

MGT
OF AMERICA, INC.

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

Contract # HSCECR-09-C-00004

ICE National Detention Standards
Compliance Review

Facility: **Northwest Detention Center**
Inspection Date: April 19-21, 2011
Report Date: April 23, 2011

MGT

OF AMERICA, INC.

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April 23, 2011

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

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

SUBJECT: Northwest Detention Center
Annual Detention Review

MGT of America, Inc. performed an annual inspection for compliance with the Immigration and Customs Enforcement (ICE) Performance Based National Detention Standards (PBNDS) at the Northwest Detention Center (NDC) located in Tacoma, Washington, during the period of April 19-21, 2011. This facility is a Contract Detention Facility (CDF) operated by the GEO Group, Inc.

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

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

Type of Review

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

Review Summary

The facility is accredited by the American Correctional Association (ACA), the National Commission on Correctional Health Care (NCCHC), and the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

Standards Compliance

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

<i>2010 Inspection – Pursuant to PBNDS</i>	
Meets Standard	40
Does Not Meet Standard	0
At-Risk	0
Repeat Finding	0
Non-Applicable	1

<i>2011 Inspection – Pursuant to PBNDS</i>	
Meets Standard	40
Does Not Meet Standard	0
At-Risk	0
Repeat Finding	0
Non-Applicable	1

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

<i>2010 Inspection – Pursuant to PBNDS</i>	<i>Mandatory</i>	<i>Non-Mandatory</i>
Meets Component	40	801
Does Not Meet Component	0	4
Non-Applicable	0	44
Repeat Finding	0	0
Total Components	40	849
Percentage of Compliance	100%	99%

<i>2011 Inspection – Pursuant to PBNDS</i>	<i>Mandatory</i>	<i>Non-Mandatory</i>
Meets Component	40	796
Does Not Meet Component	0	4
Non-Applicable	0	49
Repeat Finding	0	0
Total Components	40	849
Percentage of Compliance	100%	99.46%

Outcome Measures

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

LCI Issues and Concerns

There are no standards identified as not meeting the PBNDS.

Recommended Rating and Justification

The LCI recommends the facility receive a rating of "Meets Standards." The facility is in compliance with all 40 applicable standards; one standard (Escorted Trips for Non-Medical Emergencies) is not applicable. The facility meets 100% of the applicable "Mandatory Components" and 99.46% of the applicable non-mandatory components were identified as "Meets Standard."

LCI Assurance Statement

The findings of compliance and non-compliance are accurately and completely recorded on the G-324A Worksheets and are supported by documentation in the inspection file. An out brief was conducted at the facility. In addition to the entire inspection team, the following were present: (b)(6), (b)(7)(c) Warden; (b)(6), (b)(7)(c) Associate Warden; (b)(6), (b)(7)(c) Quality Assurance (QA); Nathalie Asher, ICE Field Office Director (FOD); (b)(6), (b)(7)(c) ICE Deputy FOD; (b)(6), (b)(7)(c) ICE Assistant FOD; (b)(6), (b)(7)(c) Contracting Officers Technical Representative (COTR); as well as numerous other GEO and ICE staff.

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

LCI, MGT

Printed Name/Title

April 23, 2011

Date

Signature: _____

A. Type of Facility Reviewed

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

B. Current Inspection

Type of Inspection
☐ Field Office ☒ HQ Inspection
Date[s] of Facility Review
April 19-21, 2011

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
May 11-13, 2010
Previous Rating ☒ Meets Standards
☐ Superior ☐ Good ☐ Acceptable ☐ Deficient ☐ At-Risk

D. Name and Location of Facility

Name
Northwest Detention Center
Address (Street and Name)
1623 East J Street
City, State and Zip Code
Tacoma, Washington 98421
County
Pierce
Name and Title of Facility Administrator (Warden/OIC/Supt.)
(b)(6), (b)(7)(c) **arden**
Telephone # (Include Area Code)
253-396-1611
Field Office / Sub-Office (List Office with Oversight)
Tukwila, Washington
Distance from Field Office
25 miles

E. ICE Information

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

F. CDF/IGSA Information Only

Contract Number
HSCEDM-10-D-00001
Date of Contract or IGSA
October 24, 2009
Basic Rates per Man-Day
0-1,181: \$99.50; Over 1,181: \$62.10
Other Charges: (If None, Indicate N/A)
Transportation - a fixed rate of \$309,120 per month, plus the cost of fuel for 16 vehicles.

Estimated Man-days Per Year
445,098 (last 12 months)

G. Accreditation Certificates

List all State or National Accreditation[s] received:
ACA; NCCHC; JCAHO
☐ Check box if facility has no accreditation[s]

H. Problems / Complaints (Copies must be attached)

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

I. Facility History

Date Built
April 2004
Date Last Remodeled or Upgraded
May 2010
Date New Construction / Bedspace Added
May 2010
Future Construction Planned
☐ Yes ☒ No Date:
Current Bedspace
1,579
Future Bedspace (# New Beds only)
Number: N/A Date: N/A

J. Total Facility Population

Total Facility Intake for previous 12 months
12,664
Total ICE Mandays for Previous 12 months
445,098

K. Classification Level (ICE SPCs and CDFs Only)

	L-1	L-2	L-3
Adult Male	600	214	87
Adult Female	82	17	0

L. Facility Capacity

	Rated	Operational	Emergency
Adult Male	1,465	1,465	1,465
Adult Female	114	114	134

☐ Facility holds Juveniles Offenders 16 and older as Adults

M. Average Daily Population

	ICE	USMS	Other
Adult Male	1116	N/A	N/A
Adult Female	102	N/A	N/A

N. Facility Staffing Level

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

SIGNIFICANT INCIDENT SUMMARY WORKSHEET

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

<i>Incidents</i>	<i>Description</i>	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault: Offenders on Offenders ¹	Types (Sexual ² , Physical, etc.)	P	P	P	P
	With Weapon	0	0	0	0
	Without Weapon	12	16	3	28
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	P	P	P	P
	With Weapon	0	0	0	0
	Without Weapon	1	4	6	4
Number of Forced Moves, incl. Forced Cell moves ³		0	0	0	0
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		0	0	0	0
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	0
Number of Times Canines Used in Facility		0	0	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	0	0	2
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	19	10	4	20
	# Resolved in favor of Offender/Detainee	2	1	2	5
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	0	0	0	0
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	0	0	0	0
	# Psychiatric Cases referred for Outside Care	0	0	0	0

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

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

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

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

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2012 FOIA03030.016441

Form G-324A SIS (Rev. 9/3/08)

DHS/ICE DETENTION STANDARDS REVIEW SUMMARY REPORT

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

LCI REVIEW ASSURANCE STATEMENT

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

LEAD COMPLIANCE INSPECTOR

Lead Compliance Inspector: (Print Name)	Signature	(b)(6), (b)(7)(c)
(b)(6), (b)(7)(c)		
Title & Duty Location	Date	
LCI, MGT	April	

TEAM MEMBERS

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

Recommended Rating:

- ☒ Meets Standards
☐ Does Not Meet Standards

Comments:

Based upon the system for data collection at this facility, the information reflected on this report covers the period from March 2010 through February 2011. The supporting data was reviewed and is accurately reflected on this form. There have been no reported escapes, attempted escapes, deaths or suicide attempts since the last inspection.

During this inspection, a report of an allegation of sexual assault occurring on 03-03-11 was reviewed. The incident involved an ICE detainee making sexual gestures and comments, exposing himself and allegedly touching the genital area of the other ICE detainee. The incident was referred to the Tacoma Police who have declined to pursue the case any further. It was also handled as a disciplinary matter at the facility. According to facility staff, due to the manner by which statistics are reported this incident will be included in the data used to complete the SIS Worksheet for the 2012 inspection of the facility.

Tasers are not used at this facility.

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



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

5-11-09 update

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

Name Northwest Detention Center
Address (Street and Name) 1623 East J Street
City, State and Zip Code Tacoma, Washington 98421
County Pierce
Name and Title of Chief Executive Officer (Warden/Superintendent/Facility Administrator) (b)(6), (b)(7)(c) Warden
Name of Lead Compliance Inspector (b)(6), (b)(7)(c)
Date[s] of Review From April 19 to April 21, 2011
Type of Review <input checked="" type="checkbox"/> Headquarters <input type="checkbox"/> Operational <input type="checkbox"/> Special Assessment <input type="checkbox"/> Other

Introduction to the G324A Over 72hour Facility Detention Inspection Worksheets

What is "Performance-Based"?

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

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

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

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

Worksheet Overview

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

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

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

The *Outcome Measures Worksheet* section is completely new for the performance-based NDS. The Outcome Measures Worksheets will be completed by facility staff prior to arrival of the review team at the

facility to be reviewed. Ideally, this information will be maintained on a continuous basis by the facility as part of a **key indicators** database to provide a perpetual record for monitoring facility performance. The Reviewer in Charge (RIC) will review facility outcome measures data and provide analysis of the data to describe facility performance and trends.

Worksheet Completion

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

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

Outcome Measures Completion

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

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

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- Detention Files
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- Staff Training
- Transfer of Detainees

Section I SAFETY

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

PART 1 – 1. EMERGENCY PLANS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. No Detainee or detainee groups exercise control or authority over other detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Detainees are protected from: <ul style="list-style-type: none"> Personal abuse Corporal punishment Personal injury Disease Property damage Harassment from other detainees 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Staff are trained to identify signs of detainee unrest. <ul style="list-style-type: none"> What type of training and how often? 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility staff are trained in "Disturbance Management" during initial academy training and annually thereafter.
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"/>	Facility staff is encouraged to routinely disseminate information on facility climate to the shift supervisor and above.
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"/>	
6. Each emergency plan is assigned a number and is strictly accounted for. A list identifying the location of each emergency plan is maintained by the Chief of Security or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. All staff 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"> Confidentiality Accountability (copies and storage locations) Annual review procedures and schedule Revisions 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has 11 copies of the emergency plans. The Warden maintains a list of where the plans are located throughout the facility. The last revision of the emergency plans was dated 04-29-10. The plans are currently in the review process for the 2011 revision. All plans are deemed confidential as stated in Policy 3.2.1, Emergency Response Plan.
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"/>	

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"> Local law enforcement agencies State agencies Federal agencies 	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility has only verbal cooperative contingency plans with local, state and federal agencies rather than the required Memoranda of Understanding (MOU).
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 provided documentation showing they cooperated with the Tacoma Police Department (TPD) on an investigation; however, there have been no mock emergency exercises conducted with other agencies.
14. All staff receive copies of the Facility Hostage policy and procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility staff receives copies of the Hostage policy during their initial academy training.
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"/>	
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"/>	The facility uses the "Interpretalk" telephone system for translation services.
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"/>	The Food Service Department maintains three days' worth of emergency meals for staff and detainees.
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"/>	
20. Written plans include a Staff Work Stoppage procedure. This procedure is available for limited supervisory review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 1 – 1. EMERGENCY PLANS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
21. (MANDATORY) Written procedures cover: <ul style="list-style-type: none">• Work/Food Strike• Fire• Environmental Hazard• Detainee Transportation System Emergency• ICE-wide Lockdown• Staff Work Stoppage• Disturbances• Escapes• Bomb Threats• Adverse Weather• Internal Searches• Facility Evacuation• Detainee Transportation System Plan• Hostages (Internal)• Civil Disturbances	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All bulleted items listed in this component are addressed in detail in the facility's Emergency Plan Manual.
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.)

This facility has a set of comprehensive emergency contingency plans to address all areas required in the PBNDS. However, the facility has verbal cooperative contingency plans with the TPD, Tacoma Fire Department (TFD), the Washington State Police (WSP) and ICE rather than the required MOU.

The facility's emergency plans are produced in a comprehensive manual which allows for ease in locating any specific emergency situation and addresses the procedures necessary to deal with the specific emergency. All staff initially receive training on emergency plans at the training academy, as well as annually thereafter in cycle training.

A review of Policy 3.2.1, Emergency Response Plan, and interviews with staff indicate this facility is meeting the requirements of the PBNDS.

(b)(6), (b)(7)(c) April 2
Reviewer's Signature / D

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

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. (MANDATORY) The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 3.2.4, Flammable, Toxic and Caustic Materials, provides guidance regarding the hazardous materials program. The policy outlines procedures to be followed for the control, handling, storage and use of flammable, toxic and caustic 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"/>	A review of the facility's hazardous chemical storage areas indicates accurate running inventories are being maintained.
3. The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. <ul style="list-style-type: none"> The files list all storage areas, and include a plant diagram and legend. The MSDSs and other information in the files are available to personnel managing the facility's safety program. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's Fire Safety Manager maintains a master index of all hazardous substances and their locations within the facility. This information has also been provided to the TFD.
4. All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures: <ul style="list-style-type: none"> Wear personal protective equipment. Report hazards and spills to the designated official. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The MSDS are readily accessible to staff and detainees in the work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MSDS are available in all work areas as well as housing units.
6. Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> Quantities are limited. Detainees are trained. Staff always supervise detainees using these substances. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Lighting fixtures and electrical equipment are installed in storage rooms and other hazardous areas and meet the National Electrical Code requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. All toxic and caustic materials stored in their original containers in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility utilizes remote dispensing systems for all chemicals.
10. Excess flammables, combustibles, and toxic liquids are disposed of properly in accordance with MSDS.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Staff directly supervise and account for products with methyl alcohol. Staff 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 utilize products containing methyl alcohol.
12. Every employee and detainee using flammable, toxic, or caustic materials receives advanced training, in accordance with OSHA standards, in their use, storage, and disposal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation is on file indicating all staff and detainees using hazardous materials receive advance training regarding the use, storage and disposal of such items.
13. (MANDATORY) The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association (NFPA) and the Occupational Safety and Health Administration (OSHA).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility is in compliance with the applicable codes, standards and regulations of the NFPA and OSHA. The facility's Fire Safety Manager is OSHA-certified.
14. A technically qualified staff member conducts fire and safety inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Fire Safety Manager has 20 years of experience in conducting fire and safety inspections.
15. The Safety Office (or officer) maintains files of inspection reports, including corrective actions taken.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. (MANDATORY) The facility has an approved fire prevention, control, and evacuation plan.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a comprehensive fire prevention, control and evacuation plan. Documentation is on file indicating the plan's approval by the TFD.
17. The plan requires: <ul style="list-style-type: none"> Monthly fire inspections. Fire protection equipment strategically located throughout the facility. Public posting of emergency plan with accessible building/room floor plans. Exit signs and directional arrows. An area-specific exit diagram conspicuously posted in the diagrammed area. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a comprehensive fire prevention, control and evacuation plan in place. All aspects of this component are addressed in the plan.
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"/>	Documentation is on file indicating fire drills are conducted on a quarterly basis.
19. A sanitation program covers barbering operations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The barbershop has the facilities and equipment necessary to meet sanitation requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. The sanitation standards are conspicuously posted in the barbershop.	<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
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"/>	Policy LOP 734, Bio/Hazardous Waste Management, outlines procedures regulating the 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"/>	
24. Standard cleaning practices include: <ul style="list-style-type: none"> Using specified equipment; cleansers; disinfectants and detergents. An established schedule of cleaning and follow-up inspections. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Spill kits are readily available.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility utilizes Steri-Cycle to dispose of infectious/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"/>	
28. Do the methods for handling/disposing of refuse meet all regulatory requirements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. A Licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. <ul style="list-style-type: none"> At least monthly. The pest-control program includes preventive spraying for indigenous insects. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pest control is provided by a contract with Sprague Integrated Pest Management. This licensed pest control company conducts bi-weekly inspections as well as providing preventive spraying.
30. Drinking water and wastewater is routinely tested according to a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Quarterly testing of the water supply is conducted by Water Management Inc.
31. Emergency power generators are tested at least every two weeks. <ul style="list-style-type: none"> Other emergency systems and equipment receive testing at least quarterly. Testing is followed-up with timely corrective actions (repairs and replacements). 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation is on file indicating generators are tested every two weeks. Quarterly testing is provided by an outside contractor.
32. The Facility appears clean and well maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The sanitation level throughout the facility was observed to be maintained at a very high level.
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"/>	Policy LOP 701, Environmental Health and Safety Inspection, establishes criteria for environmental sanitation.

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
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"/>	Documentation is on file indicating medical facility inspections are being conducted on a daily basis and maintained by the Health Service Administrator (HSA). Inspections include noting the condition of items listed in this component.
36. The assigned staff member shall: Conduct special investigations and comprehensive surveys of environmental health conditions, and provide advisory, consultative, inspection, and training services regarding environmental health conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37. The assigned staff member is responsible for developing and implementing policies, procedures, and guidelines for the environmental health program. These guidelines are intended to evaluate and eliminate or control as necessary, sources of injuries and modes of transmission of agents or vectors of communicable diseases.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility Fire Safety Manager is responsible for developing and implementing policies, procedures and guidelines for the environmental health program.
38. Environmental health and safety conditions shall be maintained at a level that meets recognized standards of safety and hygiene, including those from the: <ul style="list-style-type: none"> American Correctional Association, Occupational Safety and Health Administration, Environmental Protection Agency, Food and Drug Administration, National Fire Protection Association's Life Safety Code, and National Center for Disease Control and Prevention. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observations of the environmental health and safety conditions of the facility indicate compliance with all elements listed in this component.

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

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

The facility has established a hazardous materials program for the control, handling, storage and use of flammable, toxic and caustic materials. The facility's Fire Safety Manager oversees the program and ensures a well-run system for the storing, issuing and maintaining accountability of all hazardous materials.

Hazardous chemical storage areas within the facility were inspected and found to be organized and clean. A running inventory of all hazardous materials is maintained in all chemical storage areas. Inventories were checked and found to be accurate in all instances. A review of the facility's personnel training files and curriculum indicates all staff receive instruction regarding the handling of hazardous chemicals. A review of detainee files indicates they too receive training regarding the use of hazardous materials.

Monthly fire inspections are being conducted and documented. All fire suppression, sprinklers, extinguishers, enunciator panels and smoke evacuation systems are tested and certified by outside sources. The latest fire inspection was conducted by the TFD in April of 2011. Fire drills are being conducted and documented on a quarterly basis, which also include the use of emergency key drills. Emergency response times are recorded and show a response time of within four minutes.

The facility has a comprehensive safety and sanitation program in place. All areas of the facility were visited during the inspection, to include: housing units; administration; medical units; laundry; food service; recreation; warehouse; and multipurpose areas. Detailed weekly safety and sanitation inspections are conducted by the facility's Fire Safety Manager, Department Managers, Public Health Service staff as well as annual inspections by the local health and fire departments. Sanitation levels were observed to be maintained at a very high level throughout the facility.

The facility does not use products containing methyl alcohol.

