. Detainees must submit a written visitor request by 9 AM, Thursday, if they wish to have a visit on Saturday or Sunday. Two adult visitors are allowed in addition to minors.

Facility policy and the handbook state that detainees may submit special visitation requests to accommodate any special circumstances. Numerous legal visits were observed during the inspection period. No detainees that were asked expressed any concern regarding visitation.

Separate bound log books for general visitation, legal, and official / law enforcement visits are maintained. A review of these logs was conducted, and no issues were noted.

(b)(6), (b)(7)c April 7, 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"/>	The facility has a voluntary work program in place, which is communicated to the detainee population via the orientation video and the facility handbook.
2. Detainee housekeeping meets acceptable levels of neatness, cleanliness and sanitation standards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. At IGSA's detainees are never allowed to work outside the secure perimeter. SPCs and CDFs detainees classified as level 1 have the opportunity to participate in special details outside the secure perimeter under direct supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility does have some classification level 1 detainees who are assigned special outside details under direct supervision by staff.
4. Written procedures govern selection of detainees for the Voluntary Work Program. • The same procedures apply for replacement workers as for "new" workers. • Staff follow written procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Where possible, physically and mentally challenged detainees participate in the program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The facility complies with work-hour requirements for detainees, not exceeding: • Eight hours a day. • Forty hours a week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Detainee volunteers ordinarily work according to a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. If a detainee is removed from a work detail, staff place 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"/>	The duties and responsibilities are communicated to the detainee in writing, when they are given an assignment through the voluntary work program.
10. The voluntary work program meets: • OSHA standards • NFPA standards • ACA standards	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 5 – 33. VOLUNTARY WORK PROGRAM**

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Medical staff screen and formally certifies detainee food service volunteers; <ul style="list-style-type: none"><li>• Before the assignment begins</li><li>• As a matter of written procedure</li></ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical screening forms were observed in the detainee files.
12. Detainees receive safety equipment/ training sufficient for the assignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Proper procedure is followed when an ICE detainee is injured on the job.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 5 – 33. VOLUNTARY WORK PROGRAM**

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

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

The facility has a voluntary work program in which detainees can participate. This is communicated to them upon entry into the facility via the facility handbook and the orientation video. Detainees who are interested in working must submit a request which is reviewed to determine their eligibility. Once selected, detainees are classified to a job and sign the voluntary worksheet form which is placed in their detention file.

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

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

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

# **Section VI JUSTICE**

**34 Detainee Handbook**

**35 Grievance System**

**36 Law Libraries and Legal Material**

**37 Legal Rights Group Presentations**

# **PART 6 - 34. DETAINEE HANDBOOK**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a detainee handbook. Each detainee receives a copy of the local handbook and the ICE National Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility provides each detainee with a local handbook and a National Detainee Handbook.
2. The detainee handbook is written in English and translated into Spanish, and other languages spoken by significant numbers of detainees in that facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The detainee handbook is written in English, Spanish, and Creole.
3. A procedure for requesting interpretive services for essential communication has been developed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This procedure is addressed in the handbook.
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"/>	The facility does provide a supplemental video during the facility orientation.
6. The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The handbook was most recently revised in January 2011.
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"> <li>Personal Items permitted to be retained by the detainee.</li> <li>Initial issue of clothes, bedding and personal hygiene items.</li> <li>How to access care.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The detainee handbook states in clear language basic detainee responsibilities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Responsibilities are addressed in detail in the facility handbook.
10. The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. The handbook states when a medical examination will be conducted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The handbook describes the facility, housing units, dayrooms, In-dorm activities and special management units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The handbook describes: official count times and count procedures, meal times, feeding procedures, procedures for medical or religious diets, smoking policy, clothing exchange schedules and if authorized, clothes washing and drying procedures and expected personal hygiene practices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The handbook addresses all of the requirements of this component.



**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
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"/>	
15. The handbook describes barber hours and hair cutting restrictions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Barbering services are described in the handbook and information is also posted in the housing units.
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"/>	These requirements of this component are addressed in the handbook.
17. The handbook addresses religious programming.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. The handbook states times and procedures for commissary or vending machine usage. (where available)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. The handbook describes the detainee voluntary work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The handbook describes the library location and hours of operation and law library procedures and schedules.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. The handbook describes: attorney and regular visitation hours, policies, and procedures, location of the list of pro bono legal organizations; group legal rights presentations schedule and sign up procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The handbook/supplement provides local ICE contact information.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. The handbook describes the facility contraband policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. The handbook describes the facility visiting hours and schedule and visiting rules and regulations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. The handbook describes the correspondence policy and procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. The handbook describes the detainee disciplinary policy and procedures, including: <ul style="list-style-type: none"> <li>Prohibited acts and severity scale sanctions.</li> <li>Time limits in the Disciplinary Process.</li> <li>Summary of Disciplinary Process.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A comprehensive explanation of the disciplinary process is contained in the facility handbook.

### 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
27. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> <li>• Informal (if used) and formal grievance procedures;</li> <li>• The appeals process;</li> <li>• In CDFs procedures for filing an appeal of a grievance with ICE.</li> <li>• Staff/detainee availability to help during the grievance process.</li> <li>• Guarantee against staff retaliation for filing/pursuing a grievance.</li> <li>• How to file a complaint about officer misconduct with the Department of Homeland Security.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. The handbook describes the medical sick call procedures for general population and segregation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The procedures are described adequately in the handbook.
29. The handbook describes the facility recreation policy including: <ul style="list-style-type: none"> <li>• Outdoor recreation hours.</li> <li>• Indoor recreation hours.</li> <li>• In dorm leisure activities.</li> <li>• Rules for television viewing.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30. The handbook describes the detainee dress code for daily living; and work assignments and the meaning of color-coded uniforms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	These areas are included in the handbook.
31. The handbook specifies the rights and responsibilities of all detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Detainees are required to sign for the handbook to ensure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Orientation materials are provided to illiterate detainees either orally or via audio/video tapes in a language they can understand.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### PART 6 - 34. DETAINEE HANDBOOK

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

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

The facility provides the detainee population with an up-to-date and informational handbook that is available in English, Spanish, and Creole. The handbook describes all items required by the PBNDS and is augmented by an orientation video that is shown continuously during in-processing.

Interpretive services are in place for those detainees that need them. A significant number of staff were observed to be bi-lingual and communicating with detainees.

Detainee interviews confirmed that they knew how to access services within the facility.

