



U.S. Immigration
and Customs
Enforcement

NOV 20 2011

MEMORANDUM FOR: Philip Miller
Field Office Director
New Orleans Field Office

FROM: (b)(6), (b)(7)c
Assistant Director for Detention Management

SUBJECT: South Louisiana Correctional Center Annual Review

The annual review of the South Louisiana Correctional Center conducted on February 8-10, 2011, in Basile, Louisiana has been received. A final rating of **Meets Standards** has been assigned. No further action is required and this review is closed.

The rating was based on the Lead Compliance Inspector (LCI) Summary Memorandum and supporting documentation. The Field Office Director must 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 February 8, 2012.

Should you or your staff have any questions regarding this matter, please contact (b)(6), (b)(7)c
(Acting) Deputy Assistant Director, Detention Management at (202) 732- (b)(6), (b)(7)c

cc: Official File

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

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



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

5-11-09 update

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

Name	South Louisiana Correctional Center
Address (Street and Name)	3843 Stagg Avenue
City, State and Zip Code	Basile, Louisiana 70515
County	Evangeline Parish
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 February 8, 2011 to February 10, 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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Performance-Based National Detention Standards

Section I SAFETY

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

PART 1 – 1. EMERGENCY PLANS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. No Detainee or detainee groups exercise control or authority over other detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Detailed language found in policy addresses the bulleted items. Staff appears to understand their responsibilities regarding ICE and non-ICE detainee safety.
3. Staff is trained to identify signs of detainee unrest. <ul style="list-style-type: none"> • What type of training and how often? 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Initial, annual, and ongoing training prepares staff to identify signs of unrest at this facility.
4. Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This requirement is met through daily roll call training and written "unusual occurrence reports."
5. There is a designated person or persons responsible for emergency plans and their implementation. Sufficient time is allotted to the person or group for development and implementation of the plans.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Warden and Deputy Warden are responsible for promulgating emergency plans. The Security Officer is also well versed and active during implementation of the plans.
6. Each emergency plan is assigned a number and is strictly accounted for. A list identifying the location of each emergency plan is maintained by the Chief of Security or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. All staff receives training in the emergency plans during their orientation training as well as during their annual training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
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"/>	Emergency plans are comprehensive and detailed and address the requirements of this component. Staff appears to have a good understanding of requirements.

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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. However, the facility has procedures for notification which the Warden initiates when needed.
12. The facility has cooperative contingency plans with applicable: <ul style="list-style-type: none"> Local law enforcement agencies State agencies Federal agencies 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs; however, cooperative agreements with pertinent agencies have been developed.
13. The facility conducts mock emergency exercises with agencies or departments with which they share mutual aid agreements and Memoranda of Understandings. The exercises should test specific emergency plans to assess their effectiveness.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs; however, such exercises are planned and conducted. This facility conducted a mock fire drill on January 23, 2011.
14. All staff receives copies of the Facility Hostage policy and procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs; however, these documents are available at each post.
15. (b)(7)e (b)(7)e Within 24 hours after release, hostages are screened for medical and psychological effects.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs; however, (b)(7)(E) (b)(7)e (b)(7)e
16. The facility maintains a list of translator services in the event one is needed during a hostage crisis.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs; however, lists of translators are available.
17. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. However, medical personnel fill a prominent role before, during, and after any emergency incident. Written plans detail responsibilities of medical personnel which include being available to provide any needed advice or treatment.
18. The Food Service Department maintains at least 3-days' worth of emergency meals for staff and detainees.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs; however, at least three days of food supplies are maintained for emergencies.
19. Written plans illustrate locations of shut-off valves and switches for utilities (water, gas, electric).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Written plans as well as post orders at affected posts address this requirement.

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
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"/>	Supervisors are recalled to work in the event of a work stoppage to keep the facility functioning.
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"/>	This facility has detailed emergency plans that address all of the bulleted items. These plans are assessed quarterly and revised as necessary by the Warden, Deputy Warden, and the Chief Of Security. Staff appears to understand these plans. Emergency plans are discussed in initial training as well as during roll call on each shift.
22. The Emergency Plans specify a procedure for post-emergency debriefings and discussions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 1 – 1. EMERGENCY PLANS

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

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

The facility has detailed and wide-ranging emergency plans that specify actions to be taken during various contingencies. These plans have been developed by facility administrators, and are available to line staff in the form of written policy. Interviews with staff revealed an understanding of these plans and their role in implementation. The plans are reviewed by supervisors, coordinated with other local agencies, and updated as required.

(b)(6), (b)(7)c/ February 10,

Reviewer's Signature

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

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. (MANDATORY) The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a comprehensive system for storing, issuing, and maintaining inventories of hazardous materials.
2. Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each area of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inventories were reviewed in the two facility bulk storage areas (food service and the sanitation chemical storage room). The inventories were found to comply with this requirement.
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"/>	
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"/>	
6. Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> Quantities are limited. Detainees are trained. Staff always supervises detainees using these substances. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are issued diluted sanitation chemicals. Detainees are trained and supervised by staff. Only staff handles or otherwise uses flammable, caustic, and toxic chemicals.
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"/>	Lighting fixtures and electrical equipment meeting National Electrical Code requirements are installed in storage rooms and other hazardous areas. Limited quantities of flammable materials are stored within the facility.

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. All toxic and caustic materials stored in their original containers in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic and caustic materials are stored in secure areas in food service, the sanitation chemical storage room, and the Captain's Office.
10. Excess flammables, combustibles, and toxic liquids are disposed of properly in accordance with MSDS.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Staff directly supervise and account for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, for example, shoe dye. All such products are clearly labeled as such. "Accountability" includes issuing such products to detainees in the smallest workable quantities.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No products containing methyl alcohol were observed during the inspection.
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"/>	Staff receives required training during initial orientation. Detainees do not use or handle flammable, toxic, or caustic materials.
13. (MANDATORY) The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association (NFPA) and the Occupational Safety and Health Administration (OSHA).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A qualified contractor conducts annual sprinkler system test/inspections as required by the authority having jurisdiction (Basile Fire Department). In addition, an annual fire detection inspection/test is conducted by a qualified contract source.
14. A technically qualified staff member conducts fire and safety inspections.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Prior to November 2010, a qualified Safety Manager conducted monthly inspections. A new untrained staff member has since been assigned the position. As a result, monthly inspections have not been conducted since November. Reportedly, the new Safety Manager will soon complete an OSHA-based training course. Monthly inspections will resume after the Safety Manager has completed the training program.
15. The Safety Office (or officer) maintains files of inspection reports, including corrective actions taken.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Inspections have not been conducted since November 2010.
16. (MANDATORY) The facility has an approved fire prevention, control, and evacuation plan.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The plan is reviewed and approved annually by the local Fire Department Chief.

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
17. The plan requires: <ul style="list-style-type: none"> 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 plan includes all five of the bulleted items of this component.
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"/>	Each work shift conducts a quarterly fire drill.
19. A sanitation program covers barbering operations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy IV-012, Sanitation and Hygiene, establishes a sanitation program covering barbering operations.
20. The barbershop has the facilities and equipment necessary to meet sanitation requirements.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Disposable neck strips or clean towels are not used to prevent unprotected skin (neck) from contact with reusable plastic barber drapes.
21. The sanitation standards are conspicuously posted in the barbershop.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Written procedures regulate the handling and disposal of used needles and other sharp objects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires proper handling and disposal of used needles and other 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"/>	The medical clinic conducts hypodermic needle inventories.
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"/>	Teracycle picks up and disposes of infectious/bio-hazardous waste generated by the facility.
27. Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff receives training during initial orientation.
28. Do the methods for handling/disposing of refuse meet all regulatory requirements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	J&J Exterminators perform monthly pest inspections and 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"/>	The local municipality conducts the tests.
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"/>	
32. The Facility appears clean and well maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Hazardous material storage rooms meet the security and structural requirements of the standard. Storage cabinets meet the physical requirements specified in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hazardous material storage rooms and storage cabinets used by the facility to store hazardous materials, meet NFPA requirements.
34. The Health Services Administrator has implemented a program supporting a high level of environmental sanitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35. The Health Services Administrator conducts medical-facility inspections daily. Each inspection includes noting the condition of floors, walls, windows, horizontal surfaces, and equipment.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The Health Services Administrator does not conduct daily medical facility inspections.
36. The assigned staff member shall: Conduct special investigations and comprehensive surveys of environmental health conditions, and provide advisory, consultative, inspection, and training services regarding environmental health conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Medical Supervisor is the staff member assigned this responsibility.
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 Medical Supervisor is responsible for the environmental health program.

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
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"/>	Environmental health and safety conditions are maintained at a level of safety and hygiene that meets the recognized standards of the organizations in all six bulleted items.

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

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

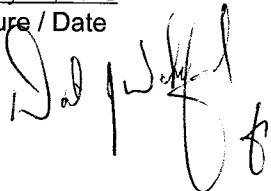
This single story block correctional facility was constructed in 1993. Two additional buildings were added in 1998 and construction on a new services building was recently completed. All detention occupancies within the facility are protected with a fire sprinkler system and fire detection system as required by NFPA. The administrative areas within the facility are equipped with a fire detection system, but are not sprinklered. The newly constructed facility services building, which will house the food service operation, medical clinic, and commissary, is equipped throughout with a fire sprinkler system and a detection system. Annual fire sprinkler and detection system tests/inspections and kitchen hood system tests/inspections are conducted as required by the authority having jurisdiction. Fire extinguishers and emergency generators are tested/inspected at correct intervals, and quarterly fire drills are conducted. Monthly fire and safety inspections were not conducted in December 2010 and January 2011.

Hazardous materials are properly handled and stored at this facility. Detainees are not authorized to handle or otherwise use flammable, caustic, or toxic materials. Constant inventories are maintained for flammable, caustic, and toxic materials. MSDSs are available for review by staff and detainees.

The facility was well maintained at the time of the inspection. The sanitation level complies with ICE requirements with two exceptions. Disposable neck strips or clean towels are not used to protect skin from contact with reusable barber hair drapes. The Health Services Administrator does not conduct daily medical facility inspections.

John L. Lee / February 10, 2011

Reviewer's Signature / Date



PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Records disclosed that a Louisiana CDL is held by all officers required to drive a commercial-sized vehicle.
3. Supervisors maintain records for each vehicle operated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of records revealed compliance.
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"/>	Records of all required inspections were available for review
5. Documentation indicating safety repairs are completed immediately and vehicles are not used until they have been repaired and inspected is available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Officers use a checklist during every vehicle inspection. <ul style="list-style-type: none"> 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"/>	Deficiencies affecting operability are reported and corrected before a vehicle goes back into service.
7. Transporting officers: <ul style="list-style-type: none"> Limit driving time to 10 hours in any 15 hour period when transporting detainees. Drive only after eight consecutive off-duty hours. Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours. Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days. During emergency conditions (including bad weather), officers may drive as long as necessary to reach a safe area—exceeding the 10-hour limit. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	These requirements are addressed in policy for all transport officers. Interviews with staff indicated and understanding of policy and the requirements of all the bulleted items of this component.
8. (b)(7)(e) officers with valid Commercial Drivers Licenses, (CDL's) required in any vehicle transporting detainees. <ul style="list-style-type: none"> 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"/>	
9. The transporting officer inspects the vehicle before the start of each detail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each vehicle is inspected by a transport officer prior to the start of a detail.

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
10. Positive identification of all detainees being transported is confirmed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All transported detainees undergo several checks, including face-to-photo identification prior to transport.
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"/>	Transport officers search all detainees immediately prior to boarding.
12. The facility ensures that the number of detainees transported does not exceed the vehicle manufacturer's occupancy level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. (b)(7)(E)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs; however, (b)(7)e (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"/>	A visual count is performed when all passengers are seated and again after any stop.
15. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Officers ensure that no one contacts the detainees. • (b)(7)e officer remains in the vehicle at all times when detainees are present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Officers do not permit any contact with detainees. (b)(7)e officer is always present in the vehicle.
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"/>	An approved nutritious meal is provided anytime the transport is taking place during scheduled meal times.
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"/>	All meals are inspected by the vehicle crew. The transport crew complies with both bulleted items of this component.

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: <ul style="list-style-type: none"> • <div style="border: 1px solid black; padding: 5px; display: inline-block;">(b)(6), (b)(7)c</div> 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Care is taken to ensure adequate communication equipment is available for transport officers. Vehicles contain all equipment required by this component to facilitate safe and secure transport of ICE detainees.
20. The vehicles are clean and sanitary at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All vehicles observed were clean and sanitary at the time of the inspection.
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"/>	All personal property of a detainee is inventoried, inspected, and accompanies the detainee to his destination.
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"/>	This facility has a detailed transport plan that addresses all of the bulleted items of this component. The transportation Captain appears to be knowledgeable regarding all the requirements.

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 an active transportation unit that transports hundreds of ICE detainees monthly. The facility has promulgated strict guidelines that govern the actions of the transport officers. The transportation Captain and the Chief of Security closely supervise all transports. All transport officers hold the rank of sergeant. The vehicle fleet was clean and well maintained at the time of the inspection. Records and reports indicate a comprehensive maintenance program is in effect. Overall, the facility conducts a professional operation that complies with the requirements of the PBNDS regarding Transportation.

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

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"/>	The admission process of IGSAs is only required to include an orientation as well as providing a copy of the detainee handbook. The other requirements of this component are only applicable to SPCs and CDFs. This facility uses two video presentations that address all of the other requirements noted in this component. During the orientation phase of the intake process, the detainee is issued a site specific handbook as well as the ICE National Detainee Handbook
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 medical screenings during the admission process are performed by permanently assigned intake officers who have been trained and certified by the facility 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"/>	The portion of this component requiring new detainees to be segregated from the general population during the orientation and classification period is specific to SPCs and CDFs. However, newly received detainees do remain segregated from general population during the orientation and classification process. Additionally, accompanying documentation, when available, is used to identify and classify each new arrival.
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"/>	

PART 2 – 4. ADMISSION AND RELEASE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
5. Detainees are subjected to a strip search only when reasonable suspicion has been established and not as routine policy. Non-criminal detainees are never subjected to a strip search but are patted down unless cause or reasonable suspicion has been established. All strip searches are documented on G-1025, or equivalent, with proper supervisory approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component that requires all strip searches to be documented on G-1025, or equivalent, with proper supervisory approval is specific to SPCs and CDFs. All strip searches are documented on a facility-generated form similar to a G-1025, and approved by a supervisor. Detainee strip searches are only conducted if reasonable suspicion exists. Non-criminal detainees are only pat searched, unless reasonable suspicion has been established.
6. The "Contraband" standard governs all personal property searches. IGSAs and CDFs use or have a similar contraband standard. Staff prepares a complete inventory of each detainee's possessions. The detainee receives a copy. All identity documents are inventoried and given to ICE staff for placement in the A-file. All funds and valuables are safeguarded in accordance with ICE Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy III-013-J governs all personal property searches. A complete inventory is prepared and a copy is provided to the detainee. Identity documents are inventoried and given to ICE staff. Funds and valuables are secured. A log book entry is made.
7. Staff completes Form I-387 or similar form for CDFs and IGSAs for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A similar form is used at this facility for missing property claims. All claims are logged and forwarded 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs; however, all releases are coordinated with ICE using form I-203.
10. Staff completes paperwork/forms for release as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Each detainee receives a receipt for personal property secured by the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The facility has a system to maintain accurate records and documentation for admission, orientation, and release.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses Golden Eagle software, a detainee management program, to maintain accurate records concerning admission, orientation, and release. Documentation from intake to release is also maintained in the detainee detention file.

PART 2 – 4. ADMISSION AND RELEASE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. ICE staff enters all information pertaining to release, removal, or transfer of all detainees into the Enforce Alien Detention Module (EADM) within 8 hours of action.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. However, the assigned ICE Deportation Officer takes signed copies of the I-203s and I-216s to the Oakdale Sub-Office where the information is entered into the EADM.
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, to include the detainee handbook and the orientation videos, are available in both English and Spanish.

PART 2 – 4. ADMISSION AND RELEASE

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

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

Interviews were conducted with the Deputy Warden, intake staff, and classification staff. The admission and release area was observed and various documents were reviewed. Facility policies were also reviewed and found compliant with the PBNDS regarding Admission and Release. Twelve of fourteen components were found to meet standards with two being not applicable.

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

Reviewer's Signature /

(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"/>	The portion of this component requiring the facility to use the required Objective Classification System is specific to SPCs and CDFs. This facility does use a similar objective classification system to classify detainees.
2. The facility classification system includes: <ul style="list-style-type: none"> Classifying detainees upon arrival. Separating individuals who cannot be classified upon arrival from the general population. The first-line supervisor or designated classification specialist reviews every classification decision. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are classified upon arrival. However, detainees who cannot be classified immediately are separated from the general population until they can be appropriately classified. A designated classification specialist reviews all classification decisions.
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"/>	Intake officers review work folders and all available documentation to identify and classify each new arrival. A-files are created and maintained at ICE offices and are not available to intake officers at this facility.
4. Staff uses only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/ unconfirmed reports may be filed but are not used to score detainee classification.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Housing assignments are based on classification-level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Facility policy ensures classification levels do not affect a detainee's opportunity for recreation. Policy further requires that detainees only recreate with persons in similar classifications.
7. Detainee work assignments are based upon classification designations.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	ICE detainees do not work at this facility. Work assignments of non-ICE detainees are based upon classification designations.

PART 2 – 5. CLASSIFICATION SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. The classification process includes reassessment/reclassification. The First Reassessment is to be completed 60 days to 90 days after the initial assessment. Subsequent reassessments are completed at 90 day to 120 day intervals. Special Reassessments are completed within 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring subsequent reassessments to be completed at 90 day to 120 day intervals is specific to SPCs and CDFs. The classification process at this facility includes reassessment/reclassification. Policy requires the First Reassessment to be completed in 60 to 90 days. Special reassessments are completed within 24 hours. Even though subsequent reassessments at 90 to 120 day intervals are not required at IGSA's, they are scheduled and completed if the detainee has not been released.
9. The classification system includes standard procedures for processing new arrivals' appeals. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component that indicates that only a designated supervisor or classification specialist to have the authority to reduce a classification-level on appeal is specific to SPCs and CDFs. At this facility, only a designated supervisor or classification specialist has the authority to reduce a classification level on appeal. The classification system does include standard procedures for processing new arrivals' appeals.
10. Classification appeals are resolved w/in 5 business days. Detainees are notified of the outcome within 10 business days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring classification appeals to be resolved in five business days is specific to SPCs and CDFs. This facility does resolve appeals within five business days, and detainees are notified of outcomes within 10 business days.
11. Classification designations may be appealed to a higher authority such as the Facility Administrator or equivalent.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Classification decisions may be appealed to a higher authority as provided in facility policy IV-001.
12. The Detainee Handbook or equivalent for IGSA's explains the classification levels, with the conditions and restrictions applicable to each.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The detainee handbook addendum on classification explains classification level, conditions, and restrictions.

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
13. In SPCs and CDFs detainees are assigned color-coded uniforms and IDs to reflect classification levels. In IGSA's a similar system is utilized for each level of classification.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring detainees to be assigned color-coded uniforms and IDs to reflect classification levels is specific to SPCs and CDFs. However, detainees are assigned color-coded uniforms and IDs which indicate the classification level.

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 Deputy Warden, the classification supervisor, and the intake supervisor were interviewed and appeared to be knowledgeable regarding classification issues. Policies and records were reviewed and found to be compliant with PBNDS standards. Classification procedures and appeals processes and practices are consistent with facility policy and ICE requirements. Eleven of thirteen components were found to meet standards, and two were not applicable.

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

(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 portion of this component requiring that staff inventory, hold, and report contraband to the proper authority for action/possible seizure is specific to SPCs and CDFs; however, staff follows written procedures for handling contraband. Contraband is secured and reported to the proper authority, as appropriate.
2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Such contraband is retained and reported to proper authority for appropriate action.
3. Staff returns property not needed as evidence to the proper authority. Written procedures cover the return of such property.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Staff returns such property to the proper authority in accordance with facility policy.
4. Altered property is destroyed following documentation and using established procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Before confiscating religious items, the Facility Administrator or designated investigator contacts a religious authority.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs; however, religious items are not confiscated.
6. Staff follows written procedures when destroying hard contraband that is illegal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Hard contraband that is illegal (under criminal statutes) is retained and used for official use, e.g. training purposes. <ul style="list-style-type: none"> If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use. Soft Contraband is mailed to a third party or stored in accordance with the Detention Standard on Funds and Personal Property. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The sections of the component that requires hard contraband that is illegal (under criminal statutes) if retained, be secured when not in use and be used under specific written procedures is specific to SPCs and CDFs. Hard contraband is secured in (b)(7)e and retained for use in training when no longer needed in legal actions. Soft contraband may be mailed to a third party or it may be stored in the required manner.
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"/>	Canines are not utilized in this facility.

PART 2 – 6. CONTRABAND

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

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

The facility has comprehensive written plans that address control of contraband. Seized contraband is secured in (b)(7)e at the facility, and retained for possible judicial action. Contraband is also used for training until it is turned over to the proper authority for disposal. The preventive measures employed by this facility keep contraband to a minimum.