(b)(6), (b)(7)(c) /
Reviewer's Signa

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

PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of records supports that transportation officers comply with applicable local, state and federal motor laws and regulations.
2. Every transporting officer required to drive a commercial size vehicle has a valid Commercial Driver's License (CDL) issued by the state of employment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GEO Transportation Inc. (GTI) uses 30 transportation officers and each transportation officer has a CDL issued by the state of Washington.
3. Supervisors maintain records for each vehicle operated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GTI uses 17 vehicles and the facility has five vehicles. There are records for all vehicles.
4. Documentation indicating annual inspection of vehicles and annual inspection in accordance with state statutes is available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Documentation indicating safety repairs are completed immediately and vehicles are not used until they have been repaired and inspected is available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vehicles are red flagged by the fleet maintenance technician if they are in need of safety repair. Vehicles will not be used again until repairs are made.
6. Officers use a checklist during every vehicle inspection. <ul style="list-style-type: none"> Officers report deficiencies affecting operability. Deficiencies are corrected before the vehicle goes back into service. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This reviewer observed two officers using a checklist for a transportation trip on 04-21-11.
7. Transporting officers: <ul style="list-style-type: none"> Limit driving time to 10 hours in any 15 hour period when transporting detainees. Drive only after eight consecutive off-duty hours. Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours. Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days. During emergency conditions (including bad weather), officers may drive as long as necessary to reach a safe area—exceeding the 10-hour limit. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. (b)(7)(e) officers with valid Commercial Drivers Licenses, (CDL's) required in any vehicle transporting detainees. <ul style="list-style-type: none"> When buses travel in tandem with detainees, there are (b)(7)(e) qualified officers per vehicle. An unaccompanied driver transports an empty vehicle. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. The transporting officer inspects the vehicle before the start of each detail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This reviewer observed a bus being inspected prior to a transportation trip on 04-21-11.
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"/>	Observation was made of a detainee being searched prior to boarding a vehicle for transportation.
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"/>	Policy 3.1.14, Transportation of Detainees, addresses the use of restraint equipment on transportation vehicles.
16. Officers ensure that no one contacts the detainees. • One 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"/>	
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)

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
19. Vehicles have: <div style="border: 1px solid black; height: 100px; width: 100%; margin-top: 10px; text-align: center;">(b)(7)(E)</div>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)(E)
20. The vehicles are clean and sanitary at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Personal property of a detainee transferring to another facility: <ul style="list-style-type: none"> • Is inventoried. • Is inspected. • Accompanies the detainee. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The following contingencies are included in the written procedures for vehicle crews: <ul style="list-style-type: none"> • Attack • Escape • Hostage-taking • Detainee sickness • Detainee death • Vehicle fire • Riot • Traffic accident • Mechanical problems • Natural disasters • Severe weather • Passenger list is not exclusively men or women or minors 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 3.1.14, Transportation of Detainees, addresses all bulleted items listed in this component.

PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

This facility has a comprehensive policy on the transportation of detainees. GTI handles long distance transportation for this facility, while the facility staff may occasionally transport detainees locally to court or to medical appointments. The facility vehicles all receive annual inspections by the state of Washington. GEO transportation officers all have CDL licenses issued by the state of Washington. GEO transportation officers receive semi-annual reviews of driving records by the state of Washington. These officers were found to comply with applicable local, state and federal vehicle laws and regulations.

On 04-21-11, a detainee transport bus departing from the facility was observed. All requirements of the transportation standard were met with no issues identified.

A review of facility transportation policy, vehicle logs, transportation officer files, observation of a transport departing the facility, and interviews with the Transportation Supervisor and other transport staff indicate this facility is meeting the requirements of the PBNDS.

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

(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"/>	Detainees receive a verbal orientation during the booking process which addresses all of the items listed in this component. Detainees sign and receive a receipt indicating they have received the orientation. An orientation film in both English and Spanish is shown daily in the housing units. All detainees receive a handbook available in both English and Spanish.
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"/>	Initial health screenings are performed by 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"/>	ICE provides an information packet on all new commitments (including the I-203, I-216 and I-385) to be used during the initial classification process. All detainees are classified prior to release to general population. If classification cannot be completed, then the individual is segregated from the general population, until such time as the classification can be completed.
4. All new arrivals are searched in accordance with the "Detainee Search" standard. An officer of the same sex as the detainee conducts the search and the search is conducted in an area that affords as much privacy as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 3.1.10, Searches of Detainees, describes the search procedures. Searches are conducted by officers of the same gender in a private area and documented appropriately.
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"/>	Both Policy 3.1.10, Searches of Detainees, and Policy 4.1.1, Detainee Admission Process, require that reasonable suspicion must be established prior to subjecting a detainee to a strip search. While neither policy prohibits the strip searching of a non-criminal detainee, all strip searches must be approved in advance by the Warden. A report must be produced to document all strip searches. There is a revised search policy which has been signed, but not yet distributed prohibiting the strip search of non-criminal detainees.

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"/>	Policy 3.1.17, Contraband Control, explains the process for managing contraband. All detainee property and possessions are inventoried and the detainee is provided with a copy of the inventory. Funds and valuables are safeguarded appropriately.
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"/>	At this facility, a Lost Property Form is produced for all missing property claims and a copy is provided to ICE.
8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. All releases are coordinated with ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All releases from this facility are initiated by ICE.
10. Staff complete paperwork/forms for release as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of detention files for released detainees revealed appropriate paperwork and forms were completed and filed.
11. Each detainee receives a receipt for personal property secured by the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are issued receipts for personal property and a copy is placed in the file.
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"/>	All orientation material is provided in English and Spanish. If required, ICE will provide verbal translations of material for detainees.

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.)

Newly committed detainees are medically screened, appropriately classified and receive an orientation to the facility. Detainee funds and valuables are inventoried, receipts are issued and the items are stored in secure locations.

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

April 21, 2011

Review

(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. IGSA's use an objective classification system or similar system for classifying detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The facility classification system includes: <ul style="list-style-type: none"> Classifying detainees upon arrival. Separating individuals who cannot be classified upon arrival from the general population. The first-line supervisor or designated classification specialist reviews every classification decision. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees are classified upon admission. The Lieutenant responsible for supervising the booking section reviews all classification decisions. If for any reason an individual cannot be classified, s/he is not released to the general population.
3. The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE provides documentation for all newly-admitted detainees which is used during the Classification process.
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"/>	Detainees are classified as Level 1, 2 or 3. Level 1 and 2 detainees may be housed in the same unit; Level 2 and 3 may be housed in the same unit. However, Level 1 and 3 detainees are not housed in the same unit.
6. A detainee's classification-level does not affect his or her recreation opportunities. Detainees recreate with persons of similar classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All housing units have access to recreational areas. Detainees recreate with persons of similar classification designations.
7. Detainee work assignments are based upon classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Level 3 detainees are not allowed to work outside of their living units. Level 1 and 2 detainees are eligible to work at all facility work assignments. Level 1 detainees are allowed to work grounds keeping details outside the secure perimeter of the facility.
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"/>	

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"/>	Classification Officers process appeals and forward them to the Associate Warden for final decision.
10. Classification appeals are resolved w/in 5 business days. Detainees are notified of the outcome within 10 business days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Classification designations may be appealed to the Warden.
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"/>	
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"/>	Uniforms are issued as follows: Level 1 in blue; Level 2 in orange; and Level 3 in red. Females are issued yellow uniforms and their wristbands are either blue or orange (dependent upon their classification level). Level 3 females are not normally held at this facility.

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 classification process provides a system which separates detainees based upon verifiable and documented data. Detainees are housed according to their classification level.

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

Reviewer's Signature

(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 follows written Policy 3.1.17, Contraband Control, for the handling of contraband. Contraband is held in a storage cabinet in the basement of the Administration Building outside the secure perimeter.
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"/>	
4. Altered property is destroyed following documentation and using established procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Altered property is destroyed using procedures found in the contraband policy.
5. Before confiscating religious items, the Facility Administrator or designated investigator contacts a religious authority.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A religious authority is contacted prior to confiscating religious items. However, this is only if the contraband is not considered to be "hard" contraband.
6. Staff follow written procedures when destroying hard contraband that is illegal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility staff follows Policy 3.1.17, Contraband Control, when destroying hard contraband that is illegal.
7. Hard contraband that is illegal (under criminal statutes) is retained and used for official use, e.g. training purposes. <ul style="list-style-type: none"> If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use. Soft Contraband is mailed to a third party or stored in accordance with the Detention Standard on Funds and Personal Property. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	This facility does not have canine units.

PART 2 – 6. CONTRABAND

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

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

This facility has a comprehensive policy on the detection, control and proper disposal of contraband. Detainees are made aware of what items are considered contraband and the rules governing contraband in both the detainee orientation manual and the orientation video. This facility does not use canines for the detection of contraband. The facility logs all contraband confiscated at the facility and properly documents the destruction of contraband.

A review of the contraband policy and contraband logs, as well as interviews with staff and detainees indicate this facility is meeting the requirements of the PBNDS.

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

Reviewer's Signature

(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"/>	
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 detainees are not housed in the same areas of this facility. At least (b)(7)(E) are present in any location, when it is possible that both a female and male detainee may be co-located (e.g., Intake).
3. Comprehensive annual staffing analysis determines staffing needs and plans.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Detainees are not permitted into the control center under any circumstances.
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"/>	The control center at this facility is staffed 24 hours per day. (b)(7)(E) Control Room Operators are assigned to the control center on the day and afternoon shift and one is assigned on the night shift.
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"/>	
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"/>	
12. (b)(7)(E)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 3.1.8, Security Inspections and Procedures, sets guidelines for (b)(7)(E) and any deviations from this must be approved by the Chief of Security (COS). (b)(7)(E)
13. Information about routine procedures, emergency situations, and unusual incidents will be continually recorded in permanent post logs and shift reports.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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 visitors are recorded electronically and in a visitor logbook.

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
16. The facility has a secure, color-coded visitor pass system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses a color-coded visitor pass system consisting of four different colors for different categories of visitors.
17. Officers monitor all vehicular traffic entering and leaving the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: <ul style="list-style-type: none"> The driver's name Company represented Vehicle contents Delivery date and time Date and time out Vehicle license number Name of employee responsible for the vehicle during the facility visit 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's Gate 1 officer maintains the logbook on incoming and departing vehicles into sensitive areas of the facility.
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's written policy on contraband is Policy 3.1.17, Contraband Control.
21. The front entrance has a sally-port type entrance, with interlocking electronic doors or grilles.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The facility's perimeter will ensure that detainees remain within and that public access is denied without proper authorization.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. Written procedures govern searches of detainee housing units and personal areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 3.1.8, Facility Inspections and Procedures, governs searches of detainee housing units and personal areas.
24. Housing area searches occur at irregular times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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 officer posts are located in detainee living areas.
26. There are post orders for every security officer post.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are (7) security posts in the facility.
27. Detainee movement from one area to another area is controlled by staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	

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
29. Every search of the SMU and other housing units is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All searches in the SMU and other housing units are documented and recorded in a bound logbook.
30. The SMU entrance has a sally port.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The entrance into the male SMU has a sally port. The female SMU is located within a female unit and does not have a sally port entrance.
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"> • Posts to be inspected • Required inspection forms • Frequency of inspections • Guidelines for checking security features • Procedures for reporting weak spots, inconsistencies, and other areas needing improvement 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 3.1.8, Facility Inspections and Procedures, addresses all bulleted items listed in this component.
33. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Results of security checks are documented in logbooks assigned to that area.
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"/>	The Associate Warden is responsible for ensuring that corrective action takes place on all recurring issues.
36. Tools being taken into the secure area of the facility are inspected and inventoried before entering and prior to departure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
39. Daily procedures include: <ul style="list-style-type: none"> • Perimeter alarm system tests. • Physical checks of the perimeter fence. • Documenting the results. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)(E) Physical checks of the perimeter fence are conducted (b)(7)(E) (b)(7)(E) All security inspections are logged.
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"/>	The facility's Security Lieutenant is responsible for ensuring the security inspection process covers all areas of the facility.

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
42. The Maintenance Supervisor and Chief of Security or equivalent make monthly fence checks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Both the maintenance supervisor and the COS make monthly fence checks and document those checks.

FACILITY SECURITY AND CONTROL

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

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

This facility has a comprehensive security inspection process in which all security staff are involved. Facility staff inspect security devices, entrances and interior and exterior facets of the facility (b)(7)(E) All security inspections are logged by post.

Male and female detainees are not housed in the same areas of this facility.

A review of policies and procedures logs, as well as interviews with all levels of staff indicates the facility is meeting the requirements of the PBNDS.

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

April 21, 2011

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"/>	Policy 4.1.2, Detainee Personal Property, provides procedures to be followed to ensure detainee's personal property is safeguarded and controlled. Detainee funds and valuables were observed to be separated and stored properly in a secure area. Only a designated supervisor has access to property storage areas.
2. Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Large valuables are secured in the facility's property storage area.
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 documentation indicates (b)(7)(e) officers verify funds and valuables that are received from in-processed detainees. All items are documented into the facility's automated inventory tracking system, GEOtrack.
5. For IGSA and CDFs, Is the facility using a personal property inventory form that meets the ICE standard?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Staff 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"/>	Documentation on file indicates detainees are provided inventory receipts for all items. Copies of the inventory are also filed in the detainee's detention file.
7. Staff forward an arriving detainee's medicine to the medical staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	The facility's Detainee Personal Property policy provides written procedures regarding the return of property to detainees.
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"/>	

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
12. The facility attempts to notify an out-processed detainee that he/she left property in the facility. <ul style="list-style-type: none"> By sending written notice to the detainee's last known address; via certified mail; The notice states that the detainee has 30 days in which to claim the property, after which it will be considered abandoned. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's Detainee Personal Property policy provides procedures to be followed regarding forgotten property. The facility provides written notice via certified mail which informs the detainees that s/he has 30 days to claim the property.
13. Staff obtain a forwarding address from each detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. It is standard procedure for two officers to be present when removing/documenting the removal of funds from a detainee's possession.	<input 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"/>	The facility utilizes an automated detainee funds system to process all funds and valuables. A review of the process indicates all funds and valuables are properly received.
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"/>	All funds and valuable receipts are entered into the facility's automated system and log book.
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"> Detainee funds are, without exception, deposited into the cash box; Every property envelope is sealed. All sealed property envelopes are placed in the safe. Large, valuable property is kept in the secured locked area. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The shift supervisor ensures: funds are deposited into the cash box; property envelopes are sealed; property envelopes secured in a safe; and valuables are secured in a locked area.
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"/>	A GEOtrack-generated property form lists: the detainee name; A-number; Baggage Check/I-77 number; security tie-strap number; property description; date issued; and date returned.
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"/>	

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
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"/>	
24. In SPCs, the Supervisory Immigration Enforcement Agent, accompanied by a detention staff member conducts a comprehensive weekly audit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs; however, weekly audits are being conducted with the SIEA and a facility detention staff member.
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"/>	
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.)

The facility has policies and procedures in place to ensure the safeguarding of detainees' funds, valuables and personal property. Observation of intake processing procedures confirmed detainees and their personal property are searched upon admittance to the facility. During this time, each detainee is informed as to what funds and property may be retained. Detainees' funds, valuables and personal property are inventoried, receipted, stored and safeguarded during their period of detention. The facility utilizes the GEOtrack property form to assist in ensuring the safeguarding, accountability and control of detainee personal property.

Although not required at a CDF, documentation was on hand to indicate the weekly audits are conducted by a detention staff member and an ICE SIEA.

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

Reviewer's Signature

(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"/>	This facility has nine hold rooms and all are situated within the secure perimeter of the facility.
2. The hold rooms are clean, in good repair, well ventilated, well lit, and all activating switches located outside the room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The hold rooms contain sufficient seating for the number of detainees held.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each hold room has concrete benches sufficient for the number of maximum occupants that would be held in them.
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"/>	
6. Detainees are not held in hold rooms for more than 12 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of intake logs indicates detainees are not held in hold rooms for more than 12 hours. The facility has an assigned staff member who notifies the shift supervisor of any detainee still held in a hold room after 10 hours. The shift supervisor then assigns sufficient staff to finish processing the detainee prior to the 12-hour limit.
7. Male and females detainees are segregated from each other at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. If the hold room is not equipped with toilet facilities, an officer is posted within visual or audible range to allow detainees access to such on a regular basis.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Each of the hold rooms in this facility has toilet facilities located in them.
10. All detainees are given a pat down search for weapons or contraband before being placed in the hold room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. When the last detainee has been removed, the hold room is inspected for the following: <ul style="list-style-type: none"> ▪ Cleaning. ▪ Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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
12. (MANDATORY) There is a written evacuation plan. <ul style="list-style-type: none"> There is a designated officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has a written evacuation plan for the hold rooms. The Movement and Response officer (a designated first responder) is designated to remove detainees from hold rooms in case of fire and/or building evacuation or other emergency.
13. An appropriate emergency service is called immediately upon a determination that a medical emergency exists.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Single occupant hold rooms contain a minimum of 37 square feet (7 unencumbered square feet for the detainee, 5 square feet for a combination lavatory/toilet fixture, and 25 square feet for a wheelchair turn-around area). <ul style="list-style-type: none"> If multiple-occupant hold rooms are used, there is an additional 7 unencumbered square feet for each additional detainee. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has one single occupancy hold room and eight multiple occupancy hold rooms, all meeting the square footage requirements.
15. In SPCs designed after 1998 the hold rooms are equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They are: <ul style="list-style-type: none"> Compliant with the American Disabilities Act. Small hold rooms (1 to 14 detainees) have at least one combi-unit. Large hold rooms (15 to 49 detainees) are provided with at least two combi-units. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility is not an SPC. Each hold room is equipped with stainless steel combination lavatory/toilet fixtures with modesty panels.
16. In SPCs designed after 1998 the hold rooms have floor drain(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility is not an SPC. The hold rooms in this facility do have floor drains.
17. In SPCs designed after 1998, the door to the hold room swings outward and the door complies with the specifications outlined in the standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility is not an SPC. The doors to all hold rooms swing outwards and the doors comply with the specifications outlined in the standard.
18. Family units, persons of advanced age (over 70), females with children, and unaccompanied juvenile detainees (under the age of 18) are not placed in hold rooms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility does not house or hold family units or juvenile detainees (under the age of 18). Detainees of advanced age are not placed in the hold rooms.
19. Minors (under 18) are confined apart from adults, except for immediate relatives or guardians.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not house detainees under the age of 18.
20. Each detention facility maintains a detention log (manually or by computer) for each detainee placed in a hold cell. <ul style="list-style-type: none"> The log includes the required information specified in the standard. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility maintains a manual detention log for each detainee placed in a hold cell.

