

Department of Homeland Security

Immigration and Customs Enforcement: Office of Enforcement and Removal Operations

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****REVIEW TEAM USE: (Edits Permitted, ALL FIELDS REQUIRED)**

Facility Information			
Facility Name: Adelanto Detention Center East			Pre-Occupancy: <input type="checkbox"/>
Facility Type: IGSA Intergovernmental Service Agreement (IGSA), ICE Service Processing Center (SPC), ICE Contract Detention Facility (CDF)			
Address:	10400 Rancho Road		
City: Adelanto	State: CA	Zip Code: 92301	
County:	San Bernardino		
CEO Name:	(b)(6), (b)(7)(c)	CEO Title: Warden	
Review Information (Use following format for dates: mm/dd/yyyy)			
Start Date: 11/6/2012	End Date: 11/8/2012	Review Type: Headquarters	
Lead Name	(b)(6), (b)(7)(c)	Lead Title: LCI	
Review Document Issue Summary (See Document Check Section to Review/Update)			
Error(s) Found:	0	Items Not Rated:	0

ICE HQ USE ONLY: (DO NOT EDIT*)

Form Name: G324A_PBNDS	Form Key: 3	Form Date: 6/19/2012	
Form Type: PBNDS	Form Review Type: Annual	Form Over/Under 72 Status: 072	

If Edits are required, contact ICE HQ for an updated form.*FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)**

G-324A (Coded 10122010) Detention Review Worksheet - Rev: 6/19/2012 - Form Key 3

ICE 2012FOIA03030.002889

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.

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

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 “Does Not Meet Standard” or “N/A”.

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

Outcome Measures Completion

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

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

Table of Contents

INTRODUCTION TO THE G324A OVER 72HOUR FACILITY DETENTION INSPECTION WORKSHEETS	2
WHAT IS “PERFORMANCE-BASED”?	2
WORKSHEET OVERVIEW	2
WORKSHEET COMPLETION	3
OUTCOME MEASURES COMPLETION	3
SECTION I: SAFETY	6
PART 1 – 1. EMERGENCY PLANS (KEY: A)	7
PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY (KEY: B)	10
PART 1 – 3. TRANSPORTATION (BY LAND) (KEY: C)	15
SECTION II SECURITY.....	19
PART 2 – 4. ADMISSION AND RELEASE (KEY: D)	20
PART 2 – 5. CLASSIFICATION SYSTEM (KEY: E)	23
PART 2 – 6. CONTRABAND (KEY: F)	26
PART 2 – 7. FACILITY SECURITY AND CONTROL (KEY: G)	28
PART 2 – 8. FUNDS AND PERSONAL PROPERTY (KEY: H)	33
PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES (KEY: I)	38
PART 2 – 10. KEY AND LOCK CONTROL (KEY: J)	41
PART 2 – 11. POPULATION COUNTS (KEY: K)	44
PART 2 – 12. POST ORDERS (KEY: L)	46
PART 2 – 13. SEARCHES OF DETAINEES (KEY: M)	48
PART 2 – 14. SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (KEY: N).....	50
PART 2 – 15. SPECIAL MANAGEMENT UNITS (KEY: O)	53
PART 2 – 16. STAFF-DETAINEE COMMUNICATION (KEY: P)	64
PART 2 – 17. TOOL CONTROL (KEY: Q)	67
PART 2 – 18. USE OF FORCE AND RESTRAINTS (KEY: R)	71
SECTION III ORDER.....	77
PART 3 – 19. DISCIPLINARY SYSTEM (KEY: S)	78

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

SECTION IV CARE	81
PART 4 – 20. FOOD SERVICE (KEY: T).....	82
PART 4 – 21. HUNGER STRIKES (KEY: U)	88
PART 4 – 22. MEDICAL CARE (KEY: V).....	90
PART 4 – 23. PERSONAL HYGIENE (KEY: W)	102
PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION (KEY: X)	105
PART 4 – 25. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH (KEY: Y)	109
SECTION V ACTIVITIES	112
PART 5 – 26. CORRESPONDENCE AND OTHER MAIL (KEY: Z)	113
PART 5 – 27. ESCORTED TRIPS FOR NON-MEDICAL EMERGENCIES (KEY: AA)	116
PART 5 – 28. MARRIAGE REQUESTS (KEY: AB)	118
PART 5 – 29. RECREATION (KEY: AC).....	119
PART 5 – 30. RELIGIOUS PRACTICES (KEY: AD)	122
PART 5 – 31. TELEPHONE ACCESS (KEY: AE).....	124
PART 5 – 32. VISITATION (KEY: AF)	127
PART 5 – 33. VOLUNTARY WORK PROGRAM (KEY: AG)	130
SECTION VI JUSTICE	132
PART 6 – 34. DETAINEE HANDBOOK (KEY: AH)	133
PART 6 – 35. GRIEVANCE SYSTEM (KEY: AI)	137
PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL (KEY: AJ)	139
PART 6 – 37. LEGAL RIGHTS GROUP PRESENTATIONS (KEY: AK)	142
SECTION VII ADMINISTRATION & MANAGEMENT	144
PART 7 – 38. DETENTION FILES (KEY: AL)	145
PART 7 – 39. NEWS MEDIA INTERVIEWS AND TOURS (KEY: AM)	147
PART 7 – 40. STAFF TRAINING (KEY: AN).....	148
PART 7 - 41. TRANSFER OF DETAINEES (KEY: AO)	158
DOCUMENT CHECK.....	160

Section I: SAFETY

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

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

PART 1 – 1. EMERGENCY PLANS (Key: A)		
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	Rating	Remarks (1000 Char Max)
1. No Detainee or detainee groups exercise control or authority over other detainees.	Meets Standard	Policy indicates that detainees have no control over other detainees.
2. Detainees are protected from: <ul style="list-style-type: none"> Personal abuse Corporal punishment Personal injury Disease Property damage Harassment from other detainees 	Meets Standard	All the bulleted items listed in the component are covered under policy.
3. Staff are trained to identify signs of detainee unrest. <ul style="list-style-type: none"> What type of training and how often? 	Meets Standard	Staff receives two hours of training on emergency plans. A review of the staff orientation and annual training plans confirmed the training addresses this topic.
4. Staff effectively disseminate information on facility climate, detainee attitudes, and moods to the Facility Administrator.	Meets Standard	Post orders and staff training address this requirement.
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.	Meets Standard	The compliance manager is responsible for emergency plans and their implementation.
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.	Meets Standard	Emergency plans are assigned numbers 1 through 6. A list of their locations is kept in the compliance manager's office.
7. All staff receive training in the emergency plans during their orientation training as well as during their annual training.	Meets Standard	Staff receives both orientation and annual training on emergency plans.
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.	Meets Standard	Emergency plans indicate one primary and two secondary access routes.
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 	Meets Standard	The emergency plans address all the bulleted items indicated in this component.

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

PART 1 – 1. EMERGENCY PLANS (Key: A)		
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	Rating	Remarks (1000 Char Max)
10. Contingency plans include a comprehensive general section with procedures applicable to most emergency situations, including procedures for handling detainees with special needs.	Meets Standard	The general section includes procedures for handling detainees with special needs.
11. Contingency plans include a procedure for notification of neighbors residing in close proximity to the facility.	Meets Standard	The facility uses an auto-dial system with the numbers of all residents in close proximity.
12. The facility has cooperative contingency plans with applicable: <ul style="list-style-type: none"> Local law enforcement agencies State agencies Federal agencies 	Meets Standard	The facility has memorandums of understandings (MOUs) for emergency response logistics with the San Bernardino County Fire Department, the California Highway Patrol and the San Bernardino County Sheriff's Department.
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.	Meets Standard	Mock emergency drills were conducted on 4/26/2012 and 7/31/2012.
14. All staff receive copies of the Facility Hostage policy and procedures.	Meets Standard	All staff sign for receipt of a copy of the hostage policy during their orientation training.
15. Staff are trained to disregard instructions from hostages, regardless of rank. Within 24 hours after release, hostages are screened for medical and psychological effects.	Meets Standard	This information is included in the general conditions of the emergency plans. Training on the subject was documented in staff training records.
16. The facility maintains a list of translator services in the event one is needed during a hostage crisis.	Meets Standard	The facility maintains a Language Line service for all translation needs.
17. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	Meets Standard	Emergency medical treatment is addressed in the general conditions of the emergency plans.
18. The Food Service Department maintains at least 3- days' worth of emergency meals for staff and detainees.	Meets Standard	The facility maintains at least three days' worth of emergency meals for staff and detainees. During the inspection, the facility had a ten-day supply on-hand.
19. Written plans illustrate locations of shut-off valves and switches for utilities (water, gas, electric).	Meets Standard	The facility maintains an emergency shut-off manual indicating locations of all shut-off valves and switches.