(b)(6), (b)(7)c February 10, 2011

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"/>	Most detainee living quarters are visited daily by supervisors in this facility. The facility administrator visits living quarters several times per week.
2. At least one male and one female staff are on duty where both males and females are housed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Females are not housed in this facility.
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"/>	All officers working the Control Center receive specialized training which is documented.
6. Policy restricts staff access to the Control Center.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Policy restricts staff access to the control center to only authorized personnel.
7. Detainees do not have access to the Control Center.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Detainees do not have access to the control center.
8. Communications are centralized in the Control Center.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Communications are centralized in the Control Center.
9. Facility security and safety will be monitored and coordinated by a secure, well-equipped, and continuously staffed control center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The Control Center maintain employee Personal Data Cards (Form G-74 or contract equivalent).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The Control Center maintains an equivalent form that meets the requirement for this component.
11. Recall lists include the current home telephone number of each employee. Phone numbers are updated as needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Recall lists are available in the (b)(7)e They were current at the time of the inspection.
12. (b)(7)e	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs (b)(7)(E) (b)(7)e (b)(7)e

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
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"/>	During the inspection, observation noted that the ID of everyone entering or exiting the facility is checked.
15. All visits officially recorded in a visitor logbook or electronically recorded.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A visitor logbook is maintained.
16. The facility has a secure, color-coded visitor pass system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Officers monitor all vehicular traffic entering and leaving the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All traffic entering and leaving the facility is monitored.
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"/>	All vehicles entering this facility are stopped, inspected, and information required by this component is logged.
19. Officers thoroughly search each vehicle entering and leaving the facility.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. All vehicles entering and leaving the facility are thoroughly searched.
20. The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a written policy to prevent the introduction of contraband.
21. The front entrance has a sally-port type entrance, with interlocking electronic doors or grilles.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The facility's perimeter will ensure that detainees remain within and that public access is denied without proper authorization.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has a double fence, (b)(7)(E) (b)(7)(E) There is razor wire between the fences (b)(7)(E) (b)(7)(E)
23. Written procedures govern searches of detainee housing units and personal areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written policy comprehensively describes all detainee searches.

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
24. Housing area searches occur at irregular times.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. There are (b)(7)(E) These searches vary and include (b)(7)(E)
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"/>	Unit management is practiced in the facility. This style of management facilitates frequent personal contact between staff and detainees.
26. There are post orders for every security officer post.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff are required to read and initial post orders of their post each shift.
27. Detainee movement from one area to another area is controlled by staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainee movement is supervised and controlled by staff.
28. Living areas are constructed to facilitate continuous staff observation of cell or room fronts, dayrooms, and recreation space.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. Every search of the SMU and other housing units is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All searches are documented.
30. The SMU entrance has a sally port.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The SMU has a sally port, and movement is strictly controlled and recorded.
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"/>	IGSAs are only required to have a comprehensive security inspection policy. The bulleted sections of this component are only applicable to SPCs and CDFs. There is a comprehensive security inspection policy that includes all of the components bulleted.
33. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Every officer is required to conduct a security check of his/her area and record the results.
34. Documentation of security inspections is kept on file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All security inspections are recorded and logged.

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
35. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility manager makes (b)(7)(E) checks of each post to ensure recurring problems are noted and resolved.
36. Tools being taken into the secure area of the facility are inspected and inventoried before entering and prior to departure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All tools being taken into and out of the facility are inspected and inventoried.
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) and the results documented.
40. Visitation areas receive frequent, irregular inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visitation areas are searched frequently on an irregular basis.
41. An officer is assigned responsibility for ensuring the security inspection process covers all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chief Of Security assists the Warden and Deputy Warden in ensuring that security inspection processes address all areas of the facility.
42. The Maintenance Supervisor and Chief of Security or equivalent make monthly fence checks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fence checks are conducted (b)(7)(E)

FACILITY SECURITY AND CONTROL

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

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

There was a high level of security and control at the facility during the inspection. The physical plant of the facility enhances security and provides an ample line of sight of the two perimeter fences. Rolled razor wire runs between the fences (b)(7)(E)

(b)(7)(E)

Vehicles are searched upon entry and exit and logs are maintained. Sally ports are utilized for control. (b)(7)(E)

(b)(7)(E)

The facility has developed extensive and detailed security plans which are regularly assessed and updated. The Warden and supervisors make frequent checks to ensure sound security practices are maintained. The lack of escapes over years appears to validate sound security practices.

(b)(6), (b)(7)(c) February 10, 2011
Reviewer's Signature / Date

(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"/>	
2. Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Staff search and itemize the baggage and personal property of arriving detainees, including funds and valuables, using a personal property inventory form that meets the ICE standard, in the presence of the detainee unless otherwise instructed by the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The baggage and personal property of arriving detainees is searched and inventoried in the presence of the detainee. Property receipt form G-589 is used to document the property.
4. (b)(7)e officers are present during the processing of detainee funds and valuables during admissions processing to the facility. (b)(7)e officers verify funds and valuables.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. (b)(7)e officers and the detainee verify funds and valuables.
5. For IGSA's and CDFs, Is the facility using a personal property inventory form that meets the ICE standard?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE form G-589, Property Receipt, is used.
6. Staff gives the detainee the original inventory form, filing copies in the detainee's detention file and the personal property container.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility complies with this component by giving the detainee the original form and placing a copy in the detention file.
7. Staff forwards an arriving detainee's medicine to the medical staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Staff searches arriving detainees and their personal property for contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each detainee receives a pat search and property search.
9. Property discrepancies are immediately reported to the Chief of Security or equivalent.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility reports property discrepancies to the Chief of Security.
10. Staff follows written procedures when returning property to detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	A report of offender/detainee missing property is completed by the detainee and sent to supervisory staff for investigation.

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"/>	A notice is sent to the detainee's forwarding address. The facility forward unclaimed property to the ICE Field Office after 30 days.
13. Staff obtains a forwarding address from each detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. It is standard procedure for (b)(7)(e) officers to be present when removing/documenting the removal of funds from a detainee's possession.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. (b)(7)(e) officers are present for removal of funds.
15. Staff issue and maintain property receipts (G-589s) in numerical order.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Form G-589s are issued and maintained at this facility.
16. Staff complete and distribute the G-589 in accordance with the ICE standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. At this facility, the form G-589 is completed and distributed accordingly.
17. The processing officer records each G-589 issuance in a G-589 logbook. The record includes the initials and star numbers of receipting officers.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. A form G-589 logbook is maintained by the facility. The record includes the signatures of the receipting officers.
18. Staff tags large valuables with both a G-589 and an I-77.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Large valuables are tagged with a G-589 and an inventory form developed by the facility.
19. The supervisor verifies the accuracy of every G-589.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The accuracy of each form G-589 is verified by a supervisor.

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
20. The supervisor ensures that: <ul style="list-style-type: none"> • Detainee funds are, without exception, deposited into the cash box; • Every property envelope is sealed. • All sealed property envelopes are placed in the safe. • Large, valuable property is kept in the secured locked area. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility complies with all four of the bulleted items of this component.
21. Staff tags every baggage/facility container with an I-77, completed in accordance with the ICE standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Bags are tagged with an inventory form developed by the facility.
22. Staff secures every container used to store property with a tamper-proof numbered strap.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Property is stored in stapled paper bags at this facility. A numbered strap is not used.
23. A logbook records detainee name, A-number/detainee-number, baggage-check/ I-77 number, security tie-strap number, property description, date issued and date returned.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility maintains a logbook containing the detainee name, property description, date issued, and date returned.
24. In SPCs, the Supervisory Immigration Enforcement Agent, accompanied by a detention staff member conducts a comprehensive weekly audit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Weekly audits are not conducted at this facility.
25. The Facility Administrator has established quarterly audits of baggage and non-valuable property as facility policy, the audits occur each quarter and audits are verified and entered in the log.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility conducts and documents (in a logbook) quarterly audits of baggage and non-valuable property.
26. The facility positively identifies every detainee being released or transferred.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility identifies all detainees prior to release or transfer.

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
27. Staff routinely informs supervisors of lost/damaged property claims. Claims are properly investigated and missing or damaged property claim reports are filed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring staff to routinely inform supervisors of lost/damaged property claims is specific to SPCs and CDFs. At this facility, staff sends lost/damaged property claims to supervisory staff. The claims are properly investigated and filed.
28. Every lost/damaged property report completed in accordance with the ICE standard on an I-387 (or equivalent). The Facility Administrator receives a copy and staff place the original in the detainee's A-file, retaining a copy in the detainee's detention file.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. At this facility, lost/damaged property is recorded on a form equivalent to an I-387. The Warden receives the original, and a copy is retained in the detainee's facility detention file.

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Upon arrival at this facility, each detainee and his property are pat searched for contraband. The detainee's property and valuables are then inventoried and stored in accordance with the ICE standard. (b)(7)e officers and the detainee verify funds and valuables on a form G-589. The detainee receives a copy of the Form G-589. Valuables are stored in a secure location, and funds are deposited into the detainee's account. Non-valuable property is inventoried and stored in a secure area. Quarterly audits occur. Detainees may submit an institution request to recover missing or damaged property. The facility sends a notification to the detainee's forwarding address concerning property that he left at the facility. After 30 days, abandoned property is forwarded to the ICE Field Office.

(b)(6), (b)(7)c February 10, 2011

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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Hold rooms are located within the secure perimeter.
2. The hold rooms are clean, in good repair, well ventilated, well lit, and all activating switches located outside the room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring hold rooms be well ventilated, well lit, and that all activating switches are located outside the room is specific to SPCs and CDFs. Hold rooms were clean, in good repair, well ventilated and well lit at the time of the inspection. All activating switches are located outside of the hold room.
3. The hold rooms contain sufficient seating for the number of detainees held.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Hold rooms contain sufficient seating for the number of detainees held.
4. No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside hold rooms.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. No sleeping apparatuses are permitted in the hold rooms.
5. Hold room walls and ceilings are escape and tamper resistant.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Hold room walls and ceilings are tamper resistant.
6. Detainees are not held in hold rooms for more than 12 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Male and females detainees are segregated from each other at all times.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not house females.
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"/>	Detainees are provided with all items listed in this component except feminine hygiene items. This facility does not house female detainees.
9. If the hold room is not equipped with toilet facilities, an officer is posted within visual or audible range to allow detainees access to such on a regular basis.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The hold rooms are equipped with toilet facilities.
10. All detainees are given a pat down search for weapons or contraband before being placed in the hold room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees were observed to be pat searched prior to being placed in the hold rooms.

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
<p>11. When the last detainee has been removed, the hold room is inspected for the following:</p> <ul style="list-style-type: none"> ▪ Cleaning. ▪ Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When the last detainee is removed, the hold room is inspected for all items noted in both bulleted items of this component.
<p>12. (MANDATORY) There is a written evacuation plan.</p> <ul style="list-style-type: none"> • There is a designated officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring the written evacuation plan designate an officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency is specific to SPCs and CDFs. There is a written evacuation plan, and the post order designates an officer to remove detainees in the event of an emergency situation.
<p>13. An appropriate emergency service is called immediately upon a determination that a medical emergency exists.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>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).</p> <ul style="list-style-type: none"> ▪ If multiple-occupant hold rooms are used, there is an additional 7 unencumbered square feet for each additional detainee. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The space requirements described in this component are met.
<p>15. In SPCs designed after 1998 the hold rooms are equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They are:</p> <ul style="list-style-type: none"> ▪ Compliant with the American Disabilities Act. ▪ Small hold rooms (1 to 14 detainees) have at least one combi-unit. ▪ Large hold rooms (15 to 49 detainees) are provided with at least two combi-units. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The hold rooms are compliant with this component.
<p>16. In SPCs designed after 1998 the hold rooms have floor drain(s).</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Hold rooms have floor drains.
<p>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.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Hold rooms swing outwards, and the door complies with the specifications of the standard.

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
18. Family units, persons of advanced age (over 70), females with children, and unaccompanied juvenile detainees (under the age of 18) are not placed in hold rooms.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Individuals falling in these groups are not placed in hold rooms in this facility. This facility does not house females, juveniles, persons of advanced age or family units.
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 minors.
20. Each detention facility maintains a detention log (manually or by computer) for each detainee placed in a hold cell. <ul style="list-style-type: none"> The log includes the required information specified in the standard. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component that requires the log to include the required information specified in the standard is specific to SPCs and CDFs. A hard copy detention log is maintained for each detainee placed in a hold room that includes all required information specified in this component.
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"/>	A meal is provided to any detainee held in a hold room for more than six hours. There are no juveniles, women, or babies housed in this facility.
22. Any detainee with disabilities, including temporary disabilities, will be housed in a manner that provides for his or her safety and security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. The maximum occupancy for the hold room will be posted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Maximum occupancy of a hold room is posted.
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"/>	Medical staff is contacted immediately if physical problems are observed.
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 allowed anywhere in the facility, including hold rooms.
26. Officers closely supervise hold rooms through direct supervision, to ensure: <ul style="list-style-type: none"> Continuous auditory monitoring, even when the hold room is not in the officer's direct line of sight, and Visual monitoring at irregular intervals at least every 15 minutes, each time recording in the detention log, the time and officer's printed name and any unusual behavior or complaints under "Comments." Constant surveillance of any detainee exhibiting signs of hostility, depression, or similar behaviors. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility complies with all three bulleted items of this component. Compliance with these requirements is facilitated by a substantial open area where hold rooms and occupants can be readily observed.

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.)*

Hold rooms in this facility provide sufficient space and comply with the PBNDS. The hold rooms are located within the secure confines of the facility away from detainee housing units. (b)(7)e controls the hold rooms in an organized and efficient manner. Detainees are observed at all times while in the hold rooms. They usually are kept in hold rooms for no more than three hours. The intake of five ICE detainees was observed during this review. It was efficient and expeditious.

(b)(6), (b)(7)c February 10, 2011

Reviewer's Signature

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

PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The security officer[s], or equivalent, has attended an approved locksmith training program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)(e) maintenance department employees have been trained in an approved locksmith training program which is documented by training records.
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"/>	(b)(7)(E) (b)(7)(E) these individuals are trained locksmiths who appear to perform their duties with efficiency.
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"/>	
4. The security officer, or equivalent, maintains inventories of all keys, locks and locking devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inventories are maintained by the tool control officer. Keys and locks are also inventoried in central control at least once each shift. A chit system is utilized when keys are signed out.
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 preventive maintenance program is managed by the maintenance officer and is supervised by the Chief of Security.
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"/>	
8. Only dead bolt or dead lock functions are used in detainee accessible areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainee accessible areas are provided with only dead bolt or dead lock functions.
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"/>	Non-authorized locks were not observed in detainee accessible areas. They are expressly prohibited by facility policy.
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"/>	Disposal of keys and locks is accomplished by the maintenance officer, who is a trained locksmith.

PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. Padlocks and/or chains are not used on cell doors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Padlocks and/or chains are not used on cell doors and is prohibited by facility policy.
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"/>	
14. The operational keyboard sufficient to accommodate all the facility key rings including keys in use is located in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The keyboard is secured in the Control Center and is sufficient to accommodate all facility keys rings.
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"/>	Facility policy requires that key rings are identifiable, the number of keys on the ring is cited, and keys cannot be removed from issued key rings. This reviewer observed that the policy was being followed at the time of the inspection.
16. Emergency keys are available for all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. The facility uses a key accountability system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Keys are inventoried at least once on each shift. A chit system along with a sign out sheet is used to ensure proper accountability of keys.
18. Authorization is necessary to issue any restricted key.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Individual gun lockers are provided. <ul style="list-style-type: none"> They are located in an area that permits constant officer observation. In an area that does not allow detainee or public access. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gun lockers are provided in an area not accessible to detainees or the public. The lockers are located in an area that permits constant officer observation.
20. The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement for the keys to be physically counted daily is specific to SPCs and CDFs. This facility does have a written key accountability policy. Keys are counted at least once daily on each shift.

PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> • Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. • When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. • Detainees are not permitted to handle keys assigned to staff. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted items in this component are only required for SPCs and CDFs. All staff members are trained and held responsible for proper handling of keys. Additionally, keys that are inadvertently removed are returned immediately. In the event of a lost key, a shift supervisor is notified. Detainees have no access to keys.
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"/>	A staff member is appointed 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The key control officer is the only individual who may add or remove a key from a ring.
25. The splitting of key rings into separate rings is not authorized.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Splitting of key rings is prohibited by facility orders.

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.)*

Key and lock control receives a lot of attention at this facility. Regulations outlining proper handling of locks and keys are in effect and available at all posts. Training to ensure understanding of key and lock control is provided to staff. Supervisors at all levels focus on this important matter. Locks and keys are secured and when signed out, their use is monitored through a chit system and logs. There is an active maintenance program administered by (b)(7) trained locksmiths. Locks and keys no longer serviceable are properly disposed of by staff.

(b)(6), (b)(7)c/ February 1
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 conducts a formal count at least once each 8 hours (no less than three counts per day). At least one of these counts shall be a face to photo count.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility exceeds the requirements described in this component. Seven counts are conducted during each 24 hour period. The 10:30 p.m. count is a face-to-photo count.
2. Activities cease or are strictly controlled while a formal count is being conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Activities are strictly controlled during formal counts.
3. There is a system for counting each detainee, including those who are outside the housing unit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. All detainees are counted or accounted for both inside and outside the facility.
4. Formal counts in all units take place simultaneously.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. All formal counts occur simultaneously.
5. Officers do not allow detainee participation in the count.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Detainees are not permitted to participate in the count process.
6. A face-to-photo count follows each unsuccessful recount.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. No unsuccessful count occurred during this review. Facility policy 111-02 addresses this contingency and appears to be understood by supervisors and staff.
7. Officers positively identify each detainee before counting him/her as present.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Each detainee is positively identified by staff in each unit. Detainee wrist bands with photos facilitate this process.
8. Written procedures cover informal and emergency counts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The control officer (or other designated position) maintains an "out-count" record of all detainees temporarily out of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The out count record was inspected during the review and found to be current and accurate.
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"/>	All staff with count responsibilities are provided training in count procedures during pre-service and in-service training. Training is documented.

PART 2 – 11. POPULATION COUNTS

☒ **Meets Standard**

☐ **Does Not Meet Standard**

☐ **N/A**

☐ **Repeat Finding**

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

Population counts occur up to seven times during a 24-hour period. Counts are scheduled for 6 a.m., 10 a.m., 4 p.m., 6 p.m., 8:30 p.m., 10:30 p.m. (which is face-to-photo count), and 12 a.m. The count is taken by correctional staff in the housing areas and other locations where there are detainees. It is reported to the Control Center where the process is supervised and documented. Most activity stops during counts. Policy requires a face-to-photo count in the event that count does not clear. The count observed at 4:17 p.m. on February 8, 2011 cleared at 4:29 p.m. and was professionally conducted.

(b)(6), (b)(7)c February 10, 2011

Reviewer's Signature

(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"/>	All fixed posts observed by the reviewer had post orders.
2. In SPCs and CDFs, Post Orders are arranged in the required six-part folder format.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. An efficient and equivalent system is utilized that allows for easy filing and review of post orders.
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 Warden and Chief of Security ensure post orders are current.
5. Review, updating, and reissuing of Post Orders occurs regularly and at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reviews are conducted quarterly and updated annually.
6. The facility administrator authorizes all Post Order changes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The facility administrator has signed and dated the last page of every section.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The Warden has signed and dated each section.
8. A Post Orders master file is available to all staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Procedures keep Post Orders and logbooks secure from detainees at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Copies of post orders are located at each post and kept secure from detainees.
11. Supervisors ensure that officers understand the Post Orders, regardless of whether the assignment is temporary, permanent, or due to an emergency.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. In SPCs and CDFs, each time an officer receives a different post assignment, he or she is required to read, sign, and date those Post Orders to indicate he or she has read and understands them.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Each officer is required to sign in to their post and review the post orders along with additional information that may be passed on.
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"/>	All personnel assigned to armed posts have qualified with the appropriate weapons. The qualification records are maintained by the training department.

PART 2 – 12. POST ORDERS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
14. Post Orders for armed posts, and for posts that control access to the institution perimeter, clearly state that: <ul style="list-style-type: none"> <div style="border: 1px solid black; background-color: #cccccc; padding: 5px; width: 100%;">(b)(7)e</div> 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The appropriate post orders state that <div style="border: 1px solid black; background-color: #cccccc; padding: 5px; width: 100%;">(b)(7)e</div>
15. Post Orders for armed posts provide instructions for escape attempts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The Post Orders for housing units track the daily event schedule.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The post orders for housing units require tracking of the daily event schedule.
17. Housing unit post officers record all detainee activity in a log. The Post Orders include instructions on maintaining the logbook.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Housing unit post officers record all detainee activity in a log. Post orders include instructions on maintaining the log book.

PART 2 – 12. POST ORDERS

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

Post orders are located at each post. Staff is required to be read the post orders after assuming his or her shift. The officers sign in a log and record all significant activity that occurs on post during the shift. Detainees do not have access to post orders which are maintained in a secure work of staff. Post orders inspected during this review were found to be current and concise.

(b)(6), (b)(7)c February 10, 2011

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"/>	Facility policy III-013-J addresses 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"/>	
3. Written policy and procedures require staff to avoid unnecessary force during searches and to preserve the dignity of the detainee being searched, to the extent practicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Written policy and procedures require staff to leave a searched housing area, work area and detainee property in its original order, to the extent practicable.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Written policy does require staff to act in a professional manner while conducting searches, but it does not specifically require staff to leave housing areas, work areas and detainee property in its original order.
5. Detainees are pat searched and screened by metal detectors routinely to control contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Electronic search devices are used when practical.
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"/>	Facility policy directs that strip searches only be performed pursuant to reasonable suspicion and when authorized by a supervisor. Policy also requires such searches to be thoroughly documented.
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"/>	Policy addresses body cavity searches. It requires that this type of search only be performed by health service personnel pursuant to the Warden's authorization.
8. "Dry cells" are used for contraband detection only when there is reasonable belief of concealment, with proper authorization, and in accordance with required procedures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Policy permits the use of canines only on areas out of the presence of detainees.

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.)*

Nine of ten components were found to meet the ICE PBNDs standard, with one component not meeting the standard. The Chief of Security was interviewed. Policy III-013-J, Detainee Searches, search logs, and other documents were reviewed. Searches of detainees were observed. Based on these reviews and observation, it was determined that the facility complies with the PBNDs regarding Searches of Detainees.