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"> Juveniles, babies and pregnant women have access to snacks, milk or juice. Meal are served to juveniles regardless of time in custody 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Every detainee placed in a hold room is fed a meal regardless of how long they are placed in the room. The facility does not hold nor house juveniles or babies.
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"/>	This facility has one hold room that is utilized for detainees with disabilities.
23. The maximum occupancy for the hold room will be posted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each hold room in this facility has the maximum occupancy posted for that hold room.
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"/>	Smoking is not permitted inside this facility.
26. Officers closely supervise hold rooms through direct supervision, to ensure: <ul style="list-style-type: none"> Continuous auditory monitoring, even when the hold room is not in the officer's direct line of sight, and Visual monitoring at irregular intervals at least every 15 minutes, each time recording in the detention log, the time and officer's printed name and any unusual behavior or complaints under "Comments." Constant surveillance of any detainee exhibiting signs of hostility, depression, or similar behaviors. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

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

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

This facility uses hold rooms to process detainees into and out of the facility. Welfare checks are made every 15 minutes or less and documented in a permanent bound logbook. Detainees are not held in hold rooms for more than 12 hours. The hold rooms in this facility are in direct view of detention staff at all times and are also under video surveillance by control center staff. The nine hold rooms in this facility are clean, in good repair, well ventilated and well lit. Each hold room contains toilet facilities for detainees, a floor drain and has doors that swing outward. This facility does not house or hold juvenile detainees.

A review of logs, policy and PBNDs.

with staff and detainees indicates this facility is meeting the requirements of the

(b)(6), (b)(7)(c) / April 21
Reviewer's Signature / Date

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

PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The security officer[s], or equivalent, has attended an approved locksmith training program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses a maintenance employee as a full-time locksmith. This employee has completed a 120-hour basic locksmithing/key watcher course, in addition to a 40-hour course in instruction in detention equipment technology presented by Southern Folger Detention Equipment Company.
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 initial academy training on keys and locks as well as annual cycle training to all staff.
4. The security officer, or equivalent, maintains inventories of all keys, locks and locking devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The locksmith follows a preventive maintenance program and maintains all necessary documentation.
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"/>	This facility has (b)(7)(C) combination safes. Every safe has the combination changed twice per year by an outside vendor.
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"/>	
11. All worn or discarded keys and locks cut up and properly disposed of.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Worn out keys and locks are cut up by the locksmith and disposed of in the trash compactor outside the secure perimeter of the fence.
12. Padlocks and/or chains are not used on cell doors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to <ul style="list-style-type: none"> Occupational Safety and Environmental Health Manual, Chapter 3 National Fire Protection Association Life Safety Code 101. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
14. The operational key system 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"/>	This facility uses a (b)(7)(e) key system. The key system is located in a secure hallway in the Administration Building before entrance through the sally port at the control center.
15. Procedures in place to ensure that key rings are: <ul style="list-style-type: none"> • Identifiable • Numbers of keys on the ring are cited? • Keys cannot be removed from issued key rings 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All keys in the (b)(7)(e) system are on key rings that are sealed. Additionally, the key ring number is identified and the number of keys on the ring cited.
16. Emergency keys are available for all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency keys are located in the control center of the facility.
17. The facility uses a key accountability system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses the (b)(7)(e) electronic key box system. Staff must have authorization to draw keys from the system by using an individual code assigned by the locksmith. (b)(7)(E)
18. Authorization is necessary to issue any restricted key.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Individual gun lockers are provided. <ul style="list-style-type: none"> • They are located in an area that permits constant officer observation. • In an area that does not allow detainee or public access. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's gun boxes are located in (b)(7)(E) area allows detainee or public access and (b)(7)(E) areas are under constant video surveillance by control center staff.
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"/>	Keys in the (b)(7)(e) system and emergency keys are counted daily. Policy 3.1.12, Key Control, ensures key accountability.
21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> • Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. • When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. • Detainees are not permitted to handle keys assigned to staff. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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
22. Locks and locking devices are continually inspected, maintained, and inventoried.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. Each facility has the position of Security Officer. If not, a staff member appointed the collateral duties of security officer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this facility, the locksmith is assigned the collateral duties of Security Officer.
24. The designated key control officer is the only employee who is authorized to add or remove a key from a ring.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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.)

This facility uses a combination of electronically controlled locks operated by control center staff and conventional keys to access all areas of the facility. The facility uses the (b)(7)(e) electronic key system. Keys are physically inventoried daily. Staff receives initial and ongoing annual training on the control of keys. Interviews with staff indicate they understand the importance of key control in the detention setting.

A review of the key control policy, key inventories, preventive maintenance logs, examination of key rings and interviews with staff and the locksmith indicate this facility is meeting the requirements of the PBNDS.

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

(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"/>	This facility conducts five formal counts per day at the following times: 1 AM; 4:30 AM; 11:30 AM; 4:30 PM; and 10 PM. The facility conducts a face-to-photo count at 4:30 PM every day.
2. Activities cease or are strictly controlled while a formal count is being conducted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainee activities are ceased during formal counts.
3. There is a system for counting each detainee, including those who are outside the housing unit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Formal counts in all units take place simultaneously.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are not allowed to participate in count nor in preparation of count paperwork.
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"/>	
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"/>	Policy 3.1.9, Detainee Counts, addresses informal and emergency counts.
9. The control officer (or other designated position) maintains an "out-count" record of all detainees temporarily out of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Control center staff and intake staff maintain an "out-count" record of all detainees temporarily out of the facility.
10. Security officers and any other staff with responsibilities for conducting counts are provided adequate initial and periodic training in count procedures, and that training is documented in each person's training folder.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Security officers receive initial instruction as to count procedures at the training academy and annually thereafter. Training documentation is contained in each person's training folder.

PART 2 – 11. POPULATION COUNTS

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

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

This facility has a comprehensive population count policy. All security staff receives instruction as to count procedures which is documented in training folders. The facility conducts five formal counts per day, one of which is a face-to-photo count. Informal and emergency counts are addressed in facility policy. Interviews with security staff indicate they understand the importance of detainee counts in the detention setting. The review team observed the 11:30 AM formal count on 04-20-11. The facility had a count of 962 ICE detainees during this count and there were no issues identified during the count process.

A review of the facility count policy and observation of count and interviews with staff indicate this facility is meeting the requirements of the PBNDS.

(b)(6), (b)(7)(c) April 21, 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"/>	This facility has 95 fixed posts.
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"/>	Every post order at this facility is arranged in the required 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"/>	The COS is responsible for keeping all Post Orders current with revisions that take place between reviews.
5. Review, updating, and reissuing of Post Orders occurs regularly and at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility updates and reissues Post Orders annually at a minimum.
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"/>	A Post Order Master file is kept in the COS' office and is available to all staff.
9. Procedures keep Post Orders and logbooks secure from detainees at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Copies of the applicable Post Orders are retained at the post only if secure from detainee access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Supervisors ensure that officers understand the Post Orders, regardless of whether the assignment is temporary, permanent, or due to an emergency.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. In SPCs and CDFs, each time an officer receives a different post assignment, he or she is required to read, sign, and date those Post Orders to indicate he or she has read and understands them.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All security staff must read and sign off on post orders on a monthly basis.
13. Anyone assigned to an armed post qualifies with the post weapons before assuming post duty.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Post Orders for armed posts, and for posts that control access to the institution perimeter, clearly state that: <ul style="list-style-type: none"> Any staff member who is taken hostage is considered to be under duress, and Any order issued by such a person, regardless of his or her position of authority, is to be disregarded. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Post Orders for armed posts provide instructions for escape attempts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All Post Orders for armed posts contain instructions for escape attempts.
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"/>	

PART 2 – 12. POST ORDERS

☒ **Meets Standard**

☐ **Does Not Meet Standard**

☐ **N/A**

☐ **Repeat Finding**

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

This facility has a comprehensive policy on Post Orders, 3.1.4. All security staff must read and sign-off on a post order each time they assume a new post. Additionally, security staff must read and sign-off on post orders on a monthly basis. A review of the Post Orders indicate they are detailed enough to guide the security staff in the procedures, duties and responsibilities of each specific post. Post Orders are reviewed and reissued at a minimum annually and the COS is responsible for keeping all Post Orders current. This facility has fixed posts.

A review of policy, observation of staff signatures on Post Orders and interviews with the COS and other security staff all indicate this facility is meeting the requirements of the PBNDS.

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

Apr

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"/>	Policy 3.1.10, Searches of Detainees, governs the searches of housing areas, work areas and detainees.
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"/>	The search policy states the detainee should not be touched any more than is necessary to conduct a comprehensive search of his person.
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The search policy does not address the issue of the appropriate level of force which may be used during a search. A revised Policy 3.1.10, Searches of Detainees, has been signed but not yet distributed which includes the language necessary to be compliant with this component.
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 search policy requires reasonable suspicion to exist and approval must be granted by the Warden and ICE before a strip search may be conducted.
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Dry cells are not utilized at this facility for the detection of contraband.
9. Contraband that may be evidence in connection with a violation of a criminal statute is preserved, inventoried, controlled, and stored so as to maintain and document the chain of custody.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Canines are not used in the presence of detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The search policy requires all canine searches to be coordinated by the Warden or Associate Warden with ICE. Detainees must be removed from the area to be searched.

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 a search policy which enhances facility security by establishing procedures to detect, control and properly dispose of contraband. The current policy does not contain language that staff will avoid unnecessary force during the search of a detainee; however, there is a revised policy which has been drafted and will soon be distributed for implementation which includes the required language.

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

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"/>	Policy 3.1.1, Sexual Abuse/Assault Prevention and Intervention Program, addresses this component. The Associate Warden has been assigned the overall responsibility for the program.
2. For SPCs and CDFs, the written policy and procedure has been approved by the Field Office Director.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The FOD has approved current policy and procedure.
3. Tracking statistics and reports are readily available for review by the inspectors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Associate Warden's Administrative Assistant is responsible for tracking statistics.
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"/>	Both medical and security staff receive training during orientation and annually thereafter as documented in personnel files and on training rosters.
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"/>	Policy LOP 817, Sexual Abuse and Assault Prevention and Intervention, addresses this component. Detainees are informed about the program during orientation and via the detainee handbook.
6. The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Sexual Assault Awareness notice is posted on housing bulletin boards as observed by this inspector.
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 Sexual Assault Awareness Information brochure is also available for detainees.
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"/>	Detainees are screened upon arrival and, if indicated, evaluated by a mental health professional or other qualified provider before being housed.
9. All incidents of sexual abuse or assault by a detainee on a detainee have been documented in the past year.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There have been no incidents of sexual abuse or assault by a detainee on a detainee during the reporting period. (NOTE: On 03-03-11 a sexual assault by an ICE detainee occurred; however, in keeping with the manner in which the facility presents their statistical data, this incident will be reported in next year's review.)
10. All incidents or allegations of sexual abuse or assault by staff on a detainee have been documented in the past year.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There have been no incidents of sexual abuse or assault by a staff member on a detainee during the reporting period.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. There is prompt and effective intervention when any detainee is sexually abused or assaulted and policy and procedures for required chain-of-command reporting.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Sexual Abuse and Assault Prevention and Intervention protocol addresses this component.
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"/>	The Sexual Abuse and Assault Prevention and Intervention protocol and the Sexual Abuse/Assault Prevention and Intervention Program address this component. Appropriate local, state or federal authorities will be contacted by the Warden.
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"/>	Appropriate local, state or federal authorities are contacted by the Warden.
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"/>	The Sexual Abuse and Assault Prevention and Intervention protocol addresses this component. Detainees may be referred to the Tacoma General Hospital for clinical evaluation and follow up.
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"/>	Both general file and investigative file records are retained indefinitely.

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.)

All medical and security staff receives initial and annual training on sexual abuse and assault prevention and intervention. Detainees receive substantive information during orientation, in the detainee handbook and as posted on the housing bulletin boards.

There was one incidents of sexual abuse or assault reported on 03-03-11; however, this will be applied to next year's reporting period.

(b)(6), (b)(7)(c) / Apr
Reviewer's Signat

(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"/>	Policy 3.4.1, Special Management Unit (SMU), Administrative Segregation, Disciplinary Segregation, details the operation of the SMUs in this facility.
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. (MANDATORY) Health care personnel are immediately informed when a detainee is admitted to an SMU to provide assessment and review as indicated by health care protocols.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility health care personnel are contacted immediately when a detainee is placed into either Administrative or Disciplinary segregation. An assessment and review is conducted within 24 hours of a detainee's placement into 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"/>	The SMU in this facility has a sally port entrance into the unit.
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"/>	Each cell in the SMU has a maximum occupancy of two detainees.
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"/>	This facility maintains a permanent bound log to record pertinent information on detainees. All staff entering the unit must sign the log indicating their entrance into the unit and the reason for the visit.
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"/>	

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>10. In SPCs and CDFs, a separate log is maintained in the SMU that all persons visiting the unit must sign and record:</p> <ul style="list-style-type: none"> The time and date of the visit, and Any unusual activity or behavior of an individual detainee, with a follow-up memorandum sent through the facility administrator to the detainee's file. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>11. A Special Management Housing Unit Record is maintained on each detainee in an SMU:</p> <ul style="list-style-type: none"> In SPCs form I-888 (Special Management Housing Unit Record) is prepared immediately upon the detainee's placement in the SMU. In CDFs and IGSA facilities form I-888 or a comparable form is used. <p>In SPCs and CDFs:</p> <ul style="list-style-type: none"> By the end of each shift, the special housing unit officer records: <ul style="list-style-type: none"> Whether the detainee ate, showered, exercised, and took any medication, and Any additional information, for example, if the detainee has a medical condition, has exhibited suicidal or assaultive behavior, etc. When a health care provider visits an SMU detainee, he or she signs that individual's record, and the housing officer initials the record after all medical visits are completed and no later than the end of the shift. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>This facility uses a comparable form to the Form I-888. All logs are completed prior to the end of each shift indicating the activities of each detainee. Health care staff signs detainees' individual logs when the visits are concluded.</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>14. There are written policy and procedures concerning privileges detainees may have in each type of segregation.</p> <p>(In Administrative Segregation, detainees generally receive the same general privileges as detainees in the general population, as is consistent with available resources and safety and security considerations.)</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Detainees in Administrative Segregation receive the same privileges as those in general population. Detainees in Disciplinary Segregation receive less privileges than those in general population (e.g., television privileges and family telephone calls).</p>

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
15. Detainees in Administrative Segregation are provided opportunities to spend time outside their cells (over and above the required recreation periods), for such activities as socializing, watching TV, and playing board games and may be assigned to work details (for example, as orderlies in the SMU).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in Administrative Segregation are allowed to work as orderlies cleaning day room areas and showers on the evening shift.
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"/>	This facility uses a scanning device to record 30-minute welfare checks on every detainee assigned to the SMU. The scanning device electronically records the scan into a computer program. The device allows detention staff to input information on a detainee's behavior.
17. The shift supervisor sees each segregated detainee daily, including weekends and holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The shift supervisor signs each individual detainee segregation record for every visit.
18. The facility administrator (or designee) visits each SMU daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility Warden, Associate Warden or COS conduct the SMU daily checks.
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"/>	Detainees in the SMU are provided the same meals as those in general population.
21. Detainees in SMUs may shave and shower three times weekly and receive other basic services (laundry, hair care, barbering, clothing, bedding, linen) on the same basis as the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	There have been no such denials of clothing, bedding or linens within the last reporting period.
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"/>	

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
24. Detainees in an SMU ordinarily retain visiting privileges.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the SMU retain normal visiting privileges unless they cause an issue during a visit, in which case normal visits may be restricted.
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"/>	There have been no visit restrictions during the last reporting period.
26. Adequate documentation was generated, for any restricted or disallowed general visitation for a detainee in Administrative Segregation status because the detainee was charged with, or committed, a prohibited act having to do with visiting guidelines or otherwise acted in a way that indicated the detainee would be a threat to the orderly operation or security of the visiting room in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no visit restrictions for prohibited acts during a visit within the last reporting period.
27. Under no circumstances is a detainee permitted to participate in general visitation while in restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. In SPCs and CDFs, detainees in protective custody and violent and disruptive detainees are not permitted to use the visitation room during normal visitation hours.	<input 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"/>	Detainees in the SMU have not been denied legal visits within the last reporting period.
31. There are policy and procedures for a situation where special security precautions for legal visitation have to be implemented and for advising legal service providers and assistants prior to their visits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Detainees in SMUs are allowed visits by members of the clergy, upon request; unless it is determined a visit presents a risk to safety, security, or orderly operations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
34. Detainees in SMUs have access to legal materials, in accordance with the Detention Standard on Law Libraries and Legal Material. Detainees are permitted to retain a reasonable amount of personal legal material in the SMU, provided it does not create a safety, security and/or sanitation hazard. Detainee requests for access to legal material in their personal property are accommodated as soon as possible and always within 24 hours of a detainee's request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are allowed to retain legal materials. Detainees are given a laundry basket and may keep the amount of legal materials that can be contained in the basket. Detainees' requests for legal material are always accommodated within 24 hours.
35. Detainees in Administrative Segregation or Disciplinary Segregation have the same law library access as the general population, unless compelling and documented security concerns require limitations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the SMU are required to submit a request slip to access the law library. Detainees are taken separately to the law library when a request is made.
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"> Supported by compelling security concerns, For the shortest period required for security, and Fully documented in the SMU housing logbook. ICE/DRO is notified every time law library access is denied. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has not denied law library access for any SMU detainee within the last reporting period.
38. Recreation for detainees in the SMU is separate from the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has a recreation yard attached adjacent to the SMU for use by SMU detainees.
39. The facility has policy and procedures to ensure detainees who must be kept apart never participate in activities in the same location at the same time. (For example, recreation for detainees in protective custody is separated from other detainees.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40. Detainees in the SMU are offered at least one hour of recreation per day, scheduled at a reasonable time, at least five days per week. Where cover is not provided to mitigate inclement weather, detainees are provided weather-appropriate equipment and attire.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are allowed one hour of recreation five days per week. Detainees have access to outside recreation where partial cover is available from inclement weather.