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

PART 1 – 1. EMERGENCY PLANS (Key: A)

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	Rating	Remarks (1000 Char Max)
20. Written plans include a Staff Work Stoppage procedure. This procedure is available for limited supervisory review.	Meets Standard	The emergency plan for staff work stoppage is only available to limited staff.
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 	Meets Standard	The facility has procedures in place for all of the required plans listed in this component.
22. The Emergency Plans specify a procedure for post-emergency debriefings and discussions.	Meets Standard	Required debriefings and discussions are mentioned in the general conditions of the emergency plans.

PART 1 – 1. EMERGENCY PLANS – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.)(5000 Character Max)

The facility has comprehensive emergency plans. All staff are trained in emergency plans during orientation and annual refresher training. The facility has MOUs with three agencies and conducted two mock drills within this review period.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY (Key: B)		
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	Rating	Remarks (1000 Char Max)
1. (MANDATORY) The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	Meets Standard	Policy and procedures outline a means for the 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.	Meets Standard	Physical inspection of hazardous materials inventories confirmed they were being maintained in easy to understand formats. Inventory quantities were correct.
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. 	Meets Standard	Master copies of Material Safety Data Sheets (MSDSs) are maintained in the safety office and medical department. They contain color-coded plant diagrams and legends.
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. 	Meets Standard	Personal protective equipment is available for use with hazardous materials. Policy specifies that hazards and spills are to be reported to the safety manager.
5. The MSDS are readily accessible to staff and detainees in the work areas.	Meets Standard	Copies of MSDSs are maintained in each work and housing area where hazardous materials are stored. They are accessible to detainees and staff, if needed.
6. Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> Quantities are limited. Detainees are trained. Staff always supervise detainees using these substances. 	Meets Standard	
7. All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	Meets Standard	
8. Lighting fixtures and electrical equipment are installed in storage rooms and other hazardous areas and meet the National Electrical Code requirements.	Meets Standard	
9. All toxic and caustic materials stored in their original containers in a secure area.	Meets Standard	

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

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY (Key: B)		
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	Rating	Remarks (1000 Char Max)
10. Excess flammables, combustibles, and toxic liquids are disposed of properly in accordance with MSDS.	Meets Standard	
11. Staff directly supervise and account for products with methyl alcohol. Staff receive a list of products containing diluted methyl alcohol, for example, shoe dye. All such products are clearly labeled as such. "Accountability" includes issuing such products to detainees in the smallest workable quantities.	N/A	Products containing methyl alcohol are not purchased or used at this facility.
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.	Meets Standard	
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).	Meets Standard	The facility was constructed to meet all applicable codes when designed. Inspection of the San Bernardino County Fire Department Inspection Report revealed the facility is maintained within applicable codes. The last inspection was conducted 06/05/2012.
14. A technically qualified staff member conducts fire and safety inspections.	Meets Standard	The San Bernardino County Fire Department and the facility safety manager conduct annual inspections of the facility. The last inspection was conducted 06/05/2012.
15. The Safety Office (or officer) maintains files of inspection reports, including corrective actions taken.	Meets Standard	
16. (MANDATORY) The facility has an approved fire prevention, control, and evacuation plan.	Meets Standard	The facility fire plan was approved by the San Bernardino County Fire Department in August 2012.
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. 	Meets Standard	The fire plan includes all of the bulleted items listed in this component.

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

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY (Key: B)		
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	Rating	Remarks (1000 Char Max)
18. Fire drills are conducted and documented quarterly in all facility locations including the administrative area.	Meets Standard	Comprehensive fire drills are conducted on a quarterly schedule. The schedule includes administrative areas of the facility.
19. A sanitation program covers barbering operations.	Meets Standard	The facility has an approved sanitation program outlining barbering operations.
20. The barbershop has the facilities and equipment necessary to meet sanitation requirements.	Meets Standard	The facility maintains dedicated space in each detainee housing area for barbering operations. The space provides hot and cold running water and meets the requirements established in the Environmental Health and Safety standard.
21. The sanitation standards are conspicuously posted in the barbershop.	Meets Standard	The sanitation standards are posted in the detainee housing areas in the spaces dedicated for barbering operations.
22. Written procedures regulate the handling and disposal of used needles and other sharp objects.	Meets Standard	Comprehensive policy outlines the handling and disposal of needles and other sharp objects.
23. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	Meets Standard	
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. 	Meets Standard	Established cleaning and inspection schedules are maintained and include usage of cleaners and disinfectants.
25. Spill kits are readily available.	Meets Standard	Spill kits are accessible to staff and are maintained at four separate locations throughout the facility.
26. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	Meets Standard	Medical waste is disposed of through a contract with Stericycle, Inc.
27. Staff are trained to prevent contact with blood and other body fluids and written procedures are followed.	Meets Standard	Prevention of contact with blood and body fluid training is offered to staff members annually.

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

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY (Key: B)		
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	Rating	Remarks (1000 Char Max)
28. Do the methods for handling/disposing of refuse meet all regulatory requirements?	Meets Standard	The facility disposes of solid waste through a contract with Burrtec Waste Industries of Victorville, CA.
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. 	Meets Standard	The facility contracts for pest control services with Orkin International Commercial Services of Pasadena, CA.
30. Drinking water and wastewater is routinely tested according to a fixed schedule.	Meets Standard	The facility's water and wastewater testing is provided through the provider, the City of Adelanto.
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). 	Meets Standard	Facility maintenance staff conducts bi-weekly testing of emergency power. They also conduct quarterly services and complete repairs promptly.
32. The Facility appears clean and well maintained.	Meets Standard	
33. Hazardous material storage rooms meet the security and structural requirements of the standard. Storage cabinets meet the physical requirements specified in the standard.	Meets Standard	
34. The Health Services Administrator has implemented a program supporting a high level of environmental sanitation.	Meets Standard	
35. The Health Services Administrator conducts medical-facility inspections daily. Each inspection includes noting the condition of floors, walls, windows, horizontal surfaces, and equipment.	Meets Standard	The health services administrator conducts medical facility inspections. The inspection includes conditions of walls and floors, equipment and surfaces.
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.	Meets Standard	The facility has designated the safety manager as responsible for conducting investigations and surveys of environmental health concerns or conditions.
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.	Meets Standard	The facility has designated the safety manager as responsible for developing and implementing policies and procedures that outline the environmental health and safety program.

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

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY (Key: B)

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	Rating	Remarks (1000 Char Max)
<p>38. Environmental health and safety conditions shall be maintained at a level that meets recognized standards of safety and hygiene, including those from the:</p> <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. 	Meets Standard	

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

The facility has created an environmental health and safety policy and procedure to protect detainees, staff, contractors and volunteers from injury and illness by maintaining high standards of cleanliness and sanitation. The policy and procedures include safe work practices, the control of hazardous substances and a comprehensive fire plan. The facility is clean and maintained by staff having knowledge of facility operations and emergency plans. Comprehensive environmental health and safety, emergency and fire plans are in place, and staff is instructed and trained on appropriate responses.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 11/08/2012

Reviewer Signature (for printed form submission):

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

PART 1 – 3. TRANSPORTATION (BY LAND) (Key: C)

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 N/A

Click the above button if all ICE Transportation is handled only by the ICE Field Office or Sub-Office in control of the detainee case. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
1. Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	N/A	
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.	N/A	
3. Supervisors maintain records for each vehicle operated.	N/A	
4. Documentation indicating annual inspection of vehicles and annual inspection in accordance with state statutes is available for review.	N/A	
5. Documentation indicating safety repairs are completed immediately and vehicles are not used until they have been repaired and inspected is available for review.	N/A	
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. 	N/A	
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. 	N/A	
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. 	N/A	
9. The transporting officer inspects the vehicle before the start of each detail.	N/A	

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

PART 1 – 3. TRANSPORTATION (BY LAND) (Key: C)