The handbook is reviewed annually by a committee and was most recently updated in January 2011.

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

Apri

Reviewer's Signature

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

# **PART 6 – 35. GRIEVANCE SYSTEM**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees are informed about the facility's informal and formal grievance system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has an effective grievance system, which has both an informal and formal system in place to address the detainee's issues and concerns.
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 receive a handbook in a language they understand which includes information about the grievance system. An orientation video is shown to explain the grievance system and process.
3. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> <li>• Informal and formal grievance procedures;</li> <li>• The appeals process and step-by-step procedures;</li> <li>• Staff/detainee availability to help during the grievance process</li> <li>• Guarantee against staff retaliation for filing/pursuing a grievance.</li> <li>• How to file a complaint about officer misconduct with the Department of Justice.</li> <li>• How to file an emergency grievance.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All of the steps noted in this section are included in the facility handbook on pages 40 and 41.
4. Written procedures provide for the informal resolution of oral grievances (Not mandatory). If yes, the detainee has up to five days within which to make his or her concern known to a member of the staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. <ul style="list-style-type: none"> <li>• Detainees may seek help from other detainees or facility staff when preparing a grievance.</li> <li>• Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a grievance coordinator who manages the grievance process. The coordinator is an ICE IEA.
6. Facility has written procedures for identifying and handling a time-sensitive emergency grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Several staff were interviewed and were aware of the emergency grievance process.
8. Staff shall not harass, discipline, punish or otherwise retaliate against a detainee who files a complaint or grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no documented cases of staff harassment during this time period.

### PART 6 – 35. GRIEVANCE SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. Procedures include maintaining a Detainee Grievance Log. <ul style="list-style-type: none"> <li>If not, an alternative acceptable record keeping system is maintained.</li> <li>"Nuisance complains" are identified in the records.</li> <li>For quality control purposes, staff document nuisance complaints received but not filed.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility utilizes a computerized database to track all detainee grievances.
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"/>	If this occurs, facility supervisors counsel the detainee. Detainees are advised, in writing, that future misuse of the grievance process may result in being suspended from using the system for a designated time period.
11. Staff are 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"/>	There have been no cases of staff misconduct during this time period.
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 comply with the requirement to report allegations of officer misconduct to a supervisor or higher-level official in his or her chain of command, and/or to ICE/DRO Office of Professional Responsibility and/or the DHS Inspector General.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. In SPCs and CDFs, when a Detainee does not accept the grievance committee's decision, he/she files an appeal with the ICE Facility Administrator. <ul style="list-style-type: none"> <li>In all facilities written procedures cover detainee appeals and are included in the detainee handbook</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Detainees have five days from the date of the incident or informal-grievance outcome to pursue the matter.

### PART 6 – 35. GRIEVANCE SYSTEM

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

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

The facility has a grievance policy in place which utilizes an informal and formal system. All staff are trained in the grievance process, and detainees are provided information in the detainee handbook and the orientation. A grievance coordinator manages the system. All grievances are documented in an electronic database which records all aspects of the process.

(b)(6), (b)(7)c / April 7, 2011

Reviewer's Signature / Date

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



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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility provides a designated law library for detainee use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The law library is located in the multipurpose building in a dedicated room.
2. The law library contains all materials listed in the "Access to Legal Materials" Standard, Attachment A. The listing of materials is posted in the law library. <ul style="list-style-type: none"> <li>In lieu of/or in addition to the physical law library, ICE detainees have access to the Lexus Nexus electronic law library.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The listing of Attachment A materials is posted and the facility maintains hard bound legal volumes via a subscription service.
3. If the Lexis/Nexis CD-ROM service alternative is used for the publications in Attachment A, the facility provides detainees sufficient: <ul style="list-style-type: none"> <li>Operable computers and printers, in sufficient numbers in order to provide access</li> <li>Photocopiers, and</li> <li>Supplies for both.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The four computers containing LexisNexis were up-to-date and in use by detainees at the time of the inspection. A photocopier was observed in use by detainees who confirmed access to the copier, as needed.
4. The library contains a sufficient number of chairs, is well lit and is reasonably isolated from noisy areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The law library is adequately equipped with typewriters, computers or both and has sufficient supplies for daily use by the detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Two of the four computers print directly to a printer that was observed to be working.
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 are provided diskettes upon request. The disk is stored for the detainee by the law library officer. A supply of disks were observed, as well as disks being used by detainees.
7. The facility subscribes to updating services where applicable and legal materials requiring updates are current.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Outside persons and organizations are permitted to submit published legal material for inclusion in the legal library. Outside published material is forwarded and reviewed by the ICE prior to inclusion.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. There is a designated ICE or facility employee who inspects, updates, and maintain/replace legal material and equipment on a routine basis. The designee properly disposes outdated supplements and replaces damaged or missing material promptly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The recreation specialist is responsible for updating the LexisNexis software. This person recently initiated a log to document the date LexisNexis updates are received and when they are installed.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The law library is available between 8 AM and 4 PM, seven days per week. Detainees may make a request and can use the law library one hour per day. A logbook was reviewed and confirmed that on seventeen occasions this year, detainees have received additional access to 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 initiated and timely pursued. Request for copies of court decisions are accommodated within 3 – 5 business days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A request may be submitted.
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"/>	A detainee clerk is assigned to the law library to assist detainees, upon request. Detainees may also request assistance from other detainees.
13. Staff ensure that illiterate or non-English-speaking detainees without legal representation receive more than access to English-language law books after indicating their need for help.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Detainees housed in Administrative Segregation and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. All denials of access to the law library fully documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no denials of access to the law library during the past year.
17. Facility staff inform ICE Management when a detainee or group of detainees is denied access to the law library or law materials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Indigent detainees are provided with free envelopes and stamps to mail related to legal matters.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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

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

Access to legal materials is provided via LexisNexis. The law library is a dedicated room that is open from 8 AM to 4 PM, seven days a week. There were eight detainees using the law library at the time of the inspection. All the detainees were asked various questions about their access to the law library and if there were any issues concerning available books, LexisNexis or anything else. With respect to the law library, all the detainees expressed satisfaction and did not voice any concerns. The facility complies with the requirements of the standard.

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

/ April 7

Reviewer's Signature /

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

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

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

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

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

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

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

Group Legal Rights presentations are encouraged and held each Tuesday and Wednesday at this facility. Upon request, individual meetings may be held with the presenter after each presentation. Individual consultations were observed following a Group Legal presentation during the first day of the inspection.