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>41. The recreation privilege is denied or suspended only if it would unreasonably endanger safety or security.</p> <p>Ordinarily, a detainee is denied recreation privileges only with the facility administrator's written authorization that documents why the detainee poses an unreasonable risk even when recreating alone. For an immediate safety or security situation, the shift supervisor may verbally authorize denial of an instance of recreation.</p> <p>When a detainee in an SMU is deprived of recreation (or any usual authorized items or activity), a report of the action is forwarded to the facility administrator.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>42. The case of a detainee denied recreation privileges is reviewed at least once each week, as part of the reviews required for all detainees in SMU status. The reviewer documents whether the detainee continues to pose a threat to self, others, or facility security and, if so, why.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>43. Denial of recreation privileges for more than 15 days requires the concurrence of the facility administrator and the health authority. It is expected that such denials shall rarely occur, and only in extreme circumstances.</p> <p>The facility notifies ICE/DRO when a detainee is denied recreation privileges for more than 15 days.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>44. Ordinarily, detainees in Administrative Segregation have telephone access similar to detainees in the general population, in a manner consistent with the special security and safety requirements of an SMU. Detainees in Disciplinary Segregation may be restricted from using telephones to make general calls as part of the disciplinary process; however, ordinarily, they are permitted to make direct and/or free and legal calls as described in the Detention Standard on Telephone Access, except for compelling and documented reasons of safety, security, and good order.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Detainees in Administrative Segregation have the same privileges as those in general population. Detainees in Disciplinary Segregation have limited telephone privileges; however, they are allowed to make legal calls.</p>

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>45. Ordinarily, a written order is completed and approved by a supervisor before a detainee is placed in Administrative Segregation. If exigent circumstances make that impracticable, the order is prepared as soon as possible.</p> <p>A copy of the order is given to the detainee within 24 hours, unless delivery would jeopardize the safety, security, or orderly operation of the facility.</p> <p>If the segregation is for protective custody, the order states whether the detainee requested the segregation and whether the detainee requests a hearing.</p> <p>The order remains on file in the SMU until the detainee is released from the SMU, at which point the releasing officer records the date and time of release on the order and forwards it to the chief of security or supervisor for the detainee's detention file.</p> <p>(An Administrative Segregation Order is not required for a detainee awaiting removal, release, or transfer within 24 hours.)</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>This facility requires a written order to place a detainee in Administrative Segregation. The detainee is given a copy of the order and a copy is placed in his or her detention file. The order does state whether or not the detainee requests the placement. The order remains on file in the SMU until the detainee is released.</p>
<p>46. There are implemented written procedures for the regular review of all detainees in Administrative Segregation.</p> <p>A supervisor conducts a review within 72 hours of the detainee's placement in Administrative Segregation to determine whether segregation is still warranted. The review includes an interview with the detainee, and a written record is made of the decision and the justification. In SPCs and CDFs, the Administrative Segregation Review Form (I-885) is used.</p> <p>If a detainee is segregated for the detainee's protection, but not at the detainee's request, continued detention requires the authorizing signature of the facility administrator or assistant facility administrator on the I-885.</p> <p>When a detainee has spent seven days in Administrative Segregation, and every week thereafter for the first 60 days and at least every 30 days thereafter, a supervisor conducts a similar review, including an interview with the detainee, and documents the decision and justification.</p> <p>A reviewing authority who concludes a detainee should be removed from Administrative Segregation, submits that recommendation to the facility administrator (or designee) for approval.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The facility Captain conducts a review within 72 hours of a detainee's placement into the SMU. A facility Lieutenant conducts a review on detainees every seven days thereafter, as long as they remain in the SMU. Each review includes a face-to-face interview with the detainee. The detainee is given a copy of the decision and justification after each review.</p>

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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"/>	
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"/>	Detainees in Administrative Segregation after seven consecutive days may appeal to the Warden the conclusions and recommendations of any review conducted. The detainee may use any standard form of written communication to make the appeal.
49. If a detainee has been in Administrative Segregation for more than 30 days and objects to this status, the facility administrator reviews the case to determine whether that status should continue, taking into account the views of the detainee. A written record is made of the decision and the justification. A similar review is done every 30 days thereafter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The review process is explained in Policy 3.4.1, SMU. The time frames in the policy are consistent with those required by this component.
50. When a detainee has been held in Administrative Segregation for more than 30 days, the facility administrator notifies the Field Office Director, who notifies the ICE/DRO Deputy Assistant Director, Detention Management Division.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The AFOD has an office at this facility. The information of any detainee held more than 30 days is forwarded to the AFOD and then up the chain of command to the ICE Detention and Removal Office (DRO) Deputy Assistant Director, Detention Management Division.
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 maximum sanction in Disciplinary Segregation for a single offense at this facility is 60 days.

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
53. After the first 30 days in Disciplinary Segregation, the facility administrator sends a written justification to the Field Office Director, who may decide to transfer the detainee to a facility where he or she could be placed in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
54. Before a detainee is placed in Disciplinary Segregation, a written order is completed and signed by the chair of the IDP (or equivalent). A copy is given to the detainee within 24 hours (unless delivery would jeopardize safety, security, or the orderly operation of the facility). The IDP chairman (or equivalent) prepares the Disciplinary Segregation Order (I-883 or equivalent), detailing the reasons for Disciplinary Segregation and attaching all relevant documentation. When the detainee is released from the SMU, the releasing officer records the date and time of release on the Disciplinary Segregation Order, and forwards the completed order to the chief of security or supervisor for insertion into the detainee's detention file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of detention files revealed the appropriate documentation was included and prepared in a timely fashion.
55. The facility has implemented written procedures for the regular review of all Disciplinary Segregation cases. 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). 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. 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. All review documents are placed in the detainee's detention file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 3.4.1 addresses all of the items listed in this component.

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.)*

Detainees placed in Administrative or Disciplinary Segregation status are housed in the SMU at this facility. Administrative Segregation is used as a non-punitive form of separation from the general population and is used when a detainee poses a threat to self, staff, other detainees or property or the secure and orderly operation of the facility. Disciplinary Segregation is used as a form of separation from the general population when a detainee is found guilty of a rule infraction and is placed in this status by a disciplinary panel. The facility maintains a clean, safe and secure environment for detainees housed in the SMU.

The facility conducts regular reviews on all detainees placed in Administrative and Disciplinary Segregation status. Detainees in the SMU receive privileges as required by the standard. This facility provides detainees in Administrative Segregation an opportunity to spend time outside their cells (over and above the required recreation periods) by assigning them to work details to clean the dayroom area and showers in the SMU.

The facility was found to be meeting the requirements of the PBNDS, as confirmed through: a review of facility logs; Policy 3.4.1, SMU; and interviews with staff and detainees.

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

Reviewer's Signature

(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"/>	
2. Detention Staff and Deportation Staff conduct scheduled weekly visits with detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detention and Deportation staff conduct scheduled visits in the units weekly.
3. Scheduled visits are posted in ICE/DRO detainee housing areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE/DRO visits are scheduled for Wednesday each week, and those scheduled visits are a posted in the unit.
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"/>	Detainee Request Forms are provided by the unit officer upon request of a detainee.
6. The facility treats detainee correspondence to ICE/DRO staff as Special Correspondence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. A secure box is located in an accessible location for detainee's to place their Detainee Request Forms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A secure box is located in each unit. ICE staff has the key to the secure box and retrieve request forms daily.
8. Only ICE staff are able to retrieve the contents of the secure box containing Detainee Request Forms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. ICE/DRO staff 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"/>	A review of the log revealed requests are being responded to within the appropriate time frames. Most responses were delivered within 24 hours of the request having been received.
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"/>	Information is documented in the unit log book, and a report is provided daily to the Security Lieutenant. Officers on the 11 PM to 7 AM shift are responsible for checking the telephones and submitting a report.

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.)

Based upon a review of documentation, as well as interviews of detainees, ICE and GEO staff, reveal communication between staff and detainees at this facility meets the requirements of the standard. During detainee interviews there were no complaints or issues raised regarding the quality and the level of communication between detainees and staff. Detainees had access to Detainee Request Forms, which they were able to place in locked mail boxes upon completion. A review of the log indicated Detainee Request Forms were being addressed within the timeframes required by the standard.

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

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. (MANDATORY) There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The COS is responsible for developing a tool control procedure and an inspection system to ensure accountability.
2. If the warehouse is located outside the secure perimeter, the warehouse receives all tool deliveries. If the warehouse is located inside the secure perimeter the facility administrator shall develop site-specific procedures, for example; storing tools at the rear sally port until picked up and receipted by the tool control officer. The tool control officer immediately places certain tools (band saw blades, files and all restricted tools) in secure storage.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The maintenance department is located outside the secure perimeter of the main facility building and receives all tool deliveries. The maintenance supervisor places all tool deliveries in a secure area in the maintenance building until the tools can be processed (etched and added to tool inventories).
3. (MANDATORY) The use of tools, keys, medical equipment, and culinary equipment is controlled.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The use of tools, keys, medical equipment and culinary equipment is well controlled within this facility. Policy 3.1.13, Control, Storage, and Accountability of Tools and Equipment, establishes the procedures for tool control.
4. A metal or plastic chit is taken in exchange for all tools issued, and when a tool is issued from a shadow board the receipt chit shall be visible on the shadow board.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses metal chits in exchange for all tools issued at this facility and when tools are checked out they are placed on the tool shadow board.
5. Tool inventories are required for: <ul style="list-style-type: none"> • Facility Maintenance Department • Medical Department • Food Service Department • Electronics Shop • Recreation Department • Armory 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility maintains tool inventories for: Food Service; the Lock Shop; Barber Shop; Segregation (Life Knife and scissors); Armory; Intake; Master Control; and the Property area.
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"/>	
7. The facility has a policy for the regular inventory of all tools. <ul style="list-style-type: none"> • The policy sets minimum time lines for physical inventory and all necessary documentation. • ICE facilities use AMIS bar code labels when required. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2-17. TOOL CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. The facility has a tool classification system. Tools are classified according to: <ul style="list-style-type: none"> Restricted (dangerous/hazardous) Non Restricted (non-hazardous). 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tools in the facility are classified as restricted and non-restricted. The facility further classifies restricted tools into two categories: "AA" for restricted tools that only staff may use; and "A" restricted tools that detainees may use only under direct staff supervision.
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"/>	
11. The facility has an approved tool storage system. <ul style="list-style-type: none"> The system ensures that all stored tools are accountable. Tools are stored on shadow boards in which the shadows resemble the tool. Shadow boards have a white background. Restricted tools are shadowed in red. Non-restricted tools are shadowed in black. Commonly used tools (tools that can be mounted) are stored in such a way that missing tools are readily noticed. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
15. Each facility has procedures for the issuance of tools to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 3.1.13, Control, Storage, and Accountability of Tools and Equipment, details procedures for issuance of tools to staff and detainees.
16. There are policies and procedures to address the issue of lost tools. The policy and procedures include: <ul style="list-style-type: none"> Verbal and written notification. Procedures for detainee access. Necessary documentation/review for all incidents of lost tools. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Broken and worn out tools are disposed of by the tool control officer in a trash compactor outside the secure perimeter of the facility fence.

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
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"/>	
20. Scissors used for in-processing detainees are tethered to the furniture (e.g. table, counter, etc.) where they are used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Scissors in all areas of the facility are tethered to the desk in areas where they are used.

PART 2-17. TOOL CONTROL

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

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

Policy 3.1.13, Control, Storage and Accountability of Tools and Equipment, is a comprehensive tool control policy. The COS is responsible for developing a tool control procedure and an inspection system to ensure accountability. The facility classifies tools as restricted and non-restricted; however, further classifies restricted tools as "AA" (tools that can be used only by facility staff) and "A" (tools that may be used by detainees only under direct supervision). All tools are stored on white-background shadow boards, with restricted tools shadowed in red and non-restricted tools shadowed in black. All tools stored in every area of the facility have a tool inventory posted conspicuously in the area where tools are stored. The facility tool policy indicates minimum tool inventories for each area and all tool inventories are sent to the Maintenance Supervisor for filing.

A review of tool inventories, the tool control policy and interviews with staff indicate the facility is meeting the requirements of the PBNDS. Staff fully understands the importance of good tool control and accountability in the detention setting.

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

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

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. (MANDATORY) The facility has a Use of Force Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 3.1.7, UOF Continuum and Restraints, outlines UOF procedures at this facility.
2. Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, policy requires that staff must try to resolve the situation without resorting to force.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The facility subscribes to the prescribed Confrontation Avoidance Procedures. • Ranking detention official, health professional, and others confer before every calculated use of force.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Warden, ICE personnel, Shift Supervisor, a designated Health Services professional and facility Duty Officer meet to confer before every calculated UOF.
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"/>	The facility uses a (b)(7)(E) for forcibly moving a detainee. The team uses the UOF Team Technique. The team normally consists (b)(7)(E) members
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"/>	(b)(7)(E) members receive 40 hours of initial specialized training and an additional eight hours of specialized training monthly.
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"/>	All UOF incidents are documented and reviewed by Administrative staff and ICE staff. All calculated UOF is videotaped.

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. Staff: <ul style="list-style-type: none"> Does not use force as punishment. Attempts to gain the detainee's voluntary cooperation before resorting to force Uses only as much force as necessary to control the detainee. Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. (MANDATORY) Use-of-Force Teams follow written procedures that attempt to prevent injury and exposure to communicable disease(s).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)(E) members receive specialized training and team members wear full protective clothing in the performance of their duties. Policy 3.1.7, UOF, provides specific direction to be followed by the UOF team to address the prevention of injury and exposure to communicable disease(s).
13. Standard procedures associated with using four/five point restraints include: <ul style="list-style-type: none"> Soft (nylon/leather) restraints. Dressing the detainee appropriately for the temperature. A bed, mattress, and blanket/sheet. Checking the detainee at least every 15 minutes. Logging each check. Repositioning detainee often enough to prevent soreness or stiffness. Medical evaluation of the restrained detainee twice per eight-hour shift. When qualified medical staff are not immediately available, staff position the detainee "face-up." 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility uses standard procedures associated (b)(7)(E) (b)(7)(E) (b)(7)(E) The facility complies with all the bulleted items listed in the component.
14. The shift supervisor monitors the detainee's position/condition every two hours. He/she allows the detainee to use the restroom at these times under safeguards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. All detainee checks are logged.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainee checks are logged and the COS maintains the logs.
16. In immediate-use-of-force situations, officers contact medical staff once the detainee is under control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
17. When the Facility Administrator authorizes use of non-lethal weapons: <ul style="list-style-type: none"> Medical staff are consulted before staff use pepper spray/non-lethal weapons. Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Intermediate Force Weapons, when not in use are stored in areas where access is limited to authorized personnel and to which detainees have no access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)(E)
19. If Intermediate Force Weapons are stored in the Special Management Unit (SMU), they are stored and maintained the same as Class R tools.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(b)(7)(E)
20. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> Medical personnel are consulted 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Protective gear is worn when restraining detainees with open cuts or wounds.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)(E) (b)(7)(E) in the performance of their duties.
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"> Specialized training is given to officers ensuring they are certified in all devices approved for use. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All training is documented in officers' training files.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility does not use canines.
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"/>	This facility uses a local UOF Information Report to document all UOF incidents.

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

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

This facility has a comprehensive UOF policy and promotes prescribed confrontation avoidance techniques. A team, comprised of (b)(7)(E) is used in all calculated UOF situations. All UOF incidents are documented and reviewed by facility administrative and ICE staff. Health Care staff is notified of all UOF incidents, to include both immediate and calculated. While all security staff receives UOF training (b)(7)(E) members receive specialized training in the UOF Team Technique as well as (b)(7)(E) (b)(7)(E) This facility does not employ the use of (b)(7)(E) or canine units.

A review of facility policy, UOF incident reports and training records, as well as interviews with (b)(7)(E) members and facility administrative staff confirms the facility is meeting the requirements of the PBNDS.

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

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

Section III ORDER

19 Disciplinary System

PART 3 – 19. DISCIPLINARY SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 3.3.1, Infractions and Disciplinary Sanctions, outlines the facility rules and regulations and imposes disciplinary sanctions to control behavior of those detainees who do not comply with expected behavior.
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Written rules prohibit staff from imposing or permitting the following sanctions: <ul style="list-style-type: none"> • corporal punishment • deviations from normal food service • clothing deprivation • bedding deprivation • denial of personal hygiene items • loss of correspondence privileges • deprivation of legal access and legal materials • deprivation of physical exercise 	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility's written disciplinary policy prohibits all the sanctions listed in this component except the deprivation of legal access and legal materials. Although staff reported it is not the practice to deprive access to legal materials and legal representatives, the facility added this prohibited sanction to the written policy prior to the conclusion of the review. A review of the documentation for legal visits, Legal Rights Presentations, and the Law Library confirmed detainees are not being deprived access to these areas.
4. The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The rules of conduct, sanctions and procedures for violations are defined in the detainee handbook and communicated orally to detainees in the orientation video.
5. The following items are conspicuously posted in Spanish and English or other dominate languages used in the facility: <ul style="list-style-type: none"> • Rights and Responsibilities • Prohibited Acts • Disciplinary Severity Scale • Sanctions 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted items listed in this component are posted in every living area of the facility in both English and Spanish.
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Incident Reports and Notice of Charges are promptly forwarded to the designated supervisor.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Incident reports and notice of charges must be forwarded to the shift supervisor prior to the end of the shift on which the incident occurred.

PART 3 – 19. DISCIPLINARY SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. Incident Reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before investigations end.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. An intermediate disciplinary process is used to adjudicate minor infractions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility uses a Unit Disciplinary Committee to adjudicate minor infractions.
10. A disciplinary panel (or equivalent in IGSAs) adjudicates infractions. The panel: <ul style="list-style-type: none"> • Conducts hearings on all charges and allegations referred by the UDC • Considers written reports, statements, physical evidence, and oral testimony • Hears pleadings by detainee and staff representative • Bases its findings on the preponderance of evidence • Imposes only authorized sanctions 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	This facility allows for hearing postponements or continuances. The reasons for such are documented on the hearing record.
13. The duration of punishment set by the Facility Administrator, as recommended by the disciplinary panel does not exceed established sanctions. The maximum time in disciplinary segregation does not exceed 60 days for a single offense.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Written procedures govern the handling of confidential-source information. Procedures include criteria for recognizing "substantial evidence".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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 comprehensive disciplinary policy. Detainees are notified of the disciplinary process, rules, regulations, violations and sanctions both orally and in writing through the orientation video and detainee handbook. The facility encourages informal resolutions for minor infractions when possible. The disciplinary process allows detainees due process and they are afforded the opportunity to appeal (through the grievance process) any sanction imposed through the disciplinary process. Interviews with detainees indicate they understand the facility rules, regulations and disciplinary process.

A review of the policy, detainee handbook, disciplinary hearing records and grievance logs, as well as interviews with staff and detainees, indicate the facility is meeting the requirements of the PBNDS.