(b)(6), (b)(7)c / February 10, 2011

Reviewer's Signature

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a Sexual Abuse and Assault Prevention and Intervention Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policies IV-022-1, Sexual Assault, and IV-022-2, Sexually Abusive Behavior Prevention and Intervention Program, establish a facility sexual abuse and assault prevention and intervention program. The policies require staff and detainee training, intake screening, classification considerations, and detection. Immediate notifications of designated staff are required. Protective housing is required as well as medical and mental health evaluations, examinations and treatment. Policy also requires investigations, appropriate discipline and prosecution, tracking of allegations and incidents, and reporting.
2. For SPCs and CDFs, the written policy and procedure has been approved by the Field Office Director.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. In this facility, policies IV-022-1 and IV-022-2 have been approved by the Warden.
3. Tracking statistics and reports are readily available for review by the inspectors.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. There have been no allegations of sexual abuse or assault at this facility in the past year. The Chief Security Officer advised that the Deputy Warden would track any statistics and maintain reports.
4. All staff is trained, during orientation and in annual refresher training, in the prevention and intervention areas required by the Detention Standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	According to the training supervisor and in accordance with policies IV-022-1 and IV-022-2, training in the prevention and intervention of sexual abuse and assault is provided during orientation and annually thereafter. Receipt of the training was confirmed based on a review of orientation and annual in-service class schedules as well as employee training records.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
5. Detainees are informed about the program in facility orientation and the detainee handbook (or equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chief Security Officer advised that detainees are informed about the program through an orientation video which is available in both English and Spanish. Each detainee is given an ICE National Detainee Handbook, available in English and Spanish, which includes information on the sexual abuse/assault prevention and intervention program.
6. The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed by direct observation, the Sexual Assault Awareness Notice is posted on housing unit bulletin boards.
7. The Sexual Assault Awareness Information brochure is available for detainees. (Required in SPCs and CDFs.)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Upon admission, each detainee receives a copy of the pamphlet, Department of Justice Sexually Abusive Behavior Prevention and Intervention: An Overview for Offenders.
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"/>	In accordance with policy IV-022-2, and as confirmed based on a review of detainee medical records, detainees are screened for sexual assaultive and sexual victimization potential during the intake screening process. Any detainee identified as a potential victim or predator is referred to mental health staff for assessment to determine risk, and for applicable counseling. Classification staff reviews options for detainees identified as victims or perpetrators, or those at risk for victimization or perpetration. Possible options in managing the detainee may include special housing or a request for transfer.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. All incidents of sexual abuse or assault by a detainee on a detainee have been documented in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chief Security Officer indicates there have been no incidents or allegations of sexual abuse or assault by a detainee on a detainee in the past year. In accordance with policy IV-022-2, if an incident occurs, it would be documented.
10. All incidents or allegations of sexual abuse or assault by staff on a detainee have been documented in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chief Security Officer advised there have been no incidents or allegations of sexual abuse or assault by staff on a detainee in the past year. In accordance with policy IV-022-2, if an incident occurs, it would be documented.
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"/>	Policies IV-22-1 and IV-22-2 establish procedures for prompt and effective intervention when a detainee is sexually abused or assaulted. These policies also address the required chain of command reporting. The Chief Security Officer and the Deputy Warden confirmed that there have been no incidents or allegations of sexual abuse or assault in the past year.
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"/>	Policy IV-22-2 establishes procedures for the investigation of alleged sexual assaults, for preserving the crime scene, collecting information and evidence, and for referring perpetrators for prosecution. There have been no incidents or allegations of sexual abuse or assault in the past year.
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"/>	Policy IV-22-2 requires prompt notification of alleged or proven sexual assaults. The Chief Security Officer advised that ICE would be notified immediately of any such occurrence.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
14. Victims of sexual abuse or assault are referred to specialized community resources for treatment and gathering of evidence.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	In accordance with policy IV-22-1 and as confirmed by the medical supervisor, alleged victims of sexual abuse or assault are examined on-site by the physician or physician's assistant. Exceptions to this practice are when one of these providers is not available or the detainee desires to pursue criminal charges against the attacker. In these cases, the victim is transported to the Acadian Medical Center for evaluation and treatment. In accordance with the policy and as confirmed by the mental health coordinator, a detainee victim would be referred to facility mental health providers for counseling. Counseling by specialized community resources would be provided only upon referral by the contract psychologist.
15. All records associated with claims of sexual abuse or assault is maintained, and such incidents are specifically logged and tracked by a designated staff coordinator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chief Security Officer and the Deputy Warden advised that there have been no incidents or allegations of sexual abuse or assault in the past year. Should such an incident occur, related records would be maintained and the incidents would be tracked by the Deputy Warden.

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION

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

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

The Deputy Warden, Chief Security Officer, medical supervisor and mental health coordinator, all confirmed that there have been no allegations or reported incidents of sexual abuse or assault in this facility for at least the past six years. A review of applicable policies occurred as did interviews with the training supervisor and those previously listed. A review of employee training records and the training curriculum occurred as did a review of instructional information provided to detainees upon admission. All of these elements support that the facility has implemented a comprehensive sexual abuse and assault prevention and intervention program. The facility is prepared to investigate, track, and report any allegations of sexual abuse and/or assault received. It is also prepared to make required notifications and to provide medical and mental health assessments and treatment to any alleged victim. Facility procedures do not include consistent referral of victims to specialized community resources for treatment and evidence gathering.

(b)(6), (b)(7)c / February 10, 2011

Reviewer's Signature

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Written policy and procedures are in place for special management units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detailed written policy guides the operation of the Special Management Units.
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"/>	A review of documentation and interviews with staff confirmed that the requirements described in this component are being met.
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"/>	Health care personnel are immediately notified when a detainee is placed in SMU. They conduct a health review and assess the health of the detainee.
5. There are written policy and procedures to control and secure SMU entrances, contraband, tools, and food carts, in accordance with the Detention Standard on Facility Security and Control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written policy restricts the use of these items in the SMU in accordance with the Detention Standard on Facility Security and Control.
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"/>	
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"/>	Detailed logs are kept in the SMU. All significant events are recorded including visits to the unit.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>9. A permanent log is maintained in each SMU to record all activities concerning SMU detainees (meals served, recreation, visitors, etc.).</p> <p>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.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The portion of this component requiring the SMU log to have the detainee's name, A-number, housing location, date admitted, reasons for admission, tentative release date for detainees in Disciplinary Segregation, the authorizing official and the date released recorded is specific to SPCs and CDFs. All the documentation relative to each detainee's placement in the SMU is kept as a matter of permanent record. Included in this file is the reason for admission, the projected release date for individuals in administrative segregation, the authorizing official, and the actual date of release.</p>
<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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>This component is only applicable for SPCs and CDFs. A log is maintained which records the time and dates of visits as well as unusual activity.</p>

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<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"/>	IGSAs are only required to maintain a Special Management Housing Unit Record on each detainee in the SMU, and this is to be recorded on an I-888 or comparable form. All the other bulleted items are only applicable to SPCs and CDFs. The I-888 form is utilized on each shift. The SMU housing officer records all relevant information to include meals consumed, showers taken, recreational activity, exhibited behavior, as well as all visits by medical personnel and supervisors.
12. Upon a detainee's release from the SMU, the releasing officer attaches the entire housing unit record to the Administrative Segregation Order or Disciplinary Segregation Order and forwards it to the Supervisor for inclusion in the detainee's detention file.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The entire record of the time spent in disciplinary segregation is forwarded to the responsible supervisor for inclusion in the detainee's detention file.
13. There are written policy and procedures concerning the property detainees may retain in each type of segregation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses what property detainees may retain in each type of segregation.
14. There are written policy and procedures concerning privileges detainees may have in each type of segregation. (In Administrative Segregation, detainees generally receive the same general privileges as detainees in the general population, as is consistent with available resources and safety and security considerations.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses what privileges detainees have in each type of segregation. Detainees in administrative segregation generally receive the same privileges as the general population.
15. Detainees in Administrative Segregation are provided opportunities to spend time outside their cells (over and above the required recreation periods), for such activities as socializing, watching TV, and playing board games and may be assigned to work details (for example, as orderlies in the SMU).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	According to staff, detainees in the SMU are checked every 15 minutes.
17. The shift supervisor sees each segregated detainee daily, including weekends and holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The shift supervisor sees each detainee in segregation daily.
18. The facility administrator (or designee) visits each SMU daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility administrator or his designee, the Deputy Warden or security major, visits each SMU daily.
19. A health care provider visits every detainee in an SMU at least three times a week, and detainees are provided any medications prescribed for them. In SPCs and CDFs, a nurse, doctor or other appropriate health care professional visits the SMU at least once each workday and questions each detainee to identify any medical problems or requests. Any action taken is documented in a separate logbook, and the medical visit is recorded on the detainee's SMU Housing Record (Form I-888).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IGSAs are only required to have a health care provider visit each detainee in the SMU at least three times per week, and detainees are provided any medications prescribed to them. Health care personnel visit the SMU at least once each shift. These visits are recorded on Form I-888.
20. Detainees in SMUs are provided three nutritionally adequate meals per day, ordinarily from the general population menu.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Detainees in SMUs may shave and shower three times weekly and receive other basic services (laundry, hair care, barbering, clothing, bedding, linen) on the same basis as the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Showers are available as required. However, a check of records revealed that detainees have the option to not take all available showers. They do receive the other basic services on the same basis as the general population.
22. Only for documented medical or mental health reasons are detainees denied such items as clothing, mattress, bedding, linens, or a pillow. If a detainee is so disturbed that he or she is likely to destroy clothing or bedding or create a disturbance risking harm to self or others, the medical department is notified immediately and a regimen of treatment and control instituted by the medical officer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The items identified in this component are provided to detainees in the SMU, and are not arbitrarily removed.
23. Detainees in an SMU may write and receive letters the same as the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Detainees in an SMU ordinarily retain visiting privileges.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	Interviews with staff indicated there have not been any restricted or disallowed general visits due to visiting rules violation in the past year. Staff appeared to be knowledgeable that documentation is required would be generated if there were any instances as described in this component.
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"/>	Interviews with staff indicated that there have not been any instances of restricted or disallowed visits in the past year. Staff advised that should there be any in the future, appropriate documentation would be generated.
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"/>	Facility policy does not permit the use of restraints on detainees while participating in general visitation.
28. In SPCs and CDFs, detainees in protective custody and violent and disruptive detainees are not permitted to use the visitation room during normal visitation hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Arrangements are made for the detainees described in this component to have separate visitation.
29. In SPCs and CDFs, violent and disruptive detainees are limited to non-contact visits and, in extreme cases, not permitted to visit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Records revealed that all detainees who had visitors were able to meet with them during the past 12 months. Written guidelines do permit suspension of visitation, if warranted, for safety reasons.
30. Ordinarily, detainees in SMUs are not denied legal visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. There are policy and procedures for a situation where special security precautions for legal visitation have to be implemented and for advising legal service providers and assistants prior to their visits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Detainees in SMUs are allowed visits by members of the clergy, upon request; unless it is determined a visit presents a risk to safety, security, or orderly operations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visits by clergy are allowed upon request consistent with security and safety considerations.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
33. Detainees in SMUs have access to reading materials, including religious materials. In SPCs and CDFs, the Recreation Specialist offers each detainee soft-bound, non-legal books on a rotating basis, provided no detainee has more than two books (excluding religious material) at any one time.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in SMUs in this facility do have access to reading materials to include religious material
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 in SMU have law library privileges separate from the general population.
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"/>	Facility policy and an interview with the law library supervisor indicates that SMU detainees have the same law library access as the general population.
36. Policy and procedures provide for legal material to be brought to individuals in Disciplinary Segregation under certain circumstances.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	A review of records and discussions with staff revealed that there has been no denial of access to the law library.
38. Recreation for detainees in the SMU is separate from the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	SMU records reveal that recreation opportunities are provided as required by this component. Inclement weather gear is provided, but detainees may opt out of recreation.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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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"/>	Facility policy addresses recreation privilege denials or suspensions. Discussions with staff and a review of records indicate adherence to requirements of this component.
<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"/>	There was no evidence indicating that recreation privileges have been denied. Staff was knowledgeable of the requirements to document such events and conduct weekly reviews.
<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"/>	There was no evidence indicating that recreation privileges have been denied by the facility.
<p>44. Ordinarily, detainees in Administrative Segregation have telephone access similar to detainees in the general population, in a manner consistent with the special security and safety requirements of an SMU.</p> <p>Detainees in Disciplinary Segregation may be restricted from using telephones to make general calls as part of the disciplinary process; however, ordinarily, they are permitted to make direct and/or free and legal calls as described in the Detention Standard on Telephone Access, except for compelling and documented reasons of safety, security, and good order.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Telephone service in Administrative Segregation is similar to the general population, but is more closely controlled. Detainees in Disciplinary Segregation are usually permitted to make direct and/or free and legal calls consistent with security considerations.

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>A review of records within the Administrative Segregation Unit in verified compliance with the requirements of this component.</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>Administrative Segregation is closely monitored by supervisors at all levels in this facility. Written policy addresses all the requirements identified in this component. A review of records and interviews with staff confirmed compliance with this component.</p>

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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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"/>	Detainees are provided with a copy of the decision and justification for all reviews and have an opportunity to appeal review decisions.
48. After seven consecutive days in Administrative Segregation, the detainee may exercise the right to appeal to the facility administrator the conclusions and recommendations of any review conducted. The detainee may use any standard form of written communication (for example, detainee request form), to file the appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49. If a detainee has been in Administrative Segregation for more than 30 days and objects to this status, the facility administrator reviews the case to determine whether that status should continue, taking into account the views of the detainee. A written record is made of the decision and the justification. A similar review is done every 30 days thereafter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Interviews with staff and a review of records and reports within the Administrative Segregation Unit confirm compliance with this component.
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"/>	Detainees are placed in Disciplinary Segregation pursuant to being found guilty of a prohibited act in a Disciplinary Hearing equivalent to an IDP.
53. After the first 30 days in Disciplinary Segregation, the facility administrator sends a written justification to the Field Office Director, who may decide to transfer the detainee to a facility where he or she could be placed in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>54. Before a detainee is placed in Disciplinary Segregation, a written order is completed and signed by the chair of the IDP (or equivalent). A copy is given to the detainee within 24 hours (unless delivery would jeopardize safety, security, or the orderly operation of the facility).</p> <p>The IDP chairman (or equivalent) prepares the Disciplinary Segregation Order (I-883 or equivalent), detailing the reasons for Disciplinary Segregation and attaching all relevant documentation.</p> <p>When the detainee is released from the SMU, the releasing officer records the date and time of release on the Disciplinary Segregation Order, and forwards the completed order to the chief of security or supervisor for insertion into the detainee's detention file.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of records in the Disciplinary Segregation unit of this facility indicated compliance with all the requirements enumerated in this component.
<p>55. The facility has implemented written procedures for the regular review of all Disciplinary Segregation cases.</p> <p>A supervisor interviews and reviews the status of each detainee in Disciplinary Segregation every seven days and documents his or her findings on a Disciplinary Segregation Review Form (I-887).</p> <p>At each formal review, the detainee is to be given a written copy of the reviewing officer's decision and the basis for this finding, unless institutional security would be compromised.</p> <p>The reviewer may recommend the detainee's early release upon finding that Disciplinary Segregation is no longer necessary to regulate the detainee's behavior. Early release and return to the general population requires approval of the facility administrator.</p> <p>All review documents are placed in the detainee's detention file.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written policy in this facility largely addresses the requirements of this component. Discussions with staff, as well as a check of records conforms adherence to the requirements.

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.)*

Special Management Units (SMUs) at this facility were well organized, properly staffed, and efficiently operated at the time of the inspection. Experienced officers are assigned to these units and comprehensive post orders are in place. A great deal of attention is dedicated to these units by the Warden, the Deputy Warden, and the Chief of Security. Detailed standards applicable for SMU are addressed in policy and appear to be understood by staff and detainees. The SMUs are separate from the general population units. Their physical layout provides good visibility and control. The units were clean and sanitary at the time of the inspection.

Staff from the medical unit makes regular visits to the SMU. The Disciplinary Segregation Unit had relatively few occupants during the inspection. This can be attributed to the high levels of discipline practiced daily in this facility. The Warden and his staff are highly visible throughout this facility as are ICE personnel. Detainees appear to respond well to this visible leadership and accordingly, disciplinary issues are kept at a minimum.

(b)(6), (b)(7) February 10, 2011

Reviewer's Signature / Date

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

PART 2 – 16. STAFF-DETAINEE COMMUNICATION

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The ICE/DRO Field Office Director ensures that weekly announced and unannounced visits occur.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is an ICE officer assigned to the facility Monday-Friday. Tuesdays and Fridays are announced days to meet with ICE detainees. During the remainder of the week, unannounced visits with detainees occur.
2. Detention Staff and Deportation Staff conduct scheduled weekly visits with detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff is on site at the facility on a daily basis and conducts frequent visits with detainees.
3. Scheduled visits are posted in ICE/DRO detainee housing areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Visiting ICE staff observes and note current climate and conditions of confinement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The assigned ICE officer observes and notes current climate and conditions of confinement on a daily basis.
5. ICE/DRO Detainee Request Forms are available for use by ICE/DRO detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Request forms are readily available in ICE detainee housing areas.
6. The facility treats detainee correspondence to ICE/DRO staff as Special Correspondence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any correspondence to an ICE official is considered Special Correspondence.
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 available in accessible locations.
8. Only ICE staff are able to retrieve the contents of the secure box containing Detainee Request Forms,	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The assigned on-site ICE officer retrieves the contents of the secure box.
9. ICE/DRO staff responds to a detainee request from a facility within 72 hours and document the response in a log.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The assigned ICE officer responds to requests the same day he retrieves it from the secure box if it can be resolved at the facility level. If necessary, he enters the information into the electronic system and forwards it to the sub-office in Oakdale for response. The ICE officer keeps the detainee advised of the status of his request. The sub-office will normally respond within 72 hours.

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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
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"/>	OIG Hotline Information posters are displayed throughout the facility in common areas and on the ICE detainee housing areas.
12. Daily telephone serviceability checks are documented in the housing unit logbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phones are checked on a daily basis by facility staff and documented. The phones are also checked electronically on a daily basis by the vendor, Network Communication International Corporation. A report is generated which is e-mailed to the responsible staff member.

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.)

Communications between staff, detainees, and ICE officials is good. An ICE officer works at the facility Monday through Friday and expeditiously handles detainee requests usually responding the same day the request is received. The facility climate was observed throughout the facility to be good during the inspection. Required posters are placed throughout the facility. The Chief of Security and the on-site ICE officer were interviewed. A telephone interview was conducted with the ICE Supervisory Detention and Deportation Officer (SDDO) in the Oakdale Sub-Office.

(b)(6), (b)(7)c / February 10, 2011

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 Chief of Security is responsible for development of tool control procedures and inspection processes that are implemented by the Maintenance Supervisor and the Tool Control Officer.
2. If the warehouse is located outside the secure perimeter, the warehouse receives all tool deliveries. If the warehouse is located inside the secure perimeter the facility administrator shall develop site-specific procedures, for example; storing tools at the rear sally port until picked up and receipted by the tool control officer. The tool control officer immediately places certain tools (band saw blades, files and all restricted tools) in secure storage.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The warehouse is located outside the secure perimeter and the warehouse receives all tool deliveries.
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 controlled through frequent inspections and a comprehensive inventory process.
4. A metal or plastic chit is taken in exchange for all tools issued, and when a tool is issued from a shadow board the receipt chit shall be visible on the shadow board.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. A metal chit is exchanged for all tools issued. When a tool is issued from a shadow board, the chit is placed on the 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"/>	A check of records during this review confirmed that tool inventories are conducted at all the locations noted in the bulleted items of this component.
6. Tool Inventories are conspicuously posted on all tool boards, tool boxes and tool kits.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Current tool inventories are posted on all tool boards, tool boxes, and tool kits.

PART 2-17. TOOL CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>7. The facility has a policy for the regular inventory of all tools.</p> <ul style="list-style-type: none"> The policy sets minimum time lines for physical inventory and all necessary documentation. ICE facilities use AMIS bar code labels when required. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy directs the regular inventory of all tools, sets time lines for physical inventory, and prescribes required documentation.
<p>8. The facility has a tool classification system. Tools are classified according to:</p> <ul style="list-style-type: none"> Restricted (dangerous/hazardous) Non Restricted (non-hazardous). 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted portions of this component requiring tools are specifically classified as Restricted and Non Restricted is specific to SPCs and CDFs. The facility classifies tools as restricted and non-restricted. There is also an AA classification which identifies tools that are not to be used by detainees. Tools classified as A and B may be used by detainees under staff supervision.
<p>9. Department heads are responsible for implementing proper tool control procedures as described in the standard.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The maintenance officer and tool control officer under the supervision of the Chief of Security are responsible for implementing proper tool control procedures.
<p>10. There are policies and procedures in place to ensure that all tools are properly marked and readily identifiable.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All tools are marked and are easily identifiable.
<p>11. The facility has an approved tool storage system.</p> <ul style="list-style-type: none"> The system ensures that all stored tools are accountable. Tools are stored on shadow boards in which the shadows resemble the tool. Shadow boards have a white background. Restricted tools are shadowed in red. Non-restricted tools are shadowed in black. Commonly used tools (tools that can be mounted) are stored in such a way that missing tools are readily noticed. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IGSAs are only required to have an approved tool storage system that ensures all stored tools are accountable and that commonly used tools (tools that can be mounted) are stored in a way that missing tools can easily be noticed. Tools are stored on shadow boards as outlined in the bulleted items 2 through 4 of this component. The facility also has an approved tool storage system that ensures tool accountability and appropriate storage of commonly use tools.

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
12. Tools removed from service have their shadows removed from shadow boards.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Tools removed from service have their shadows removed from the boards.
13. Tools not adaptable to a shadow board are stored in a locked drawer or cabinet.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Tools not adaptable to a shadow board are stored in a locked cabinet,
14. Sterile packs are stored under lock and key.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Sterile packs are stored under lock and key.
15. Each facility has procedures for the issuance of tools to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses procedures to use in the 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"/>	Facility policy addresses all three bulleted items of this component.
17. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. All private or contract repairs and maintenance workers under contract with ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility. The inventory is reviewed and verified prior to the contractor entering/departing the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All tools being taken into or out of the confines of the secure perimeter of this facility are inventoried.
19. Hoses longer than three feet in length are classified as a restricted tool.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Hoses longer than three feet are classified as restricted tools.
20. Scissors used for in-processing detainees are tethered to the furniture (e.g. table, counter, etc.) where they are used.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. (b)(7)e

PART 2-17. TOOL CONTROL

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

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

Tool control in this facility is exceptional. Tools are stored outside the secure confines of the inner perimeter are kept well secured. All tools brought into the secure area are inventoried before and prior to departure. Tools are kept on shadow boards in locked cases or locked boxes. The tool control officer and maintenance supervisor under the guidance of the Chief of Security maintain tools to a high standard.