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 N/A

Click the above button if all ICE Transportation is handled only by the ICE Field Office or Sub-Office in control of the detainee case. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
10. Positive identification of all detainees being transported is confirmed.	N/A	
11. All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.	N/A	
12. The facility ensures that the number of detainees transported does not exceed the vehicle manufacturer's occupancy level.	N/A	
13. (b)(7)(E)	N/A	
14. The vehicle crew conducts a visual count once all passengers are on board and seated. <ul style="list-style-type: none"> Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop. 	N/A	
15. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	N/A	
16. Officers ensure that no one contacts the detainees. <ul style="list-style-type: none"> One officer remains in the vehicle at all times when detainees are present. 	N/A	
17. Meals are provided during long distance transfers. <ul style="list-style-type: none"> The meals meet the minimum dietary standards, as identified by dietitians utilized by ICE. 	N/A	
18. The vehicle crew inspects all Food Service meals before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). <ul style="list-style-type: none"> Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative. Basins, latrines, and drinking-water, containers, dispensers are cleaned and sanitized on a fixed schedule. 	N/A	

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

PART 1 – 3. TRANSPORTATION (BY LAND) (Key: C)

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 N/A

Click the above button if all ICE Transportation is handled only by the ICE Field Office or Sub-Office in control of the detainee case. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
<p>19. Vehicles have:</p> <ul style="list-style-type: none"> • (b)(7)(E) • • • 	N/A	
20. The vehicles are clean and sanitary at all times.	N/A	
<p>21. Personal property of a detainee transferring to another facility:</p> <ul style="list-style-type: none"> • Is inventoried. • Is inspected. • Accompanies the detainee. 	N/A	
<p>22. The following contingencies are included in the written procedures for vehicle crews:</p> <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 	N/A	

PART 1 – 3. TRANSPORTATION (BY LAND) – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

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

PART 1 – 3. TRANSPORTATION (BY LAND) – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

All transportation of ICE detainees is done by ICE.

Overall Rating: N/A

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

Section II SECURITY

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

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

PART 2 – 4. ADMISSION AND RELEASE (Key: D)

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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	The facility orientation program is presented to detainees prior to their admission. Upon admission, detainees have already received information on all of the areas mentioned in this component. They also arrive with copies of a site-specific facility handbook and 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.	Meets Standard	Medical screenings are performed by health care staff who are available 24 hours a day, seven days a week.
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.	Meets Standard	Detainees are oriented and classified before admission to this facility. Classification documents are brought to the facility with the detainees and are reviewed by facility staff.
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.	Meets Standard	
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.	Meets Standard	In the event a strip search is warranted, policy requires prior approval from the facility administrator or designee in his absence. Strip searches are only conducted if reasonable suspicion exists. Policy requires all personnel involved in a strip search to fully document the examination on a general incident report and a G-1025 form.

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

PART 2 – 4. ADMISSION AND RELEASE (Key: D)		
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	Rating	Remarks (1000 Char Max)
6. The “Contraband” standard governs all personal property searches. IGSAs and CDFs use or have a similar contraband standard. Staff prepare a complete inventory of each detainee’s possessions. The detainee receives a copy. All identity documents are inventoried and given to ICE staff for placement in the A-file. All funds and valuables are safeguarded in accordance with ICE Policy.	Meets Standard	Detainee property is searched and processed at another facility prior to a detainee's admission to this facility. The detainee arrives with a copy of his property inventory sheet. The property is again searched and the inventory is checked to verify its accuracy. Detainee funds are also processed at another facility prior to the detainee's admission and are placed in a commissary account which he can access while housed at this facility. Identity documents are kept by ICE.
7. Staff complete Form I-387 or similar form for CDFs and IGSAs for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	Meets Standard	
8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	Meets Standard	
9. All releases are coordinated with ICE.	Meets Standard	ICE coordinates all releases. ICE informs facility intake and command staff of these authorizations through an internal e-mail network.
10. Staff complete paperwork/forms for release as required.	Meets Standard	
11. Each detainee receives a receipt for personal property secured by the facility.	Meets Standard	Detainees receive copies of their personal property inventory sheets prior to admission.
12. The facility has a system to maintain accurate records and documentation for admission, orientation, and release.	Meets Standard	Paper and electronic detention files are maintained on all detainees.
13. ICE staff enter all information pertaining to release, removal, or transfer of all detainees into the Enforce Alien Detention Module (EADM) within 8 hours of action.	Meets Standard	According to the Supervisory Detention and Deportation Officer (SDDO), ICE enters all required detainee movement information into the Enforce Alien Detention Module within prescribed timelines.
14. All orientation material shall be provided in English, Spanish, and other language(s) as determined by the Field Office Director.	Meets Standard	

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

PART 2 – 4. ADMISSION AND RELEASE – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

Interviews with the SDDO, the intake lieutenant and the chief of security, review of policy and detention files and observation of the admission process revealed that a secure and orderly admission and release process is being employed.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 5. CLASSIFICATION SYSTEM (Key: E)

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	Rating	Remarks (1000 Char Max)
1. SPC and CDF facilities use the required Objective Classification System. IGSA's use an objective classification system or similar system for classifying detainees.	Meets Standard	Detainees are classified at another facility prior to admission to this facility. The classification designation, based on an objective system, is accepted by this facility. Detainees arrive with a classification of low, medium low, medium high or high security.
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. 	Meets Standard	All detainees are classified prior to admission. The classification documents are brought to the facility with the detainees and are reviewed by facility command staff.
3. The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	Meets Standard	All detainees are classified prior to admission. The classification documents are brought to the facility with the detainees and are reviewed by facility intake and command staff.
4. Staff use only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/ unconfirmed reports may be filed but are not used to score detainee classification.	Meets Standard	
5. Housing assignments are based on classification-level.	Meets Standard	The facility has seven housing units. Side 1 (A, B, C and D housing units) houses detainees classified as low, low medium and high medium security. Side 2 (A, B and C housing units) houses detainees classified as low medium, high medium and high security.
6. A detainee's classification-level does not affect his or her recreation opportunities. Detainees recreate with persons of similar classification designations.	Meets Standard	
7. Detainee work assignments are based upon classification designations.	Meets Standard	

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

PART 2 – 5. CLASSIFICATION SYSTEM (Key: E)

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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	Reassessments are initially conducted at 60 day intervals. Subsequent reassessments are conducted at 90-120 day intervals. Reclassifications are completed at another facility. The average length of stay for a detainee in this facility, however, is only 29 days.
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.	Meets Standard	Per policy, classification appeals are submitted on a grievance form and are resolved within five business days. The facility administrator determines all classification appeal decisions. The grievant is informed of the decision in writing.
10. Classification appeals are resolved w/in 5 business days. Detainees are notified of the outcome within 10 business days.	Meets Standard	Policy requires a classification appeal resolution within five days and outcome notification within ten days. No classification appeals have been filed in the last twelve months.
11. Classification designations may be appealed to a higher authority such as the Facility Administrator or equivalent.	Meets Standard	Policy addresses appeal procedures for classification designations. The facility administrator determines all classification appeal decisions.
12. The Detainee Handbook or equivalent for IGSA's explains the classification levels, with the conditions and restrictions applicable to each.	Meets Standard	Classification levels and respective restrictions are addressed in the site-specific handbook.
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.	Meets Standard	Detainees in this IGSA facility are assigned blue, orange or red uniforms based on their assigned classification levels.

PART 2 – 5. CLASSIFICATION SYSTEM – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

All detainees are classified prior to admission to this facility. Upon admission, the classification documents are reviewed by facility staff. Interviews with the intake lieutenant and chief of security and review of policy, the housing unit classification matrix and the classification instrument revealed an objective, formal classification process has been established and is used to separate detainees into like groups for housing, work assignments and program participation.