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

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

Section IV CARE

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

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The food service program is under the direct supervision of a professionally trained and certified Food Service Administrator (FSA). The Responsibilities of cooks and cook foremen are in writing. The FSA determines the responsibilities of the Food Service Staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Food Service Manager (FSM) has 27 years experience and is ServSafe certified. Job responsibilities and position descriptions are on file for all civilian staff.
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"/>	
3. The FSA provides food service employees with training that specifically addresses detainee-related issues. In ICE Facilities this includes a review of the "Food Service" standard	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. (MANDATORY) Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device. Knives and keys are inventoried and stored in accordance with the Detention Standard on Tool Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Knives are not utilized at this facility; however, food service utensils are kept in a cabinet with an approved locking device. The cook supervisors maintain control of the key to this area. All utensils and keys are inventoried for security and control purposes.
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"/>	Although this facility does not utilize knives, staff monitors the condition of dining utensils for replacement as needed. In addition, tools such as dough cutters and large stirring paddles are tethered and locked when in use.
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. (MANDATORY) There is adequate health protection for all detainees and staff in the facility, and for all persons working in food service. Detainees and other persons working in food service are monitored each day for health and cleanliness by the food service supervisor or designee. Detainee clothing and grooming comply with the "Food Service" standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff and detainees assigned to the kitchen are medically screened and cleared before being allowed to work in this area. All individuals are monitored for health and cleanliness by food service staff. Staff and detainees were observed to be in clean uniforms and in compliance with this component.
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"/>	

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. During orientation and training session(s), the Cook Supervisor (CS) explains and demonstrates: <ul style="list-style-type: none"> Safe work practices and methods. Safety features of individual products/ pieces of equipment. Training covers the safe handling of hazardous material[s] the detainee are likely to encounter in their work. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The Cook Foreman documents all training in individual detainee detention files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Detainees at SPCs and CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSA's are subject to local and State rules and regulations regarding detainee pay.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are paid in accordance with the Voluntary Work Program standard. Detainees assigned to the kitchen receive one dollar a 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"/>	Meals are served at: 5:30 AM; 12 noon; and 5:30 PM. Two hot meals are provided each day.
16. For cafeteria-style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not utilize cafeteria-style feeding. All meals are delivered via satellite feeding trays.
17. The facility has a standard 35-day menu cycle. IGSA's use a 35 day or similar system for rotating meals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility utilizes a 35-day menu cycle.
18. (MANDATORY) A registered dietitian shall conduct a complete nutritional analysis that meets U.S. Recommended Daily Allowances (RDA), at least annually, of every master-cycle menu planned by the FSA. The dietitian must certify menus before they are incorporated into the food service program. If necessary, the FSA shall modify the menu in light of the nutritional analysis to ensure nutritional adequacy. The menu will need to be revised and re-certified by the registered dietician in that event.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation is on file indicating the menus were analyzed and certified by a Registered Dietitian on 01-16-11.
19. The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The GEO Group has established recipes that are utilized in its food service operations.
20. The Cook Foreman has the authority to change menu items if necessary. <ul style="list-style-type: none"> If yes, documenting each substitution, along with its justification, with copy to the FSA 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. All staff and volunteers know and adhere to written "food preparation" procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>22. A Common Fare menu available to detainees, at no charge, whose dietary requirements cannot be met on the main.</p> <ul style="list-style-type: none"> Changes to the planned Common Fare menu can be made at the facility level. Hot entrees are offered three times a week. The Common Fare menus satisfy nutritional recommended daily allowances (RDAs). Staff routinely provide hot water for instant beverages and foods. <ul style="list-style-type: none"> Common Fare meals are served with: Disposable plates and utensils. Reusable plates and utensils. Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the Common Fare diet items. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 4.3.1, Food Service Operations, establishes guidelines regarding religious diet menus. Common Fare meals are available at no cost to detainees. The menus in place provide a nutritionally-adequate alternative to the main-line bill of fare. A hot entrée alternative is available seven times a week and meals are served using disposable plates and utensils. Separate cutting boards and utensils are available for preparation of Common Fare items. There are currently two detainees participating in the Common Fare program.
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. A supervisor at the command level must approve a detainee's removal from the Common Fare Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"> Muslims fasting during Ramadan receive their meals after sundown. Jews who observe Passover but do not participate in the Common Fare Program receive the same Kosher-for- Passover meals as those who do participate. Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observations and interviews with staff and detainees indicate accommodations are made for detainees abstaining from particular foods or fasting for religious purposes. Jewish Passover was being observed during the inspection with Passover meals being provided. Meatless meals were also being provided for Ash Wednesday and Fridays during Lent.
27. The food service program addresses medical diets.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Special diets are prescribed by the medical department and provided by the Food Service Department.
28. Satellite-feeding programs follow guidelines for proper sanitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. Hot and cold foods are maintained at the prescribed, "safe" temperature(s) as served. See Detention Standard on Food Service for guidance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
30. All meals provided in nutritionally adequate portions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The nutritional analysis indicates all meals are provided in nutritionally-adequate portions.
31. Food is not used to punish or reward detainees based upon behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. The food service staff instruct detainee volunteers on: <ul style="list-style-type: none"> Personal cleanliness and hygiene; Sanitary techniques for preparing, storing, and serving food, and; The sanitary operation, care, and maintenance of equipment. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Everyone working in the food service department complies with food safety and sanitation requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34. (MANDATORY) The facility implements written procedures for the administrative, medical, and/or dietary personnel conducting the weekly inspections of all food service areas, including dining, storage, equipment, and food-preparation areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 4.3.1, Food Service Operations, provides guidelines and procedures regarding the daily activities of this department. The facility's policy dictates all areas of food service be inspected on a weekly basis. Documentation is on file indicating inspections are being conducted by the FSM, Fire Safety Manager, as well as Public Health Service staff. The facility is also inspected by the Tacoma-Pierce County Health Department.
35. Reports of discrepancies are forwarded to the Facility Administrator or designated department head and corrective action is scheduled and completed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36. (MANDATORY) Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal, in accordance with the Detention Standard on Food Service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's Food Service Operations policy establishes written procedures for documenting temperatures of dishwashing machines. Documentation is on file indicating temperature checks are being performed and recorded after all three meals.
37. (MANDATORY) 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"/>	Temperatures of all coolers and freezers were observed to be checked and recorded three times daily.
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"/>	

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
42. In SPCs only: The ICE supervisor on duty ensures that ICE officers participate in dining room supervision.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This is a CDF. The facility utilizes a satellite feeding operation. There are no dining rooms.
43. Menus are certified by a registered dietitian prior to being incorporated into the Food Service Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. In SPCs only: the FSA prepares quarterly cost estimates for the Common Fare Program. This quarterly estimate is factored into the quarterly budget.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This is a CDF. The FSM does not prepare quarterly cost estimates for the Common Fare Program.
45. When required, only food service staff prepare the sack lunches for detainee transportation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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 have been installed on outside doors leading into food preparation areas.
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Although the facility does not have a centralized dining room, sufficient space and time is provided for detainees to eat meals in the housing units.
51. (MANDATORY) An independent, external source shall conduct annual inspections to ensure that the food service facilities and equipment meet governmental health and safety codes. Corrective action is taken on deficiencies, if any.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Food Service Department is inspected semi-annually by the Tacoma-Pierce County Health Department. The latest inspection was conducted on 08-25-10.
52. Personnel inspecting the food service department shall note needed corrective action(s), if any, in a written report to the Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
53. Only those toxic and caustic materials required for sanitary maintenance of the facility, equipment, and utensils shall be used in the food service department. Material Safety Data Sheets (MSDSs) will be maintained on all flammable, toxic, and caustic substances used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
54. (MANDATORY) The FSA is responsible for pest control in the food service department, including contracting the services of an outside exterminator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility maintains a contract service agreement with Sprague Integrated Pest Management to conduct pest control maintenance.

FOOD SERVICE

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

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

The food service program is providing detainees with nutritious and attractively-presented meals. Interviews with detainees revealed an overall acceptance of the meals with minimal concerns expressed. The meals were observed to be prepared, plated and served within the proper time and temperature requirements. All menus have been nutritionally analyzed, certified and approved by a registered dietitian.

Sanitation levels were observed to be maintained at a very high level. All staff and detainee workers were observed to be following a clean-as-you-go policy. Sanitation inspections are being conducted by the facility Fire Safety Manager, as well as by the Public Health Service, Food Service Administration and outside independent sources. Both civilian staff and detainees were observed to be dressed neatly and appropriately. A review of documentation indicates all staff and detainees are medically screened prior to working in the department.

All meals are provided via a satellite feeding operation. There is sufficient space available for meals to be served in the housing units and adequate time was observed to be provided for detainees to consume meals. At the time of inspection, the Jewish Passover was being observed. Two detainees were participating in Passover and were provided meals specifically prepared for that holy day.

(b)(6), (b)(7)(c) April
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"/>	Policy LOP 892, Hunger Strike Protocol, addresses this component. Any detainee refusing food for 72 hours is considered to be on a hunger strike and is referred to the medical department.
2. Facility immediately reports via the chain of command a hunger strike to ICE/DRO.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Clinical Director, through the HSA, notifies ICE of a hunger-striking detainee.
3. The facility has established procedures to ensure staff respond immediately to a hunger strike.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Hunger Strike Protocol outlines these procedures.
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"/>	The Hunger Strike Protocol requires isolation of a hunger-striking detainee.
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"/>	Medical personnel may isolate the detainee in a single occupancy observation room or in the short stay unit.
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"/>	Protocol requires the recording of weight and vital signs every 24 hours.
7. The facility medical authority obtains a hunger striker's consent before medical treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy LOP 210, Informed Consent, addresses this component and consent is sought before any treatment is begun.
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"/>	Refusal of Treatment, DIHS Form 820, is used to document a detainee's refusal of medical treatment.
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"/>	Staff delivers three meals per day to the hunger-striking detainee.
10. Staff maintain the hunger striker's supply of drinking water/other beverages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The detainee's supply of drinking water or other fluids is maintained.
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"/>	During a hunger strike, any food not provided by food services is not allowed.
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"/>	Staff records food and fluid intake on a monitoring form and in the medical record.
13. The medical staff have written procedures for treating hunger strikers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Hunger Strike Protocol outlines these procedures.
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"/>	The Hunger Strike Protocol addresses this component. Staff documents all treatment attempts and/or counseling in the medical record.

PART 4 – 21. HUNGER STRIKES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	Both medical and security staff receive training during orientation and annually, as documented in personnel files and on training rosters.

PART 4 – 21. HUNGER STRIKES

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

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

Hunger strike policy and procedure is comprehensive. Both medical and security staff receives initial and annual training on hunger strike evaluation and treatment. There have been no reported hunger strikes since the last review.

(b)(6), (b)(7)(c) April 21,
Reviewer's Signature /

(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 was accredited by: NCCHC in November 2008; ACA on January 12, 2009; and JCAHO in April 2009.
2. The facility's in-processing procedures of arriving detainees include medical screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy LOP 875, Intake Screening, addresses this component. As documented in medical records, detainees receive medical screening upon admission.
3. (MANDATORY) The essential positions needed to perform the health services mission and provide the required scope of services are described in a staffing plan that is reviewed at least annually by the health authority.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Health Services Unit (HSU) is staffed with (b)(7)(E) positions (b)(7)(E) of which are currently filled. Staffing includes: (b)(7)(E) registered nurses (RNs); (b)(7)(E) licensed practical nurses (LPNs); one HSA; one Assistant HSA; (b)(7)(E) physicians; (b)(7)(E) pharmacy technician; (b)(7)(E) dentist; (b)(7)(E) registered dental hygienist; (b)(7)(E) dental technician; (b)(7)(E) licensed clinical social worker (CSW); (b)(7)(E) psychologist; (b)(7)(E) psychiatrist; (b)(7)(E) administrative assistant; (b)(7)(E) medical record technicians; (b)(7)(E) physician's assistants (PAs); and (b)(7)(E) nurse practitioners (NPs). The staffing plan was last reviewed on 01-07-11.
4. (MANDATORY) Newly admitted detainees will be informed, orally and in writing (in a language they can understand), about how to access health services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Newly-admitted detainees are informed orally during initial medical screening and in writing in the detainee handbook and as posted on housing bulletin boards on how to access health care services. This information is provided in both English and Spanish. A language line is available to provide this information in other languages.
5. Detainees will have access to and receive specified 24-hour emergency medical, dental, and mental health services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff is available 24 hours per day, seven days per week. Emergency medical, mental health and dental care is available 24 hours per day.
6. New direct care staff will receive tuberculosis tests prior to their job assignment and periodically thereafter and will be offered the hepatitis B vaccine series.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As documented in employee personnel folders, direct care staff receive tuberculosis (TB) testing prior to employment and annually and are also offered the hepatitis B vaccine.
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"/>	As documented in employee personnel folders, health care staff licensing and credentialing is current.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. The facility provides each detainee, upon admittance, a copy of the detainee handbook or equivalent, in which procedures for access to health care services are explained (in a language they can understand).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are provided with a copy of the detainee handbook in English or Spanish, as reported by detainees during interview. Access to health care services is described in the handbook.
9. In SPCs and CDFs, medical personnel credentialing and verification complies with the standards established by the NCCHC and Joint Commission.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical personnel credentialing and verification for this CDF complies with the standards established by NCCHC and 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">When screening is performed by a detention officer, the facility maintains documentation of the officer's special training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees receive initial medical clearance on admission. As documented in medical records, all detainees receive initial medical, mental health and dental screening within four hours of admission. All screening is performed by medical personnel.
11. (MANDATORY) If language difficulties prevent the health care provider/officer from sufficiently communicating with the detainee for purposes of completing the medical screening, the officer obtains translation assistance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy LOP 846, Interpreter Services, addresses this component. Staff may use Interpretalk Translation Services, as necessary.
12. The facility has sufficient space and equipment to afford each detainee privacy when receiving health care.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has sufficient space and equipment.
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 HSU has its own restricted access area, located within the confines of the secure perimeter.
14. The medical facility entrance includes a holding/waiting room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are two holding rooms in the HSU.
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"/>	The holding rooms are under the direct supervision of security staff.
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 and sink in each of the holding rooms.
17. Medical records are kept apart from other files. They are: <ul style="list-style-type: none">Secured in a locked area within the medical unit.With physical access restricted to authorized medical staff.Procedurally, no copies made and placed in detainee files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses an electronic medical record with access limited to medical staff only. Any paper records are secured in a locked medical records room in the HSU, with access restricted to medical staff.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
18. (MANDATORY) A signed and dated consent form is obtained from a detainee before medical treatment is administered.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Intake Screening protocol addresses this component. As documented in detainee medical records, a signed and dated consent form is obtained from detainees before medical treatment is administered.
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"/>	Policy LOP 1414, Processing Requests for Medical Records, addresses this component. Detainees may make a Freedom of Information Act (FOIA) request to authorize release of medical records.
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"/>	Policy LOP 876, Detainee Transfer, addresses this component. The health care provider is given advance notice prior to the release of a detainee.
21. A detainee's medical records will be transferred as appropriate. All detainees will be transferred with a copy of their transfer summary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A medical transfer sheet is prepared for the detainee transfer.
22. Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL."	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical records are placed in a sealed envelope and stamped confidential.
23. Medical screening includes a Tuberculosis (TB) test.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As documented in detainee medical records, medical screening includes a chest x-ray for TB testing.
24. All detainees receive a mental-health screening upon arrival. It is conducted: <ul style="list-style-type: none"> • By a health care provider or specially trained officer; • Before a detainee's assignment to a housing unit. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As documented in detainee medical records, detainees receive mental health screening upon admission, performed by a health care provider.
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"/>	The Intake Screening protocol addresses. The health care provider reviews all I-794s within 24 hours.
26. (MANDATORY) Each facility's health care provider conducts a health appraisal and physical examination on each detainee within 14 days of arrival. If there is documentation of one within the previous 90 days, the facility health care provider may determine that a new appraisal is not required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As documented in detainee medical records, they receive a health appraisal and physical examination performed by a health care provider within 14 days.
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"/>	Medical staff makes rounds in the SMU at least once per day as documented in log books and as reported in interview.

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"> Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population. Service-request slips are delivered in a timely fashion to the health care provider. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff provides face-to-face verbal sick call request and triage daily to all detainees, except those detainees in the SMU. Written sick call request forms are used in the SMU.
<p>29. (MANDATORY) The facility has a written plan for the delivery of 24-hour emergency health care when no medical personnel are on duty at the facility, or when immediate outside medical attention is required.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy LOP 822, Emergency Services, addresses this component. Medical staff is on-site 24 hours per day, seven days per week. A plan is in place for detainees requiring emergency outside medical attention.
<p>30. The plan includes an on-call provider.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A mid-level provider or physician is on call.
<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"/>	Policy LOP 838, Patient Transport, addresses this component. Local 911 services are used for emergency ambulance.
<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"/>	Appropriate security procedures are followed for those detainees transported to community medical facilities.
<p>33. (MANDATORY) Detention and health care personnel will be trained, at least annually, to respond to health-related situations within four minutes and to properly use first aid kits, available in designated areas.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff are trained initially and annually in First Aid, Cardiopulmonary Resuscitation (CPR) and the use of an Automated External Defibrillator (AED), as documented in personnel records and on training rosters. During the inspection, this training was being provided by local fire department staff.
<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"/>	Only medical staff distributes medication.
<p>35. Pharmaceuticals and nonprescription medicines will be stored, inventoried, dispensed, and administered in accordance with sound standards and facility needs for safety and security.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medications are stored, inventoried, dispensed and administered according to sound standards. Observation of controlled substance count was conducted and noted to be correct.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>36. (MANDATORY) Each facility has written policy and procedures for the management of pharmaceuticals that include:</p> <ul style="list-style-type: none"> • A formulary of all prescription and nonprescription medicines stocked or routinely procured from outside sources. • A method for obtaining medicines not on the formulary. • Prescription practices, including requirements that medications are prescribed only when clinically indicated and that prescription are reviewed before being renewed. • Procurement, receipt, distribution, storage, dispensing, administration, and disposal of medications. • Secure storage and perpetual inventory of all controlled substances (DEA Schedule II-V), syringes, and needles. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>LOP Chapter 11: Pharmacy, addresses this component. This protocol addresses: formulary and prescription practices; storage of medication; controlled items; dispensing of medications; ordering of medications and supplies; acquisition of non-formulary items; keep on person (KOP) medications; and disposal of medications.</p>
<p>37. All pharmaceuticals are stored in a secure area with the following features:</p> <ul style="list-style-type: none"> • A secure perimeter; • Access limited to authorized medical staff (never detainees); • Solid walls from floor to ceiling and a solid ceiling; • A solid core entrance door with a high security lock (with no other access); and • A secure medication storage area. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Pharmaceuticals are stored in a medication room within the secure perimeter with: limited access; solid walls from floor to ceiling; and a solid entrance door that has a high security lock.</p>
<p>38. In SPCs and CDFs, the pharmacy has a locking pass-through window.</p> <ul style="list-style-type: none"> • Administration and management in accordance with state and federal law. • Supervision by properly licensed personnel. • Administration of medications by personnel properly trained and under the supervision of the health services administrator, or equivalent. • Accountability for administering or distributing medications in a timely manner and according to physician orders. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The pharmacy has a locking pass-through window. Medications are distributed by licensed nursing personnel as ordered by mid-level or physician order.</p>
<p>39. Distribution of medication is in accordance with specific instructions and procedures established by the health care provider. Written records of all medication given to detainees are maintained.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Medications are distributed according to mid-level or physician order. Distribution of medications is documented on medication administration records (MARs).</p>