(b)(6), (b)(7)(c) February 10, 2011

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"/>	This facility has a detailed Use of Force Policy that is understood by line staff and closely supervised by the Warden, the Deputy Warden, and the Chief of Security.
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"/>	Facility written policy allows staff to respond to an immediate use of force without a supervisor's presence. However, supervisors are required to respond as soon as possible under these circumstances, along with medical personnel to provide advice and treatment, as needed.
3. When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, policy requires that staff must try to resolve the situation without resorting to force.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility written policy requires the use of verbal intervention and other techniques to resolve situations without resorting to force whenever possible.
4. Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility written policy states a calculated use of force can be used in most incidents instead of immediate use of force.
5. The facility subscribes to the prescribed Confrontation Avoidance Procedures. • Ranking detention official, health professional, and others confer before every calculated use of force.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. When a detainee must be forcibly moved and/or restrained and there is time for a calculated use of force, staff uses the Use-of-Force Team Technique. • Under staff supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Staff members are trained in the performance of the Use-of-Force Team Technique.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff members are trained in Use of Force Team Techniques. (b)(7)(E) are equipped with protective clothing and equipment. Team members are designated, trained, and available for calculated Use of Force situations.
8. All use-of-force incidents are documented and reviewed.	<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
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"/>	A review of records of prior calculated use of force events, reveal compliance as required and stated in this component.
10. Staff: <ul style="list-style-type: none"> Does not use force as punishment. Attempts to gain the detainee's voluntary cooperation before resorting to force Uses only as much force as necessary to control the detainee. Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses these requirements.
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"/>	Written guidelines detail the actions to be taken and the equipment to be worn by Use-of-Force teams to prevent injury and exposure to communicable diseases.
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"/>	ICE standards are followed with regard to restraints. This facility's written guidelines address all eight of the bulleted items of this component. Staff is made aware of these requirements through post orders, training, and daily shift briefings.

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
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"/>	
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"/>	Medical staff is notified immediately whenever force is used.
17. When the Facility Administrator authorizes use of non-lethal weapons: <ul style="list-style-type: none"> Medical staff is consulted before staff use pepper spray/non-lethal weapons. Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When the use of non-lethal weapons is authorized, medical staff is consulted and they review the detainee's medical file prior to the deployment of a non-lethal weapon.
18. Intermediate Force Weapons, when not in use are stored in areas where access is limited to authorized personnel and to which detainees have no access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. If Intermediate Force Weapons are stored in the Special Management Unit (SMU), they are stored and maintained the same as Class R tools.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)(E)
20. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> Medical personnel are consulted 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not house females.
21. Protective gear is worn when restraining detainees with open cuts or wounds.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Staff documents every use of force, including what type of restraints was used during the incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. It is standard practice to review any use of force and the non-routine application of restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written policy directs the review of all use of force as well as non-routine application of restraints.
24. All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. <ul style="list-style-type: none"> Specialized training is given to officers ensuring they are certified in all devices approved for use. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All officers receive the training described in this component. Documentation of the training is maintained by the facility's training department.
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"/>	All staff receives training in the use of OC spray as well as decontamination techniques. The training is documented in staff training records.
26. The use of canines is restricted to contraband detection purposes only.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Canines are not utilized in this facility for any purpose.

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
27. The officers are thoroughly trained in the use of soft and hard restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. In SPCs, the Use of Force form is used. In other facilities (IGSAs / CDFs) this form or its equivalent is used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement to use the "Use of Force Form" is specific to SPCs. The standard use of force form is utilized.

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.)

Use of force and restraints are applied in accordance with specific written policy. Detainees placed in restraints are closely supervised. Use of force incidents are reviewed by administrators in each case. All use of force incidents are rapidly reported up the chain of command to the Warden. All incidents are evaluated and used as the basis for further training of staff. These reports also serve as a record to assist in the development of new policy relative to use of force and restraints. Interviews with line staff indicate that they are well trained and appear to understand the procedures relative to Use-of-Force and restraints.

(b)(7)(E)

(b)(7)(E)

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

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

Performance-Based National Detention Standards

Section III ORDER

19 Disciplinary System

PART 3 – 19. DISCIPLINARY SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy addresses the disciplinary system and requires the use of progressive levels of reviews and appeals.
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Written rules prohibit staff from imposing or permitting the following sanctions: <ul style="list-style-type: none"> • corporal punishment • deviations from normal food service • clothing deprivation • bedding deprivation • denial of personal hygiene items • loss of correspondence privileges • deprivation of legal access and legal materials • deprivation of physical exercise 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility written procedures specifically prohibit the imposition of the sanctions identified in this component. Supervisors, including the Warden, Deputy Warden, and the Chief of Security make daily visits to the housing units to ensure compliance. Staff appear to be knowledgeable of policy and procedures.
4. The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The following items are conspicuously posted in Spanish and English or other dominate languages used in the facility: <ul style="list-style-type: none"> • Rights and Responsibilities • Prohibited Acts • Disciplinary Severity Scale • Sanctions 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All four of the bulleted items of this component are conspicuously posted in English and Spanish. These four items are also addressed in the detainee handbook and are included in the orientation provided to all detainees. Interviews with ICE detainees revealed that they understood these components, expressed fair treatment by staff.
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Incident Reports and Notice of Charges are promptly forwarded to the designated supervisor.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs; however, incident reports and notice of charges are promptly forwarded to designated supervisors.

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"/>	As matter of policy, discipline is administered at the lowest levels for minor infractions.
10. A disciplinary panel (or equivalent in IGSA's) adjudicates infractions. The panel: <ul style="list-style-type: none"> • Conducts hearings on all charges and allegations referred by the UDC • Considers written reports, statements, physical evidence, and oral testimony • Hears pleadings by detainee and staff representative • Bases its findings on the preponderance of evidence • Imposes only authorized sanctions 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The equivalent of a disciplinary panel adjudicates infractions and conducts hearings on all charges and allegations that have been submitted. Written reports, statements, physical evidence, and oral testimony are presented. Pleadings by the detainees and their staff representatives are heard. Findings are based on a preponderance of evidence and only authorized sanctions are imposed.
11. A staff representative is available if requested for a detainee facing a disciplinary hearing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The duration of punishment set by the Facility Administrator, as recommended by the disciplinary panel does not exceed established sanctions. The maximum time in disciplinary segregation does not exceed 60 days for a single offense.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of records revealed that established standards for disciplinary actions were followed by the facility.
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"/>	This facility has a comprehensive system for reporting incidents involving the disciplinary system. The records kept in support of the process are detailed and complete.

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 disciplinary system at this facility appears to be comprehensive and effective. Written policy is available at each post that guides staff actions and attitudes. Line staff is trained to deal with detainees in a manner that promotes compliance. The Warden, Deputy Warden, and the Chief of Security visit the housing units daily to observe the mood in the facility, and evaluate the performance of staff, and provide leadership. Disciplinary issues are rapidly communicated up the chain of command, evaluated, and adjudicated. As a result, disciplinary violations are relatively few and minor in nature. Interviews with ICE detainees during this review revealed the belief that the disciplinary system is fair and effective.

(b)(6), (b)(7)c February 10, 2011
Reviewer's Signature / Date

(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 Administrator (FSA) is professionally trained and certified. The responsibilities of cooks and cook foremen are described in the post orders.
2. The Cook Foreman is on duty on days when the FSA is off duty and vice versa.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Assistant FSA is on duty when the FSA is off duty and vice versa.
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The FSA reportedly provides training to food service staff concerning detainee-related issues. No verifying documentation was available for review during the inspection.
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"/>	Knife cabinets are closed with an approved locking device and the (b)(7)e maintains control of the knife cabinet key. Knives and keys are appropriately inventoried and stored.
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"/>	The section of this component requiring staff to monitor the condition of knives and dining utensils is specific to SPCs and CDFs. Staff monitors the condition of knives and dining utensils daily and all knives not in a secure cutting room are secured to the workstation with staff directly supervising any detainees using knives at these workstations.
6. Special procedures (when necessary) govern the handling of food items that pose a security threat.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not handle or store food items that pose a security threat (e.g. yeast, nutmeg and mace.
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 is trained in count procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Population counts are conducted in the dining room by (b)(7)e officers. The FSA or Assistant FSA is present during the counts.

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. (MANDATORY) There is adequate health protection for all detainees and staff in the facility, and for all persons working in food service. Detainees and other persons working in food service are monitored each day for health and cleanliness by the food service supervisor or designee. Detainee clothing and grooming comply with the "Food Service" standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE detainees are not authorized to work in food service. Non-ICE detainee workers are inspected for health and cleanliness prior to each work shift. In addition, each food service worker is medically cleared prior to being assigned to work in food service. Detainee clothing and grooming was appropriate at the time of the inspection.
10. The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Detainee volunteer job descriptions have not been developed.
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"/>	Each worker receives training in food service rules and procedures during new worker orientation.
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"/>	(b)(7)(E) Randomly picked files were reviewed and training was appropriately documented.
14. Detainees at SPCs and CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSA's are subject to local and State rules and regulations regarding detainee pay.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The portion of this component requiring detainees be paid in accordance with the "Voluntary Work Program" standard is specific to SPCs and CDFs. ICE detainees are not authorized to work in food service. Non-ICE detainees are subject to local and State rules and regulations.
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"/>	The facility serves breakfast at 6:30 a.m., lunch at 11:00 a.m., and dinner at 4:30 p.m.
16. For cafeteria-style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The serving line is protected with a barrier that serves as a sneeze guard. Meals are served through an open window partially covered with a sliding partition.

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
17. The facility has a standard 35-day menu cycle. IGSA's use a 35 day or similar system for rotating meals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring a 35-day menu cycle is specific to SPCs and CDFs. This facility uses a standard 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 dietitian in that event.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A registered dietitian conducts a nutritional analysis annually of all master-cycle menus planned by the FSA and has certified that the menus meet the U.S. RDA.
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"/>	Recipes are strictly followed.
20. The Cook Foreman has the authority to change menu items if necessary. <ul style="list-style-type: none"> If yes, documenting each substitution, along with its justification, with copy to the FSA 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Assistant FSA or Cook Foreman documents each substitution on a Menu Substitution Request Form.
21. All staff and volunteers know and adhere to written "food preparation" procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. A Common Fare menu available to detainees, at no charge, whose dietary requirements cannot be met on the main. <ul style="list-style-type: none"> Changes to the planned Common Fare menu can be made at the facility level. Hot entrees are offered three times a week. The Common Fare menus satisfy nutritional recommended daily allowances (RDAs). Staff routinely provides hot water for instant beverages and foods. <ul style="list-style-type: none"> Common Fare meals are served with: Disposable plates and utensils. Reusable plates and utensils. Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the Common Fare diet items. 	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility is in compliance with the first four bulleted item of this component. However, separate cutting boards, knives, spoons, scoops, etc., are not used to prepare the Common Fare diet items.
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"/>	Detainees may send a request for a special diet to the Chaplain through the Warden.

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
24. A supervisor at the command level must approve a detainee's removal from the Common Fare Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Warden approves removals from the Common Fare Program.
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A schedule of ceremonial meals was not available for review.
26. The Common Fare Program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. <ul style="list-style-type: none"> Muslims fasting during Ramadan receive their meals after sundown. Jews who observe Passover but do not participate in the Common Fare Program receive the same Kosher-for- Passover meals as those who do participate. Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. The food service program addresses medical diets.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Hot foods tested were maintained above 140 degrees with cold items maintained below 41 degrees.
30. All meals provided in nutritionally adequate portions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. Food is not used to punish or reward detainees based upon behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. The food service staff instruct detainee volunteers on: <ul style="list-style-type: none"> Personal cleanliness and hygiene; Sanitary techniques for preparing, storing, and serving food, and; The sanitary operation, care, and maintenance of equipment. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Volunteer workers receive instructions on all three bulleted items of this component during new worker orientation.
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"/>	A checklist with an explanatory legend is used when administrative, medical and dietary personnel are conducting weekly inspections.
35. Reports of discrepancies are forwarded to the Facility Administrator or designated department head and corrective action is scheduled and completed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Discrepancies are forwarded to the FSA and Warden.

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
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"/>	Temperatures of all dishwashing machines are checked and documented after each meal.
37. (MANDATORY) Staff documents the results of every refrigerator/ freezer temperature check, in accordance with the Detention Standard on Food Service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food Service staff checks, documents, and maintains temperature logs on all refrigerators and freezers.
38. The cleaning schedule for each food service area is conspicuously posted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39. Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40. Storage areas are locked when not in use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. Food service personnel conduct shakedowns along with detention staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42. <u>In SPCs only:</u> The ICE supervisor on duty ensures that ICE officers participate in dining room supervision.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Correctional staff provides dining room supervision.
43. Menus are certified by a registered dietitian prior to being incorporated into the Food Service Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. <u>In SPCs only:</u> the FSA prepares quarterly cost estimates for the Common Fare Program. This quarterly estimate is factored into the quarterly budget.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility does not prepare quarterly cost estimates.
45. When required, only food service staff prepare the sack lunches for detainee transportation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The night food service staff prepares sack lunches.
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 protect the rear dock door and the two dining room entrances/exits.
47. Staff complies with the ICE requirements for "food receipt and storage.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48. Stock inventory levels are monitored and adjusted to correct overage and shortage problems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49. Staff complies with all ICE Housekeeping, Storeroom/Refrigerator requirements. Identify and explain any shortcomings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
50. Dining room facilities and operating procedures will provide sufficient space and time for detainees to eat meals in a relatively relaxed, unregimented atmosphere.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has a large detainee dining room, and detainees are provided sufficient time to eat their meals.

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
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 Louisiana Department of Health and Hospitals conducted an inspection on September 23, 2010. Corrective action was taken to address deficiencies.
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"/>	A copy of the September 23, 2010, inspection conducted by the Louisiana Department of Health and Hospitals, which included a dish machine discrepancy, was sent to the Warden. The conclusions of a follow-up inspection conducted on September 28, 2010, indicated corrective action had been completed.
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"/>	J&J Exterminators conducts monthly pesticide inspections and preventive spraying.

FOOD SERVICE

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

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

Detainees at this facility receive a nutritious and balanced diet. Food is prepared in sanitary conditions, maintained at proper temperatures, and protected from contamination. Stored food products are maintained at proper temperatures to prevent spoilage. The sanitation within the kitchen and dining room was acceptable at the time of the inspection. The food service workers are medically cleared to work in a food preparation facility prior to assignment.

The following components were not in compliance with the food service standard. The Food Service Administrator (FSA) has not provided verifiable training to staff that includes detainee related issues. Detainee worker job descriptions have not been developed. Separate cutting boards, knives, spoons, scoops, etc., are not used to prepare common fare food. The FSA has not received a 2011 schedule of ceremonial meals

(b)(6), (b)(7)c February 10, 2011
Reviewer's Signature / Date

(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"/>	The medical supervisor advised that medical staff is notified when a detainee first begins to skip meals. Health care staff evaluates and counsel the detainee. In accordance with policy IV-022, Suicide Prevention and Intervention/Hunger Strike, notification of an official hunger strike is given when a detainee has refused to eat for 72 hours.
2. Facility immediately reports via the chain of command a hunger strike to ICE/DRO.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy IV-022, and as confirmed by the medical supervisor and the Supervisory Detention and Deportation Officer (SDDO), ICE is promptly notified of any detainee hunger strike.
3. The facility has established procedures to ensure staff respond immediately to a hunger strike.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy IV-022 establishes procedures for the prompt identification of hunger strikers and for their referral to, and evaluation and treatment by, medical and mental health staff.
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"/>	Policy IV-022 establishes procedures for the separation of a hunger striking detainee from other detainees.
5. Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical supervisor advised the physician is notified of any detainee identified as a hunger striker. The detainee is ordered to be placed in a secure observation room in one of the housing units.
6. Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy IV-022, and as confirmed by the medical supervisor, a hunger striker's weight and vital signs are checked and recorded upon his initial evaluation and at least once every 24 hours thereafter. A review of detainee medical records confirmed compliance with the requirements of this policy.

PART 4 – 21. HUNGER STRIKES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
7. The facility medical authority obtains a hunger striker's consent before medical treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed based on a review of detainee medical records, each detainee signs a general consent for medical treatment upon admission to the facility. In accordance with policy IV-013, Offender Health Care Services, a procedure-specific consent would be signed for any needed invasive procedure.
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"/>	In accordance with policy IV-022, and as confirmed per a review of detainee medical records, a detainee who rejects medical evaluation or treatment is required to sign a Medical Refusal Form. If the detainee refuses medical care and refuses to sign the form, two staff witnesses document this refusal on the form.
9. Unless otherwise directed by the medical authority, staff delivers three meals per day to the detainee's room, regardless of the detainee's response to a verbally offered meal and document those meal offers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy IV-022, and as confirmed by the medical supervisor and a review of detainee medical records, three meals are delivered to a hunger striker each day. Medical staff also offers the hunger striker additional beverages and food supplements.
10. Staff maintains the hunger striker's supply of drinking water/other beverages.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hunger strikers maintain independent access to drinking water through a sink within each observation room. Other beverages are provided by staff. Detention officers monitor the hunger strikers fluid intake per a video camera mounted in each observation room
11. During a hunger strike, staff removes all food items from the hunger striker's living area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy IV-022, and as confirmed by the medical supervisor, a hunger striker is not permitted to retain possession of stored or commissary-purchased food items when moved to an observation room. No commissary food purchases are permitted during the hunger strike.

PART 4 – 21. HUNGER STRIKES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. Staff is directed to record the hunger striker's fluid intake and food consumption on the Hunger Strike Monitoring Form I-839 or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy IV-022, and as confirmed per the medical supervisor, a detainee's fluid intake and food consumption is documented on a Hunger Strike Food/Water Log maintained by the housing unit officer.
13. The medical staff has written procedures for treating hunger strikers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy IV-022 establishes procedures for the medical treatment of hunger strikers.
14. Staff documents all treatment attempts in the medical record, including attempts to persuade the hunger striker by counseling him or her of the medical risks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy IV-022, and as confirmed per the medical supervisor, the mental health coordinator and a review of detainee medical records, staff documents all counseling and treatment attempts in the detainee's medical record.
15. All staff receives orientation and annual training on recognizing the signs of a hunger striker and on the procedures for referral for medical assessment. Medical staff receives training in hunger-strike evaluation and treatment and remain up-to-date on these techniques.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per a review of training schedules and employee training records, all staff receives training on the identification and management of hunger strikers during new employee orientation and annual in-service training. Per the mental health coordinator who participates in the training, it includes recognition of the signs of a hunger strike, referral procedures, and the medical evaluation and treatment of hunger strikers. The training includes a review of the procedures for evaluating and treating a hunger striker.

PART 4 – 21. HUNGER STRIKES

☒ Meets Standard

☐ Does Not Meet Standard

☐ N/A

☐ Repeat Finding

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

As confirmed based on a review of facility policy, employee training records, training schedules, and documentation in detainee medical records, and per interviews with the medical supervisor, mental health coordinator, training supervisor, and the Supervisory Detention and Deportation Officer (SDDO), procedures for and training on the identification and management of hunger strikers are in place. Established procedures include prompt notification to ICE, isolation and monitoring of the detainee, and referral to and evaluation/treatment by medical and mental health staff. Hunger strikers maintain independent access to drinking water through a sink within each observation room.

Per the medical supervisor and the SDDO, there have been no detainee hunger strikes at this facility in the past year. According to interviews with the medical supervisor and the Warden, a group of detainees refused to go to the dining hall for meals as part of a protest in January 2011. However, they continued to eat food purchased from the commissary. Stored food was removed from the unit. ICE was notified and met with the detainees. As confirmed per a review of detainee medical records, medical and mental health staff evaluated and counseled those involved. Per documentation in the medical records, involved detainees refused to have their weight and vital signs checked. The protest ended after three days.

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

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 complies with public health department communicable disease reporting requirements. The facility does not have an on-site pharmacy requiring state licensure, but follows guidelines for the appropriate handling of pharmaceuticals. The medical department is not inspected by state or local authorities.
2. The facility's in-processing procedures of arriving detainees include medical screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy IV-017, Offender/Detainee Intake Health Screening/Medical History, and as confirmed by the medical supervisor and a review of detainee medical records, medical screening is completed on all detainees during in-processing.
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"/>	Per the medical supervisor, he reviews the medical staffing plan for this facility at least annually and consults with the Warden regarding any identified concerns. An additional position was recently added to the staffing plan subsequent to such a review. The medical supervisor is a (b)(7)e (b)(7)e (b)(7)e licensed practical nurses (LPNs). (b)(7)e (b)(7)e (b)(7)e A physician provides on-site services on Tuesday and Thursday mornings and is on call when not on site. A physician's assistant (PA) mid-level provider is on site Mondays and Wednesdays for a total of 12 hours per week. A psychologist provides on-site services every other week and is on call when not on site. An x-ray technician provides onsite services as needed which according to the medical supervisor is usually several days each week.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
4. (MANDATORY) Newly admitted detainees will be informed, orally and in writing (in a language they can understand), about how to access health services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the medical supervisor, instructions for accessing medical care are included in a video, available in both English and Spanish, presented to all detainees upon arrival. Instructions are also included on page 16 of the facility detainee handbook and are reviewed verbally with each detainee by medical staff.
5. Detainees will have access to and receive specified 24-hour emergency medical, dental, and mental health services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff is on duty 24 hours a day, 7 days a week to provide immediate emergency medical care. Emergency medical equipment including an automated external defibrillator (AED) is stored in the medical unit and available for transport to other locations within the facility, as needed. In accordance with policy IV-013, Offender Health Care Services, and as confirmed by the medical supervisor, the physician and the psychologist are on call when not on site for medical, dental, and mental health emergencies. Emergency medical response and transport services (EMS) are provided by Acadian Ambulance. Hospital-based emergency medical, mental health and dental care is provided by Acadian Medical Center. A review of detainee medical records confirmed transport to and treatment of a detainee at the hospital emergency room.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	In accordance with policy IV-013-2, Management of Infectious Diseases (Blood Borne Pathogens and Tuberculosis), and as confirmed by the medical supervisor, all staff are tested for tuberculosis (TB) upon hire and annually thereafter. A review of documentation maintained in the medical department confirmed staff TB testing. No documentation was available to confirm that new direct care staff is offered hepatitis B immunization. Per the training captain and as confirmed by the Warden, the offering of this vaccination series has been discontinued.
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 confirmed per a review of documentation maintained in the medical department, staff licenses are current. Job descriptions are available and are reviewed monthly by medical staff.
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"/>	Procedures for accessing health care services are included in the facility detainee handbook. A copy of the handbook, available in both English and Spanish, is given to each detainee upon admission to the facility. Detainees sign an Offender Handbook Receipt to document receipt of this handbook.
9. In SPCs and CDFs, medical personnel credentialing and verification complies with the standards established by the NCCHC and Joint Commission.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The licenses of medical staff are verified and RNs are credentialed to conduct physical examinations.