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

PART 2 – 5. CLASSIFICATION SYSTEM – Reviewer Summary <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 11/8/2012
Reviewer Signature (for printed form submission):	

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

PART 2 – 6. CONTRABAND (Key: F)		
This Detention Standard protects detainees and staff and enhances facility security and good order by identifying, detecting, controlling, and properly disposing of contraband.		
Components	Rating	Remarks (1000 Char Max)
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.	Meets Standard	The facility has a policy for handling contraband. Staff members that locate evidence or contraband have the responsibility for marking, tagging and preserving it. The shift supervisor has the responsibility for securing the contraband in the evidence cabinet located in the shift supervisor's office.
2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	Meets Standard	Contraband that is government property is retained as evidence for possible disciplinary action or criminal prosecution.
3. Staff return property not needed as evidence to the proper authority. Written procedures cover the return of such property.	Meets Standard	If appropriate, the contraband property is returned to the issuing authority if not needed as evidence or after its use as such.
4. Altered property is destroyed following documentation and using established procedures.	Meets Standard	
5. Before confiscating religious items, the Facility Administrator or designated investigator contacts a religious authority.	Meets Standard	The facility administrator consults a religious authority about the handling of religious items prior to confiscation.
6. Staff follow written procedures when destroying hard contraband that is illegal.	Meets Standard	
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. 	Meets Standard	Hard contraband that is illegal under criminal statutes may be destroyed when no longer needed for possible disciplinary action or criminal prosecution. It may also be kept for official use, such as a training tool. In such cases, the items receive advanced approval from the facility administrator and are secured in a (b)(7)(E) (b)(7)(E) (b)(7)(E) Soft contraband is stored in the detainee's personal property.

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

PART 2 – 6. CONTRABAND (Key: F)

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

Components	Rating	Remarks (1000 Char Max)
8. Detainees receive notification of contraband rules and procedures in the Detainee Handbook and notified when property is identified and seized as contraband.	Meets Standard	Contraband is addressed in the handbook. Detainees are notified when contraband property is seized.
9. Facilities with Canine Units only use them for contraband detection.	N/A	The facility does not have a canine unit.

PART 2 – 6. CONTRABAND – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

The facility has a policy for dealing with both soft and hard contraband. Contraband is identified, bagged, labeled and stored. Hard contraband can be used for training purposes. Hard contraband, however, is normally destroyed after it is no longer needed for criminal evidence. Contraband that is returned to the detainee is put into his personal property.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 7. FACILITY SECURITY AND CONTROL (Key: G)		
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	Rating	Remarks (1000 Char Max)
1. The facility administrator or assistant administrator and department heads visit detainee living quarters and activity areas weekly.	Meets Standard	Detainee housing units are visited by the facility administrator, assistant administrators and department heads weekly. Visits are recorded on the unit log books.
2. At least one male and one female staff are on duty where both males and females are housed.	N/A	There are no females housed at this facility.
3. Comprehensive annual staffing analysis determines staffing needs and plans.	Meets Standard	A staffing analysis was conducted in June 2012 and determined staffing needs and plans.
4. Essential posts and positions are filled with qualified personnel.	Meets Standard	All personnel must pass an ICE background check before being considered for hire. All personnel assigned to essential positions and posts are trained to handle those responsibilities.
5. Every Control Center officer receives specialized training.	Meets Standard	Every control center officer receives specialized training by an officer that has demonstrated proficiency in the control center post.
6. Policy restricts staff access to the Control Center.	Meets Standard	Control center post orders indicate that access is restricted to authorized personnel only.
7. Detainees do not have access to the Control Center.	Meets Standard	The control room door is never to be opened for or accessed by detainees for any reason at any time.
8. Communications are centralized in the Control Center.	Meets Standard	All facility 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.	Meets Standard	The control center is continuously manned around the clock by (b)(7)(e) detention officers.
10. The Control Center maintain employee Personal Data Cards (Form G-74 or contract equivalent).	Meets Standard	The control center maintains a master list for immediate employee contact.
11. Recall lists include the current home telephone number of each employee. Phone numbers are updated as needed.	Meets Standard	The control center master employee list includes current telephone numbers.

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

PART 2 – 7. FACILITY SECURITY AND CONTROL (Key: G)		
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	Rating	Remarks (1000 Char Max)
12. <div style="background-color: #cccccc; padding: 5px; text-align: center;">(b)(7)(E)</div>	Meets Standard	(b)(7)(E)
13. Information about routine procedures, emergency situations, and unusual incidents will be continually recorded in permanent post logs and shift reports.	Meets Standard	Post logs and shift reports are updated continually and are recorded in permanent logbooks located in the housing units and central control.
14. The front-entrance officer checks the ID of everyone entering or exiting the facility.	Meets Standard	
15. All visits officially recorded in a visitor logbook or electronically recorded.	Meets Standard	All visits are recorded by the visitor's lobby officer in a permanent logbook.
16. The facility has a secure, color-coded visitor pass system.	Meets Standard	
17. Officers monitor all vehicular traffic entering and leaving the facility.	Meets Standard	All vehicular traffic into or out of the sally port is coordinated through the perimeter patrol officer. Upon notification that a vehicle is requesting access to the sally port, the master control center officer will notify perimeter patrol. Upon completion of a vehicle search, the perimeter patrol officer approves opening the sally port gate.
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 	Meets Standard	A vehicle log located in the perimeter officer's vehicle is used to record all the information specified by this component.

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

PART 2 – 7. FACILITY SECURITY AND CONTROL (Key: G)		
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	Rating	Remarks (1000 Char Max)
19. Officers thoroughly search each vehicle entering and leaving the facility.	Meets Standard	The perimeter patrol officer is responsible for inspecting and searching each vehicle that comes into the perimeter sally port. All drivers making deliveries submit to questioning about firearms, munitions, knives, ropes, jacks, narcotics and other items considered contraband before access is granted. Detention officers escort each vehicle to its destination within the secure perimeter and stay with that vehicle until its departure.
20. The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	Meets Standard	The facility has a policy to prevent introduction of contraband into the facility.
21. The front entrance has a sally-port type entrance, with interlocking electronic doors or grilles.	Meets Standard	
22. The facility's perimeter will ensure that detainees remain within and that public access is denied without proper authorization.	Meets Standard	
23. Written procedures govern searches of detainee housing units and personal areas.	Meets Standard	The facility has a policy in place for searches of detainee housing units and personal areas.
24. Housing area searches occur at irregular times.	Meets Standard	Searches of detainee housing units are performed on unannounced and irregular schedules. Housing searches are designed to uncover contraband, prevent escapes, maintain sanitary standards and eliminate fire and safety hazards. The assigned housing unit officer is the designated team leader of the search and is responsible for completion of all required documentation.
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.	Meets Standard	
26. There are post orders for every security officer post.	Meets Standard	

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

PART 2 – 7. FACILITY SECURITY AND CONTROL (Key: G)		
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	Rating	Remarks (1000 Char Max)
27. Detainee movement from one area to another area is controlled by staff.	Meets Standard	Detainee movement is controlled and documented by staff.
28. Living areas are constructed to facilitate continuous staff observation of cell or room fronts, dayrooms, and recreation space.	Meets Standard	Housing units are dormitory style, designed and operated to allow continuous staff observation.
29. Every search of the SMU and other housing units is documented.	Does Not Meet Standard	The facility does not have a Special Management Unit (SMU). Therefore, no searches are conducted in the SMU.
30. The SMU entrance has a sallyport.	Does Not Meet Standard	The facility does not have an SMU. Therefore, it has no sally port for an SMU.
31. All tools entering SMU will be inspected and inventoried by the SMU officer prior to entering the housing unit.	N/A	The facility does not have an SMU.
32. The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> Posts to be inspected Required inspection forms Frequency of inspections Guidelines for checking security features Procedures for reporting weak spots, in-consistencies, and other areas needing improvement 	Meets Standard	All of the bulleted items in this component are addressed in policy. Weak spots, inconsistencies and other areas needing improvement are documented on paper or in the GEOTrac database used for all repair issues.
33. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	Meets Standard	Every detention officer is required to conduct a security check (b)(7)(E) per shift.
34. Documentation of security inspections is kept on file.	Meets Standard	
35. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	Meets Standard	Policies are in place to document and report to the shift supervisor when recurring problems and failures to take corrective action are discovered.
36. Tools being taken into the secure area of the facility are inspected and inventoried before entering and prior to departure.	Meets Standard	Tools entering the facility are inspected a total of four times: when entering the facility; when entering the unit; when leaving the unit; and when leaving the facility.