Staff advised that the presentations are well received and there have been no issues of concern for the facility during the past year.

(b)(6), (b)(7)c Apr  
Reviewer's Signature

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



## **Section VII ADMINISTRATION & MANAGEMENT**

- 38 Detention Files**
- 39 News Media Interviews and Tours**
- 40 Staff Training**
- 41 Transfer of Detainees**

# **PART 7 – 38. DETENTION FILES**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. A Detention File is created for every new arrival whose stay will exceed 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A detention file is created for every detainee admitted who is expected to be held for 24 hours or more.
2. The detainee Detention File contains either originals or copies of documentation and forms generated during the admissions process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The detainee's Detention File also contains documents generated during the detainee's custody. <ul style="list-style-type: none"> <li>• Special requests</li> <li>• Any G-589s and/or I-77s or IGSA equivalent, closed-out during the detainee's stay</li> <li>• Disciplinary forms/Segregation forms</li> <li>• Grievances, complaints, and the disposition(s) of same</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Completed request forms, disciplinary forms, Common-Fare requests, and other documents were noted in files during a review of detainee 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"/>	
5. The Detention File remains active during the detainee's stay. When the detainee is released from the facility, staff add copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent and other documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The officer closing the Detention File makes a notation that the file is complete and ready to be archived.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Staff make copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Appropriate staff have 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"/>	
9. Electronic record-keeping systems and data are protected from unauthorized access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Unless release of information is required by statute or regulation, a detainee must sign a release-of-information consent form prior to the release of any information, and a copy of the form is maintained in the detainee's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Electronic data on individual detainees is subject to the same Privacy Act regulations as the contents of traditional paper Detention Files and A-files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### PART 7 – 38. DETENTION FILES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. The Facility Administrator or staff designate ensures that necessary equipment and supplies, including copier and copier supplies are available; all equipment is maintained in good working order and that equipment has the capacity to handle the volume of work.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The Detention Operations Supervisor or equivalent can direct certain documents be added to a detainee's detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Archived files are purged after six years by shredding or burning.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inactive file are retained for two years in a secure cage in the property room. The files are then moved to a warehouse outside the secure perimeter. Staff advised that a vendor comes to the warehouse, approximately twice a year, to shred inactive detention files which are older than six years.
15. Field Offices maintains detention files on detainees housed in IGSA Facilities as needed. These files are maintained for a minimum of 18 months.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### PART 7 – 38. DETENTION FILES

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

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

Detention files are either red, orange, or blue to denote security levels of high, medium, or low. Each file has a label attached to identify the specific dates that classification reviews are required. A checklist is used to ensure that the detention file contains all the required documents. A supervisor, in addition to the person initiating the file, signs to confirm that the file meets the requirements. A review of eleven files confirmed that the detention files are well organized and contained the required documents. Two logbooks were reviewed to confirm the accountability of the files.

[Redacted] April 7, 20  
 Reviewer's Signature / Date

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

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

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

Components	Meets Standards	Does Not Meet Standards	N/A	Remarks
1. The ICE/DRO Field Office Director approved all interviews by reporters, other news media representatives, academics and others not covered by the Detention Standard on Visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The AFOD / OIC was interviewed.
2. All personal interviews are documented with the News Interview Authorization form (or equivalent) and filed in the detainee's A-file with a copy in the facility's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The Field Office Director consulted with Headquarters before deciding to allow an interview with a detainee who was the center of a controversy, or special interest, or high profile case.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Signed released forms are obtained and retained in the detainee's a-file from any media representatives who photographed or recorded any detainee in any way that would individually identify him or her.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. All press pools are organized according to the procedures in the Detention Standard. <ul style="list-style-type: none"> <li>A press pool may be established when the Field Office Director and facility administrator determine that the volume of interview requests warrants such action.</li> <li>All media representatives with pending or requested, tours, or visits were notified that, effective immediately and until further notice, all media representatives must comply with the press pool guidelines established by the Field Office Director.</li> <li>All material generated from such a press pool is made available to all news media, without right of first publication or broadcast.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There has been no need to establish a press pool during the last year.

# **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.)

The facility policy and procedures meet the requirements of this standard. The only major media presence was a PBS crew filming a "Frontline" story. That media access was approved in compliance with the requirements of the standard.

(b)(6), (b)(7)c April 7,  
Reviewer's Signature / D

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

# **PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility conducts appropriate orientation, initial training, and annual training for all staff, contractors, and volunteers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility conducts an extensive initial training program for all staff and then provides a minimum of 40 hours of annual refresher training. Contractors and volunteers are also provided initial training and annual training as well.
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"/>	All training instructors have completed a 40 hour training course. This was verified by reviewing the instructors' training files.
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"/>	Doyan Security Services, which is the contract provider of staff, meets with ICE staff to develop the training plan for the year. The plan is then reviewed and approved by the facility administrator.
5. An accurate and complete record is maintained of all formal training activities in: <ul style="list-style-type: none"> <li>Individual training folders,</li> <li>Other training records systems, and/or</li> <li>Electronic systems.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector reviewed (b)(7)(F) training folders of ICE staff and (b)(7)(F) training folders of Doyan Security staff. Files of staff which differing ranks were reviewed to ensure consistency.