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>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.</p> <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"/>	As confirmed per a review of 25 detainee medical records, an initial medical, dental, and mental health screening is consistently completed by trained detention officers on each newly arriving detainee during in-processing. Per the training supervisor, training on the screening process is provided during the new employee orientation program. As confirmed per a review of employee training records, additional training is provided to all detention staff assigned to, or occasionally posted in, the intake area. The medical supervisor and the mental health coordinator serve as instructors for this training. Per a review of the training lesson plan, the training addresses each component of the screening process and emphasizes the importance of an accurate and complete screening, of prompt referrals to health care staff for any identified concerns, and of the need for maintaining confidentiality. A review of the employee training records confirmed receipt of this training.
<p>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.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the medical supervisor and as confirmed per a review of detainee medical records, translators are used, as needed, to assist non-English speaking detainees. If an on-site translator is not available, a telephone-based language line translator service is utilized.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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 current medical facility includes an appropriately equipped examination room allowing for privacy in the provision of detainee medical care. A separate office is available for private mental health encounters. A digital x-ray unit for basic non-invasive x-ray testing located adjacent to the medical building. A new medical facility, constructed and scheduled to open soon, includes two examination rooms, a dental office, an x-ray room, and a lab specimen collection room. Two medical observation cells are also included in the new unit.
13. The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical unit is located within the secure perimeter of the facility. Access is through a locked gate.
14. The medical facility entrance includes a holding/waiting room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The entrance to the medical area includes a large seating area where detainees wait prior to seeing medical staff.
15. The medical facility's holding/waiting room under the direct supervision of custodial staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A detention officer maintains supervision of detainees in the waiting room of the medical unit.
16. Detainees in the holding/waiting room have access to a toilet and a drinking fountain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the waiting room have access to a toilet and a drinking fountain.
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"/>	As confirmed per direct observation, detainee medical records are secured in cabinets in a locked nurses' station within the secure medical area. Access is limited to medical staff, and, on an as needed basis, to the Warden and Deputy Warden. Copies of records are made subsequent to an authorization for release of information signed by the detainee and are not placed in detainee non-medical files.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
18. (MANDATORY) A signed and dated consent form is obtained from a detainee before medical treatment is administered.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per a review of detainee medical records, each detainee signs a general consent for medical treatment during the medical intake process. As confirmed per medical record reviews, consents are also signed for dental procedures. In accordance with policy IV-013, a procedure-specific consent must be signed for any needed invasive procedure. In accordance with policy IV-013-1, Mental Health Services, and as confirmed per a review of detainee medical records, consents are also signed for the administration of psychotropic medications.
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"/>	In accordance with policy IV-013, a Release of Information Request/ Authorization form is signed by detainees to authorize the release of confidential medical information to outside sources. A copy placed is in the detainee's medical record. Medical staff reported that detainees seldom take action to release such information and no completed authorizations were seen during a review of detainee 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"/>	Per the medical supervisor, notification is provided one to two days in advance of a detainee's transfer from the facility.
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"/>	In accordance with policy IV-013, and as confirmed by the medical supervisor, a medical transfer summary is prepared for transfer with each detainee. The complete medical record is archived and securely stored within the facility.
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"/>	In accordance with policy IV-013, and as confirmed per direct observation, medical records transferred with a detainee are placed in sealed and appropriately labeled envelopes.

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
23. Medical screening includes a Tuberculosis (TB) test.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy 013-2, and as confirmed per a review of detainee medical records, all detainees are given a TB skin test upon arrival unless there is documentation of a recent negative test or a previous positive reading. Chest x-rays are used to screen any detainee with a positive TB skin test. Per a review of 25 detainee medical records, 20 detainees were given a TB test within 24 hours of arrival. Four detainees arrived with documentation of a recent negative test. The remaining detainee was tested within 72 hours.
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"/>	In accordance with policy IV-013-1, and as confirmed per the mental health coordinator and a review of 25 detainee medical records, an initial mental health screening is consistently completed by trained detention officers on each newly arriving detainee during in-processing and before a detainee's assignment to a housing unit. Per the training supervisor, officers receive training on the screening process during the new employee orientation program. As confirmed per a review of employee training records, additional training is provided to all detention staff assigned to, or occasionally posted in, the intake area. Per the mental health coordinator and a review of the training lesson plan used, the training addresses each component of the screening process and emphasizes the importance of an accurate and complete screening, of prompt referrals to health care staff for any identified concerns, and of the need for maintaining confidentiality.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
25. The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the medical supervisor, completed intake screening forms are given to one of the LPNs for an initial review. An RN conducts a second documented review. Urgent concerns are addressed immediately. Detainees with identified medical concerns are scheduled to see the physician or PA as clinically indicated.
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"/>	In accordance with policy IV-017, detainees are scheduled for a physical examination/health appraisal within 14 days of arrival. Per a review of 25 detainee medical records, 16 of the detainees were examined/assessed within 48 hours of arrival. The remaining detainees were seen within five to seven days. The physical exams are completed by RNs trained and credentialed to do so by the physician. The physician completes a documented review of each completed physical exam/health appraisal.
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"/>	Per the medical supervisor and in accordance with policy IV-013, detainees in the special management unit have access to health care through the submission of written requests and by a direct request to staff for urgent concerns. A review of Daily Activity Logs and Special Housing Unit Logs maintained by detention officers in one of the housing units confirmed that medical staff completes at least daily checks on detainees on special management status. Per the mental health coordinator and in accordance with policy IV-013-1, the coordinator also makes rounds in the special management units once or more often each 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
<p>28. Staff provides 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"/>	<p>Per the medical supervisor and as confirmed per direct observations and a review of detainee medical records, detainees use Offender/Detainee Request forms to request medical services. The forms, written in English and Spanish, are available from officers in the housing units. Detainees in general population place completed forms in a locked medical request box in the detainee dining hall. Medical staff collects the requests twice each day. Detainees housed on special management status give completed forms to medical staff during medication administration rounds. In accordance with policy IV-013 and as confirmed per a review of the Medical Sick Call/Request Log, medical staff triages the requests and schedules the detainees for sick call appointments. Per a review of the request log and of completed requests in detainee medical records, detainees are usually seen within 24 to 48 hours of submission of a request. As confirmed through direct observation in the medical area, detainees with urgent concerns are seen immediately.</p>
<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"/>	<p>On-site medical coverage is available 24 hours a day, 7 days per week. Policy IV-013 establishes a written plan for the delivery of 24 hour emergency care when immediate outside attention is required.</p>
<p>30. The plan includes an on-call provider.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The physician and psychologist are on call when not on site.</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
31. The plan includes a list of telephone numbers for local ambulances and hospital services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency medical response and transport (EMS) services are available through a call to 911. A medical transfer summary is used to convey needed medical information to the EMS responders and through them, to the hospital emergency department. Medical staff has access to contact information for the hospital and contacts them directly for updates on any detainee receiving treatment at the hospital.
32. The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Procedures established in policies IV-013 and IV-025, Offender/Detainee Escorts/Transport, address the coordination of medical and security response to a medical emergency, including secure transport off-site.
33. (MANDATORY) Detention and health care personnel will be trained, at least annually, to respond to health-related situations within four minutes and to properly use first aid kits, available in designated areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with procedures established in policy IV-013, medical staff and officer first responders are trained in first aid and certified in CPR and use of the AED upon initial hire and annually thereafter. An interview with the training supervisor and a review of class schedules and employee training records confirmed the provision of this training. In accordance with policy IV-019, First Aid Kits/Suicide Kits, first aid kits are available in the housing unit control rooms as well as in detainee and staff work areas and transport vehicles.

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
34. Where staff is used to distribute medication, a health care provider properly trains these officers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the medical supervisor, medications provided pursuant to physician orders or physician-approved protocols are administered by medical staff. In accordance with policy IV-018, Pharmaceutical Management, and as confirmed per the training supervisor and a review of employee training records, shift captains receive training from medical staff and are authorized in an emergency to distribute medication doses prepared by medical staff.
35. Pharmaceuticals and nonprescription medicines will be stored, inventoried, dispensed, and administered in accordance with sound standards and facility needs for safety and security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy IV-018 and as confirmed per direct observation in the medical unit and during medication distribution, pharmaceuticals and non-prescription medications are stored in medication carts and locked cabinets within a secure nurses' station within the medical unit. Prescriptions ordered by a medical provider are faxed to an off-site pharmacy, dispensed to the facility as patient-specific medications and administered by nursing staff in accordance with standard medical procedures. Over-the-counter medications are administered during sick call in accordance with physician approved protocols. Detainees are permitted to retain possession of some inhalers and creams received from medical staff. Detainees may purchase a limited number of nonprescription medications from the pharmacy.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>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>Policy IV-018 establishes procedures for the management of pharmaceuticals, including prescribing practices and procurement, receipt, distribution, storage, dispensing, administration and disposal of medications. As confirmed per direct observation, the facility uses the DIHS formulary. If non-formulary medications are needed, medical staff contacts DIHS for authorization. Prescriptions are sent to, and promptly filled by, an off-site pharmacy. Prescriptions written after hours for medications immediately needed are filled by a local pharmacy. When a federally controlled substance is ordered for a detainee, a perpetual inventory is maintained, the inventory is counted at each change of shift, and the medications are secured in a locked box within a medication cart. There were no detainees taking controlled substances during the inspection. Perpetual inventories are maintained of all needles and syringes. A spot check of inventory documentation confirmed its accuracy.</p>

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>37. All pharmaceuticals are stored in a secure area with the following features:</p> <ul style="list-style-type: none"> • A secure perimeter; • Access limited to authorized medical staff (never detainees); • Solid walls from floor to ceiling and a solid ceiling; • A solid core entrance door with a high security lock (with no other access); and • A secure medication storage area. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pharmaceuticals are stored in locked cabinets and carts within a restricted access nurses' station within the secure medical unit. The room is constructed in compliance with the requirements for secure storage with the exception of having a suspended ceiling. The room designated for the storage of pharmaceuticals in the newly constructed and soon to open medical building is fully secure. Access to the medication room/nurses' station from the remainder of the medical area is through a locked gate and two security doors. Per the medical supervisor and as confirmed per direct observation, detainees are not permitted in this part of the medical unit.
<p>38. In SPCs and CDFs, the pharmacy has a locking pass-through window.</p> <ul style="list-style-type: none"> • Administration and management in accordance with state and federal law. • Supervision by properly licensed personnel. • Administration of medications by personnel properly trained and under the supervision of the health services administrator, or equivalent. • Accountability for administering or distributing medications in a timely manner and according to physician orders. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring the pharmacy have a locking pass-through window is specific to SPCs and CDFs. The pass through window from the nurses' station/medication room does not lock. The opening is small and no medications are stored within reach. As confirmed per direct observations, medications are administered by licensed nursing staff under the supervision of the medical supervisor, in accordance with procedures established in policy IV-018, and pursuant to a physician's, or other appropriately licensed clinician's, order.
<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"/>	Medications are distributed in accordance with procedures established in policy IV-018. As confirmed per direct observation, the administration of prescription and over-the-counter medication is documented on detainee-specific Medication Administration Records (MARs). Completed MARs are filed in the detainee's medical record.

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 is not on duty. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff is on duty 24 hours per day and administer all prescribed medications. Detainees are permitted to keep certain medically issued inhalers and creams on their person for self-administration.
<p>41. The facility maintains documentation of the training given any officer required to distribute medication, and the officer has available for reference the training syllabus or other guide or protocol provided by the health authority.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Except in the event of an emergency when no medical staff is available, all medications are administered by medical staff. In accordance with policy IV-018, and as confirmed per the training supervisor and a review of employee training records, shift captains receive training from medical staff and are authorized to distribute medication for self-administration by applicable detainees. In the event of such an emergency, the nursing staff prepares each medication dose and provides instructions with the delivery of the medication for self-administration by the detainee.
<p>42. The Warden/Facility receives notification that a detainee that has special medical needs.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the medical supervisor, verbal reports and e-mail are used to notify the Warden of any significant detainee special medical needs. Detention staff is notified of special needs per documentation on the electronic detainee roster and/or written notices posted in the control room of the detainee's housing unit.
<p>43. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the LCS Corrections Services, Inc. (LCS) Chief Compliance Officer, and as confirmed by the Warden, any request by a detainee for an examination by an independent medical service provider or expert would be referred to ICE. If approved by ICE, the facility makes arrangements to accommodate the examination within the facility.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<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"/>	<p>Policy IV-013-2 establishes a comprehensive written plan for the management of infectious and communicable diseases, including education for staff and detainees, control, treatment and prevention strategies, confidentiality, management of TB, hepatitis, HIV and influenza and communication with the local public health authority. Immunizations are provided on an as-needed basis per physician's order. Procedures for dealing with the media are established in Policy I-015, Public Information and Media Relations. Media inquiries are directed to the LCS corporate office. LCS, the facility contractor, responds to media requests upon approval by ICE.</p>
<p>45. Detainees diagnosed with a communicable disease are isolated according to local medical operating procedures.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Policy IV-013-2 establishes procedures for the isolation of potentially infectious detainees. Single-occupancy observation rooms in the housing units are currently used for this purpose. The newly constructed and soon to open medical unit includes two negative air-flow respiratory isolation rooms. In the interim, detainees in need of such respiratory isolation are given a mask to wear and are transported to Acadian Medical Center for treatment and appropriate housing pending transfer to another facility.</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
46. All new arrivals receive TB screening in accordance with guidelines of the Centers for Disease Control (CDC). Unless a chest x-ray is the primary screening method, the PPD (mantoux method) is the primary screening method. (For a detainee on whom the PPD is contraindicated; a chest x-ray will be needed. Detainees not screened are housed separate from the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy IV-013-2 and as confirmed per a review of detainee medical records, all detainees are given a TB skin test upon arrival unless there is documentation of a recent negative test or a previous positive result. Chest x-rays are used to screen any detainee with a positive TB skin test. Per a review of 25 detainee medical records, all detainees arriving without documentation of recent negative testing were given a TB skin test or, if positive, a chest x-ray.
47. Detainees with symptoms suggestive of TB are placed in a negative pressure isolation room and promptly evaluated for TB disease. Detainees at facilities with no negative pressure isolation room are referred to an appropriate off-site facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility currently does not have negative pressure rooms. Per the medical supervisor, any detainee with symptoms of active TB disease is transported, using appropriate infection control measures, to Acadian Medical Center for treatment and appropriate housing pending transfer to a facility with negative pressure rooms. The newly constructed and soon to open medical unit does include two negative pressure isolation rooms.
48. A transportation system will be available that ensures timely access to health care services that are only available outside the facility, including: prioritization of medical need, urgency (ambulance versus standard), and transfer of medical information.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policies IV-013 and IV-021, Medical Transfer, and as confirmed per a review of detainee medical records and off-site medical appointment scheduling maintained by the medical unit, a transportation system is available and utilized to ensure timely access to needed off-site medical services. EMS services, when clinically indicated, are available through Acadian Ambulance.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
49. Detainee who requires close, chronic or convalescent medical supervision will be treated in accordance with a plan approved by licensed physician, physician assist, nurse practitioner, dentist, or mental health practitioner that includes directions to health care and other involved personnel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy IV-013, and as confirmed per a review of detainee medical records, detainees with an identified urgent and/or chronic medical concern are promptly referred to the applicable medical, mental health, or dental provider. Treatment plans are developed by the provider and implemented by health care staff.
50. (MANDATORY) Female detainees have access to pregnancy testing and pregnancy management services that include routine high-risk prenatal care, addiction management, comprehensive counseling and assistance, nutrition, and postpartum follow-up.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not house female detainees.
51. (MANDATORY) Detainees with chronic conditions (such as hypertension and diabetes) will receive periodic care and treatment that includes monitoring of medications, laboratory testing, and chronic care clinics, and others will be scheduled for periodic routine medical examinations, as determined by the health authority	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy IV-013, and as confirmed per a review of detainee medical records, detainees with chronic conditions are identified, evaluated, and scheduled for periodic follow up as determined appropriate by the physician. Lab and other medical tests are completed as ordered. Lab, x-ray and EKG results, and documentation of medication adjustment when indicated were observed in detainee medical records.
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"/>	Policies IV-013 and IV-013-1 establish procedures for the identification and housing of detainees with special medical and mental health needs. Medical Transportation Summary forms are used to provide written notification of any special needs affecting detainee transport. Detention staff is notified of special needs per documentation on the electronic detainee roster and/or written notices posted in the control room of the detainee's housing unit. Per the medical supervisor, verbal reports and e-mail are used to notify the Warden of any significant health care needs including those requiring a detainee's transfer.

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
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"/>	In accordance with policy IV-013-3, Offender/Detainee Dental Services, and as confirmed per the medical supervisor, a review of detainee medical records and direct observation of the provider's license, detainees have access to and receive routine dental care through a contract with a local licensed dentist. Detainees are transported to the local hospital emergency room for emergency dental treatment when medically indicated.
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"/>	In accordance with policy IV-013-1 and as confirmed per the mental health coordinator and a review of detainee medical records, detainees with mental health problems are referred to a mental health provider for evaluation and treatment.
55. Crisis intervention services are available for detainees who experience acute mental health episodes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy IV-013-1 and as confirmed per the medical supervisor and mental health coordinator and a review of detainee medical records, crisis intervention services are available to detainees who experience acute mental health episodes. The mental health coordinator provides an immediate response and consults with the psychologist who follows up with an on-site evaluation. If inpatient treatment is needed, the detainee is transported to Acadian Medical Center.
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"/>	Medical interviews, examinations, and procedures are conducted in the examination room within the medical unit. Mental health interviews are conducted in a separate private office within the medical unit. The facility does not house female detainees.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	Policy IV-013-1 requires that a detainee referred for mental health treatment is evaluated within 14 days of that referral. Referrals were found in three of the 25 detainee records reviewed. Two referred detainees were evaluated within 6 days. The third was seen and evaluated within eight days.
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"/>	Policies IV-022, Suicide Prevention and Intervention/Hunger Strike, and III-003, Mechanical Restraints/ Armory, address the use of restraints for the protection of a detainee from self-harm only when less restrictive measures are ineffective. Such use of restraints must be authorized by a physician or a qualified mental health professional in consultation with a physician and approved by the Warden. One point (one extremity) through five point (all extremities and a protective helmet) are permitted as ordered. The detainee must be under continuous observation. Medical staff is required to check the detainee at least once an hour. An after-incident review must be conducted. Per the Warden, medical and mental health staff complete and submit detailed post-restraint written reports. Restraints for medical or mental health purposes have not been used in this facility in the past 12 months.

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"/>	In accordance with policy IV-013-1, involuntary psychotropic medications are administered only per a physician's order as an emergency measure when less restrictive measures have been ineffective. Procedures established per the policy include the required components of this standard. Per the medical supervisor and the mental health coordinator, the one incident involving the administration of involuntary psychotropic medication involved a detainee who was repeatedly attempting to cut his throat and, after having done so, to reopen the wound.
<p>60. An initial dental screening exam should be performed within 14 days of the detainee's arrival. If no on-site dentist is available, the initial dental screening may be performed by a physician, physician's assistant, nurse practitioner or trained RN.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the medical supervisor, in accordance with policy IV-013-3, and as confirmed per a review of detainee medical records, RNs trained by the physician conduct a dental screening on all detainees within 14 days of the detainee's arrival. Of the 25 detainees whose medical records were reviewed, dental screening was completed on all within the first one to seven days of their arrival.
<p>61. In each detention facility, the designated health authority and Facility Administrator determines the contents, number, location(s), use protocols, and procedures for monthly inspections of first aid kits.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy IV-019, First Aid Kits/Suicide Kits, designates the number, location, and contents of the first aid kits and establishes procedures for the monthly inspection of the kits. Completion of the monthly inspections was confirmed per a review of inspection logs maintained in the medical area. Policy IV-019 was approved by the medical supervisor. The policy was approved and signed by the Warden.
<p>62. An automatic external defibrillator should be available for use at the facility.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An AED is available in the medical unit and is taken by medical staff when responding to a medical emergency elsewhere within the facility.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	Per the medical supervisor, ICE is promptly notified of any detainee refusing needed medical care.
64. In SPCs and CDFs, the Facility Administrator and health services administrator will meet at least quarterly and include other facility and medical staff as appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Per the medical supervisor, in this facility he and other department heads meet with the Warden on a monthly basis.
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"/>	Policy IV-013-2 establishes procedures for the management of biohazardous waste in compliance with state and federal regulations. Stericycle, the contracted medical waste-hauling company, picks up the biohazardous waste twice a month. Dental equipment is not used on site. Disposable medical instruments are used and are discarded in a puncture-proof biohazard container.
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"/>	Policy IV-015-1, Health Care Services Performance Improvement, establishes procedures for a comprehensive internal review/quality assurance program. Per the medical supervisor, medical chart reviews are conducted to identify practice and documentation of concerns. Documentation of the chart reviews was not available for assessment. It is anticipated that full implementation of the procedures established in policy IV-015-1 will improve the effectiveness of the internal review program.

PART 4 – 22. MEDICAL CARE

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

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

A review of facility policies and protocols occurred. Staff and detainee interviews were conducted. Direct observations in the medical and housing units, observations of detainee scheduled and urgent non-scheduled medical encounters and observations of medication administration occurred. A review of sick call request logs, dental logs, outside medical consult logs, PPD (tuberculosis testing) logs and other medical documentation was reviewed as well as 25 detainee medical records. Based on these factors, it was determined that medical staff are responsive to detainee medical and mental health needs.