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

PART 2 – 7. FACILITY SECURITY AND CONTROL (Key: G)		
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	Rating	Remarks (1000 Char Max)
37. Storage and supply rooms; walls, light and plumbing fixtures, accesses, and drains, etc. undergo frequent, irregular searches. These searches are documented.	Meets Standard	These areas are inspected during the security inspections that occur (b)(7)e Searches are documented in security log books and in the GEOTrac database.
38. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	Meets Standard	
39. Daily procedures include: <ul style="list-style-type: none"> Perimeter alarm system tests. Physical checks of the perimeter fence. Documenting the results. 	Meets Standard	The alarm test and physical checks are done b(7)(E) er shift. All inspections are documented on the facility perimeter security checklist.
40. Visitation areas receive frequent, irregular inspections.	Meets Standard	
41. An officer is assigned responsibility for ensuring the security inspection process covers all areas of the facility.	Meets Standard	This responsibility is assigned to the perimeter patrol officer.
42. The Maintenance Supervisor and Chief of Security or equivalent make monthly fence checks.	Meets Standard	

PART 2 – 7. FACILITY SECURITY AND CONTROL – Reviewer Summary	
(Use following format for dates: mm/dd/yyyy)	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.) (5000 Character Max)</i> The facility has policies and procedures in place to address all areas of the standard except for inspections of SMUs as the facility does not have an SMU. Security inspections of all housing units are conducted twice per shift and are recorded in the housing unit logbook.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 11/8/2012
Reviewer Signature (for printed form submission):	

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

PART 2 - 8. FUNDS AND PERSONAL PROPERTY (Key: H)

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 N/A

Click the button above (IGSA ONLY) 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. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
1. Detainee funds and valuables are properly separated and stored. Detainee funds and valuables are accessible to designated supervisor(s) only.	Meets Standard	Detainee property is stored in a secure property room. It is accessible only to designated supervisors and command staff.
2. Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	Meets Standard	
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.	Meets Standard	Detainee funds and personal property are processed, searched and inventoried at another facility before the detainee's admission to this facility. Funds are deposited in a commissary account which the detainee can access from this facility. Detainees are given, and arrive at this facility with, a completed personal property inventory form. Their property is transferred to and stored at this facility.
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.	N/A	Detainee funds are processed at another facility prior to the detainee's admission. The funds are deposited in a commissary account the detainee can access from this facility.
5. For IGSA's and CDFs, Is the facility using a personal property inventory form that meets the ICE standard?	Meets Standard	
6. Staff give the detainee the original inventory form, filing copies in the detainee's detention file and the personal property container.	Meets Standard	Detainees are given a copy of their personal property inventory form during processing before admission to this facility. Copies of completed forms were seen in detainee detention files. A copy is also maintained with the secured property.

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

PART 2 - 8. FUNDS AND PERSONAL PROPERTY (Key: H)

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 N/A

Click the button above (IGSA ONLY) 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. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
7. Staff forward an arriving detainee's medicine to the medical staff.	Meets Standard	Detainees are processed at another facility prior to admission. Medications are not brought to this facility with the detainee. Medical staff, however, ensure an order is obtained for any medication the detainee had that must be continued.
8. Staff search arriving detainees and their personal property for contraband.	Meets Standard	Policy and procedure require that staff search property for contraband. Detainees and their property are searched at an adjacent facility prior to admission. The property is searched again before being placed in storage at this facility.
9. Property discrepancies are immediately reported to the Chief of Security or equivalent.	Meets Standard	Policy specifies that staff is to notify the facility administrator or designee when detainee property discrepancies occur.
10. Staff follow written procedures when returning property to detainees.	Meets Standard	
11. CDF/IGSA facility procedures for handling detainee property claims are similar to the ICE standard.	Meets Standard	The facility uses a Report of Detainee Missing Property form. A preliminary investigation is conducted, and the form is then forwarded to ICE for disposition.
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. 	Meets Standard	Per policy, the facility attempts to notify out-processed detainees about unclaimed property by certified mail. Property not claimed by the detainee in 30 days is considered abandoned and forwarded to ICE for disposition.
13. Staff obtain a forwarding address from each detainee.	Meets Standard	

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

PART 2 - 8. FUNDS AND PERSONAL PROPERTY (Key: H)

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 N/A

Click the button above (IGSA ONLY) 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. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
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.	N/A	Detainee funds are processed at another facility prior to the detainee's admission. The funds are deposited in a commissary account the detainee can access from this facility.
15. Staff issue and maintain property receipts (G-589s) in numerical order.	Meets Standard	Property receipts are maintained via an electronic system which may access documents numerically.
16. Staff complete and distribute the G-589 in accordance with the ICE standard.	N/A	Detainee property is processed, inventoried and receipted before a detainee's arrival at this facility. Detainees do arrive with their copy of a local property receipt and one is included with their property.
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.	N/A	Detainee property is inventoried and logged into an electronic property management system at another facility prior to the detainee's admission. Facility staff does have access to the information in the property management system.
18. Staff tag large valuables with both a G-589 and an I-77.	Meets Standard	Local forms are used in conjunction with the electronic property management system to identify and track detainees' large valuable property stored at this facility.
19. The supervisor verifies the accuracy of every G-589.	Meets Standard	The property room supervisor verifies detainee property inventory documents.

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

PART 2 - 8. FUNDS AND PERSONAL PROPERTY (Key: H)

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 N/A

Click the button above (IGSA ONLY) 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. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
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. 	Meets Standard	Detainee funds are processed and deposited into the detainee's account at another facility prior to his admission to this facility. Per policy, detainee property is stored in accordance with the bulleted points in this component.
21. Staff tag every baggage/facility container with an I-77, completed in accordance with the ICE standard.	Meets Standard	Local forms are used to identify baggage and containers in the facility property room.
22. Staff secure every container used to store property with a tamper-proof numbered strap.	Meets Standard	Property containers stored at this facility are secured with numbered straps and are stored in a locked storage room or vault.
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.	Meets Standard	The information listed in this component is logged in the electronic property inventory system.
24. In SPCs, the Supervisory Immigration Enforcement Agent, accompanied by a detention staff member conducts a comprehensive weekly audit.	N/A	At this IGSA, facility staff conducts comprehensive quarterly audits of the detainee property room.
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.	Meets Standard	The facility conducts quarterly audits of detainee baggage and non-valuable property.
26. The facility positively identifies every detainee being released or transferred.	Meets Standard	ICE detainees are verified by photograph and number prior to release from the facility.
27. Staff routinely inform supervisors of lost/damaged property claims. Claims are properly investigated and missing or damaged property claim reports are filed.	Meets Standard	Per policy, facility supervisory staff are notified of property claims. Claims are investigated by facility staff and forwarded to ICE for disposition.
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.	Meets Standard	The facility completes a lost/damaged property report using the ICE form. It is forwarded to ICE for disposition.

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

PART 2 - 8. FUNDS AND PERSONAL PROPERTY – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

The facility has established a policy and procedure to ensure detainee funds and personal property are safeguarded and controlled. Detainee funds and property are processed at another facility prior to the detainee's admission to this facility. Funds are deposited into a commissary account the detainee can access from this facility. Detainee property is transferred to this facility with the detainee and stored onsite. Any property left at the facility is secured in a locked container. Facility staff notifies the detainee they may pick up the property.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES (Key: I)		
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	Rating	Remarks (1000 Char Max)
1. The hold room is situated in a location within the secure perimeter.	Meets Standard	All three hold rooms are 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.	Meets Standard	All hold rooms are clean and in good repair, with adequate lighting for the space. All switches are located on the outside of the rooms.
3. The hold rooms contain sufficient seating for the number of detainees held.	Meets Standard	All hold rooms have signage indicating their capacity.
4. No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside hold rooms.	Meets Standard	There are no bunks/cots/beds or other related make shift sleeping apparatuses permitted inside the hold rooms.
5. Hold room walls and ceilings are escape and tamper resistant.	Meets Standard	All hold rooms are escape and tamper resistant.
6. Detainees are not held in hold rooms for more than 12 hours.	Meets Standard	Detainees are not held in the hold rooms for longer than 12 hours.
7. Male and females detainees are segregated from each other at all times.	N/A	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.	Meets Standard	Each detainee is provided a towel, soap, shampoo, a comb or brush, a toothbrush and toothpaste, lotion and one roll of toilet paper.
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.	Meets Standard	All hold rooms are equipped with toilet facilities allowing detainees regular access.
10. All detainees are given a pat down search for weapons or contraband before being placed in the hold room.	Meets Standard	Every detainee is pat searched and searched using a hand wand for detecting weapons or contraband before placement into a hold room.
11. When the last detainee has been removed, the hold room is inspected for the following: <ul style="list-style-type: none"> ▪ Cleaning. ▪ Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair. 	Meets Standard	Hold rooms are cleaned after the last detainee is removed. Evidence of tampering is reported to the shift supervisor, and recorded in the GEOTrac work order database for repair monitoring.