# **PART 7 – 40. STAFF TRAINING**

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

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

# **PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>8. Professional and support employees (including contractors) who have regular or daily detainee contact will receive training on the following subjects, at a minimum:</p> <ul style="list-style-type: none"> <li>• Security procedures and regulations</li> <li>• Code of Ethics</li> <li>• Health-related emergencies</li> <li>• Drug-free workplace</li> <li>• Supervision of detainees</li> <li>• Signs of suicide risk and hunger strike</li> <li>• Suicide precautions</li> <li>• Use-of-force regulations and tactics</li> <li>• Report writing</li> <li>• Detainee rules and regulations</li> <li>• Key control</li> <li>• Rights and responsibilities of detainees</li> <li>• Safety procedures</li> <li>• Emergency plan and procedures</li> <li>• Interpersonal relations</li> <li>• Social/cultural lifestyles of the detainee population</li> <li>• Cultural diversity/understanding staff &amp; detainees</li> <li>• Communication skills</li> <li>• Cardiopulmonary resuscitation (CPR)/First aid</li> <li>• Counseling techniques</li> <li>• Sexual harassment/sexual misconduct awareness.</li> <li>• National Detention Standards.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>A review of the training curriculum indicates that all components in this section are included in training provided for all professional and support employees.</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>9. Full-time health care employees receive at least 40 hours of formal orientation before undertaking their assignments. At a minimum, the orientation program includes:</p> <ul style="list-style-type: none"> <li>• The purpose, goals, policies and procedures for the facility and parent agency security and contraband regulations</li> <li>• Key control; appropriate conduct with detainees</li> <li>• Responsibilities and rights of employees</li> <li>• Standard precautions</li> <li>• Occupational exposure</li> <li>• Personal protective equipment</li> <li>• Bio-hazardous waste disposal</li> <li>• Overview of the detention operations.</li> <li>• National Detention Standards.</li> <li>• Medical grievance procedures and protocol.</li> <li>• Requirement for special needs detainees.</li> <li>• Code of Ethics</li> <li>• Drug free workplace</li> <li>• Hostage situations and staff conduct if taken hostage.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>A review of the training curriculum indicates that all areas noted in this component are addressed in training provided for all health care employees.</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"> <li>• Security procedures and regulations</li> <li>• Supervision of detainees</li> <li>• Searches of detainees, housing units, and work areas</li> <li>• Signs of suicide risk, precaution, prevention and intervention.</li> <li>• Code of Ethics</li> <li>• Health-related emergencies</li> <li>• Drug-free workplace</li> <li>• Suicide precautions</li> <li>• Self-defense techniques</li> <li>• Use-of-force regulations and tactics</li> <li>• Report writing</li> <li>• Detainee rules and regulations</li> <li>• Key control</li> <li>• Rights and responsibilities of detainees</li> <li>• Safety procedures</li> <li>• Emergency plans and procedures</li> <li>• Interpersonal relations</li> <li>• Social/cultural lifestyles of the detainee population</li> <li>• Cultural diversity/understanding staff &amp; detainees</li> <li>• Communication skills</li> <li>• Cardiopulmonary resuscitation (CPR)/first aid</li> <li>• Counseling techniques</li> <li>• Sexual abuse/assault awareness</li> <li>• National Detention Standards.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the training curriculum from Doyan Security Services noted that all areas in this component are addressed in training provided for all security personnel.
<p>11. Situation Response Teams (SRTs) receive:</p> <ul style="list-style-type: none"> <li>• Specialized training before undertaking their assignments.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of SRT Team members' files indicated specialized training is conducted.
<p>12. Facility management and supervisory staff receive:</p> <ul style="list-style-type: none"> <li>• Management and Supervisory training</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the Supervisors and Management files indicated that all receive an initial 40 hour training program which is supplemented by ongoing training.



# **PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. <b>(MANDATORY)</b> Personnel authorized to use firearms receive training that covers their use, safety, and care and constraints on their use -- before being assigned to a post involving their possible use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All security and ICE staff in the facility are firearms trained. A review of several staff files indicated that completion of both a written and practical firearms training course was completed. Then, staff are certified to carry a weapon prior to being assigned to an armed post.
14. <b>(MANDATORY)</b> All personnel authorized to use firearms demonstrate competency in their use at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Firearms competency is conducted quarterly.
15. <b>(MANDATORY)</b> Personnel authorized to use chemical agents receive training in the use of chemical agents and in the treatment of individuals exposed to a chemical agent before being assigned to a post involving their possible use.	<input 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"> <li>• Staff, contractors, and volunteers prohibited from:</li> <li>• Using illegal drugs.</li> <li>• Possessing illegal drugs except in the authorized performance of official duties.</li> <li>• Procedures to be used to ensure compliance.</li> <li>• Opportunities available for treatment and/or counseling for drug abuse.</li> <li>• Penalties for violation of the policy.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. New staff are 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"/>	Staff acknowledgement forms were observed in each file reviewed.

# **PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>18. All staff are trained during orientation and annually thereafter, regarding the facility's code of ethics.</p> <p>Typical contents are:</p> <ul style="list-style-type: none"> <li>• Staff, contractors, and volunteers prohibited from:</li> <li>• Using their official positions to secure privileges for themselves or others.</li> <li>• Engaging in activities that constitute a conflict of interest.</li> <li>• Accepting any gift or gratuity from, or engaging in personal business transactions with a detainee or a detainee's immediate family.</li> <li>• Acceptable behavior in the areas of campaigning, lobbying or political activities.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>19. New staff are required to acknowledge in writing that they have reviewed and understand facility work rules, ethics, regulations, conditions of employment, and related documents, and a copy of the signed acknowledgement is maintained in that person's personnel file.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff acknowledgement forms were observed in each file reviewed.
<p>20. <b>(MANDATORY)</b> All staff in frequent contact with detainees is trained at least annually to respond to health-related emergencies within four minutes. The training is provided by a responsible medical authority in cooperation with the facility administrator and includes:</p> <ul style="list-style-type: none"> <li>• Recognizing of signs of potential health emergencies and the required responses.</li> <li>• Administering first aid and cardiopulmonary resuscitation (CPR).</li> <li>• Obtaining emergency medical assistance through the facility plan and its required procedures.</li> <li>• Recognizing signs and symptoms of mental illness, suicide risk, retardation, and chemical dependency.</li> <li>• The facility's established plan and procedures for providing emergency medical care including, when required, the safe and secure transfer of detainees for appropriate hospital or other medical services, including by ambulance when indicated.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Health Services Administrator provided a copy of the medical emergency drill (i.e. man down drill) which addresses each area of 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>21. All staff in frequent contact with detainees are trained at least annually on the facility's Sexual Abuse and Assault Prevention and Intervention Program, to include:</p> <ul style="list-style-type: none"> <li>Understanding that sexual abuse or assault is never an acceptable consequence of detention.</li> <li>Recognizing housing or other situations where sexual abuse or assault may occur.</li> <li>Recognizing the physical, behavioral, and emotional signs of sexual abuse or assault and ways to prevent such occurrences.</li> <li>Knowing how to report knowledge or suspicion of sexual abuse or assault and make intervention referrals in the facility's program.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>22. <b>(MANDATORY)</b> All staff in frequent contact with detainees are trained at least annually on the facility's Suicide Prevention and Intervention Program, to include:</p> <ul style="list-style-type: none"> <li>Identifying the warning signs and symptoms of impending suicidal behavior,</li> <li>Demographic, cultural, and precipitating factors of suicidal behavior,</li> <li>Responding to suicidal and depressed detainees,</li> <li>Communication between correctional and health care personnel,</li> <li>Referral procedures,</li> <li>Housing observation and suicide-watch level procedures, and</li> <li>Follow-up monitoring of detainees who have attempted suicide.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility provides annual training for each staff member in the area of Suicide Prevention and Intervention. This was verified when reviewing staff training files.
<p>23. All staff are trained during orientation and annually to recognize the signs of a hunger strike and on the procedures for referral for medical assessment.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>24. All staff are trained in proper procedures for the care and handling of keys. Orientation training shall be accomplished before staff are issued keys, and key control shall be among the topics covered in annual training. Ordinarily, such training is done by the Security Officer or Key Control Officer.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 7 – 40. STAFF TRAINING**

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

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

**PART 7 – 40. STAFF TRAINING**

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

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

The facility provides training for all staff members in accordance with their duty assignment. All staff complete initial training and annual refresher training thereafter. Staff assigned to carry firearms and chemical agents are certified prior to issuance. This was verified through review of numerous training files. Overall, the facility complies with the PBNDS regarding Staff Training.