Intake screenings, TB testing and health assessments are completed in a timely manner. Timely and clinically appropriate responses are given to detainee medical requests. Detainees with urgent medical concerns are seen promptly. Those with chronic medical problems are scheduled for periodic assessments and are treated pursuant to an individualized treatment plan. No significant unresolved detainee complaints were identified. Medical documentation is appropriate and thorough.

The facility provides out-patient medical and mental health services on site but does not have an inpatient unit. An off-site pharmacy dispenses prescribed medications in detainee specific and appropriately labeled blister pack cards or containers. Detainees in general population report to the medical unit for the administration of medications. Medications for detainees on special management status are administered in the housing units. Digital x-rays are taken on site with the results available the same day. Lab specimens are collected on site and sent out for processing.

Emergency medical response and transport services are provided by Acadian Ambulance. Emergency and inpatient medical and mental health hospital-based services are provided by Acadian Medical Center. All needed outpatient medical care not available on-site is provided through the use of community medical providers and services. The facility has not pursued accreditation of its medical services unit. Once the newly constructed medical unit is opened, medical staff will have more space for detainee medical encounters and will be able to provide onsite dental care. The new unit also includes two medical observation rooms constructed to also function as negative pressure/respiratory isolation rooms.

The facility does not offer the hepatitis B immunization series to new employees.

Facility policy establishes procedures for a comprehensive system of internal review and quality assurance. Per the medical supervisor, current quality assurance activities involve ongoing medical chart reviews to identify practice and documentation concerns. Documentation of the chart reviews was not available for review. Full implementation of the procedures established in the facility health care performance improvement policy should enhance the effectiveness of the facility's internal review and quality assurance program.

(b)(6), (b)(7)c / February 1

Reviewer's Signature / D

(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
<p>1. There is a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items.</p> <p>The supply of these items exceeds the minimum required for the number of detainees.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Policies IV-010, Offender/Detainee Clothing Guidelines; IV-011, Offender/Detainee Bedding and Linen; and IV-012, Offender Hygiene, establish procedures for the regular issuance and exchange of clothing, bedding, linens, towels and personal hygiene items. Policy requires the maintenance of sufficient supplies to exceed the minimum required for the number of detainees in the facility. Per direct observations in the housing units, sufficient supplies are available. No detainee complaints were received regarding insufficient supplies.</p>
<p>2. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive, at a minimum:</p> <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"/>	<p>The bulleted items in this component are only applicable to SPCs and CDFs. In accordance with policy IV-010, in this facility new detainees receive two uniforms, two pairs of socks, two undershirts, two boxer shorts, one pair of shoes and one pair of shower shoes. Per observations in the housing units, the clothing is clean, temperature appropriate and presentable.</p>
<p>3. Additional clothing is available for changing weather conditions and as is seasonally appropriate.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>The component is only applicable for SPCs and CDFs. In accordance with policy IV-010 and as confirmed per direct observation, jackets are issued for use during cool weather.</p>
<p>4. New detainees are issued clean bedding, linens and towels, at a minimum:</p> <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"/>	<p>The bulleted items in this component are only applicable to SPCs and CDFs. In accordance with policy IV-011, each detainee is issued one mattress, one blanket, two sheets, one pillow, one pillowcase, two towels, and one face cloth. Additional blankets are issued, if needed. Mattresses and pillows are cleaned with a disinfectant before reissue. Linens are laundered.</p>

PART 4 – 23. PERSONAL HYGIENE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
5. The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE detainees are not charged for these items.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy IV-012, each new detainee is issued soap, toothpaste, a toothbrush, shampoo, toilet paper, and a comb. Razors are issued and recollected daily. All other items are replenished weekly at no cost to the detainees. Toilet paper is also available, as needed. The facility houses only male detainees.
6. Toilet facilities are: <ul style="list-style-type: none"> • Clean • Adequate in number and can be used without staff assistance 24 hours per day when detainees are confined in their cells or sleeping areas. ACA Expected Practice 4-ALDF-4B-08 requires that toilets be provided at a minimum ratio of one for every 12 male detainees or one for every 8 female detainees. For males, urinals may be substituted for up to one-half of the toilets.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per direct observations in the housing units, toilet facilities were clean at the time of the inspection. Per the maintenance supervisor, small housing units have 3 toilets and one trough-style urinal. These small units house 28 to 42 detainees. The large dorms house up to 72 detainees and have 4 toilets in addition to the urinal. Per the Chief Security Officer, detainees in all dorm housing units have access to toilet facilities 24 hours per day except during counts when all movement ceases.

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"/>	<p>As confirmed per direct observations in the housing units, bathing facilities were clean at the time of the inspection. Per the maintenance supervisor, small housing dorms have three sinks and two showers and house 28 to 42 detainees. The large dorms house up to 72 detainees and have four sinks and five showers. Per the Chief Security Officer, detainees in all dorm housing units have access to the sinks 24 hours per day except during count when all movement ceases. Showers may be used daily from 3:00 p.m. to 10:00 p.m. Per the maintenance supervisor and in accordance with policy II-005, Offender/Detainee Shower Accessibility, hot water temperature controls are set for 110 degrees. The temperatures are not routinely checked unless a work order is submitted due to complaints that the water is not hot enough. In such cases, the controls are reset, if necessary, to provide water at 110 degrees. There have been no documented incidents of the water temperature rising above 120 degrees.</p>
<p>8. Detainees with disabilities are provided adequate facilities, support, and assistance needed for self-care and personal hygiene.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Policy II-003-1, Offenders/Detainees with Disabilities, requires the provision of adequate facilities for the physically disabled. Tiger Unit - Dorm 4 has been designated for the housing of disabled detainees and is designed to meet ADA (Americans with Disabilities Act) requirements. Per the Chief Security Officer, the facility does not accept detainees who need assistance for self-care and personal hygiene.</p>

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
9. Detainees are provided clean clothing, linen and towels. <ul style="list-style-type: none"> • Socks and undergarments - daily. • Outer garments - twice weekly. • Sheets - weekly. • Towels - weekly. • Pillowcases - weekly. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per posted laundry schedules, clothing, towels and facecloths are laundered three times each week. This schedule allows for a change of clothing six of seven days per week. Sheets and pillow cases are laundered weekly. Blankets are laundered monthly. Cleaned laundry is returned the same day is it collected.
10. Food service detainee volunteer workers are permitted to exchange outer garments daily.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Per the Chief of Security, ICE detainees in this facility are not permitted to volunteer to work in food service.
11. Volunteer detainee workers are permitted to exchanges of outer garments more frequently.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Per the Chief of Security, ICE detainees in this facility are not approved for volunteer work.

PART 4 – 23. PERSONAL HYGIENE

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

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

A review of facility policies and the detainee handbook occurred. Interviews occurred with administrative, detention and maintenance staff. Per direct observations in the housing units, it was determined that adequate resources are provided to enable detainees to maintain acceptable personal hygiene. Bathing and toilet facilities were clean, in good working order and available in sufficient numbers given the available hours of access. During the inspection, no detainees were observed having to wait to use the facilities. Detainees were clean and appropriately dressed. No complaints regarding bathing and toilet facilities, clothing, bedding or personal hygiene supplies were voiced by detainees during the inspection.

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

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PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a written suicide prevention and intervention program approved and signed by the health authority and Facility Administrator and reviewed annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy IV-022, Suicide Prevention and Intervention/Hunger Strike, establishes a written suicide prevention and intervention program. The policy was revised and approved by the Warden on January 10, 2011. Per the Warden, all such policies are reviewed on an annual basis.
2. At a minimum, the Program shall include procedures to address: <ul style="list-style-type: none"> • Intake screening and referral requirements; • The identification and supervision of suicide-prone detainees; • Staff training requirements; • The management and reporting of suicidal incidents, suicide watches, and deaths; • Provision of safe housing for suicidal detainees; • Debriefing of any suicides and suicide attempts by administrative, security, and health services staff; • Guidelines for returning a previously suicidal detainee to a facility's general population, upon written authorization of the clinical director. • Reporting guidelines for facility personnel when suspected suicidal behavior is observed; and Written procedures for the proper handling of detainees who exhibit suicidal behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Procedures established in policy IV-022 include suicide prevention and intervention, related intake screening, identification of those at risk, referrals, management of at risk detainees, safe housing, prevention and intervention techniques, staff training and reporting guidelines. Per the mental health coordinator, detainees are removed from a suicide watch pursuant to mental health evaluations and with the approval of the psychologist. Guidelines for returning a previously suicidal detainee to general population are provided by mental health staff in consultation with the psychologist.
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"/>	In accordance with policy IV-022, and as confirmed by the training supervisor and a review of orientation and annual in-service training class schedules and employee training records, all staff receive suicide prevention training during orientation and annually thereafter.

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"/>	In accordance with policy IV-022, and as confirmed per the mental health coordinator who teaches the class and a review of the PowerPoint presentation used during the suicide prevention training, all required components are covered in this training. A review of detainee medical records confirmed the ability of staff to recognize and appropriately respond to detainees at risk of suicide.
<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"/>	In accordance with policy IV-022, and as confirmed per a review of 25 detainee medical records, screening for suicide potential is consistently completed by trained detention officers the day a detainee arrives at the facility as part of the admission process. Per the training supervisor, officers receive training on the screening process during the new employee orientation program. As confirmed per a review of employee training records, additional training is provided to detention staff assigned to, or occasionally posted in, the intake area. The mental health coordinator serves as the instructor for this training.
<p>6. Written procedures contain when and how to refer at-risk detainees to medical staff and procedures are followed.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy IV-022 establishes procedures for the referral of at risk detainees to medical/mental health staff. A review of detainee medical records confirmed that detainees identified as at risk are immediately referred to health care staff and are placed under observation pending evaluation by clinical staff.

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
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Written procedures do not address returning a previously suicidal detainee to general population. Per the mental health coordinator, authorization to remove a detainee from suicide watch is pursuant to an order from the psychologist.
8. The facility has a designated isolation room for evaluation and treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single occupancy observation cells within the housing units are designated for the evaluation and treatment of detainees at risk for suicide. The observation cell in Tiger Unit is considered the primary suicide watch cell.
9. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	As confirmed per direct observation, the observation cells designated for use for suicide watches include metal bed frames with elevated cross bars at the head and foot of the bed which have the potential to be used as an anchor for the end of a noose used in a suicide attempt. Per discussions with the medical supervisor, mental health coordinator and Warden, detainees placed on suicide watch are given only tear resistant gowns and are under constant observation by an officer posted by the cell door. Officers posted in the housing unit control room also monitor the status of a detainee on suicide watch via video from a camera mounted in each of the designated cells.
10. Medical staff have approved the room for this purpose.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the mental health coordinator, the psychologist has approved use of the designated cells for suicide watches.
11. Staff observes and document the status of a suicide-watch detainee at least once every 15 minutes/constant observation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy IV-022, and as confirmed per a review of detainee medical records, detention officers monitoring the status of detainees on suicide watch document the detainee's status on a Suicide Log Sheet at least once 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"/>	In accordance with policy IV-022, and as confirmed per a review of detainee medical records, detention officers monitoring the status of detainees on suicide watch document the detainee's status on a Suicide Log Sheet at least once every 15 minutes. Policy IV-022 requires that medical staff evaluate a detainee on suicide watch a minimum of once every 24 hours. According to the medical supervisor, nurses check on a detainee on suicide watch every two hours.
13. In CDFs or IGSAs, and/or at facilities where there is not twenty-four hour medical staff, the facility administrator shall report to ICE/DRO any detainee who has been identified as suicidal. ICE/DRO, shall consult with the CD or designated medical authority for immediate evaluation (with constant observation until evaluation), or for transfer to a local psychiatric facility or emergency room by ambulance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff is on duty 24 hours a day. The mental health coordinator and the psychologist are on call when not on site. Per the medical supervisor, ICE is notified of any detainee identified as at risk for suicide and the detainee is placed on constant suicide watch pending evaluation by mental health staff. If immediate evaluation is needed, the detainee is transported to the Acadian Medical Center for evaluation and treatment.
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"/>	Policy IV-022 establishes procedures for an in-depth investigation and a critical incident debriefing for all affected staff and detainees following any suicide. Per discussions with the Warden and the medical supervisor, an in-depth review is also completed after any significant suicide attempt.

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.)*

There have been no suicides or serious suicide attempts at this facility in the past 12 months. In August of 2010, one ICE detainee threatened suicide by repeatedly holding objects up to his neck and threatening to cut himself. He succeeded in making a non-life-threatening cut and was taken to the local emergency room for suturing. Following his return to the facility, he repeatedly attempted to reopen the wound by removing the sutures and was again taken out to be re-sutured. Per a review of his medical record, the detainee was placed and maintained on suicide watch. He was referred to and evaluated by mental health staff, diagnosed as mentally ill, and closely monitored and treated by mental health staff. Completed suicide watch logs with documentation of 15 minute checks were noted in the medical record.

A review of established policies, detainee medical records, training schedules, and lessons plans occurred. Per direct observations in the housing units, and per medical, mental health, administration and detention supervisory and line staff interviews, it was determined that facility staff are able to identify and appropriately respond to detainees at risk for suicide and to implement suicide prevention and intervention procedures. In practice, procedures are in place to ensure a detainee on suicide watch is taken off watch pursuant to authorization by a qualified mental health professional and is clinically monitored. Written procedures, however, do not address returning a previously suicidal detainee to general population.

As confirmed per direct observation, the observation cells designated for use for suicide watches include metal bed frames with elevated cross bars at the head and foot of the bed which have the potential to be used as an anchor for the end of a noose used in a suicide attempt. Per the medical supervisor and the mental health coordinator, detainees placed on suicide watch are given only tear resistant gowns and are not permitted possession of clothing or sheets from which strips of cloth could be made. Detainees on suicide watch are also under constant observation of an officer posted by the cell door. Officers working in the housing unit control rooms also monitor the status of detainees on suicide watch via video from a camera mounted in each of the designated cells.

(b)(6), (b)(7)c / February 10, 2011

Reviewer's Signature

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees, who are chronically or terminally ill, are transferred to an appropriate off-site medical facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the medical supervisor, the facility does not accept terminally or severely ill detainees. The facility has no inpatient unit and has limited medical staff. Should the medical condition of a detainee already housed in the facility deteriorate to the extent that more intensive medical treatment is needed, ICE would be notified and the detainee would be transported to the Acadian Medical Center for treatment pending transfer to a more appropriate detention facility.
2. The facility or appropriate ICE office promptly notifies the next-of-kin of the detainee's: medical condition. <ul style="list-style-type: none">• The detainee's location.• The visiting hours and rules at that location.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the medical supervisor, ICE is notified any time a detainee's medical condition deteriorates and/or he is transported to an outside medical facility. Per the Supervisory Detention and Deportation Officer (SDDO), ICE would make other notifications as needed in accordance with the requirements of ICE policy and this standard.
3. There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives. <ul style="list-style-type: none">• These guidelines include instructions for detainees who wish to have a living will.• These guidelines provide the detainee the opportunity to have a private attorney prepare the documents, at the detainee's expense.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LCS Corrections Services, Inc. (LCS) Advanced Medical Directives guidelines are available for use in this facility. Per policy IV-013, Offender Health Care Services, advanced directives for detainees must comply with state and local laws and may be implemented only at community health care facilities while the detainee is under a physician's care and treatment. The guidelines include instructions for completing a living will and establish procedures for a private attorney to prepare the document.

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
4. There is a policy addressing "Do Not Resuscitate Orders"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy IV-013 and the LCS Advanced Medical Directives address Do Not Resuscitate (DNR) orders. DNR orders will be invoked only when a detainee has been admitted to a community medical facility and never when he is still housed in general population at the facility. DNR orders will be considered only when a detainee is terminally ill or suffering from a fatal injury. The detainee must have requested and signed a DNR order or is unable to sign and a family member signs on his behalf. The decision is made consistent with sound medical practice.
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"/>	Per policy IV-013, detainees with a DNR order shall receive all therapeutic efforts short of resuscitation.
6. The facility notifies ICE/DRO Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSA's, this notification is made through the local ICE representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the medical supervisor and in accordance with policy IV-013, ICE is notified of any detainee with a DNR order. Per the SDDO, ICE would make other notifications in accordance with the requirements of ICE policy and this standard. Per the medical supervisor, no ICE detainees have initiated a DNR order.
7. The facility has written procedures to address the issues of organ donation by detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Procedures addressing organ donation by detainees as established in policy IV-013 require the detainee to submit a written request. This request is forwarded to ICE. Any recipient must be an immediate family member and all associated costs must be at the expense of the detainee. Per the medical supervisor, no ICE detainees have requested to donate organs.

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in custody.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency Action Plan Section 18, Death of an Offender, requires notification to ICE in the event of any detainee death. Per the SDDO, ICE would make other notifications as required by ICE policy and this standard.
9. The facility has a policy and procedure to address the death of a detainee while in transport.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy IV-025, Offender/Detainee Escorts/Transport, establishes procedures for the transporting officers to notify the facility as soon as possible in the event of a detainee death while in transport. Emergency Action Plan - Section 18 establishes additional procedures in the event of any detainee death.
10. At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the SDDO, ICE would ensure the disposition of a detainee's remains in accordance with the provisions of this standard.
11. In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. • If the detainee is a U.S. military veteran, the Department of Veterans Affairs notified.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the SDDO, ICE would schedule the burial of unclaimed detainee remains in accordance with the provisions of this standard.
12. An original or certified copy of a detainee's death certificate is placed in the subject's A-File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the SDDO, ICE would place a copy of a deceased detainee's death certificate in the applicable 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"/>	Emergency Action Plan - Section 18 requires notification of the local coroner in the event of a detainee death and specifies that the coroner is responsible for investigating the death and performing an autopsy. Emergency Action Plan - Section 18, references ICE Directive 7-9.0, Notification and Reporting of Detainee Deaths, for issues related to the death of an ICE detainee.
14. ICE staff follows established procedures to properly close the case of a deceased detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the SDDO, ICE would close the case of a deceased detainee in accordance with ICE policy and the requirements of this standard.

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

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

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

Due to its limited medical resources, the facility does not accept detainees who are severely or terminally ill. As confirmed per a review of detainee medical records, detainees already housed at the facility who develop the need for more extensive medical care are transported to the local hospital. Per the medical supervisor and the Supervisory Detention and Deportation Officer (SDDO, ICE is promptly notified of any significant change in the medical status of a detainee. Procedures are in place for the completion of advanced directives, if medically indicated, and for responding to detainee requests to donate organs. Per the medical supervisor, no such requests have been received.

There have been no deaths at this facility in the past year. A review of facility policies and emergency plans occurred as did interviews with the medical supervisor and the SDDO. It was determined that procedures for appropriately responding to the death of a detainee in the facility or while in transport are in place.

(b)(6), (b)(7)c / February 10, 2012
Reviewer's Signature / Date

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

Section V ACTIVITIES

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

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has written policy and procedures concerning correspondence and other mail. The rules for correspondence and other mail are posted in each housing or common area or provided to each detainee via a detainee handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement for correspondence rules to be posted in each housing or common area is specific to SPCs and CDFs. However, these rules are posted in the housing areas at this facility.
2. The facility provides key information in English, Spanish, and other languages spoken by a significant number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Key information is provided in both English and Spanish.
3. Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mail is usually distributed on the same day received, but always within 24 hours.
4. Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Staff maintains a logbook-recording acceptance of priority, priority overnight, and certified mail delivered to the facility for a detainee.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. At this facility, a detailed logbook is maintained for all priority, priority overnight, and certified mail. All incoming mail is recorded in an electronic log.
6. Staff does not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized in writing by the Facility Administrator or equivalent for prevailing security reasons.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All ICE detainee mail is delivered to the housing area unopened where it is opened by the detainee in the presence of an officer.
7. Staff does not read incoming general correspondence without the Facility Administrator's prior approval.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Pursuant to policy, staff at this facility is not allowed to read any incoming general correspondence.
8. Staff does not inspect incoming Special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Staff is prohibited from reading or copying incoming and outgoing Special Correspondence without the detainee present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff members are not permitted to read or copy any incoming or outgoing Special Correspondence.
10. Staff is only authorized to inspect outgoing correspondence or other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement to inspect outgoing mail without the detainee present is specific to SPCs and CDFs. However, staff members do not inspect outgoing mail.

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
11. Correspondence to a politician or to the media is processed as Special Correspondence and is not read or copied.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement to notify the sender of rejected incoming mail is specific to SPCs and CDFs. This facility does not send written notice to the sender. Written notice is provided to the addressee of incoming mail.
13. The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Staff maintains a written record of every item removed from detainee mail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A written record is maintained as well as a log book identifying any item which is removed from detainee mail.
15. The Facility Administrator or designee monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The procedure for safeguarding cash removed from a detainee protects the detainee from loss of funds and theft. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A comprehensive procedure is followed to safeguard any cash removed from a detainee and to ensure it is accurately credited to the detainee's account. Multiple receipts are issued to the detainee during the process.
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"/>	Any identity documents found are logged and turned over to ICE immediately.
18. Staff provides the detainee a copy of his or her identity document(s) upon request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Staff disposes of prohibited items found in detainee mail in accordance with the Detention Standard on "Contraband".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Disposal of prohibited items is done in accordance with the facility policy on contraband.
20. Every indigent detainee has the opportunity to mail, at government expense: At least five pieces of special correspondence per week; Three one ounce letters per week; Packages deemed necessary by ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. The facility has a system for detainees to purchase stamps and for mailing all Special Correspondence and a minimum of 5 pieces of general correspondence per week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stamps may be purchased at the commissary and detainees can mail all Special Correspondence and general correspondence at the mail drop located in the dining hall.

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
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"/>	Paper, envelopes, and pencils are available at no cost to detainees and may be obtained from the commissary and the law library supervisor.
23. SMU detainees have the same correspondence privileges as general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees have the same correspondence privileges.
24. Detainees have access to outside publications.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees may have access to newspapers and magazines.