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

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES (Key: I)		
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	Rating	Remarks (1000 Char Max)
12. (MANDATORY) There is a written evacuation plan. <ul style="list-style-type: none"> There is a designated officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency. 	Meets Standard	There is a written evacuation plan included as part of the intake officer's post order. Evacuation routes are also posted on the front of every hold room.
13. An appropriate emergency service is called immediately upon a determination that a medical emergency exists.	Meets Standard	
14. Single occupant hold rooms contain a minimum of 37 square feet (7 unencumbered square feet for the detainee, 5 square feet for a combination lavatory/toilet fixture, and 25 square feet for a wheelchair turn-around area). <ul style="list-style-type: none"> If multiple-occupant hold rooms are used, there is an additional 7 unencumbered square feet for each additional detainee. 	Meets Standard	The hold rooms contain the required minimum square footage for their occupancy.
15. <u>In SPCs designed after 1998</u> the hold rooms are equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They are: <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. 	N/A	This IGSA facility has one large hold room with a capacity of 22. This room was built before 1998 and contains only one toilet and one sink. All hold rooms are equipped with stainless steel toilets and sinks with a modesty wall separating this area from the seating area.
16. <u>In SPCs designed after 1998</u> the hold rooms have floor drain(s).	N/A	The medical hold room has a floor drain, but the intake hold rooms do not. Intake hold rooms in this IGSA facility were built in 1991.
17. <u>In SPCs designed after 1998</u> , the door to the hold room swings outward and the door complies with the specifications outlined in the standard.	Meets Standard	All hold room doors swing outward.
18. Family units, persons of advanced age (over 70), females with children, and unaccompanied juvenile detainees (under the age of 18) are not placed in hold rooms.	N/A	The facility does not accept family units, persons of advanced age, females with children or juveniles.
19. Minors (under 18) are confined apart from adults, except for immediate relatives or guardians.	N/A	The facility does not accept juveniles.
20. Each detention facility maintains a detention log (manually or by computer) for each detainee placed in a hold cell. <ul style="list-style-type: none"> The log includes the required information specified in the standard. 	Meets Standard	The facility maintains a detention log for each detainee placed in a hold cell.

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

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES (Key: I)		
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	Rating	Remarks (1000 Char Max)
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 	Meets Standard	Detainees kept in hold rooms for more than six hours are provided a meal. Juveniles and women are not 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.	Meets Standard	
23. The maximum occupancy for the hold room will be posted.	Meets Standard	The maximum occupancy is posted on the wall outside of each hold room.
24. Before placing a detainee in a room, an officer shall observe each individual to screen for obvious mental or physical problems.	Meets Standard	This observation responsibility is listed in the intake officer's post order.
25. Staff does not permit detainees to smoke in a hold room.	Meets Standard	
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. 	Meets Standard	All hold rooms are under direct supervision by the intake officer posted in that area. Visual monitoring at irregular intervals of at least every 15 minutes is recorded in the logbook.

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES – Reviewer Summary	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.) (5000 Character Max)</i> Detainees are initially processed at another facility and are placed in the hold rooms upon transport to this facility. Detainees arrive with one issued set of clothes. Additional items are issued to the detainee by this facility. Detainees in hold rooms are under direct supervision.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 11/8/2012
Reviewer Signature (for printed form submission):	

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

PART 2 – 10. KEY AND LOCK CONTROL (Key: J)		
This Detention Standard maintains facility safety and security by requiring that keys and locks be properly controlled and maintained.		
Components	Rating	Remarks (1000 Char Max)
1. The security officer[s], or equivalent, has attended an approved locksmith training program.	Meets Standard	The facility administrator has identified the armory sergeant as the employee responsible for the key control program. The armory sergeant has received the training necessary to manage the program.
2. The security officer, or equivalent, has responsibility for all administrative duties and responsibilities relating to keys, locks etc.	Meets Standard	The armory sergeant is responsible for all administrative duties relating to keys and locks.
3. The security officer, or equivalent, provides training to all employees in key and lock control.	Meets Standard	The armory sergeant is responsible for training employees in key and lock control.
4. The security officer, or equivalent, maintains inventories of all keys, locks and locking devices.	Meets Standard	The armory sergeant is responsible for all inventories of keys, locks and locking devices.
5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	Meets Standard	The armory sergeant plans and practices preventive maintenance for, and replacement as necessary of, locks and other security devices. He also identifies technical problems or malfunctions in the <div style="background-color: #cccccc; padding: 2px; text-align: center;">(b)(7)(E)</div>
6. Facility policies and procedures address the issue of compromised keys and locks.	Meets Standard	Policies are in place to address compromised keys and locks.
7. The security officer, or equivalent, develops policy and procedures to ensure safe combinations integrity.	Meets Standard	The armory sergeant developed a policy for ensuring safe combination integrity.
8. Only dead bolt or dead lock functions are used in detainee accessible areas.	Meets Standard	
9. Non-authorized locks (as specified in the Detention Standard) are not used in detainee accessible areas.	Meets Standard	Non-authorized locks are not used in this facility.
10. The facility does not use grand master keying systems.	Meets Standard	The facility does not use a grand master keying system.
11. All worn or discarded keys and locks cut up and properly disposed of.	Meets Standard	Employees identifying broken or bent keys are required to submit a work order to the key control officer addressing the deficiency. The armory sergeant will remove the key from service and destroy it.

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

PART 2 – 10. KEY AND LOCK CONTROL (Key: J)		
This Detention Standard maintains facility safety and security by requiring that keys and locks be properly controlled and maintained.		
Components	Rating	Remarks (1000 Char Max)
12. Padlocks and/or chains are not used on cell doors.	Meets Standard	
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. 	Meets Standard	
14. The operational keyroom sufficient to accommodate all the facility key rings including keys in use is located in a secure area.	Meets Standard	The facility uses an automated Keywatcher system to house all facility keys. (b)(7)(e) <div style="background-color: #cccccc; height: 80px; width: 100%; margin-top: 5px;">(b)(7)(e)</div>
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 	Meets Standard	Key rings have chits which are labeled with the number of keys on the ring. All key rings are sealed.
16. Emergency keys are available for all areas of the facility.	Meets Standard	Emergency keys are available for all areas of the facility. (b)(7)(E) <div style="background-color: #cccccc; height: 20px; width: 100%; margin-top: 5px;">(b)(7)(E)</div>
17. The facility uses a key accountability system.	Meets Standard	
18. Authorization is necessary to issue any restricted key.	Meets Standard	Some restricted keys are kept in the same key cabinet as active keys; however, they are clearly separated within the cabinet and are easily distinguished per a color coding system. These keys are only issued to those individuals assigned to work in sensitive areas.
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. 	Meets Standard	Gun lockers are located in (b)(7)(E) (b)(7)(E) All are monitored by camera from the central control center. These areas are not accessible to detainees or the public.
20. The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	Meets Standard	The facility has a key accountability policy. All keys are counted daily.

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

PART 2 – 10. KEY AND LOCK CONTROL (Key: J)

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

Components	Rating	Remarks (1000 Char Max)
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. 	Meets Standard	All staff are trained on the use of keys during orientation and annual refresher training. In the event a key is lost, misplaced, or damaged, it is reported immediately to the facility administrator or designee so that adequate safeguards may be placed into effect. A written report is submitted. Detainees are not permitted to handle keys.
22. Locks and locking devices are continually inspected, maintained, and inventoried.	Meets Standard	Policy contains a preventive maintenance plan in which keys are continually inspected, maintained and inventoried.
23. Each facility has the position of Security Officer. If not, a staff member appointed the collateral duties of security officer.	Meets Standard	
24. The designated key control officer is the only employee who is authorized to add or remove a key from a ring.	Meets Standard	The armory sergeant is the only staff member authorized to add or remove keys from a key ring.
25. The splitting of key rings into separate rings is not authorized.	Meets Standard	Policy states that key rings can only be separated by the armory sergeant.