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

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

### PART 7 - 41. TRANSFER OF DETAINEES

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

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



### PART 7 - 41. TRANSFER OF DETAINEES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. For medical transfers, transporting officers receive instructions regarding medical issues.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Detainee's funds, valuables and property are returned and transferred with the detainee to his or her new location.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Transfer and documentary procedures outlined in Section C and D are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Indigent detainees unable to make a telephone call at their new location are able to make a telephone call at the government's expense within 12 hours of arrival.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Meals are provided when transfers occur during normally schedule meal times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. An A-File or work folder accompanies the detainee when transferred to a different Field Office or sub-office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. A-Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### PART 7 - 41. TRANSFER OF DETAINEES

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

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

This facility processes nearly a thousand detainees each month. The facility policies, procedures, and practices correspond to and meet the requirements of this standard.

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

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

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**U.S. Immigration and Customs Enforcement  
Office of Detention and Removal**

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**Performance-Based National Detention Standards  
Outcome Measures for Over 72 Hour Facilities**

Krome Service Processing Center  
April 10, 2011

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**Detention Management Division  
801 I Street NW  
Washington, DC 20536**

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## **What is “Performance-Based”?**

Unlike “policy and procedures” that focus solely on what is to be done, performance-based standards start with a focus on the results or outcomes the required procedures are expected to accomplish. Each National Performance-Based Detention Standard (NDS) includes clearly stated Expected Outcomes to reflect the standard’s contribution to the agency’s broader mission and detention goals.

The ***Expected Practices*** in each NDS represent what is to be done to accomplish the ***Expected Outcomes*** that address the Detention Standard Purpose and Scope. Outcome Measures are the indicators examined in order to determine whether (or how well) a facility is addressing the Expected Outcomes. Outcome data, along with the levels of compliance with Expected Practices are considered as part of the totality of conditions in a facility.

The new National Performance-Based National Detention Standards address or incorporate American Correctional Association (ACA) Adult Local Detention Facility Standards, which are the industry benchmark.

## **Worksheet Overview**

Two sets of Detention Review Worksheets are used to assess compliance with the National Performance-Based Detention Standards (NDS) – both of which are derived from the Expected Practices articulated in the Standards themselves:

- The G324A is used for facilities that house detainees for over 72 hours.
- The G324B is used for facilities that house detainees for under 72 hours.

The G324B is for use with under 72 hour facilities and does not contain as much detail on the following NDS as is included in the 324A: 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 324B due to the short term nature of the detention in facilities that are used for 72 hours or less. These sections are now included in the 324B 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 are noted on the worksheets. Mandatory items must be met in order for the facility to receive a satisfactory rating for that standard. These mandatory components typically represent life safety issues. A Does Not Meet rating 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 National Performance-Based Detention Standards. The Outcome Measures Worksheets are to 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 an Outcome Measures database to provide a perpetual record for monitoring facility performance. Detention reviewers 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 of each section of the G324A and G324B Detention Review Worksheets. Worksheets are in a uniform format with six columns with NDS purpose and scope cited at the top of the worksheet. Column 1 contains the NDS standard assessment component. Columns 2-5 are provided for the ratings assigned to each component that is assessed. While there is a column titled N/A or not applicable, the NA rating should be used rarely and only when it applies. The remarks section is provided for reviewers to include details on each rating that may raise a question such as the Does Not Meet Standards or N/A ratings. Reviewers may find it useful to include rationale for Exceeds Standards ratings as well.

A Remarks section is 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 an Outcome Measures 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.

Detention reviewers 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 National Performance-Based Detention Standards because after careful consideration of the standard the assessment process has been determined to be more process-oriented in nature.



## Table of Contents

### PART 1 SAFETY

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

### PART 2 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 3 ORDER

- 19 Disciplinary System

### PART 4 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 5 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 6 JUSTICE

- 34 Detainee Handbook
- 35 Grievance System
- 36 Law Libraries and Legal Material
- 37 Legal Rights Group Presentations

### PART 7 ADMINISTRATION & MANAGEMENT

- 38 Detention Files
- 39 News Media Interviews and Tours
- 40 Staff Training
- 41 Transfer of Detainees

### 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.

#### Outcome Measures Worksheet

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
17	1 (Key) (1C09)	Number of injuries resulting from fires requiring medical treatment	0	
		divided by the average daily population (ADP)	589	0.00
19,21	2 (Key) (1C10)	Number of fires that resulted in property damage	0	
		divided by the average daily population (ADP)	589	0.00
21	3 (Key) (1C08)	Number of hours that facility operations were suspended due to emergencies that were not caused by forces external to the facility	8	
		divided by the number of emergencies.	152	0.05
21	4 (1C01)	Number of emergencies, caused by forces external to the facility, that result in property damage	0	
		divided by the average daily population (ADP)	589	0.00
21	5 (1C11)	Dollar amount of property damage from fire	0	
		divided by the average daily population (ADP)	589	0.00
21	6 (1C12)	Number of code violations cited	0	
		divided by the average daily population (ADP)	589	0.00
21	7 (1C14)	Number of incidents of inventory discrepancies	18	
		divided by the average daily population (ADP)	589	0.03
21	8 (1C13)	Number of incidents involving toxic or caustic materials	0	
		divided by the average daily population (ADP)	589	0.00

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

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.