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

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

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

The mail room supervisor, the Chief of Security, and several detainees were interviewed. There were no complaints noted. Overall, the facility complies with the PBNDS regarding Correspondence and Other Mail. Special mail is handled in accordance with the standards. ICE detainee mail is only opened and searched in the presence of the detainee. Twenty-two of twenty-four components meet the standard and two were found to be not applicable. Detainees are able to correspond with family, legal representatives, government officials as well as consular/embassy staff.

(b)(6), (b)(7)c February
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interviews with the ICE SDDO and facility staff indicated that the ICE Field Office Director (FOD) would approve on a case-by-case basis any detainee request to attend a funeral or a deathbed visit. There have been no such requests in the past three years.
2. The facility recognizes as "immediate family member" a parent (including stepparent or foster parent), brother, sister, child, and spouse (including common-law spouse).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The CDF/IGSA facility notifies ICE of all detainee requests for non-medical escorts.	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An interview with ICE officers and facility staff indicates that a Deportation Officer (DO) would review a detainee's file before forwarding any request to the approving authority.
5. Detainees who require overnight housing are placed in approved IGSA facilities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 111-025, Offender Escort/Transport, provides that detainees requiring overnight housing would be placed in an approved IGSA facility.
6. Each escort detail includes at least (b)(7)(e) officers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy addresses this requirement.
7. The detainee remains under constant, direct visual supervision of escorting staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Escorting officers report unexpected situations to the originating facility as a matter of procedure and the ranking supervisor on duty has the authority to issue instructions for completion of the trip.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility Policy 111-025 provides guidance to staff on what to do when encountering unexpected situations while on escort duty into the community.
9. Escorting officers have the discretion to increase or decrease minimum restraints in accordance with written instruction, procedures and classification level of the detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Escort officers do not accept gifts/gratuities from a detainee, detainee's relative or friend for any reason.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility Policy 101, General/ Professional Conduct, addresses prohibitions on staff accepting gifts or gratuities for a detainee.

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 checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Standard procedure requires the immediate return to the facility of any detainee who violates trip rules.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The Field Office Director is the approving official for all non-medical escorted trips.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An interview with ICE officers and facility staff as well as facility policy indicates that the FOD is the approving official for all non-medical escorted trips.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility procedures comply with the ICE standard on Transportation (Land Transportation) and the ICE Use of Force Standard regarding the use of restraints.

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 plans and written policy to support escorted trips for non-medical emergencies are available and current and were reviewed during this inspection. ICE officers and facility staff were also interviewed to support the finding. No such escorted trips have been conducted for at least three years.

(b)(6), (b)(7)(d) February 10, 2012

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"/>	
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"/>	To date, the facility has received no detainee marriage requests. However, should a request be made, facility policy requires that it be forwarded to the FOD for review.
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"/>	The facility policy requires the intended spouse to send a letter confirming marital intent to the Warden.
5. The Facility Administrator provides a written copy of his or her decision to the detainee and his or her legal representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. When permission is denied, the Facility Administrator states the basis for his or her decision along with instructions on how the detainee can file an appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The Facility Administrator provides the detainee with a place and time to make wedding arrangements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy limits marriage ceremony attendance to the detainee, intended spouse, and the person performing the ceremony. Should a wedding be scheduled, the detainee would be provided with a time and place for arrangements.
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 component is only applicable for SPCs and CDFs. At this facility, the Warden approves marriage requests,

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 allows detainees to request permission to marry. Each written request is reviewed by the facility Warden and ICE Field Office Director (FOD). In addition, the FOD reviews all decisions made by the Warden concerning detainee marriage requests. Each detainee who submits a marriage request receives a written response from Warden.

(b)(6), (b)(7)c / February 10, 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"/>	Indoor recreation opportunities include television, board games, and card games. Outdoor activities available at the facility include basketball, volleyball, soccer, and softball.
2. A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs; however, this facility has a recreation officer.
3. Regular maintenance keeps recreational facilities and equipment in good condition.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Recreational facilities and equipment were found to be in good condition
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"/>	The recreation officer oversees recreation programs for the SMU and special needs detainees. Correctional officers supervise the daily recreation of detainees in the SMU.
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Outside activities are restricted to limited-contact sports.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Each detainee has the opportunity to participate in daily recreation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each detainee, including those housed in special management units, are afforded an opportunity to participate in daily recreation.
9. Detainees have access to recreation activities outside the housing units for at least one hour daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Staff checks all items for damage and condition when equipment is returned.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Staff conducts searches of recreation areas before and after use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Searches of all recreation areas are conducted both before and after use.
12. Recreation areas are under constant staff supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All outside recreation is monitored and supervised by a correctional officer.
13. Supervising staff are equipped with radios.	<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
14. The facility provides detainees in the SMU at least one hour of outdoor recreation time daily, five times per week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in Administrative Segregation and Disciplinary Segregation are afforded at least one hour of outdoor recreation, five days per 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"/>	
17. All volunteers have completed an orientation program with documentation required before entering a secure portion of the facility where detainees are present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Training Department provides training for volunteers before they are allowed to enter secure areas of the facility.
18. Visitors, relatives or friends of detainees are not allowed to serve as volunteers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. If the facility has no outside recreation, are detainees considered for transfer after six months?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has 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 has outdoor recreation.
21. Case officers make written transfer recommendations about every six-month detainee to the Facility Administrator.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has outdoor recreation.
22. The Facility Administrator documents all detainee-transfer decisions, whether yes or no.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has outdoor recreation.
23. The detainee's written decision for or against an offered transfer documented in his or her A-file.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has outdoor recreation.
24. Staff notifies the detainee's legal representative of his or her decision to accept/decline a transfer.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has outdoor 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 has outdoor recreation.
26. Does the A-file of every detainee held more than 60 days without access to recreation contains either a transfer-waiver signed by the detainee or the Facility Administrator's written determination of the detainee's ineligibility for transfer.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has outdoor recreation.
27. The detainee's legal representative is notified of the detainee's/Facility Administrator's decision.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has outdoor recreation.

PART 5 - 29. RECREATION

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

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

The facility has a recreation program that provides each detainee an opportunity to participate in recreation. The program is supervised by a recreation officer. Detainees in general population may recreate daily within the housing units and use outdoor recreation areas. Detainees housed in Special Management Units may receive a minimum of at least one hour of outdoor recreation five days per week. Of particular note was the large, well equipped and maintained, outdoor soccer field which receives a great deal of use by ICE detainees.

(b)(6), (b)(7)c February 10, 2011

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"/>	Policy V-006, Religious Programs, establishes a religious services program.
2. Space is available for detainees to participate in religious services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The facility allows detainees to observe the major "holy days" of their religious faith. • List any exceptions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are allowed to observe the major "holy days" of their religion. However, as an exception, activities may be limited if there are security concerns.
4. The facility accommodates recognized holy-day observances by: • Providing special meals, consistent with dietary restrictions. • Honoring fasting requirements. • Facilitating religious services. • Allowing activity restrictions.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility fully complies with the requirements of all the bulleted items of this component.
5. Each detainee is allowed religious items in his/her immediate possession; refer to the Funds and Personal Property Standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Examples include prayer rugs, prayer books, medicine pouches, and religious medallions.
6. Volunteer's credentials are checked and verified before allowing participation in detainee programs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Religious volunteers' credential are checked and verified before they are allowed to enter the facility and participate in detainee programs.
7. Members of faiths not represented by clergy may request to present their own services within security allowances.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Detainees in the Special Management Unit may participate in religious practices unless otherwise documented for the safety and security of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

RELIGIOUS PRACTICES

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

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

Each detainee, housed at this facility, may participate in religious services. Volunteers provide a variety of religious programs.

Detainees who are members of religious faiths not represented by volunteers may present their own services. Detainees may possess religious items such as prayer beads, prayer rugs, medicine bags, and prayer books.

(b)(6), (b)(7)c February 10, 2011

Reviewer's Signature /

(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"/>	Telephones are turned on at 7:30 a.m. after the daily cleanliness inspection. Phones are turned off at 10:30 p.m.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The telephone access policy is included in the video orientation provided to detainees at admission. It is also posted on facility bulletin boards in the housing areas.
3. Notification explaining the facilities telephone policy is in the Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Access rules, including updated telephone and consulate number, are posted in housing units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Key information is provided in 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"/>	The ratio of telephones varies from housing unit to housing unit, but is always greater than one per 25 detainees.
7. Telephones are inspected daily by facility staff to ensure that they are in good working order.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	As soon as it is determined that a telephone is out of order, it is report to the vendor.
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"/>	Telephone repairs are normally completed within 24 hours. Most repairs are electronic in nature and can be completed same day as reported. If it is a hardware problem, the vendor usually visits the facility the day after the report is made.
11. Detainees are afforded a reasonable degree of privacy for legal phone calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. A procedure exists to assist a detainee who is having trouble placing a confidential call.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When a detainee requests assistance, the law library supervisor will assist the detainee in placing a confidential call.
13. The facility provides the detainees with the ability to make non-collect (special access) calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pursuant to requests for such assistance, the law library supervisor will assist the detainee.

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
14. Special Access calls are at no charge to the detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are not charged for Special Access calls.
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"/>	This facility is able to fully meet this requirement. So, no alternate arrangements are necessary.
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"/>	There are no restrictions placed on detainees who attempt to contact attorneys and legal service providers.
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"/>	Pursuant to such a request, ICE would be contacted for approval. If granted, the facility makes special arrangements.
18. All telephone restrictions are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no instances of telephone restrictions. However, if a restriction should occur pursuant to a disciplinary hearing, it would be documented.
19. The facility has a system for taking and delivering emergency detainee telephone messages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Phone call messages are given to detainees as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Detainees are allowed to return emergency phone calls as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A detainee being allowed to return an emergency phone call would be brought to a facility administrative telephone as soon as possible to return such a call.
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 allowed phone calls for consultation relating to their immigration case or other legal 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 permitted calls to consular or 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"/>	

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
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"/>	Signs advising that detainee phone calls are subject to monitoring are conspicuously posted on bulletin boards throughout the facility and in the housing units. There is also a recorded message on the phone system. Special Access calls are not monitored. Detainees needing to make a Special Access call submit a request to the law library supervisor.
27. The OIG phone number for reporting abuse is programmed into the detainee phone system. The reviewer must verify that the number is operable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The OIG number is programmed into the detainee phone system. This reviewer tested the number from a phone in a detainee housing area. It was working, and contact was made with a staff member at the OIG Hotline desk.
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"/>	This is done weekly by the on-site assigned ICE officer.

PART 5 – 31. TELEPHONE ACCESS

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

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

Detainee telephones were inspected at several locations throughout the facility and found to be in good repair. Facility staff was knowledgeable about the requirements of the ICE PBNDS regarding Telephone Access. Staff was also aware of the facility policy regarding telephone access, and what to do in the event repairs were necessary. The ICE liaison and support officer as well as the law library supervisor who is responsible for detainee telephones were interviewed. This reviewer checked the OIG hotline process and was able to speak to a live person at the OIG help desk. Required signs were posted throughout the facility and in close proximity to the detainee telephones. Twenty-seven of twenty-eight components were found to meet standards while one was not applicable.

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

(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"/>	Facility policy V-004 addresses written visitation procedures, schedules, and hours for visitation.
2. The visitation hours are tailored to the detainee population and the demand for visitation. The minimum duration for a visit is 30 minutes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The visitation schedule and rules are available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The visitation schedule and rules are available as a handout to the public as well as being posted on the wall in the visitation waiting area.
4. The hours for all categories of visitation are posted in the visitation waiting area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The hours for all types of visitation are posted on the wall in the visitor's waiting room.
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"/>	Rules are available in English and Spanish.
6. A general visitation log is maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A general visitation log is maintained for each visit by a visitation officer.
7. Detainees are permitted to retain authorized personal property items specified in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The items which detainees may retain are enumerated in facility policy V-004.
8. A visitor dress code is available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Visitors are searched and identified according to standard requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All visitors are identified and searched prior to visiting with a detainee.
10. The requirement on visitation by minors is complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, within the first 30 days.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are provisions at this facility for visitation by minors.
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"/>	There are provisions at this facility for visitation by minors.
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"/>	Any visitation denial is documented.
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"/>	Legal visits may be conducted seven days a week.

PART 5 – 32. VISITATION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
16. On regular business days legal visitation hours provide for a minimum of eight (8) hours per day and a minimum of four hours per day on weekends and holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Legal visitation may be conducted eight hours per day, seven days a week.
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"/>	
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"/>	Private consultation rooms are available, and documents may be exchanged between the detainee and his legal visitor.
19. There are written procedures governing detainee searches.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy III-013-J governs all 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"/>	Facility policy specifically addresses that legal representatives and assistants are subject to non-intrusive searches at anytime for the purpose of ascertaining the presence of 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"/>	The visitation policy requires that legal service providers be identified prior to any visit.
22. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. SPCs and CDFs shall submit written requests for tours from domestic or international organizations and associated with detention issues to the appropriate Field Office Director for approval.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility has not received any requests for such tours. However, if a request is received, it is referred to the onsite ICE Deportation Officer to forward it to the FOD .
24. Provisions for NGO visitation as stated in the Detention Standards are complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy at this facility provides that any request for NGO visitation must be submitted in advance and approved by the ICE Field 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"/>	Requests by law enforcement officials to visit an ICE detainee are referred to ICE for approval.
26. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the Facility Administrator or ICE Field Office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 32. VISITATION

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

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

Visitation rules, hours/schedules, and the dress code were posted in the visitors waiting area in English and Spanish. This information is also available as handouts. Legal visits and non-governmental organizations (NGO) visits are facilitated by policy and practice. Detainees are able to visit family, legal representatives, government officials, and consular/embassy personnel. Visitation was observed during the inspection and appeared to be in keeping with the requirements of the PBNDS. No problems were noted. Twenty three of twenty six components were found to meet standards with three being not applicable.

(b)(6), (b)(7)c / February 10, 2011

Reviewer's Signature /

(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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Detainee housekeeping meets acceptable levels of neatness, cleanliness and sanitation standards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. At IGSA's detainees are never allowed to work outside the secure perimeter. SPCs and CDFs detainees classified as level 1 have the opportunity to participate in special details outside the secure perimeter under direct supervision.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Written procedures govern selection of detainees for the Voluntary Work Program. • The same procedures apply for replacement workers as for "new" workers. • Staff follows written procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Where possible, physically and mentally challenged detainees participate in the program.	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Detainee volunteers ordinarily work according to a fixed schedule.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. If a detainee is removed from a work detail, staff places the written justification for the action in the detainee's detention file.	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The voluntary work program meets: • OSHA standards • NFPA standards • ACA standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Medical staff screen and formally certifies detainee food service volunteers; • Before the assignment begins • As a matter of written procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Detainees receive safety equipment/ training sufficient for the assignment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 33. VOLUNTARY WORK PROGRAM

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. Proper procedure is followed when an ICE detainee is injured on the job.	<input 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.)

(b)(6), (b)(7)c February 11, 2011

Reviewer's Signature / [Redacted]

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

Performance-Based National Detention Standards

Section VI JUSTICE

34 Detainee Handbook

35 Grievance System

36 Law Libraries and Legal Material

37 Legal Rights Group Presentations

PART 6 - 34. DETAINEE HANDBOOK

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a detainee handbook. Each detainee receives a copy of the local handbook and the ICE National Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Upon admission to the facility, each detainee receives a copy of the facility handbook and the ICE National Detention Handbook.
2. The detainee handbook is written in English and translated into Spanish, and other languages spoken by significant numbers of detainees in that facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The handbook is written in both English and Spanish.
3. A procedure for requesting interpretive services for essential communication has been developed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Orientation materials are read to detainees who cannot read, or they are provided the material via audio or video recordings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses two orientation videos and they are in both English and Spanish.
5. The handbook supplements the facility orientation video where one is provided.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Revisions are posted in housing units.
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The initial issue of clothes and bedding is not addressed. The handbook does address what personal items may be retained by the detainee, and how to access medical care.
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility handbook does not state when a medical examination will be conducted.
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"/>	

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
13. The handbook describes: official count times and count procedures, meal times, feeding procedures, procedures for medical or religious diets, smoking policy, clothing exchange schedules and if authorized, clothes washing and drying procedures and expected personal hygiene practices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The handbook describes times and procedures for obtaining disposable razors and explains that detainees attending court will be afforded the opportunity to shave first.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility handbook fails to explain special procedures for detainees who are attending court. The information is provided in the ICE National Detainee Handbook.
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"/>	Telephones are available from 7:30 a.m. to 10:30 p.m.
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"/>	As indicated in the handbook, commissary times and procedures are posted in each housing unit.
19. The handbook describes the detainee voluntary work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The handbook describes the library location and hours of operation and law library procedures and schedules.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Law library procedures are described. However, the general library location and hours are not identified.
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The location of the pro bono legal organization lists is not identified in the handbook. In addition, group legal rights presentation schedules and sign-up procedures are not discussed.
22. The handbook/supplement provides local ICE contact information.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. The handbook describes the facility contraband policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. The handbook describes the facility visiting hours and schedule and visiting rules and regulations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. The handbook describes the correspondence policy and procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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
26. The handbook describes the detainee disciplinary policy and procedures, including: <ul style="list-style-type: none"> Prohibited acts and severity scale sanctions. Time limits in the Disciplinary Process. Summary of Disciplinary Process. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> Informal (if used) and formal grievance procedures; The appeals process; In CDFs procedures for filing an appeal of a grievance with ICE. Staff/detainee availability to help during the grievance process. Guarantee against staff retaliation for filing/pursuing a grievance. How to file a complaint about officer misconduct with the Department of Homeland Security. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring procedures for filing an appeal of a grievance with ICE is specific to CDFs. However, the grievance section of this facility's handbook explains procedures for filing an appeal with ICE. All six of the bulleted items of this component are addressed in the handbook.
28. The handbook describes the medical sick call procedures for general population and segregation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. The handbook describes the facility recreation policy including: <ul style="list-style-type: none"> Outdoor recreation hours. Indoor recreation hours. In dorm leisure activities. Rules for television viewing. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30. The handbook describes the detainee dress code for daily living; and work assignments and the meaning of color-coded uniforms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. The handbook specifies the rights and responsibilities of all detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Detainees are required to sign for the handbook to ensure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Two videos are used, and if required, interpretive services are available.

PART 6 - 34. DETAINEE HANDBOOK

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

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

During the initial orientation process, detainees receive a facility handbook. Two orientation videos are used to supplement the facility handbook. The handbook and the orientation video are available in English and Spanish. Interpretive services are available when required.

The handbook provides the information concerning facility rules and regulations, services and program opportunities required by the standard with the following exceptions. The handbook fails to describe or identify the initial issue of clothing and bedding. Also not address is when a detainee will receive a medical examination. Special shaving arrangements for detainees attending court is not addressed. Finally, information regarding pro bono legal lists, group legal rights presentations and sign up schedules, and the library location and hours is not included in the handbook.

(b)(6), (b)(7)c / February 10, 2011

Reviewer's Signature /

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

PART 6 – 35. GRIEVANCE SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees are informed about the facility's informal and formal grievance system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Information concerning the facility's informal and formal grievance system is provided in the facility handbook.
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"/>	Each detainee receives a copy of the facility handbook and the ICE National Detention 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility handbook fails to explain how to file a complaint concerning officer misconduct with the Department of Justice. The information is provided in the ICE National Detention Handbook. The facility handbook does address the other five bulleted items of this component.
4. Written procedures provide for the informal resolution of oral grievances (Not mandatory). If yes, the detainee has up to five days within which to make his or her concern known to a member of the staff.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Detainees have up to three days to make concerns or complaints known to staff.
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"/>	Emergency grievances are expedited.
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 complains" are identified in the records. For quality control purposes, staff document nuisance complaints received but not filed. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An electronic grievance log and a hard copy grievance file are maintained. "Nuisance complaints" are identified and documented for quality control purposes.
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"/>	The Warden may instruct staff to refuse to process grievances submitted by a detainee who has established a pattern of filing nuisance complaints.
11. Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Informal resolution of a written grievance is documented in the detainee's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Staff complies with the requirement to report allegations of officer misconduct to a supervisor or higher-level official in his or her chain of command, and/or to ICE/DRO Office of Professional Responsibility and/or the DHS Inspector General.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. In SPCs and CDFs, when a Detainee does not accept the grievance committee's decision, he/she files an appeal with the ICE Facility Administrator. <ul style="list-style-type: none"> In all facilities written procedures cover detainee appeals and are included in the detainee handbook 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of the component requiring a detainee to file an appeal with the ICE Facility Administrator when he does not accept the grievance committee's decision is specific to SPCs and CDFs. A detainee may request a second responder's review. If he is not satisfied with the second response, the grievance may be sent to the Warden for a final review.
15. In SPCs/CDFs, the detainee has a reasonable timeframe after the incident or informal-grievance outcome to file a formal grievance.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The detainee has up to three days after an incident to file a grievance.

PART 6 – 35. GRIEVANCE SYSTEM

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

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

This facility has a comprehensive grievance program that allows detainees to make their concerns or grievances known to staff. The program includes an informal administrative remedy process and a formal written grievance program. Detainees are allowed to appeal the initial grievance determination to a second reviewer and then to the Warden. A grievance log is maintained by the facility and an annual report is generated for Executive Staff review.

The facility complies with the PBNDS regarding the Grievance System with two exceptions. Detainees are not allowed to informally resolve a grievance up to five days from the date of an incident. Also, the facility handbook fails to explain how to file a concern about officer misconduct with the Department of Justice.