PART 2 – 10. KEY AND LOCK CONTROL – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

All key and lock functions are performed by the armory sergeant who is a trained locksmith. Restricted keys are secured in the central control center. All keys are inventoried daily. The key control policy covers all areas of this standard. Inventory logs were reviewed and an interview was conducted with the armory sergeant.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 11. POPULATION COUNTS (Key: K)		
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	Rating	Remarks (1000 Char Max)
1. Staff conduct a formal count at least once each 8 hours (no less than three counts per day). At least one of these counts shall be a face to photo count.	Meets Standard	Formal counts are conducted at approximately 4:30 a.m., 6:30 a.m., 4:30 p.m. and 11:00 p.m. The 4:30 p.m. count is a standing/face to photo count. As soon as the 11:00 p.m. count clears, the shift supervisor will transmit the daily census.
2. Activities cease or are strictly controlled while a formal count is being conducted.	Meets Standard	There is no movement of detainees during formal counts. All detainee movement into, out of and within the facility must cease before the count begins.
3. There is a system for counting each detainee, including those who are outside the housing unit.	Meets Standard	Officers must make positive identification of a living body and not mere clothing in a human shape before counting anyone present. The counting officer remains in the count area until the central control center verifies and clears the count.
4. Formal counts in all units take place simultaneously.	Meets Standard	All housing unit and area counts are taken simultaneously, and each detainee is counted at a specific location.
5. Officers do not allow detainee participation in the count.	Meets Standard	Detainees are not permitted to participate in taking the population counts.
6. A face-to-photo count follows each unsuccessful recount.	Meets Standard	If a recount fails to clear the count, the shift supervisor conducts a face-to-photo count, matching photos on bed cards (individual photo identification placards) with detainee faces, individual by individual.
7. Officers positively identify each detainee before counting him/her as present.	Meets Standard	Officers verify the identity of each detainee by comparing every person present with the photographic likeness on the bed card.
8. Written procedures cover informal and emergency counts.	Meets Standard	Procedure addresses all aspects of this component.

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

PART 2 – 11. POPULATION COUNTS (Key: K)

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	Rating	Remarks (1000 Char Max)
9. The control officer (or other designated position) maintains an “out-count” record of all detainees temporarily out of the facility.	Meets Standard	Out counts are given to central control prior to the start of a population count. The central control officer maintains the out-count.
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.	Meets Standard	Population count training is included in all security staff orientation training and is also included in the annual refresher training.

PART 2 – 11. POPULATION COUNTS – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

A formal population count was observed on 11/06/2012. Count was started at 4:30 p.m. and cleared at 4:53 p.m. All movement was stopped and out count slips were submitted to central control. Housing unit officers were observed conducting a face-to-photo population count.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 12. POST ORDERS (Key: L)		
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	Rating	Remarks (1000 Char Max)
1. Every fixed post has a set of Post Orders.	Meets Standard	
2. In SPCs and CDFs, Post Orders are arranged in the required six-part folder format.	Meets Standard	Post orders are arranged in the required six-part-folder format.
3. Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	Meets Standard	All posts orders were reviewed and contained the most current inserts and revisions.
4. One individual or department is responsible for keeping all Post Orders current with revisions that take place between reviews.	Meets Standard	The facility administrator is responsible for keeping all post orders current.
5. Review, updating, and reissuing of Post Orders occurs regularly and at least annually.	Meets Standard	Review of the post orders was last completed October 2012.
6. The facility administrator authorizes all Post Order changes.	Meets Standard	
7. The facility administrator has signed and dated the last page of every section.	Meets Standard	All post orders have been signed and dated by the facility administrator.
8. A Post Orders master file is available to all staff.	Meets Standard	A master post order book is maintained in the office of the compliance manager.
9. Procedures keep Post Orders and logbooks secure from detainees at all times.	Meets Standard	
10. Copies of the applicable Post Orders are retained at the post only if secure from detainee access.	Meets Standard	
11. Supervisors ensure that officers understand the Post Orders, regardless of whether the assignment is temporary, permanent, or due to an emergency.	Meets Standard	In accordance with policy, both the officer and the shift supervisor indicate that the officer has read and understood the post orders by dating and initialing the form provided.
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.	Meets Standard	Each officer is required to read, sign and date the post order to indicate that his/she understands the post duties and responsibilities.
13. Anyone assigned to an armed post qualifies with the post weapons before assuming post duty.	Meets Standard	All officers taking responsibility for an armed post qualify with the post weapon issued by the facility before assuming the post.

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

PART 2 – 12. POST ORDERS (Key: L)

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	Rating	Remarks (1000 Char Max)
<p>14. Post Orders for armed posts, and for posts that control access to the institution perimeter, clearly state that:</p> <ul style="list-style-type: none"> <div style="background-color: #cccccc; padding: 5px; display: inline-block;">(b)(7)(E)</div> <div style="background-color: #cccccc; padding: 5px; display: inline-block;">(b)(7)(E)</div> 	Meets Standard	<div style="background-color: #cccccc; padding: 5px; display: inline-block;">(b)(7)(E)</div>
15. Post Orders for armed posts provide instructions for escape attempts.	Meets Standard	Perimeter patrol officers are specifically referenced to the Emergency Plans Manual. This manual addresses escape attempts.
16. The Post Orders for housing units track the daily event schedule.	Meets Standard	All housing officers are required to follow 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.	Meets Standard	All detention officers are required to log all daily activity on the unit logbook. Instructions on what is required are included in every post order.

PART 2 – 12. POST ORDERS – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

All post orders were complete and up-to-date and were signed off by the facility administrator. Post orders are available to all staff.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 13. SEARCHES OF DETAINEES (Key: M)		
This Detention Standard protects detainees and staff and enhances facility security and good order by detecting, controlling, and properly disposing of contraband.		
Components	Rating	Remarks (1000 Char Max)
1. There are written policy and procedures governing searches of housing areas, work areas and of detainees.	Meets Standard	Policy addresses searches of detainees, housing units, general areas, visitors, the perimeter, utility areas, vehicles and work areas.
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.	Meets Standard	
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.	Meets Standard	
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.	Meets Standard	
5. Detainees are pat searched and screened by metal detectors routinely to control contraband.	Meets Standard	Per policy and practice, pat searches and metal detector screenings are routinely conducted in all areas of the facility and during detainee movement.
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.	Meets Standard	Strip searches are only conducted when reasonable suspicion exists. These circumstances include but are not limited to observation of unusual or suspicious appearance or behavior, discovery of a weapon or any contraband during a pat search, or when criminal and/or institutional histories warrant. All strip searches require prior approval by the facility administrator.
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.	Meets Standard	Per policy, when ICE determines there are reasonable grounds to believe a detainee has concealed contraband within a body cavity, the body cavity search shall only be conducted by medical personnel at an off-site medical facility.

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

PART 2 – 13. SEARCHES OF DETAINEES (Key: M)

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

Components	Rating	Remarks (1000 Char Max)
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	N/A	Dry cells are not used at this facility.
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.	Meets Standard	
10. Canines are not used in the presence of detainees	Meets Standard	This facility does not have a canine unit and does not allow canine units from outside law enforcement agencies to enter the facility.

PART 2 – 13. SEARCHES OF DETAINEES – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

Review of policy and interviews with the chief of security and the compliance manager revealed that detainee searches are conducted in accordance with policy and in a manner that protects the security and good order of the facility.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 14. SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (Key: N)		
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	Rating	Remarks (1000 Char Max)
1. The facility has a Sexual Abuse and Assault Prevention and Intervention Program.	Meets Standard	The facility has a Sexual Abuse and Assault Prevention and Intervention Program which references the Prison Rape Elimination Act.
2. For SPCs and CDFs, the written policy and procedure has been approved by the Field Office Director.	N/A	The policy in this IGSA facility has been approved by the warden.
3. Tracking statistics and reports are readily available for review by the inspectors.	Meets Standard	There has only been one reported sexual assault at this facility. The reports for this alleged assault were readily available.
4. All staff are trained, during orientation and in annual refresher training, in the prevention and intervention areas required by the Detention Standard.	Meets Standard	A review of staff records and the training curriculum revealed that all staff are trained during orientation and annually in the prevention and intervention of sexual abuse and assault.
5. Detainees are informed about the program in facility orientation and the detainee handbook (or equivalent).	Meets Standard	Detainees are informed about the program in the detainee handbook and through facility orientation.
6. The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	Meets Standard	The Sexual Assault Awareness Notice was observed on all housing unit bulletin boards.
7. The Sexual Assault Awareness Information brochure is available for detainees. (Required in SPCs and CDFs.)	Meets Standard	The Sexual Assault Awareness Information brochure is available to detainees through the medical unit and is on the housing unit bulletin boards.
8. Detainees are screened upon arrival for “high risk” sexual assaultive and sexual victimization potential and housed and counseled accordingly.	Meets Standard	Review of 25 detainee medical records revealed that this screening is part of the intake medical/mental health screening conducted by nursing staff. Interview with medical staff indicated that high risk individuals would be referred promptly to a mental health professional and counseling would be provided.