#### Outcome Measures Worksheet

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
3, 8, 13	1 (Key) (1A01)	Number of worker's compensation claims filed for injuries that resulted from the physical environment.	11	
		divided by the average number of full-time equivalent staff positions	(b)(7)(E)	
1,8,13,18	2 (Key) (1A04)	Number of physical injuries or emotional traumas requiring treatment as a result of the physical environment of the facility	22	
		divided by the average daily population.	589	0.04
27,30,31	3 (Key) (1A06)	Number of sanitation or health-code violations identified by external agencies	0	
		divided by the average daily population (ADP)	589	0.00

## PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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.

3,10,17,36	4 (Key) (1A08)	Number of detainee grievances related to safety or sanitation found in favor of detainees	7	
		divided by the number of detainee's grievances related to safety or sanitation.	9	0.78
9	5 (Key) (1A10)	Number of detainee injuries resulting from fires requiring medical treatment in a 12-month period	0	
		divided by the average daily population (ADP)	589	0.00
19,30,31,33,36,37	6 (1A02)	Number of illnesses requiring medical attention as a result of the physical environment of the facility	0	
		divided by the average daily population	589	0.00
27,30,31	7 (1A07)	Number of health code violations corrected	0	
		divided by the number of health code violations identified.	0	0.00
9	8 (1A09)	Number of fire-code violations corrected	0	
		divided by the number of fire code violations cited by jurisdictional authority.	0	0.00
15	9 (1A11)	Number of detainee injuries (other than by fire) requiring medical treatment	61	
		divided by the average daily population.	589	0.10
9	10 (1A12)	Number of staff injuries resulting from fires requiring medical treatment	0	
		divided by the average daily number of staff in the past 12 months.	(b)(7)(E)	
15	11 (1A13)	Number of staff injuries (other than fire) requiring medical treatment	0	
		divided by the number of fire related incidents during the past 12 months.	0	0.00
15	12 (1A14)	Number of detainee lawsuits related to safety or sanitation found in favor of the detainee	0	
		divided by the number of detainee lawsuits related to safety or sanitation	0	0.00

**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.

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
1	1 (Key) (1B02)	Number of vehicle accidents resulting in injuries requiring medical treatment for any party	0	
		divided by the average daily population (ADP)	589	0.00
12	2	Number of vehicle accidents resulting in property damage	4	
		divided by the total number of trips	256	.02
12	3 (1B03)	Dollar amount of damage from vehicle accidents resulting in property damage	5459	
		divided by the total number accidents	5	1091.80

**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.

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
1	1 (Key)	Total number of detainees who received orientation presentations over the last year	10555	
		divided by the total number of detainees admitted into the facility over the last year	10555	1.00

**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.

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
2	1 (Key) (2A05)	Number of escapes from the facility	0	
		divided by the average daily population.	589	0.00
2,3,4	2	Number of level 1 detainees admitted during the past 12 months	1936	
		divided by total number of detainees admitted during the past 12 months	10555	0.18
2,3,4	3	Number of level 2 detainees admitted during the past 12 months	5149	
		divided by total number of detainees admitted during the past 12 months	10555	0.49
2,3,4	4	Number of level 3 detainees admitted during the past 12 months	3472	
		divided by total number of detainees admitted during the past 12 months	10555	0.33
9,10,11	5	Number of classification appeals won over the last 12 months	1	
		divided by the number of classification appeals filed over the last 12 months	34	0.03

**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.

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
6,7	1 (Key) (2C03)	Number of weapons found in the facility over the past 12 months	13	
		divided by the average daily population.	589	0.02
6,7	2 (Key) (2C04)	Number of controlled substances found in the facility	10	
		divided by the average daily population.	589	0.02
8	3 (2C01)	Number of incident reports involving contraband	34	
		divided by the average daily population.	589	0.06



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

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.

**Outcome Measures Worksheet**

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
13	1 (2A01)	Number of incidents	15	
		divided by the average daily population.	589	0.03
3,4	2	Number of full time employees (FTE) filled	(b)(7)(E)	
		Number of FTE authorized	(b)(7)(E)	
3,4	3	Number of security employees (FTE) filled	(b)(7)(E)	
		Number of security FTE authorized	(b)(7)(E)	

**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.**

**Outcome Measures Worksheet**

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
29, 30, 31	1 (Key)	Number of missing property claims submitted during the past 12 months	21	
		divided by the number of detainees admitted during the past 12 months	10555	0.00
29, 30, 31	2 (Key) (7D03)	Number of grievances filed by detainees regarding their property	53	
		divided by the average daily population.	589	0.09
7	3 (Key) (7D04)	Number of detainee grievances on property decided in favor of detainees	13	
		divided by the total number of detainee grievances on property.	52	0.25

**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.

**Outcome Measures Worksheet**

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
6	1 (Key)	Number of detainees kept in hold rooms beyond the 12 hour time constraint in the past 12 months	638	
		divided by the number of admissions	10555	0.06

**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.

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
21	1 (2D01)	Number of incidents involving keys	83	
		divided by the average daily population.	589	0.14
21	2	Number of incidents involving locks	87	
		divided by the average daily population.	589	0.15

**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.

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
2	1	Number of incident reports involving count issues (delayed counts, inaccurate counts, recounts...)	49	
		divided by the total number of counts.	1482	0.03

**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.

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
		NA		

**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.

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
5	1 (Key)	Number of strip searches conducted over the past 12 months	79	
		divided by number of detainees admitted into the facility over the past 12 months	10555	0.01

### 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.

#### Outcome Measures Worksheet

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
10	1 (Key) (4D11)	Number of confirmed sexual misconduct incidents between staff and detainees	0	
		divided by the average daily population for the past 12 months.	589	0.00
10	2 (Key) (4D12)	Number of confirmed sexual misconduct incidents between volunteers and/or contract personnel and detainees	0	
		divided by the average daily population.	589	0.00
10	3 (4D09)	Number of alleged sexual misconduct incidents between staff and detainees	0	
		divided by the average daily population.	589	0.00
10	4 (4D10)	Number of alleged sexual misconduct incidents between volunteers and/or contract personnel and detainees	2	
		divided by the average daily population.	589	0.00

### 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.

#### Outcome Measures Worksheet

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
47	1	Number of detainees held in SMU beyond 30 days during the past 12 months	14	
		divided by the number of admissions to segregation in the past 12 months	323	0.04
36	2	Number of grievances regarding access to courts found in favor of the detainee during the past 12 months while in SMU	0	
		divided by the number of grievances regarding access to courts during the past 12 months while in SMU	0	0.00
40,41,42	3	Number of grievances regarding access to recreation activities found in favor of the detainee during the past 12 months while in SMU	0	
		divided by the number of grievances regarding access to recreation activities during the past 12 months while in SMU	0	0.00
1	4	Number of incidents in SMU	29	
		divided by the number of admissions to SMU.	325	0.09