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>40. Medication may not be delivered or administered by detainees.</p> <ul style="list-style-type: none"> In facilities that are medically staffed 24 hours a day, the health care provider distributes medication. In facilities that are not medically staffed 24 hours a day, medication may be distributed by detention officers, who have received proper training by the health care provider, only when medication must be delivered at a specific time when medical staff are not on duty. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Only medical staff distributes medications.
41. The facility maintains documentation of the training given any officer required to distribute medication, and the officer has available for reference the training syllabus or other guide or protocol provided by the health authority.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Only medical staff distributes medications.
42. The Warden/Facility receives notification that a detainee that has special medical needs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy LOP 803, Detainee with Special Needs, addresses this component. Facility staff receive notification that a detainee has special medical needs via a special needs form initiated by medical staff.
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"/>	SOP 2.7, Medical Requests by Outside Independents, addresses this component.
<p>44. (MANDATORY) Each facility has a written plan (or plans) that address the management of infectious and communicable diseases, including prevention, education, identification, surveillance, immunization (when applicable), treatment, follow-up, isolation (when indicated), and reporting to local, state, and federal agencies. Plans include:</p> <ul style="list-style-type: none"> Coordination with public health authorities; Ongoing education for staff and detainees; Control, treatment, and prevention strategies; Protection of individual confidentiality; Media relations; Management of tuberculosis, hepatitis A, B, and C, HIV infection, avian influenza, and Reporting communicable diseases to local and/or state health departments in accordance with local and state regulations. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Division of Immigration Health Services (DIHS) Infection Control Manual addresses this component. In addition, the following address all of these areas: LOP 710, Infection Control Plan; LOP 839, HIV Positive Detainees; LOP 845, Patient Confidentiality; and Policy 1.1.12, Contacts with the Public, Media and Other Agencies.
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 may be isolated in one of four reverse isolation (negative pressure) rooms in the HSU.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
46. All new arrivals receive TB screening in accordance with guidelines of the Centers for Disease Control (CDC). Unless a chest x-ray is the primary screening method, the PPD (mantoux method) is the primary screening method. (For a detainee on whom the PPD is contraindicated; a chest x-ray will be needed. Detainees not screened are housed separate from the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility, all new detainee arrivals receive a chest x-ray for TB testing.
47. Detainees with symptoms suggestive of TB are placed in a negative pressure isolation room and promptly evaluated for TB disease. Detainees at facilities with no negative pressure isolation room are referred to an appropriate off-site facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees with symptoms suggestive of TB are placed in one of four reverse isolation (negative pressure) rooms in the HSU.
48. A transportation system will be available that ensures timely access to health care services that are only available outside the facility, including: prioritization of medical need, urgency (ambulance versus standard), and transfer of medical information.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility performs routine transportation for health care services. Emergency ambulance services are provided via the 911 system.
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"/>	Chronic care plans are provided for detainees who require close, chronic, or convalescent medical care, as documented in detainee medical records.
50. (MANDATORY) Female detainees have access to pregnancy testing and pregnancy management services that include routine high-risk prenatal care, addiction management, comprehensive counseling and assistance, nutrition, and postpartum follow-up.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOP 816, Pregnancy Screening/Pregnancy Care, addresses this component. All female detainees are tested for pregnancy upon arrival.
51. (MANDATORY) Detainees with chronic conditions (such as hypertension and diabetes) will receive periodic care and treatment that includes monitoring of medications, laboratory testing, and chronic care clinics, and others will be scheduled for periodic routine medical examinations, as determined by the health authority	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE Health Services Corps (IHSC) National Policy, Chapter 8.6 and SOP 8.6, Continuity of Care of Chronic Conditions, address this component. Detainees with chronic conditions are provided with care plans and receive periodic care, as documented in detainee medical records, and as reported in detainee interviews.
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"/>	LOP 803, Detainee with Special Needs, addresses this component.
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"/>	Routine dental care is available five days per week. Emergency dental care is available 24 hours per day, seven days per week.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
54. (MANDATORY) Detainees with mental health problems will be referred to a mental health provider as needed for detection, diagnosis, treatment, and stabilization to prevent psychiatric deterioration while confined.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOP 1503, Mental Health Screening, Referral, Triage, Evaluation and Treatment, addresses this component. Referral may be either "routine" or "urgent."
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 Mental Health Screening, Referral, Triage, Evaluation and Treatment protocol addresses. Crisis intervention services are available 24 hours per day, seven days per week.
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"/>	Policy LOP 204, Privacy of Care, addresses this component. Clinical encounters are performed in a private setting as allowed by the security of the detainee. Female detainees are provided female escorts for health care by male providers, as observed by this inspector during the inspection.
57. (MANDATORY) Any detainee referred for mental health treatment receives a comprehensive evaluation by a licensed mental health provider within 14 days of the referral.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Mental Health Screening, Referral, Triage, Evaluation and Treatment protocol addresses. As documented in detainee medical records, detainees referred for mental health treatment receive a comprehensive evaluation by a licensed mental health provider well within the 14-day timeframe.
58. (MANDATORY) Restraints for medical or mental health purposes may be authorized only by a qualified medical or mental health provider, after reaching the conclusion that less restrictive measures are not successful. The facility has written procedures that specify: <ul style="list-style-type: none"> • The conditions under which restraints may be applied; • The types of restraints to be used; • How a detainee in restraints is to be monitored; • The length of time restraints are to be applied; • Requirements for documentation, including efforts to use less restrictive alternatives; and • After-incident review. • The medical authority or mental health provider completes a Post-Restraints Observation Report form DIHS-867 or similar form. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOP 827, Medically Ordered Physical/Chemical Restraints and Seclusion, addresses this component. A DIHS 869, Restraint Flow Sheet, is used to document conditions of restraint.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>59. (MANDATORY) Involuntary administration of psychotropic medications to detainees complies with applicable laws and regulations and the authorizing physician or psychiatrist will:</p> <ul style="list-style-type: none"> Specify the duration of therapy; Obtain an order authorizing the administration of the drug from a Federal District Court. Document that less restrictive intervention options have been exercised without success; Detail how the medication is to be administered; Monitor the detainee for adverse reactions and side effects; and Prepare treatment plans for less restrictive alternatives as soon as possible. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A court order is sought for routine involuntary administration of psychotropic medications. The Medically Ordered Physical/Chemical Restraints and Seclusion protocol is followed for emergency involuntary administration of psychotropic medications and for less restrictive alternatives. It addresses all of the bulleted items in this component.
60. An initial dental screening exam should be performed within 14 days of the detainee's arrival. If no on-site dentist is available, the initial dental screening may be performed by a physician, physician's assistant, nurse practitioner or trained RN.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees receive dental screening as part of the initial medical screen, as documented in detainee medical records.
61. In each detention facility, the designated health authority and Facility Administrator determines the contents, number, location(s), use protocols, and procedures for monthly inspections of first aid kits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The health services and facility administrators determine the number, contents, location, and protocols of use for first aid kits.
62. An automatic external defibrillator should be available for use at the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are two AEDs at the facility: one in the short stay unit; and one in the urgent care room.
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"/>	If a detainee refuses treatment, ICE is notified.
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"/>	Policy 4.5.1, Health Care, addresses this component. The facility administrator, HSA and ICE staff meet at least quarterly, as documented in DIHS, ICE Meeting Minutes.
65. (MANDATORY) Biohazardous waste will be managed and medical and dental equipment decontaminated in accordance with sound medical standards and compliance with applicable local, state, and federal regulations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical waste is managed via a contract with Stericycle. Dental equipment is sterilized by autoclave, located in the dental suite. The autoclave is tested routinely and found to be in good working order.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
66. (MANDATORY) The health authority will implement a system of internal review and quality assurance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DIHS Policy and Procedure, Chapter 5, Performance Improvement, addresses. The health authority has implemented various multi-disciplinary performance improvement analysis including: Continuity of Care; Asthma Management; Short Stay/Infirmity Nursing Care; and other healthcare failure modes and effects analysis.

PART 4 – 22. MEDICAL CARE

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

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

Health care at the facility is provided by the IHSC. The facility is accredited by the JCAHCO, the NCCHC and ACA.

Detainee medical records were reviewed. In all 15 medical records reviewed: medical clearance was observed upon admission; initial medical, mental health, and dental screening was documented and found to be completed within four hours; chest x-rays were performed on admission; consent to treatment forms were found; physical exams and assessments were found to be performed within one to ten days of admission (with the majority performed within one day); and pregnancy testing was found in the five female detainee medical records.

Access to health care is provided daily via a face-to-face, one-on-one triage between medical personnel and individual detainees. Male detainees are triaged in the intake area, while female detainees are triaged on the female unit. Privacy is maintained. Detainees in the SMU use sick call request slips for access to health care, which are collected daily.

The HSU is large, well-equipped and clean. There are four reverse isolation rooms and four individual medical cells in the short stay unit in the HSU. There are two nurse's stations. Additionally, there are: seven exam rooms; an urgent care (treatment) room; a two-chair dental suite with office and lab space; an x-ray room; laboratory room; three storage rooms; pharmacy; medication room; two holding rooms; medical records office; and ample office and conference space. There are also two exam rooms located in the Intake area, and one exam room each on the F Unit and the G Unit.

(b)(6), (b)(7)(c) / April 21, 20
Reviewer's Signature / Date

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

PART 4 – 23. PERSONAL HYGIENE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There is a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items. The supply of these items exceeds the minimum required for the number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy LOP 726, Personal Hygiene, addresses this component. As observed, the supply of these items exceeds the minimum required for the number of detainees.
2. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive, at a minimum: <ul style="list-style-type: none"> One uniform shirt and one pair of uniform pants or one jumpsuit. One pair of socks. One pair of underwear (daily change). One pair of facility-issued footwear. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As observed during the inspection, detainees are issued: two uniform shirts and two uniform pants; two pairs of socks; three pair of underwear; one pair of tennis shoes; and one pair of shower shoes.
3. Additional clothing is available for changing weather conditions and as is seasonally appropriate.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As observed during the inspection, detainees are issued sweat pants and sweat shirts for cooler weather conditions.
4. New detainees are issued clean bedding, linens and towels, at a minimum: <ul style="list-style-type: none"> One mattress One blanket Two sheets One pillow One pillowcase One towel Additional blankets, based on local weather conditions. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As observed during the inspection, detainees are issued: one mattress; two blankets; two sheets; one pillow; one pillowcase; and one towel.
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"/>	LOP 726 addresses this component. As observed during the inspection, detainees are provided gender-specific personal hygiene items.
6. Toilet facilities are: <ul style="list-style-type: none"> Clean Adequate in number and can be used without staff assistance 24 hours per day when detainees are confined in their cells or sleeping areas. ACA Expected Practice 4-ALDF-4B-08 requires that toilets be provided at a minimum ratio of one for every 12 male detainees or one for every 8 female detainees. For males, urinals may be substituted for up to one-half of the toilets.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In both dormitory-style and cell block housing units; toilet facilities are clean and adequate in number.

PART 4 – 23. PERSONAL HYGIENE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>7. Bathing facilities are:</p> <ul style="list-style-type: none"> • Clean • Operable with temperatures between 100 and 120 degrees Fahrenheit. <p>ACA Expected Practice 4-ALDF-4B-08 requires one washbasin for every 12 detainees.</p> <p>ACA Expected Practice 4-ALDF-4B-09 requires a minimum ratio of one shower for every 12 detainees.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In both dormitory and cell block housing units, bathing facilities are clean and adequate in number.
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"/>	Each housing unit has facilities for detainees with disabilities. In addition, Americans with Disabilities Act (ADA) access is made possible in the short stay unit.
<p>9. Detainees are provided clean clothing, linen and towels.</p> <ul style="list-style-type: none"> • Socks and undergarments - daily. • Outer garments - twice weekly. • Sheets - weekly. • Towels - weekly. • Pillowcases - weekly. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clean socks and undergarments are provided daily, outer garments three times per week and sheets and towels two times per week.
10. Food service detainee volunteer workers are permitted to exchange outer garments daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food service detainee volunteer workers are permitted to exchange outer garments daily.
11. Volunteer detainee workers are permitted to exchanges of outer garments more frequently.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Volunteer detainee workers are permitted to exchange outer garments as needed.

PART 4 – 23. PERSONAL HYGIENE

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

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

As observed during the inspection and as reported via detainee interview, detainees are provided with clean and adequate bathing facilities, clothing, bedding, linens and towels.

(b)(6), (b)(7)(c) April 21, 20
Reviewer's Signature / Date

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

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a written suicide prevention and intervention program approved and signed by the health authority and Facility Administrator and reviewed annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Suicide prevention and intervention at this facility is addressed by: LOP 1505, Suicide Prevention/Watch Program; LOP 1504, Mental Health Awareness and Suicide Prevention; and Policy 3.4.2, Suicide/Self Injury Prevention. The Warden and the AFOD have reviewed the policy and the HSA has signed the LOPs.
2. At a minimum, the Program shall include procedures to address: <ul style="list-style-type: none"> • Intake screening and referral requirements; • The identification and supervision of suicide-prone detainees; • Staff training requirements; • The management and reporting of suicidal incidents, suicide watches, and deaths; • Provision of safe housing for suicidal detainees; • Debriefing of any suicides and suicide attempts by administrative, security, and health services staff; • Guidelines for returning a previously suicidal detainee to a facility's general population, upon written authorization of the clinical director. • Reporting guidelines for facility personnel when suspected suicidal behavior is observed; and Written procedures for the proper handling of detainees who exhibit suicidal behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The program includes statistics and definitions associated with suicides in correctional facilities, identification of reasons for a detainee to contemplate suicide, common types of suicide warning signs, common myths about suicide, identification and notification regarding potentially suicidal detainees, response to suicide attempts, and potential effects on staff members after a critical incident.
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"/>	Mental Health Awareness and Suicide Prevention protocol addresses this component. All staff receives suicide prevention training initially and annually.

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>4. Training prepares staff to:</p> <ul style="list-style-type: none"> Effective methods for identifying the warning signs and symptoms of impending suicidal behavior, Demographic, cultural, and precipitating factors of suicidal behavior, Responding to suicidal and depressed detainees, Effective communication between correctional and health care personnel, Necessary referral procedures, Housing observation and suicide-watch level procedures, Follow-up monitoring of detainees who have already attempted suicide, and Reporting and written documentation procedures. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training includes identifying signs and symptoms of suicidal behavior, precipitating factors, response and referral to mental health staff, observation status and follow up. A power point presentation, entitled "Suicide Recognition and Prevention," is used for this purpose.
<p>5. A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process.</p> <ul style="list-style-type: none"> Screening does not occur later than one working day after the detainee's arrival. Documentation exists that "specially trained officers" have completed training in accordance with a syllabus approved by the medical authority. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees are screened by medical staff for suicide potential upon admission.
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"/>	"Suicide Management Intervention Procedures" addresses 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"/>	Procedures include returning a previously-suicidal detainee to the general population upon authorization of a medical professional only.
8. The facility has a designated isolation room for evaluation and treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are two isolation rooms on the short stay unit in the HSU.
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"/>	As much as is possible, structures and smaller items that could be used in a suicide attempt have been removed from the isolation rooms.
10. Medical staff have approved the room for this purpose.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff have approved the rooms for this purpose.
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"/>	Staff constantly observe a detainee on suicide watch and document that watch every 15 minutes.

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. At facilities with twenty-four-hour medical staff, observation of imminently suicidal detainees by medical or detention staff shall occur no less than every 15 minutes. The Clinical Director (CD) may recommend constant direct supervision. If a detainee is clinically evaluated and determined to be at risk for suicide, medical staff shall document the status of the detainee in the medical record at least every two hours, unless otherwise directed by the CD.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Suicidal detainees are under constant direct supervision when on watch. The watch is documented every 15 minutes.
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"/>	Medical staff is on duty 24 hours per day, seven days per 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"/>	A mortality review is required after a completed or serious suicide attempt. Critical incident stress debriefing is provided to staff and detainees.

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.)

Suicide Prevention and Intervention policy and procedure is comprehensive. All staff are trained initially and annually. Training includes identifying signs and symptoms of suicidal behavior, precipitating factors, response and referral to mental health staff, observation status and follow up. A power point presentation, entitled "Suicide Recognition and Prevention," is used for this purpose.

There have been no suicides or serious suicide attempts at the facility during the review period.

(b)(6), (b)(7)(c) April
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"/>	The facility is capable of managing terminally or chronically ill detainees. Should the detainee require hospice services or an increased level of care, the detainee would be transferred to a more appropriate medical facility.
2. The facility or appropriate ICE office promptly notifies the next-of-kin of the detainee's: medical condition. <ul style="list-style-type: none"> The detainee's location. The visiting hours and rules at that location. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Notifications of next of kin are carried out by ICE personnel.
3. There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives. <ul style="list-style-type: none"> These guidelines include instructions for detainees who wish to have a living will. These guidelines provide the detainee the opportunity to have a private attorney prepare the documents, at the detainee's expense. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses the State of Washington Advance Directives.
4. There is a policy addressing "Do Not Resuscitate Orders"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy LOP 207, Do Not Resuscitate (DNR) Orders, addresses 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"/>	A DNR order is consistent with sound medical practice and not in any way associated with assisting suicide, voluntary euthanasia, or expediting the death of a detainee.
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"/>	The facility is required to notify the Branch Chief who notifies the Office of the Director
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"/>	These procedures are addressed in the State of Washington Advance Directives.
8. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in custody.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility notifies ICE officials, who in turn notify other interested parties.
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"/>	LOP 834, Procedures Following Death of a Detainee, addresses 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"/>	Per interview with the ICE AFOD, a detainee's remains are disposed of in accordance with the provisions in this standard.
11. In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. • If the detainee is a U.S. military veteran, the Department of Veterans Affairs notified.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per interview with the ICE AFOD, the Field Office schedules an indigent's burial when neither family nor consulate claims the remains. The Department of Veterans Affairs is notified as required.
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"/>	An original and copy of the death certificate are provided to ICE officials for family/consulate and for the A-file.
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"/>	LOP 201, Autopsies and Death Certificate, addresses this component. Pierce County requires that any death occurring in prison, jail or detention center will have an autopsy ordered by the Pierce County Medical Examiner. Pierce County Medical Examiner's office provides an original and two copies of the death certificate to the facility.
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"/>	Per interview with the ICE AFOD, a note is written in the detention file and the death certificate is filed in the A-file when the case is closed.

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.)

Facility policy and procedure regarding terminal illness, advance directives, CPR, organ donation and death is comprehensive. The facility is capable of managing terminally or chronically ill detainees. Should a detainee require hospice services or a higher level of care, s/he would be transferred to a more appropriate medical facility. There have been no deaths at the facility during this review period.

(b)(6), (b)(7)(c) April 21,
Reviewer's Signature /

(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"/>	Policy 5.2.1, Detainee Correspondence, addresses the handling of correspondence and mail. The rules for correspondence are posted in each unit.
2. The facility provides key information in English, Spanish, and other languages spoken by a significant number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Information is provided to ICE detainees in both English and Spanish.
3. Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Staff 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"/>	An electronic log is maintained which records the receipt of priority, priority overnight, certified mail and Special Correspondence.
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"/>	All correspondence is opened in the presence of the detainee.
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"/>	The Warden may authorize the random reading of incoming mail to maintain security and the orderly operation of the facility. Authorization may also be sought when a specific security concern arises with respect to an individual detainee to reveal such information as escape plots, plans to commit illegal acts, plans to violate facility rules, and so forth. ICE is to be notified of these security concerns and must grant prior approval before mail is read for any of these reasons. The Mail Clerk stated she was not aware of any instance when this provision of the policy was implemented.
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"/>	All correspondence, whether general or special, is opened for inspection, in the presence of the detainee.
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"/>	

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. Staff 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"/>	Outgoing general correspondence and other mail may be inspected and/or read if the addressee is another detainee or if there is reasons to believe the item might present a threat to the facility's security or orderly operation endanger the recipient or the public or might facilitate criminal activity. The detainee must be present when the correspondence or other mail including packages is inspected, unless otherwise authorized by the Warden.
11. Correspondence to a politician or to the media is processed as Special Correspondence and is not read or copied.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written notification is provided to the sender and addressee.
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"/>	The mail clerk maintains a file of documentation for all items removed from correspondence.
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"/>	According to the Detainee Correspondence policy a receipt is issued to the detainee for all cash. It is then safeguarded, receipted and forwarded to the Business Office to be credited to the detainee's account. Any discrepancies are investigated.
17. Original identity documents (for example, passports, and birth certificates) are immediately removed and forwarded to ICE staff for placement in the A-files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	ICE staff provides detainees with copies of their identity documents upon request.
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"/>	

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
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"/>	The facility definition of indigent requires the detainee to have \$15 or less in his/her account for 30 days or longer. If this applies, a detainee is provided with the required amount of free postage.
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"/>	In addition to allowing detainees to have family members subscribe to publications on their behalf, the facility subscribes to several publications which are placed in the housing units for detainee use.