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

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"/>	There is a room designated as the law library for use by detainees.
2. The law library contains all materials listed in the "Access to Legal Materials" Standard, Attachment A. The listing of materials is posted in the law library. <ul style="list-style-type: none"> In lieu of/ or in addition to the physical law library, ICE detainees have access to the Lexus Nexus electronic law library. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The law library uses LexisNexis in lieu of Attachment A holdings. Additionally, there are a number of other hard copy law books available as legal reference material.
3. If the Lexis/Nexis CD-ROM service alternative is used for the publications in Attachment A, the facility provides detainees sufficient: <ul style="list-style-type: none"> Operable computers and printers, in sufficient numbers in order to provide access Photocopiers, and Supplies for both. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are two computers available with LexisNexis for ICE detainee use. A photocopier and supplies are also available on request.
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"/>	Computers are available for daily use by detainees.
6. Detainees are provided with the means to save legal work in a private electronic format for future use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees may save legal work in a private electronic format with assistance provided by the law library supervisor.
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 updates are provided quarterly by ICE.
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"/>	According to the law library supervisor, there have been no requests from outside individuals or organizations to provide published legal material. Should such a request be received, the facility would forward the request to ICE for approval.
9. There is a designated ICE or facility employee who inspects, updates, and maintain/replace legal material and equipment on a routine basis. The designee properly disposes outdated supplements and replaces damaged or missing material promptly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The law library supervisor and the on-site ICE officer inspect and update legal material routinely.

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The law library supervisor allows detainees daily use of the law library, if requested. More than five hours time is provided, if requested. Detainees are not required to forego recreation time. Detainees having time sensitive work to complete are given additional time on a priority basis.
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"/>	
12. The facility permits detainees to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are permitted to assist other detainees when requested, provided it is voluntary and unpaid.
13. Staff ensures that illiterate or non-English-speaking detainees without legal representation receive more than access to English-language law books after indicating their need for help.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Assistance is provided to both illiterate and non-English speaking detainees to include telephonic translation services if necessary.
14. Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are not restricted at this facility from storing reasonable amounts of legal material in their housing units.
15. Detainees housed in Administrative Segregation and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. All denials of access to the law library fully documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	According to the law library supervisor, there have been no denials of law library access. Should a denial occur, it would be fully documented.
17. Facility staff informs ICE Management when a detainee or group of detainees is denied access to the law library or law materials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	According to the law library supervisor, there has been no denial of access to the law library or law materials to a detainee or group of detainees at this facility. Should it occur, ICE management would be informed.

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
18. Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No reprisals, retaliation, or penalties are permitted to take place against any detainee who sought any type of judicial relief.
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"/>	The law library supervisor and/or the commissary provide indigent detainees with free envelopes and stamps.

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

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

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

The law library has a designated room equipped with LexisNexis that is updated quarterly by ICE in lieu of a physical library equipped with legal reference volumes. The library does contain a significant number of West Law reference books. There are sufficient computers to support daily use, as requested, by detainees. Detainees with court dates are given priority. All detainees are offered a minimum of five hours per week of time. If they request more time, it is made available to them per law library supervisor. The detainees' rights are being protected at this facility by their access to courts, counsel, and legal material. Nineteen of nineteen components comply with the PBNDS regarding Law Libraries and Legal Material.

(b)(6), (b)(7)c / February 10, 2012
Reviewer's Signature / Date

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

PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<input type="checkbox"/> Check here if No Group Presentations were conducted within the past 12 months. Mark Standard as Acceptable overall and continue on with next portion of worksheet.				
1. The Field Office is responsive to requests by attorneys and accredited representatives for group presentations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Only one group has requested to make a group presentation. The presentation was approved in a timely way.
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 has been no rejection or modification of objectionable material. If this did occur, staff would follow the policy.
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"/>	Posters are placed in common areas and housing units seven days in advance of presentations, and sign-up sheets are readily available.
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"/>	There have been no denials of permission to attend any group presentations. However, documentation would be maintained if any denials should occur.
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"/>	The number of detainees allowed to attend a presentation is not limited since it takes place in the facility Dining Hall which has a large capacity. All detainees who sign up are able to attend.
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"/>	If requested, separate sessions would be provided by the presenters. To date, there have not been any such requests.
8. Interpreters are admitted when necessary to assist attorneys and other legal representatives.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Several interpreters accompany the presenters each time a group presentation is scheduled.
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 allowed as much time as needed to make their presentations.
10. Staff permits presenters to distribute ICE/DRO-approved materials.	<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.				
11. The facility permits presenters to meet with small groups of detainees to discuss their cases after the group presentation. ICE/DRO or authorized detention staff is present but do not monitor conversations with legal providers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Presenters are permitted to meet with smaller groups of detainees after the group presentations. Staff is present in the area, but do not monitor conversations.
12. Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee, and the reasons for suspension are documented. The Headquarters Office for Detention and Removal, Field Operations and Detention management Division is notified when a group or individual is suspended from making presentations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no suspension of privileges, but the procedure described in this component would be followed if suspensions were imposed.
13. The facility plays ICE/DRO-approved videotaped presentations on legal rights, at regular opportunities at the request of outside organizations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The only organization which makes group presentations at this facility does not use any videotaped presentations. However, the facility has equipment available if needed.
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.)*

There is a viable Legal Rights Group Presentation program operating at this facility. An Immigration Law Program is presented monthly by the Immigration Law Center, Louisiana State University (LSU). The program provides detainees access to information that informs them of Immigration Law and Procedures. Translators accompany the presenters. Law students from LSU meet with detainees in small groups after the formal presentations to answer questions. Overall, the facility complies with policy and the PBNDS regarding Legal Rights Group Presentation. This results in fifteen of fifteen components meeting the standard.

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

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

Section VII ADMINISTRATION & MANAGEMENT

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

PART 7 – 38. DETENTION FILES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. A Detention File is created for every new arrival whose stay will exceed 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A detention file is created during the admission process.
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"/>	Documentation received when the detainee is admitted and documents generated during the intake process are placed in the newly created detention file.
3. The detainee's Detention File also contains documents generated during the detainee's custody. <ul style="list-style-type: none"> • Special requests • Any G-589s and/or I-77s or IGSA equivalent, closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The Detention Files are located and maintained in a secured area. If not the cabinets are lockable and distribution of the keys is limited to supervisors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring detention files to be kept in lockable cabinets and the key distribution to be limited to supervisors if the files are not located in a secure area is specific to SPCs and CDFs. The detention files are maintained in a secure area that is staffed during the workday and locked during non-business hours. The Shift Captain has a key to access the records area, if necessary, during non-business hours
5. The Detention File remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent and other documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detention files remain active while the detainee is assigned to this facility. When he is released from the facility, copies of all completed release documents are added to the file
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 the detention file is closed, the Files Supervisor makes a notation that the file is complete and ready to be archived.
7. Staff make copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 7 – 38. DETENTION FILES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. Appropriate staff has access to the Detention Files and other departmental requests are accommodated by making a request for the file. Each file is properly logged out and in by a representative of the responsible department.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Whenever a file is logged out, a file identifier card is placed in the file's location until it is returned.
9. Electronic record-keeping systems and data are protected from unauthorized access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Electronic record-keeping systems are password protected and data is restricted and secured.
10. Unless release of information is required by statute or regulation, a detainee must sign a release-of-information consent form prior to the release of any information, and a copy of the form is maintained in the detainee's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Electronic data on individual detainees is subject to the same Privacy Act regulations as the contents of traditional paper Detention Files and A-files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Equipment and supplies are available, maintained in good order, having sufficient capacity to handle the volume of work.
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 at the facility have not been kept for six years at this time. However, the records supervisor was interviewed and was aware of the shred/burn requirement to purge files.
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"/>	Interviews with ICE staff indicated compliance with this requirement.

PART 7 – 38. DETENTION FILES

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

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

The records supervisor, the classification supervisor, and the intake supervisor as well as ICE officers, were all interviewed in the process of reviewing this standard. Facility policy was reviewed and detention files were inspected. The records supervisor keeps active files secured in the administrative office. After a detention file is closed, it is archived in a secure room for archived files. The records supervisor was aware of the policy requirement that archived files are to be purged by shredding or burning after six years, but she explained that had not yet been done because no archived files had yet been retained for that time period. The facility complies with the PBNDS for Detention Files. This is reflected by the fact that fifteen of fifteen components were found to meet the standard.

(b)(6), (b)(7)c February 1
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"/>	All media interviews are 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"/>	Documentation authorizing personal interviews by news media is filed in the detainees A-file and a copy provided to the facility for inclusion in the detainees Detention File.
3. The Field Office Director consulted with Headquarters before deciding to allow an interview with a detainee who was the center of a controversy, or special interest, or high profile case.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no occurrences at this facility. However, the Supervisory Detention and Deportation Officer (SDDO) interviewed for this standard stated that should such a situation occur, the FOD would consult with Headquarters.
4. Signed released forms are obtained and retained in the detainee's a-file from any media representatives who photographed or recorded any detainee in any way that would individually identify him or her.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Whenever a detainee is photographed or recorded by news media, a signed release form is obtained and placed in the 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"/>	According to the SDDO interviewed for this standard, the situation described by this component has not occurred. If it should, appropriate procedures are in place to address these requirements.

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 ICE Supervisory Detention and Deportation Officer (SDDO) was interviewed by telephone from her office in the ICE Oakdale Sub-Office. Facility policy was reviewed. There has been little or no media activity at this facility in the past year. However, both ICE and the facility appear to be prepared to follow policy and comply with the requirements of the PBNDS. The SDDO was knowledgeable of all requirements. Five of five components of this standard were found compliant and meet the standard.

(b)(6), (b)(7)c / February 10, 2011

Reviewer's Signature

(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"/>	
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"/>	Correctional staff receives a four-week initial Basic Correctional Officer Training Course and a 40-hour facility orientation course. Medical and clerical staff receives a 40-hour institution orientation course. Volunteers and contractors complete a Volunteer/Paid Professional Training class.
3. At least one qualified individual with specialized training for the position coordinates and oversees the staff development and training program. At a minimum, full-time training personnel complete a 40-hour training-for-trainers course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Training Director has completed the American Correctional Association (ACA) 40 hour training-for-trainers course.
4. Training is governed and guided by a training plan that is reviewed and approved annually by the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. An accurate and complete record is maintained of all formal training activities in: <ul style="list-style-type: none"> Individual training folders, Other training records systems, and/or Electronic systems. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Individual training folders are maintained.

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>The training curriculum was reviewed during the inspection and included all of the information identified in the bulleted items of this component.</p>

PART 7 – 40. STAFF TRAINING

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

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

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>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>The training curriculum was reviewed during this inspection and included all of the subject matter identified in the 22 bulleted items of this component.</p>

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>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>The training curriculum was reviewed during this inspection and the orientation program for health care personnel included the information identified in all 14 of the bulleted items of this component.</p>

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>10. Security personnel (including contractors) will receive training on the following subjects, at a minimum:</p> <ul style="list-style-type: none"> • Security procedures and regulations • Supervision of detainees • Searches of detainees, housing units, and work areas • Signs of suicide risk, precaution, prevention and intervention. • Code of Ethics • Health-related emergencies • Drug-free workplace • Suicide precautions • Self-defense techniques • Use-of-force regulations and tactics • Report writing • Detainee rules and regulations • Key control • Rights and responsibilities of detainees • Safety procedures • Emergency plans and procedures • Interpersonal relations • Social/cultural lifestyles of the detainee population • Cultural diversity/understanding staff & detainees • Communication skills • Cardiopulmonary resuscitation (CPR)/first aid • Counseling techniques • Sexual abuse/assault awareness • National Detention Standards. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The training curriculum was reviewed during this inspection and the training for security personnel included information identified in all of the bulleted items of this component.
<p>11. Situation Response Teams (SRTs) receive:</p> <ul style="list-style-type: none"> • Specialized training before undertaking their assignments. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
<p>12. Facility management and supervisory staff receive:</p> <ul style="list-style-type: none"> • Management and Supervisory training 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)(E) randomly chosen files were reviewed which indicated that management and supervisory staff complete the required 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"/>	All personnel authorized to use firearms receive training that addresses their use, safety, care, and constraints on use prior to assignment to a post requiring firearms. Rosters of personnel authorized to use firearms are maintained by shift supervisors, the Chief of Security, the Warden, and the training director. (b)(7)(E) (b)(7)(E)
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"/>	All personnel authorized to use (b)(7)(e)
15. (MANDATORY) Personnel authorized to use chemical agents receive training in the use of chemical agents and in the treatment of individuals exposed to a chemical agent before being assigned to a post involving their possible use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Correctional officers complete chemical agent training during the Basic Officers Training Course.
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"/>	Annual training for all staff includes the content as described in the bulleted items of this component.
17. New staff is required to acknowledge in writing that they have reviewed and understand the facility's drug-free workplace program, and a copy of the signed acknowledgement is maintained in that person's personnel file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A signed statement is maintained in each training file and was reviewed during this inspection.

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>18. All staff is trained during orientation and annually thereafter, regarding the facility's code of ethics.</p> <p>Typical contents are:</p> <ul style="list-style-type: none"> • Staff, contractors, and volunteers prohibited from: • Using their official positions to secure privileges for themselves or others. • Engaging in activities that constitute a conflict of interest. • Accepting any gift or gratuity from, or engaging in personal business transactions with a detainee or a detainee's immediate family. • Acceptable behavior in the areas of campaigning, lobbying or political activities. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff complete code of ethics training in initial Basic Training, and also annually. All content as described in the bulleted items of this component is discussed.
<p>19. New staff are required to acknowledge in writing that they have reviewed and understand facility work rules, ethics, regulations, conditions of employment, and related documents, and a copy of the signed acknowledgement is maintained in that person's personnel file.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Signed acknowledgements are maintained in training files and were reviewed during this inspection.
<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"/>	All correctional staff and those other employees having frequent contact with detainees are trained during Basic Training and annually thereafter to respond to health emergencies within four minutes. The training includes the content of the five bulleted items of this component. Five randomly chosen training files were reviewed during this inspection and documented the 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>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"/>	All staff having frequent contact with detainees is trained in Basic Training and annual training on the Sexual Abuse and Assault Prevention and Intervention Program. The training includes information regarding the four bulleted items of this component.
<p>22. (MANDATORY) All staff in frequent contact with detainees are trained at least annually on the facility's Suicide Prevention and Intervention Program, to include:</p> <ul style="list-style-type: none"> • Identifying the warning signs and symptoms of impending suicidal behavior, • Demographic, cultural, and precipitating factors of suicidal behavior, • Responding to suicidal and depressed detainees, • Communication between correctional and health care personnel, • Referral procedures, • Housing observation and suicide-watch level procedures, and • Follow-up monitoring of detainees who have attempted suicide. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff having frequent contact with detainees is trained in basic Training and annually on the facility's Suicide and Intervention Program including information identified in the seven bulleted items of this component. Five randomly chosen files were reviewed during this inspection and documented compliance.
<p>23. All staff is trained during orientation and annually to recognize the signs of a hunger strike and on the procedures for referral for medical assessment.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>24. All staff is trained in proper procedures for the care and handling of keys. Orientation training shall be accomplished before staff is issued keys, and key control shall be among the topics covered in annual training. Ordinarily, such training is done by the Security Officer or Key Control Officer.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training in the proper procedures for the care and handling of keys is provided during the Basic Training program for all staff.

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>25. Through ongoing (at least annual) training, all detention facility staff is made aware of their responsibilities to control situations involving aggressive detainees. At a minimum, training shall include:</p> <ul style="list-style-type: none"> • The requirements of this Detention Standard • The use of force continuum • Communication techniques • Cultural diversity • Dealing with the mentally ill • Confrontation-avoidance techniques • Approved methods of self-defense • Force cell-move techniques • Communicable diseases, particularly precautions to be taken for use of force • Application of restraints (progressive and hard) • Reporting procedures. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training on the handling of aggressive detainees is conducted annually. The training includes the content identified in the bulleted items of this component
<p>26. Employees are encouraged to continue their education and professional development through incentives such as salary enhancement, reimbursement of costs, and administrative leave.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility encourages staff to complete ACA and American Jail Association courses. Staff receives reimbursement for the course fees.

PART 7 – 40. STAFF TRAINING

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

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

Training curriculum, individual training files, and lesson plans were reviewed, and the Director of Training was interviewed during the inspection.

The facility training program provides comprehensive corrections training for correctional staff, professional, clerical, and administrative staff, contractors, and volunteer workers. Correctional staff completes a four-week Basic Correctional Officers Training Course, a 40-hour facility orientation class, and a 40-hour refresher class annually thereafter. In addition, specialized training is provided to staff that is required to carry a firearm, use chemical agents, or participate in special response teams. Professional, clerical, and administrative staff complete a minimum of 40 hours of initial orientation which is tailored to meet their specific needs and job responsibilities. A 40 hour annual refresher course is provided each year. Volunteers and contractors receive specialized initial training.

(b)(6), (b)(7)c February 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"/>	
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"/>	For security reasons, the deportation officer exercises discretion regarding the timing of the notification.
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"/>	Facility policy I-009-1, Section III-Q, specifically addresses all three bulleted items of this component.
6. The detainee is provided with a completed Detainee Transfer Notification Form.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An I-203 and I-216 authorizes the removal of the detainee from the facility. Form G-391 is an Official Detail which provides instructions to transport officers among other uses.
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"/>	

PART 7 - 41. TRANSFER OF DETAINEES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. Detainees are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number and the envelope is marked Medical Confidential.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. For medical transfers, transporting officers receive instructions regarding medical issues.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transport officers are provided information regarding medical issues of the detainee.
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"/>	Funds, valuables, and property are returned to detainees when released from the facility, and are transferred with the detainees to their new location.
12. Transfer and documentary procedures outlined in Section C and D are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Indigent detainees unable to make a telephone call at their new location are able to make a telephone call at the government's expense within 12 hours of arrival.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	According to the SDDO who was interviewed by phone, indigent detainees are allowed to make a telephone call at government expense within 12 hours of arrival at their new location.
14. Meals are provided when transfers occur during normally schedule meal times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sack lunches are provided by this facility when transfer occurs during meal hours.
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.)

The on-site ICE Deportation Officer (DO) and the Supervisory Detention and Deportation Officer (SDDO) were both interviewed. Facility Policy I-009-1 was also reviewed. Both ICE officials interviewed were knowledgeable and facility policy is consistent with the ICE PBNDS for the Transfer of Detainees. Sixteen of sixteen components were compliant with the policy and standards and were found to meet standard.

(b)(6), (b)(7)c / February 10, 2012
Reviewer's Signature / Date

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

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 – Pursuant to ICE PBNDs
February 8-10, 2011

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review – Pursuant to ICE NDS
February 4-6, 2010
Previous Rating
☐ Superior ☐ Good ☒ Acceptable ☐ Deficient ☐ At-Risk

D. Name and Location of Facility

Name
South Louisiana Correctional Center
Address (Street and Name)
3843 Stagg Avenue
City, State and Zip Code
Basile, Louisiana 70515
County
Evangeline Parish
Name and Title of Facility Administrator (Warden/OIC/Supt.)
David A. Viator, Warden
Telephone # (Include Area Code)
337-432-1161 (b)(6), (b)(7)(c)
Field Office / Sub-Office (List Office with oversight responsibilities)
New Orleans, Louisiana / Oakdale, Louisiana
Distance from Field Office
185 miles / 35 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 Service / 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
DROIGSA-10-00004
Date of Contract or IGSA
June 25, 2010
Basic Rates per Man-Day
\$53.02
Other Charges: (If None, Indicate N/A)
N/A ; ;
Estimated Man-days Per Year
142,000

G. Accreditation Certificates

List all State or National Accreditation[s] received:
☒ Check box if facility has no accreditation[s]

H. Problems / Complaints (Copies must be attached)

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

I. Facility History

Date Built
1993
Date Last Remodeled or Upgraded
2001
Date New Construction / Bedspace Added
2011 / Currently constructing new Services Building
Future Construction Planned
☒ Yes ☐ No Date: Currently in progress
Current Bedspace
1,046
Future Bedspace (# New Beds only)
Number: N/A Date: N/A

J. Total Facility Population

Total Facility Intake for previous 12 months
5,864
Total ICE Mandays for Previous 12 months
142,537

K. Classification Level (ICE SPCs and CDFs Only)

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

L. Facility Capacity

	Rated	Operational	Emergency
Adult Male	1,054	1,046	1,054
Adult Female	N/A	N/A	N/A

☐ Facility holds Juveniles Offenders 16 and older as Adults

M. Average Daily Population

	ICE	USMS	Other
Adult Male	391	N/A	337
Adult Female	N/A	N/A	N/A

N. Facility Staffing Level

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

SIGNIFICANT INCIDENT SUMMARY WORKSHEET

or 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.)	Physical	Physical	Physical	Physical
	With Weapon	0	0	0	0
	Without Weapon	22	9	21	8
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	0	0	0	0
	With Weapon	0	0	0	0
	Without Weapon	0	0	0	0
Number of Forced Moves, incl. Forced Cell moves ³		0	1	2	0
Disturbances ⁴		0	0	0	1
Number of Times Chemical Agents Used		0	0	1	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
Offender / Detainee Medical Referrals as a result of injuries sustained.		15	17	7	2
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	5	5	7	2
	# Resolved in favor of Offender/Detainee	0	0	4	0
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	0	0	A	0
	Number	0	0	1	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	176	116	163	90
	# 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.

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

ICE 52 FOIA03030.017196

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

DHS/ICE DETENTION STANDARDS REVIEW SUMMARY REPORT

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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	February 14, 2011

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:

The pending litigation began in June 2007 when the facility was housing Alabama Department of Corrections (ADC) offenders. On June 10, 2007, two ADC offenders were involved in an altercation in a dorm. One attempted to assault the other who was mopping the floor. The aggressor had a padlock in a sock, and the individual being assaulted defended himself by grabbing the mop wringer and fighting back. The aggressor was hit with the mop wringer and went down before staff were able to intervene. He received significant injuries and was hospitalized. That offender's family filed a suit, and the case is still pending.

There have been no escapes, attempted escapes or deaths at this facility during the previous 12 months. However, there was one attempted suicide involving an ICE detainee, as noted below:

- In August 2010, a male ICE detainee threatened suicide by repeatedly holding objects up to his neck and threatening to cut himself. He succeeded in making a non-life-threatening cut and was taken to the local emergency room for suturing. Following his return to the facility, he repeatedly attempted to reopen the wound by removing the sutures and was again taken to the hospital for re-suturing. Per a review of his medical record, the detainee was placed and maintained on suicide watch. He was referred to and evaluated by mental health staff who diagnosed him as mentally ill. The detainee was closely monitored and treated by mental health staff. Completed suicide watch logs with documentation of 15-minute checks were noted in the medical record. He was ultimately transferred to another facility.

(b)(7)e