**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.

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
1,2,3	1 (Key)	Number of ICE scheduled visits during the last 12 months	48	
		divided by 52 (weeks).	52	0.92
1,2,3	2	Number of ICE unannounced visits during the last 12 months	109	
		divided by 52 (weeks).	52	2.10
5,8,9	3	Number of Staff Detainee Request forms responded to within 72 hours	7390	
		divided total number of Staff Detainee Request forms for the past 12 months	8989	0.82

**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.

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
3	1 (2D02)	Number of incidents involving tools	0	
		divided by the average daily population.	589	0.00
3	2 (2D03)	Number of incidents involving culinary equipment	0	
		divided by the average daily population.	589	0.00
3	3 (2D04)	Number of incidents involving medical equipment and sharps	0	
		divided by the average daily population.	589	0.00

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

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

### Outcome Measures Worksheet

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
7, 28	1 (Key) (2B01)	Number of instances in which force was used	26	
		divided by the average daily population.	589	0.04
7, 9	2 (Key) (2B03)	Number of times that staff uses of force were found to have been inappropriate	0	
		divided by the number of uses of force	26	0.00
16,21	3 (Key) (2B06)	Number of injuries requiring medical treatment resulting from staff use of force	0	
		divided by the average daily population	589	0.00
7, 9	4 (Key) (2B04)	Number of detainee grievances filed alleging inappropriate use of force decided in favor of the detainees	0	
		divided by the number of grievances alleging inappropriate uses of force.	21	0.00



### PART 3 – 19. DISCIPLINARY SYSTEM

This Detention Standard promotes a safe and orderly living environment for detainees by establishing a fair and equitable disciplinary system, requiring detainees to comply with facility rules and regulations, and imposing disciplinary sanctions to those who do not comply.

#### Outcome Measures Worksheet

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
1	1 (Key) (3A01)	Number of rule violation reports	366	
		divided by the average daily population.	589	0.62
1	2 (Key) (3A02)	Number of assaults -- detainee against detainee	103	
		divided by the average daily population	589	0.17
1	3 (Key) (3A02)	Number of assaults -- detainee against staff	20	
		divided by the average daily population	589	0.03
1	4 (Key)	Number of 100 and 200 level violations	308	
		divided by the average daily population.	589	0.52
1	5 (Key)	Number of 300 and 400 level violations	61	
		divided by the average daily population.	589	0.10
6	6	Number of disciplinary violations resolved at the unit level	55	
		divided by the total number of disciplinary violations adjudicated	62	0.89

### 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.

#### Outcome Measures Worksheet

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
3	1 (Key) (4A01)	Number of documented detainee illnesses attributed to food service operations	0	
		divided by the average daily population (ADP)	589	0.00
3	2 (Key) (4A02)	Number of detainee grievances about food service decided in favor of the detainee the past 12 months	6	
		divided by the number of detainee grievances about food service.	18	0.33
52	3 (Key) (4A03)	Number of violations cited by independent authorities for food sanitation in the past 12 months.	0	0.00

**PART 4 – 21. HUNGER STRIKES**

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

**Outcome Measures Worksheet**

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
1	1 (Key)	Number of hunger strikes during past 12 months	22	
		divided by the average daily population	589	0.04
13	2 (Key)	Number of detainees transported to outside facilities as a result of a hunger strike	5	
		divided by the number of hunger strikes during the past 12 months	589	0.01

**PART 4 – 22. MEDICAL CARE**

This Detention Standard ensures that detainees have access to a continuum of prompt, effective health care and emergency care services, so that their health care needs are met in a timely and efficient manner at no cost to detainees.

**Outcome Measures Worksheet**

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
67	1 (Key) (4C12)	Number of detainee deaths due to injuries	0	
		divided by the average daily population.	589	0.00
67	2 (Key) (4C13)	Number of medically expected detainee deaths	0	
		divided by the average daily population.	589	0.00
67	3 (Key) (4C14)	Number of medically unexpected detainee deaths	1	
		divided by the average daily population.	589	0.00
29,67	4 (Key) (4C16)	Number of detainee admissions to off-site hospitals	179	
		divided by the average daily population.	589	0.30
5,29	5 (Key) (4C17)	Number of detainees transported off-site (via an ambulance or correctional vehicle) for treatment of emergency health conditions	301	
		divided by the average daily population.	589	0.51
1	6 (Key) (4C19)	Number of detainee grievances about access to health care services found in favor of the detainee	77	
		divided by the number of detainee grievances about access to healthcare services	132	0.58
1	7 (Key) (4C20)	Number of detainee grievances related to the quality of health care found in favor of detainees	38	
		Divided by the number of detainee grievances related to the quality of health care	81	0.47
2,9	8 (Key) (4D01)	Number of staff with lapsed licensure and/or certification	0	
		divided by the number of licensed or certified staff.	(b)(7)(E)	

23	9	Number of detainees with a positive tuberculin skin test on admission	0	
	(4C01)	divided by the number of admissions.	1055 5	0.00
23	10	Number of detainees diagnosed with active tuberculosis	57	
	(4C02)	divided by the average daily population.	589	0.10
23	11	Number of conversions to a positive tuberculin skin test	0	
	(4C03)	divided by the number of tuberculin skin tests given.	0	0.00
23	12	Number of detainees with a positive tuberculin skin test who complete prophylaxis treatment for tuberculosis	0	
	(4C04)	divided by the number of detainees with a positive tuberculin skin test on prophylaxis treatment for tuberculosis.	0	0.00
44	13	Number of Hepatitis C positive detainees	8	
	(4C05)	divided by the average daily population.	589	0.01
44	14	Number of HIV positive detainees	86	
	(4C06)	divided by the average daily population.	589	0.15

#### 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.

##### Outcome Measures Worksheet

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
1,2	1 (Key)	Detainee grievances regarding detainee access to personal hygiene decided in favor of the detainee	6	
	(4B01)	divided by the average daily population.	589	0.01
1,2	2 (Key)	Number of detainee grievances related to hygiene found in favor of the detainee	6	
	(4B04)	divided by the number of detainee grievances related to hygiene.	11	0.55
7,8	3	Number of detainees diagnosed with hygiene-related conditions (scabies, lice, or fungal infections)	43	
	(4B03)	divided by the average daily population.	589	0.07
7	4	Number of detainee lawsuits related to hygiene found in favor of the detainee.	0	
	(4B05)	divided by the number of detainee lawsuits related to hygiene	0	0.00

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

This Detention Standard protects the health and well-being of immigration detainees by training detention facility staff in effective methods for preventing suicide. More specifically, facility staff will be trained to recognize and identify potential signs, behaviors, or situations which suggest a detainee may be a suicide risk. Facility staff will also be trained to proceed with the appropriate sensitivity, supervision, referral, reporting, medical emergency intervention, and treatment when required to take action in order to prevent or minimize such a risk.