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 at this facility are 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. Detainees are being provided with writing supplies and indigent detainees are receiving the required amount of free postage. All correspondence, whether general or special, is opened for inspection in the presence of the detainee.

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

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"> Funeral Deathbed 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The facility recognizes as "immediate family member" a parent (including stepparent or foster parent), brother, sister, child, and spouse (including common-law spouse).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The CDF/IGSA facility notifies ICE of all detainee requests for non-medical escorts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The detainee's Deportation Officer reviews the file before forwarding a detainee's request, with recommendation, to the approving official. Each recommendation addresses the individual's suitability for travel, e.g., the kind of supervision required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees who require overnight housing are placed in approved IGSA facilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Each escort detail includes at least (b)(7)(e) officers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The detainee remains under constant, direct visual supervision of escorting staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Escorting officers report unexpected situations to the originating facility as a matter of procedure and the ranking supervisor on duty has the authority to issue instructions for completion of the trip.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Escorting officers have the discretion to increase or decrease minimum restraints in accordance with written instruction, procedures and classification level of the detainee.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Escort officers do not accept gifts/gratuities from a detainee, detainee's relative or friend for any reason.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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

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

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

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

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

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

All ICE Non-Medical Emergency Escorted Trips are handled by the ICE Field Office or Sub-Office.

(b)(6), (b)(7)(c) / April 2
 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"/>	Policy 3.5.5, Detainee Marriage Requests, establishes procedures for detainees requesting to marry. All marriage requests are submitted in writing to the Field Office for review on a case-by-case basis.
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"/>	
4. The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The Facility Administrator provides a written copy of his or her decision to the detainee and his or her legal representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE notifies the detainee of the decision regarding his or her marriage request.
6. When permission is denied, the Facility Administrator states the basis for his or her decision along with instructions on how the detainee can file an appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The Facility Administrator provides the detainee with a place and time to make wedding arrangements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The detainee handbook explains the marriage request process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. <u>In SPCs</u> the Facility Administrator or highest ranking ICE official on-site is the only officer authorized to approve a request to marry.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This is a CDF. However, the highest-ranking ICE official on site is the only one who can authorize or approve a request to marry.

PART 5 – 28. MARRIAGE REQUESTS

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

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

The facility has policy and procedures in place regarding detainee marriage requests, which is detailed in the detainee handbook. Detainees wishing to marry must submit a request in writing through the Warden of the facility, which is then forwarded to the ICE AFOD for review. ICE will ultimately approve or deny the request. If the request is denied, ICE notifies the detainee in writing and provides the reasons for denial. If the marriage request is approved, the facility accommodates the request and allows the marriage to take place within the facility. Interviews with ICE officials indicate that 14 marriage requests were submitted during 2010 and all requests were reviewed and approved by ICE.

(b)(6), (b)(7)(c) April 21, 2011
Reviewer's Signature / Date

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

PART 5 - 29. RECREATION

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Facility provides: <ul style="list-style-type: none"> An indoor recreation program. An outdoor recreation program. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy: 5.1.5, Recreation Programs, establishes procedures for all recreational activities.
2. A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	The facility provides television, cards, checkers, chess and various board games in each housing unit dayroom.
7. Outside activities are restricted to limited-contact sports.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
11. Staff conduct searches of recreation areas before and after use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Recreation areas are under constant staff supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Recreational activities are under constant staff supervision as well as video monitoring.
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"/>	A review of the segregation logs indicates detainees housed in the SMU are offered outdoor recreation a minimum of one hour a day, five times a week.
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"/>	Interviews with the facility Training Manager and a review of documentation, indicates all volunteers have completed an orientation program.
18. Visitors, relatives or friends of detainees are not allowed to serve as volunteers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. If the facility has no outside recreation, are detainees considered for transfer after six months?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility offers access to outdoor recreation.
20. If yes, written procedures ensure timely review of all eligible detainees.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility offers access to outside recreation.
21. Case officers make written transfer recommendations about every six-month detainee to the Facility Administrator.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility offers access to outside recreation.
22. The Facility Administrator documents all detainee-transfer decisions, whether yes or no.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility offers access to outside recreation.
23. The detainee's written decision for or against an offered transfer documented in his or her A-file.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility offers access to outside recreation.
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"/>	The facility offers access to outside recreation.
25. If no recreation is available, the ICE Field Office routinely review transfer eligibility for all detainees after 60 days.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility offers access to outside recreation.
26. Does the A-file of every detainee held more than 60 days without access to recreation contains either a transfer-waiver signed by the detainee or the Facility Administrator's written determination of the detainee's ineligibility for transfer.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility offers access to outside recreation.
27. The detainee's legal representative is notified of the detainee's/Facility Administrator's decision.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility offers access to outside recreation.

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 detainees with access to recreational programs and activities, under conditions of security and supervision that protect their safety and welfare. The facility provides access to open air recreation space in each housing area. The recreation schedule for these areas allows detainees access to outdoor recreation a minimum of one hour every day.

Additional recreation activities are available and include: chess; checkers; television; video games; movies; dominoes; and card games. Organized handball and basketball tournaments are also provided to the detainee population.

A review of the facility activity log indicates that detainees housed in disciplinary segregation are offered a minimum of one hour of access to exercise per day, five days a week.

(b)(6), (b)(7)(c) Apr
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"/>	
2. Space is available for detainees to participate in religious services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Religious services are conducted in the facility's 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"/>	
5. Each detainee is allowed religious items in his/her immediate possession; refer to the Funds and Personal Property Standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility allows detainees to have religious books, plastic crosses, religious headgear and prayer rugs in their possession.
6. Volunteer's credentials are checked and verified before allowing participation in detainee programs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Members of faiths not represented by clergy may request to present their own services within security allowances.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Detainees in the Special Management Unit may participate in religious practices unless otherwise documented for the safety and security of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Religious services are available to detainees in the SMU.

RELIGIOUS PRACTICES

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

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

The facility provides each detainee with the opportunity to practice his or her religious beliefs. Religious services are conducted in an area that provides adequate space and equipment for conducting religious programs. All religions represented in the facility have equal status and are not discriminated against.

The religious programs offered at this facility are planned, administered and coordinated through the efforts of the facility Chaplain. The facility's religious program is augmented by community clergy and volunteers.

(b)(6), (b)(7)(c) April 21, 2011

Review 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"/>	
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Information regarding telephone access is provided to detainees via: the handbook; a verbal orientation; and also a video orientation to the facility.
3. Notification explaining the facilities telephone policy is in the Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Access rules, including updated telephone and consulate number, are posted in housing units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All appropriate postings are located in the housing units.
5. The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Information is provided to detainees in both English and Spanish.
6. Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Telephones are inspected daily by facility staff to ensure that they are in good working order.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Telephone checks are completed each evening, and a report is submitted to the shift commander.
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"/>	There is a Lieutenant assigned to monitor the telephones, including repair progress if necessary.
11. Detainees are afforded a reasonable degree of privacy for legal phone calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are a sufficient number of phones located throughout the unit to afford detainees a reasonable amount of privacy.
12. A procedure exists to assist a detainee who is having trouble placing a confidential call.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees may be brought to the Intake area where they will be allowed to place a confidential call, if necessary.
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"/>	Special access calls are placed on facility telephones at no charge to the detainee.
15. In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Special access telephone calls are provided at this facility.

PART 5 – 31. TELEPHONE ACCESS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
16. No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Arrangements are made to allow detainees to call immediate family members detained in other facilities. Calls are placed on facility telephones at no charge to the detainee.
18. All telephone restrictions are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Although seldom imposed, a report is written and placed in the file if telephone access is restricted.
19. The facility has a system for taking and delivering emergency detainee telephone messages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The shift commander makes arrangements for the detainee to be brought to Intake where the emergency is verified, and the detainee is allowed to make a call.
20. Phone call messages are given to detainees as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Detainees are allowed to return emergency phone calls as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in Disciplinary Segregation are provided with the opportunity to make calls daily upon request regarding immigration matters.
23. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in Disciplinary Segregation are provided with the opportunity to make calls daily upon request to consular/embassy officials.
24. Detainees in disciplinary segregation are allowed phone calls for family emergencies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Appropriate postings were observed on all detainee phones in the units.
27. The OIG phone number for reporting abuse is programmed into the detainee phone system. The reviewer must verify that the number is operable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The LCI successfully placed calls to the OIG from several telephones in different housing units.
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"/>	

PART 5 – 31. TELEPHONE ACCESS

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

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

Detainees have reasonable access to telephones to maintain contact with family, friends and legal representatives. Procedures exist which allow detainees to make confidential and emergency phone calls. The OIG telephone number, as well as the telephone number for embassies and consulates, is programmed into the telephone system.

(b)(6), (b)(7)(c) / April
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"/>	Visitation periods are from 8 AM to 11 AM and 1 PM to 3:30 PM, Thursdays through Mondays. The duration of visits is at least 30 minutes.
3. The visitation schedule and rules are available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visiting schedules and rules are posted in the visitation lobby and are available on the facility web site.
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"/>	The visitation rules are posted in English and Spanish.
6. A general visitation log is maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Detainees are permitted to retain authorized personal property items specified in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. A visitor dress code is available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The visitor dress code is posted in the lobby and available on the facility web site.
9. Visitors are searched and identified according to standard requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visitors are required to provide valid identification. Visitors are required to pass through a metal detector; and if necessary, they will be checked with a hand wand metal detector.
10. The requirement on visitation by minors is complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Minors are allowed to visit if accompanied by an adult.
11. At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, within the first 30 days.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Minors are allowed to visit.
12. After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Minors are allowed to visit.
13. Anytime a visit is denied, to either a general population detainee or SMU detainee, the denial is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If a visit is denied for any reason, a memo is produced.
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"/>	Attorneys are allowed to visit from 6:00 a.m. to 6:00 p.m., seven days per week.
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"/>	Attorneys are allowed to visit from 6 AM to 6 PM daily.

PART 5 – 32. VISITATION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
17. On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are allowed to remain on legal visits through meal periods. Detainees are provided with a meal when they complete their legal visit and return to their unit.
18. Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. There are written procedures governing detainee searches.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 3.1.10, Search of Detainees, establishes the procedures for detainee searches.
20. Legal representatives and assistants are subject to a non-intrusive search – such as a pat-down search of the person or a search of the person's belongings - at any time for the purpose of ascertaining the presence of contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Attorneys must pass through a metal detector; and if necessary, a hand held metal detector will be used. A pat search may be conducted if necessary and the attorney agrees to submit to such a search. The attorney's belongings are searched for contraband.
21. Per the Standard, prior to each visit, legal service providers and assistants are identified.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Positive identification is required prior to an attorney visit. Attorneys are required to produce a valid Bar card.
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"/>	A non-governmental organization (NGO) must submit a written request, noting reasons, to the ICE AFOD or District Office.
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"/>	Former detainees or aliens in proceedings are to notify the Warden or designee before requesting visitation privileges. The Warden or designee is to weigh the nature and extent of an individual's criminal record and/or prior conduct against the benefits of visitation in determining visitation privileges.

PART 5 – 32. VISITATION

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

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

Based upon a review of policy and documentation and interviews of staff and detainees it was determined the visitation process and procedures at this facility allow detainees to maintain ties with their families, the community, legal representatives and consular officials consistent with the safe, secure and orderly operation of the facility.

(b)(6), (b)(7)(c) / April
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"/>	Policy 5.1.2, Voluntary Work Program, establishes policy and procedures for detainees requesting to work.
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"/>	This CDF facility does not allow detainees to work outside the secure perimeter of the facility.
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"/>	Detainees work a fixed schedule of no more than eight hours a day, 40 hours a week.
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"/>	Documentation on file indicates all detainees requesting to work are required to sign a Volunteer Work Program Agreement form. The agreement describes job description and responsibilities.
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">• Before the assignment begins• As a matter of written procedure	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of documentation indicates all food service volunteers are cleared by medical staff before assignment. The facility utilizes a Food Service Clearance checklist.
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 provides detainees with the opportunity to work and earn money. Detainees assigned to the program are paid one dollar per day and work assignments are strictly on a volunteer basis. Information regarding the volunteer work program is provided to detainees during orientation as well as outlined in the detainee handbook. Selection to the program is not dependent upon race, religion, national origin, gender, sexual orientation or disability.

Detainee working conditions are monitored by the facility's Volunteer Work/Classification Coordinator to ensure they comply with applicable federal, state and local work safety laws and regulations.

(b)(6), (b)(7)(c) / April 21
Reviewer's Signature / Date

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

Section VI JUSTICE

34 Detainee Handbook

35 Grievance System

36 Law Libraries and Legal Material

37 Legal Rights Group Presentations

PART 6 - 34. DETAINEE HANDBOOK

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a detainee handbook. Each detainee receives a copy of the local handbook and the ICE National Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The detainee handbook is written in English and translated into Spanish, and other languages spoken by significant numbers of detainees in that facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility handbook is available in English and Spanish versions.
3. A procedure for requesting interpretive services for essential communication has been developed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interpretive services are provided through a contract with Interpretalk.
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 utilizes an orientation video in conjunction with the facility handbook.
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 current handbook was revised in April 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"> Personal Items permitted to be retained by the detainee. Initial issue of clothes, bedding and personal hygiene items. How to access care. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The detainee handbook states in clear language basic detainee responsibilities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. The handbook states when a medical examination will be conducted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The handbook states medical examinations will be conducted within 14 days.
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"/>	

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"/>	Disposable razors are available on a daily basis. Procedures for obtaining razors are provided in the handbook and orientation video.
15. The handbook describes barber hours and hair cutting restrictions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The handbook describes; the telephone policy, debit card procedures, direct and frees calls; locations of telephones; policy when telephone demand is high; and policy and procedures for emergency phone calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. The handbook addresses religious programming.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. The handbook states times and procedures for commissary or vending machine usage. (where available)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Commissary is available twice weekly. Commissary procedures are provided in the handbook as well as posted in the housing units.
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"/>	ICE contact information is provided in the handbook, as well as is posted in each of the housing units.
23. The handbook describes the facility contraband policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. The handbook describes the facility visiting hours and schedule and visiting rules and regulations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. The handbook describes the correspondence policy and procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. The handbook describes the detainee disciplinary policy and procedures, including: <ul style="list-style-type: none"> Prohibited acts and severity scale sanctions. Time limits in the Disciplinary Process. Summary of Disciplinary Process. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 - 34. DETAINEE HANDBOOK

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
27. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> • Informal (if used) and formal grievance procedures; • The appeals process; • In CDFs procedures for filing an appeal of a grievance with ICE. • Staff/detainee availability to help during the grievance process. • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Homeland Security. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The grievance section of the handbook includes all of the listed items in this component.
28. The handbook describes the medical sick call procedures for general population and segregation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. The handbook describes the facility recreation policy including: <ul style="list-style-type: none"> • Outdoor recreation hours. • Indoor recreation hours. • In dorm leisure activities. • Rules for television viewing. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30. The handbook describes the detainee dress code for daily living; and work assignments and the meaning of color-coded uniforms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. The handbook specifies the rights and responsibilities of all detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainee's rights and responsibilities are: provided in the handbook; posted in the unit; and described in the orientation video.
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 detainees with a comprehensive verbal orientation and handbook during in-processing. The handbook describes the facility's rules and sanctions, disciplinary system, mail and visiting procedures, grievance system, services, programs and medical care services. English and Spanish versions are available. The facility's orientation video is played during booking, as well as each morning in the housing units.

(b)(6), (b)(7)(c) / April 21

Reviewer's Signature / Date

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

PART 6 – 35. GRIEVANCE SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees are informed about the facility's informal and formal grievance system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility handbook outlines the informal and formal process for the grievance system. Policy 3.5.3, Detainee Grievances, establishes procedures for the grievance system.
2. The admissions process includes providing each new arrival with a copy of the detainee handbook (or equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are required to sign for receipt of the facility handbook.
3. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> • Informal and formal grievance procedures; • The appeals process and step-by-step procedures; • Staff/detainee availability to help during the grievance process • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Justice. • How to file an emergency grievance. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the grievance section of the handbook indicates all steps listed in this component are explained.
4. Written procedures provide for the informal resolution of oral grievances (Not mandatory). If yes, the detainee has up to five days within which to make his or her concern known to a member of the staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. <ul style="list-style-type: none"> • Detainees may seek help from other detainees or facility staff when preparing a grievance. • Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Facility has written procedures for identifying and handling a time-sensitive emergency grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the facility's Detainee Grievance Policy indicates written procedures are in place to provide guidance to staff in the identification and handling of emergency grievances. A review of the facility's grievance log indicates there have been no such grievances filed during the past year.
7. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Staff shall not harass, discipline, punish or otherwise retaliate against a detainee who files a complaint or grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 – 35. GRIEVANCE SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. Procedures include maintaining a Detainee Grievance Log. <ul style="list-style-type: none"> If not, an alternative acceptable record keeping system is maintained. "Nuisance complaints" are identified in the records. For quality control purposes, staff document nuisance complaints received but not filed. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's Grievance Coordinator maintains a computerized Grievance Log. "Nuisance complaints" are identified and documented.
10. If a detainee who establishes a pattern of filing nuisance complaints or otherwise abusing the grievance system, the Facility Administrator may authorize staff to refuse to process subsequent complaints. This authority may not be delegated, even to an acting Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Staff 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"/>	The facility's Detainee Grievance Policy requires staff to forward any grievance relating to officer misconduct to ICE. Records indicate there have been no instances of a misconduct grievance being filed.
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"> In all facilities written procedures cover detainee appeals and are included in the detainee handbook 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The handbook outlines the procedures for the appeals process.
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"/>	

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 grievance system is thoroughly explained in the detainee handbook and each detainee receives a copy during in-processing. The grievance system is further explained in the facility orientation video. The facility has written policy and procedures which establishes a means by which detainees are able to file a formal grievance. All formal grievances are logged and tracked by the Warden's Administrative Assistant. The facility policy establishes time limits for processing, investigating and responding to all grievances. Standard procedures include providing the detainee with a written response, which is to give the basis for the decision. A review of the grievance system indicates this is being done and in a timely manner. Facility policy also allows detainees to appeal the initial decision to a higher level.