**Outcome Measures Worksheet**

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
3	1 (Key) (4C09)	Number of detainee suicide attempts	6	
		divided by the average daily population	589	0.01
4	2 (Key) (4C10)	Number of detainee suicides	0	
		divided by the average daily population.	589	0.00

**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.

**Outcome Measures Worksheet**

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
		NA		

**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.

**Outcome Measures Worksheet**

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
8,9,10	1 (Key)	Number of detainee grievances regarding correspondence and other mail	12	
		divided by the average daily population	589	0.02
8,9,10	2 (Key)	Number of detainee grievances regarding correspondence and other mail decided in favor of detainees	0	
		divided by the total number of grievances	943	0.00

**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.

**Outcome Measures Worksheet**

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
1	1	Number of escorted trips denied	1	
		Divided by the number of requests received	4	0.20
14	2	Number of detainees who became disruptive during the trip resulting in the trip's termination	0	
		Divided by the number of escorted trips taken	2859	0.00

**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.

**Outcome Measures Worksheet**

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
		NA		

**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.

**Outcome Measures Worksheet**

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
1,6,7,8	1	Average number of detainees participating in recreation per day	589	
		divided by the average daily population	589	1.00
18	2	Number of detainee grievances, regarding: recreation	25	
		divided by the average daily population.	589	0.04
1	3	Number of detainee voluntary transfers (recreation related) approved	0	
		divided by the total number of voluntary transfers (recreation related) requested	0	0.00
1	4	Number of voluntary transfers (recreation related) requested	0	
		divided by the average daily population	589	0.00



**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.

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
1	1 (Key)	Number of detainee grievances regarding religious practices	5	
		divided by the average daily population.	589	0.01
1	2	Number of detainee grievances regarding religious practices decided in favor of detainees	2	
		divided by the total number of grievances filed	943	0.00

**PART 5 – 31. TELEPHONE ACCESS**

This Detention Standard ensures that detainees may maintain ties with their families and others in the community, legal representatives, consulates, courts, and government agencies by providing them reasonable and equitable access to telephone services.

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
27	1	Number of detainee grievances regarding telephone access	16	
		divided by the average daily population.	589	0.03
27	2	Number of detainee grievances regarding telephone access decided in favor of detainees	6	
		divided by the total number of grievances filed	943	0.01

**PART 5 – 32. VISITATION**

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

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
1	1	Number of detainee grievances regarding visitation	6	
		divided by the average daily population.	589	0.01
1	2	Number of detainee grievances regarding visitation decided in favor of detainees	4	
		divided by the total number of grievances filed	943	0.00

**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.

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
8	1	Number of detainee grievances regarding voluntary work program	8	
		divided by the average daily population.	589	0.01
8	2	Number of detainee grievances regarding voluntary work program decided in favor of detainees	2	
		divided by the total number of grievances filed	943	0.00
1,3	3	Average number of detainees participating in the voluntary work program	132	
		divided by the average daily population	589	0.22
1,3	4	Average monthly total wages paid to detainees	4347	
		divided by the average daily population	589	7.38

**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.

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
		NA		

<b>PART 6 – 35. GRIEVANCE SYSTEM</b>				
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.				
Outcome Measures Worksheet				
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
7	1 (Key) (6B01)	Number of detainee grievances regarding discrimination	42	
		divided by the average daily population.	589	0.07
8,11	2 (Key) (6B02)	Number of detainee grievances regarding discrimination resolved in favor of detainees	3	
		divided by the total number of detainee grievances filed regarding discrimination.	42	0.07
8,11	3 (Key) (6B03)	Number of grievances resolved in favor of detainees	143	
		divided by the average daily population.	589	0.24
8,11	4 (Key) (6B04)	Number of grievances resolved in favor of detainees	153	
		divided by the total number of grievances filed.	943	0.16

<b>PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL</b>				
This Detention Standard protects detainees' rights by ensuring their access to courts, counsel, and comprehensive legal materials.				
Outcome Measures Worksheet				
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
18	1	Number of detainee grievances regarding access to court decided in favor of detainees.	1	
		divided by the total number of grievances filed	943	0.00
18	2	Number of detainee grievances, regarding access to court	5	
		divided by the average daily population.	589	0.01

<b>PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS</b>				
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.				
Outcome Measures Worksheet				
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
		NA		

**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.

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
2	1 (7D04)	Number of detainee grievances on records decided in favor of detainees	158	
		divided by the total number of detainee grievances.	943	0.17
2	2 (7D03)	Number of detainee grievances on records	943	
		Divided by the average daily population.	589	1.60

**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.

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
1,3	1 (7F03)	Number of complaints filed by the public/media regarding access to information and/or the facility	0	
		divided by the average daily population.	589	0.00
1,3	2 (7F04)	Number of positive letters/news articles made by the public/media regarding the facility	1	
		divided by the average daily population.	589	0.00

# **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.

## **Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
1	1 (Key) (7B02)	Number of staff who left employment for any reason	(b)(7)(E)	
		divided by the number of full-time equivalent staff positions.	(b)(7)(E)	
4	2	Number of initial training hours provided in the past 12 months	328	
		divided by the number of staff hired in the past 12 months	(b)(7)(E)	
4	3	Number of annual training hours provided in the past 12 months	28420	
		divided by the average number of FTE in the past 12 months	(b)(7)(E)	
26	4	Number of credit hours in course relevant to their facility responsibilities earned by staff participating in higher education	9	
		divided by the number of full-time equivalent staff positions.	(b)(7)(E)	
26	5	Number of professional development events attended by staff	28	
		divided by the number of full-time equivalent staff positions	(b)(7)(E)	

**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.

**Outcome Measures Worksheet**

<b>Worksheet Item #</b>	<b>Outcome Measure</b>	<b>Numerator/Denominator</b>	<b>Value</b>	<b>Outcome Measure</b>
		NA		