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

April

Reviewer's Signature /

(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"/>	
2. The law library contains all materials listed in the "Access to Legal Materials" Standard, Attachment A. The listing of materials is posted in the law library. <ul style="list-style-type: none"> In lieu of/or in addition to the physical law library, ICE detainees have access to the Lexus Nexus electronic law library. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Attachment A is posted in the law library. The law library is also equipped with LexisNexis.
3. If the Lexis/Nexis CD-ROM service alternative is used for the publications in Attachment A, the facility provides detainees sufficient: <ul style="list-style-type: none"> Operable computers and printers, in sufficient numbers in order to provide access Photocopiers, and Supplies for both. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are 10 computer stations available for general population detainees and three available for Level 3 detainees and those confined in segregation units. Photocopiers and supplies are available to detainees.
4. The library contains a sufficient number of chairs, is well lit and is reasonably isolated from noisy areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The law library is adequately equipped with typewriters, computers or both and has sufficient supplies for daily use by the detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Detainees are provided with the means to save legal work in a private electronic format for future use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Law Librarian has an ample supply of two gigabyte (2GB) flash drives, which are labeled, and can be provided to detainees for their use during their stay at this facility. The flash drives are stored in a locked cabinet in the law library and provided to the detainee when s/he uses the law library equipment.
7. The facility subscribes to updating services where applicable and legal materials requiring updates are current.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LexisNexis was updated 04-18-11.
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"/>	The Law Librarian stated the request to submit material to the law library would be forwarded to ICE for approval. It was reported, however, there has never been a request to submit such material.
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"/>	

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are provided with one hour per day of access to the law library, if they submit a request. Detainees with a pending court deadline are provided with two hours of daily access.
11. Detainees may request material not currently in the law library. Each request is reviewed and where appropriate an acquisition request is initiate and timely pursued. Request for copies of court decisions are accommodated within 3 – 5 business days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are allowed to submit requests for materials not currently in the law library; however, no such requests have been received. There is a very active legal rights organization, Northwest Immigration Rights Project (NIRP), which provides much of the requested material to detainees.
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"/>	There are detainee volunteers available daily in the law library to assist other detainees with their research and the preparation of legal documents.
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"/>	There are three computers in a separate room available for use by detainees in segregation.
16. All denials of access to the law library fully documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Law Librarian reported there have been no denials of access to the law library. He further reported that if such a denial were to occur, a report would be produced and forwarded to the Warden and ICE.
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"/>	The Law Librarian reported there have been no denials of access to the law library. He further reported that if such a denial were to occur, a report would be produced and forwarded to the Warden and ICE
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.)*

Based upon a review of documentation, inspection of the Law Library and interviews of staff and detainees it was determined detainees have sufficient access to the courts, counsel and legal materials.

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

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"/>	There have been no denials of materials to be used by the attorneys associated with the NIRP.
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"/>	The NIRP makes presentations four times weekly to detainee groups. There is a permanent posting in the housing units stating the time and location of meetings.
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"/>	All detainees are allowed access to the presentations.
6. When the number of detainees allowed to attend a presentation is limited, the facility allows a sufficient number of presentations so that all detainees signed up may attend.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are a sufficient number of weekly presentations to accommodate all detainees wishing to attend the NIRP presentations.
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"/>	Arrangements are made to provide detainees in segregation access to presentations.
8. Interpreters are admitted when necessary to assist attorneys and other legal representatives.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Presenters are able to communicate in several languages. Upon request, arrangements will be made to provide interpreters
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"/>	Presenters are provided with four one-hour time slots per week.
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No presenters have had their privileges suspended.
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"/>	A video on immigration rights is played daily in the housing units.
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.)

The NIRP meets four times per week to provide Legal Rights Presentations. NIRP also provides free legal services to detainees.

(b)(6), (b)(7)(c) / April 21
Reviewer's Signature / Date

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

Section VII ADMINISTRATION & MANAGEMENT

38 Detention Files

39 News Media Interviews and Tours

40 Staff Training

41 Transfer of Detainees

PART 7 – 38. DETENTION FILES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. A Detention File is created for every new arrival whose stay will exceed 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The detainee Detention File contains either originals or copies of documentation and forms generated during the admissions process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The detainee's Detention File also contains documents generated during the detainee's custody. <ul style="list-style-type: none"> • Special requests • Any G-589s and/or I-77s or IGSA equivalent, closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All of the documents identified in this component were observed to be included in the detention files.
4. The Detention Files are located and maintained in a secured area. If not the cabinets are lockable and distribution of the keys is limited to supervisors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The file room is a secure area and staffed during the day. After hours, the file room is locked and only shift supervisors have access to the area.
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"/>	All appropriate documents are included in the files. GEO staff maintains custody of the detention file for approximately 30 days after it is closed-out to ensure all documents which may have been generated are received in the file room and placed in the file. After 30 days, the files are given to ICE staff who are located at the facility.
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"/>	When a file is completed and ready to be archived, the Records Supervisor stamps "Detention File Closed" on the front cover.
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"/>	The log was observed and found to be current.
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"/>	Copies of release of information forms were observed in detainee detention files.

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
11. Electronic data on individual detainees is subject to the same Privacy Act regulations as the contents of traditional paper Detention Files and A-files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The Facility Administrator or staff designate ensures that necessary equipment and supplies, including copier and copier supplies are available; all equipment is maintained in good working order and that equipment has the capacity to handle the volume of work.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The Detention Operations Supervisor or equivalent can direct certain 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"/>	Archived files are sent to ICE, where they are stored for six years before being destroyed.
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 created for all detainees admitted to this facility. A review of a random selection of files revealed they contain documents and information required by the PBNDS. The files are maintained in a secure and confidential manner, and access to them is restricted.

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

(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"/>	Documentation was reviewed which indicated interviews of detainees by members of the media were approved by the FOD.
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"/>	Appropriate documentation was observed in detainees' A-files and detention files, indicating media interviews were requested and approved.
3. The Field Office Director consulted with Headquarters before deciding to allow an interview with a detainee who was the center of a controversy, or special interest, or high profile case.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There were no recent examples of requests for interviews with high profile or special interest, or controversial detainees.
4. Signed release 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"/>	The appropriate release forms were observed in a detainee's A-file.
5. All press pools are organized according to the procedures in the Detention Standard. <ul style="list-style-type: none"> A press pool may be established when the Field Office Director and facility administrator determine that the volume of interview requests warrants such action. All media representatives with pending or requested, tours, or visits were notified that, effective immediately and until further notice, all media representatives must comply with the press pool guidelines established by the Field Office Director. All material generated from such a press pool is made available to all news media, without right of first publication or broadcast. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 5.2.3, Detainee Visitation, contains a section for the organization of press pools which includes all of the bulleted items contained in this component.

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 has policy and procedures in place which appropriately address access to the facility and to detainees by the media, while safeguarding the detainee's right to decline being interviewed by the media.

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

(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"/>	Policy 1.4, Staff Training and Development, establishes policies and procedures regarding orientation, initial training and annual training for all staff, contractors and volunteers.
2. The amount and content of training is consistent with the duties and function of each individual and the degree of direct supervision that individual receives.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. At least one qualified individual with specialized training for the position coordinates and oversees the staff development and training program. At a minimum, full-time training personnel complete a 40-hour training-for-trainers course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a certified Staff Training Manager responsible for oversight of staff training and development.
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"/>	A review of the facility's Annual Training Plan indicates it is reviewed and approved by the Warden.
5. An accurate and complete record is maintained of all formal training activities in: <ul style="list-style-type: none"> • Individual training folders, • Other training records systems, and/or • Electronic systems. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Training Manager maintains active training files and also enters training data in the Learning Management System (LMS), an electronic training record tracking system.

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>6. Each new employee, contractor, and volunteer is provided an orientation prior to assuming duties. While tailored specifically for staff, contractors, and volunteers, the orientation programs include, at a minimum:</p> <ul style="list-style-type: none"> • Working conditions • Cultural diversity/understanding staff & detainees • Code of ethics • Personnel policy manual • Employees' rights and responsibilities • Drug-free Workplace • Health-related emergencies • Signs of Suicide risk and precautions • Suicide prevention and intervention • Hunger strikes • Use of Force • Keys and Locks • Overview of the criminal justice system • Tour of the facility • Facility goals and objectives • Facility organization • Staff rules and regulations • Sexual harassment/sexual misconduct awareness • Personnel policies • Program overview • Orientation and training on detainee handbook and detainee rights. • Requirement of special-needs detainees. • National Detention Standards 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>A review of the documentation on file indicates each new employee, contractor and volunteer is provided orientation prior to assuming duties. New employees, contractors and volunteers receive an initial 40 hours of training that addresses each bulleted item listed in this component. The facility utilizes administrative staff as well as ICE staff to conduct training.</p>

PART 7 – 40. STAFF TRAINING

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

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

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>8. Professional and support employees (including contractors) who have regular or daily detainee contact will receive training on the following subjects, at a minimum:</p> <ul style="list-style-type: none"> • Security procedures and regulations • Code of Ethics • Health-related emergencies • Drug-free workplace • Supervision of detainees • Signs of suicide risk and hunger strike • Suicide precautions • Use-of-force regulations and tactics • Report writing • Detainee rules and regulations • Key control • Rights and responsibilities of detainees • Safety procedures • Emergency plan and procedures • Interpersonal relations • Social/cultural lifestyles of the detainee population • Cultural diversity/understanding staff & detainees • Communication skills • Cardiopulmonary resuscitation (CPR)/First aid • Counseling techniques • Sexual harassment/sexual misconduct awareness. • National Detention Standards. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>A review of the documentation on file indicates all professional and support employees are provided orientation training prior to assuming duties. New professional and support employees receive an initial 40 hours of training that addresses each bulleted item listed in this component. The facility utilizes administrative staff as well as ICE staff to conduct training.</p>

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>9. Full-time health care employees receive at least 40 hours of formal orientation before undertaking their assignments. At a minimum, the orientation program includes:</p> <ul style="list-style-type: none"> • The purpose, goals, policies and procedures for the facility and parent agency security and contraband regulations • Key control; appropriate conduct with detainees • Responsibilities and rights of employees • Standard precautions • Occupational exposure • Personal protective equipment • Bio-hazardous waste disposal • Overview of the detention operations. • National Detention Standards. • Medical grievance procedures and protocol. • Requirement for special needs detainees. • Code of Ethics • Drug free workplace • Hostage situations and staff conduct if taken hostage. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>A review of the documentation on file indicates all full-time healthcare employees receive an initial 40 hours of training that addresses each bulleted item listed in this component. The facility utilizes administrative staff as well as ICE staff to conduct training. In addition, IHSC staff receives an additional seven weeks of orientation training provided by medical staff.</p>

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>10. Security personnel (including contractors) will receive training on the following subjects, at a minimum:</p> <ul style="list-style-type: none"> • Security procedures and regulations • Supervision of detainees • Searches of detainees, housing units, and work areas • Signs of suicide risk, precaution, prevention and intervention. • Code of Ethics • Health-related emergencies • Drug-free workplace • Suicide precautions • Self-defense techniques • Use-of-force regulations and tactics • Report writing • Detainee rules and regulations • Key control • Rights and responsibilities of detainees • Safety procedures • Emergency plans and procedures • Interpersonal relations • Social/cultural lifestyles of the detainee population • Cultural diversity/understanding staff & detainees • Communication skills • Cardiopulmonary resuscitation (CPR)/first aid • Counseling techniques • Sexual abuse/assault awareness • National Detention Standards. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the documentation on file indicates all security personnel (including contractors) are provided orientation prior to assuming duties. New security personnel (including contractors) receive an initial six weeks of training that addresses each bulleted item listed in this component. The facility utilizes administrative staff as well as ICE staff to conduct training.
<p>11. Situation Response Teams (SRTs) receive:</p> <ul style="list-style-type: none"> • Specialized training before undertaking their assignments. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation on file indicate (b)(7)(E) members receive an additional 40 hours of specialized training prior to assuming their duties and then receive eight hours of training each month thereafter.
<p>12. Facility management and supervisory staff receive:</p> <ul style="list-style-type: none"> • Management and Supervisory training 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training records were reviewed and verified facility management and supervisory staff receives this 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. (MANDATORY) Personnel authorized to use firearms receive training that covers their use, safety, and care and constraints on their use -- before being assigned to a post involving their possible use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Random files of personnel authorized to carry firearms were reviewed and found to be in compliance with this component. All personnel assigned to posts requiring the issuance of a weapon receive an initial eight hours of firearms training.
14. (MANDATORY) All personnel authorized to use firearms demonstrate competency in their use at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of training files indicates all personnel authorized to use firearms demonstrate competency on a quarterly basis.
15. (MANDATORY) Personnel authorized to use chemical agents receive training in the use of chemical agents and in the treatment of individuals exposed to a chemical agent before being assigned to a post involving their possible use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All security personnel receive training in (b)(7)(E) during the initial six weeks of training.
16. All staff receives orientation and annual training on the facility's drug-free workplace program. Typical contents are: <ul style="list-style-type: none"> • Staff, contractors, and volunteers prohibited from: • Using illegal drugs. • Possessing illegal drugs except in the authorized performance of official duties. • Procedures to be used to ensure compliance. • Opportunities available for treatment and/or counseling for drug abuse. • Penalties for violation of the policy. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's Human Resource Manager provides this training during orientation. A review of the training curriculum indicates all elements of this component are addressed in the lesson plan.
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"/>	
18. All staff are trained during orientation and annually thereafter, regarding the facility's code of ethics. Typical contents are: <ul style="list-style-type: none"> • Staff, contractors, and volunteers prohibited from: • Using their official positions to secure privileges for themselves or others. • Engaging in activities that constitute a conflict of interest. • Accepting any gift or gratuity from, or engaging in personal business transactions with a detainee or a detainee's immediate family. • Acceptable behavior in the areas of campaigning, lobbying or political activities. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
19. New staff are required to acknowledge in writing that they have reviewed and understand facility work rules, ethics, regulations, conditions of employment, and related documents, and a copy of the signed acknowledgement is maintained in that person's personnel file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>20. (MANDATORY) All staff in frequent contact with detainees is trained at least annually to respond to health-related emergencies within four minutes. The training is provided by a responsible medical authority in cooperation with the facility administrator and includes:</p> <ul style="list-style-type: none"> • Recognizing of signs of potential health emergencies and the required responses. • Administering first aid and cardiopulmonary resuscitation (CPR). • Obtaining emergency medical assistance through the facility plan and its required procedures. • Recognizing signs and symptoms of mental illness, suicide risk, retardation, and chemical dependency. • The facility's established plan and procedures for providing emergency medical care including, when required, the safe and secure transfer of detainees for appropriate hospital or other medical services, including by ambulance when indicated. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of documentation indicates that staff having frequent contact with detainees receives annual training regarding response to health-related emergencies. Documentation shows the staff is trained: to respond to emergencies within four minutes; to recognize signs of potential health emergencies and obtain medical assistance; in CPR and certified; and to recognize signs and symptoms of mental illness, suicide, retardation and chemical dependency. The facility has an established plan and procedure for providing emergency care, including the transfer of detainees to local hospital via ambulance services.
<p>21. All staff in frequent contact with detainees are trained at least annually on the facility's Sexual Abuse and Assault Prevention and Intervention Program, to include:</p> <ul style="list-style-type: none"> • Understanding that sexual abuse or assault is never an acceptable consequence of detention. • Recognizing housing or other situations where sexual abuse or assault may occur. • Recognizing the physical, behavioral, and emotional signs of sexual abuse or assault and ways to prevent such occurrences. • Knowing how to report knowledge or suspicion of sexual abuse or assault and make intervention referrals in the facility's program. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of training documents and the facility's Annual Training Plan indicates all staff is trained at least annually on the facility's Sexual Abuse and Assault Prevention and Intervention Program. All bulleted items listed in this component are addressed and medical staff provides this 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
<p>22. (MANDATORY) All staff in frequent contact with detainees are trained at least annually on the facility's Suicide Prevention and Intervention Program, to include:</p> <ul style="list-style-type: none"> Identifying the warning signs and symptoms of impending suicidal behavior, Demographic, cultural, and precipitating factors of suicidal behavior, Responding to suicidal and depressed detainees, Communication between correctional and health care personnel, Referral procedures, Housing observation and suicide-watch level procedures, and Follow-up monitoring of detainees who have attempted suicide. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of training documents and the facility's Annual Training Plan indicates all staff is trained annually on the facility's Suicide Prevention and Intervention Program. All bulleted items listed in this component are addressed and medical staff provides this training.
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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>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:</p> <ul style="list-style-type: none"> The requirements of this Detention Standard The use of force continuum Communication techniques Cultural diversity Dealing with the mentally ill Confrontation-avoidance techniques Approved methods of self-defense Force cell-move techniques Communicable diseases, particularly precautions to be taken for use of force Application of restraints (progressive and hard) Reporting procedures. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the facility's Annual Training Plan and individual training files indicates training is provided to all staff regarding staff awareness in controlling situations involving aggressive detainees. The training plan includes all bulleted items listed in this component.

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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 comprehensive training to all facility staff, contractors and volunteers. The facility has developed training and lesson plans which provide appropriate orientation and initial and ongoing annual training for all staff, contractors and volunteers. All training is provided by qualified instructors. In addition to initial orientation, ongoing instruction is provided during Annual Refresher Training.

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

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



PART 7 - 41. TRANSFER OF DETAINEES

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

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

PART 7 - 41. TRANSFER OF DETAINEES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. For medical transfers, transporting officers receive instructions regarding medical issues.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Detainee's funds, valuables and property are returned and transferred with the detainee to his or her new location.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Copies of receipts indicating detainees had received their funds and valuables upon transfer from this facility were found in those files reviewed of transferred detainees.
12. Transfer and documentary procedures outlined in Section C and D are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff coordinate with GEO staff to ensure the procedures outlined in Section C and D are implemented.
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

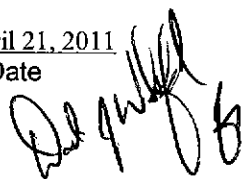
☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

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

Detainees are not generally transferred from this facility to another facility, but rather released from custody or removed to their country of origin. Detention files of detainees transferred from this facility were observed to contain appropriate documentation and notifications. Although the facility transportation policy does not address specific prohibitions regarding information provided to detainees pending transport, the Transportation Officer Post Orders detail the manner in which detainees are to be handled and what information they may be provided prior to transfer.

Based upon the review of policy and procedures, interviews of staff, and the review of detention files it is determined that the process for transferring detainees from this facility is consistent with the ICE PBNDS.

(b)(6), (b)(7)(c) April 21, 2011
Reviewer's Signature / Date





U.S. Immigration
and Customs
Enforcement

MEMORANDUM FOR: Nathalie R. Asher
Field Office Director

FROM:

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

(A) AD DMD

Assistant Director for Detention Management

SUBJECT: Northwest Detention Center Annual Review

The annual review of the Northwest Detention Center conducted on April 19-21, 2011, in Tacoma, Washington has been received. A final rating of **Meets the 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 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 19, 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 Division at (202)

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

cc: Official File

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