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

PART 2 – 14. SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (Key: N)

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	Rating	Remarks (1000 Char Max)
9. All incidents of sexual abuse or assault by a detainee on a detainee have been documented in the past year.	Meets Standard	There has only been one alleged detainee on detainee sexual assault, and all documents were readily available.
10. All incidents or allegations of sexual abuse or assault by staff on a detainee have been documented in the past year.	Meets Standard	No allegations of sexual abuse or assault by staff on a detainee have been reported.
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.	Meets Standard	An investigative file and reports were reviewed, and prompt intervention was initiated in compliance with the plan. Policy and procedures were followed for chain-of-command reporting.
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.	Meets Standard	Review of an investigative file revealed that a thorough investigation was conducted and referral was made to the local sheriff's department.
13. When there is an alleged or proven sexual assault, the required notifications are promptly made.	Meets Standard	Notification was promptly made for the one alleged sexual assault.
14. Victims of sexual abuse or assault are referred to specialized community resources for treatment and gathering of evidence.	Meets Standard	The facility uses Antelope Valley Hospital for treatment and the gathering of evidence from sexual assault victims.
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.	Meets Standard	The associate warden is the designated staff coordinator and had all records associated with the one alleged sexual assault.

PART 2 – 14. SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

The facility has a comprehensive sexual abuse and assault prevention and intervention program. All staff receive related training during pre-service orientation and annual training. Procedures are in place to prevent sexual assault and abuse of detainees and to provide prompt and effective intervention and treatment of victims. Detainees receive information regarding the Prison Rape Elimination Act during in-processing, through the housing unit bulletin boards and via information in the handbook. There was one unsubstantiated allegation of sexual assault by a detainee on a detainee over the past year. All proper steps were taken following the reported incident, and subsequent investigation found that the allegation was unfounded. The detainee subsequently recanted his claim. The standard's rating was based on a review of policies and investigation reports and on staff interviews.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

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

PART 2 – 14. SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Reviewer Signature (for printed form submission):

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)

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	Rating	Remarks (1000 Char Max)
1. Written policy and procedures are in place for special management units.	Does Not Meet Standard	The facility does not have special management units (SMUs) for either administrative segregation or disciplinary segregation purposes. It therefore has no written policy for 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.	Meets Standard	The facility does not have an SMU for administrative segregation purposes. Therefore, no detainee can be placed in administrative segregation when there is no documentation that it is warranted or reasonable alternatives are available.
3. A detainee will be placed in Disciplinary Segregation only after a finding by a Disciplinary Hearing Panel that the detainee is guilty of a prohibited act or rule violation classified at a "Greatest", "High", or "High-Moderate" level, as defined in the Detention Standard on Disciplinary System.	Meets Standard	The facility does not have an SMU for disciplinary segregation purposes. Therefore, no detainee can be placed in disciplinary segregation before a finding of guilt.
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.	Meets Standard	Medical staff are informed of a detainee's pending placement in an SMU and complete an assessment and review in accordance with established protocol.
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.	Does Not Meet Standard	The facility does not have an SMU. Therefore, no policy exists to control and secure the SMU entrances.
6. The number of detainees confined to each cell or room does not exceed the capacity for which it was designed.	Meets Standard	The facility does not have an SMU. Therefore, the facility does not exceed capacity as the capacity and the count are both zero.
7. Cells and rooms are well ventilated, adequately lit, appropriately heated and maintained in a sanitary condition at all times.	Does Not Meet Standard	The facility does not have an SMU for either administrative segregation or disciplinary segregation purposes.

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)		
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	Rating	Remarks (1000 Char Max)
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.	Does Not Meet Standard	The facility does not have an SMU. Therefore, no logs are maintained.
9. A permanent log is maintained in each SMU to record all activities concerning SMU detainees (meals served, recreation, visitors, etc.). In SPCs and CDFs, the SMU log records the detainee's name, A-number, housing location, date admitted, reasons for admission, tentative release date for detainees in Disciplinary Segregation, the authorizing official, and date released.	Does Not Meet Standard	The facility does not have an SMU for either administrative segregation or disciplinary segregation purposes. Therefore, no logs are maintained.
10. In SPCs and CDFs, a separate log is maintained in the SMU that all persons visiting the unit must sign and record: <ul style="list-style-type: none"> ▪ The time and date of the visit, and ▪ Any unusual activity or behavior of an individual detainee, with a follow-up memorandum sent through the facility administrator to the detainee's file. 	N/A	This facility is an IGSA. No records are maintained by the facility staff, as there is no SMU.
11. A Special Management Housing Unit Record is maintained on each detainee in an SMU: <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. In SPCs and CDFs: <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. 	Does Not Meet Standard	This IGSA facility does not have an SMU. Therefore, no records for detainees placed in an SMU are maintained.

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)		
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	Rating	Remarks (1000 Char Max)
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.	Does Not Meet Standard	The facility does not have an SMU for either administrative segregation or disciplinary segregation purposes. Therefore, no segregation housing records are maintained.
13. There are written policy and procedures concerning the property detainees may retain in each type of segregation.	Does Not Meet Standard	The facility does not have an SMU for either administrative or disciplinary segregation purposes. Therefore, there are no written policies governing property detainees may retain while housed in 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.)	Does Not Meet Standard	The facility does not have an SMU for either administrative segregation or disciplinary segregation purposes. Therefore, there are no written policies pertaining to detainee privileges in segregation.
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).	Does Not Meet Standard	The facility does not have an SMU for administrative segregation purposes. Therefore, no provision is made for detainees in administrative segregation to spend time outside of their cells.
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).	Does Not Meet Standard	The facility does not have an SMU for either administrative segregation or disciplinary segregation purposes. Therefore, no detainees were observed in segregation.
17. The shift supervisor sees each segregated detainee daily, including weekends and holidays.	Does Not Meet Standard	The facility does not have an SMU for either administrative segregation or disciplinary segregation purposes. Therefore, the shift supervisor does not see segregated detainees.

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)		
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	Rating	Remarks (1000 Char Max)
18. The facility administrator (or designee) visits each SMU daily.	Does Not Meet Standard	The facility does not have an SMU for either administrative segregation or disciplinary segregation purposes. Therefore, no visits are made to a segregation unit.
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).	Does Not Meet Standard	This IGSA facility does not have an SMU for either administrative segregation or disciplinary segregation purposes. Therefore, health care providers do not visit detainees in segregation.
20. Detainees in SMUs are provided three nutritionally adequate meals per day, ordinarily from the general population menu.	Does Not Meet Standard	The facility does not have an SMU for either administrative segregation or disciplinary segregation purposes. Therefore, no meals are served in segregation.
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.	Does Not Meet Standard	The facility does not have an SMU for either administrative segregation or disciplinary segregation purposes. Therefore, times for shaves and showers are not given.
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.	Meets Standard	The facility does not have an SMU for either administrative or disciplinary segregation purposes. Therefore, detainees are never denied clothing items, bedding, pillows or linen, and disturbed detainees are not placed in segregation.
23. Detainees in an SMU may write and receive letters the same as the general population.	Does Not Meet Standard	The facility does not have an SMU for either administrative segregation or disciplinary segregation purposes. Therefore, no mail is sent from or received in segregation.

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)		
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	Rating	Remarks (1000 Char Max)
24. Detainees in an SMU ordinarily retain visiting privileges.	Does Not Meet Standard	The facility does not have an SMU for either administrative segregation or disciplinary segregation purposes. Therefore, no detainees in an SMU retain visiting privileges.
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.	Does Not Meet Standard	The facility does not have an SMU for either administrative segregation or disciplinary segregation purposes. Therefore, no documentation exists for restricted or disallowed visits.
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.	Does Not Meet Standard	The facility does not have an SMU for either administrative segregation or disciplinary segregation purposes. Therefore, no documentation regarding any facet of segregation exists.
27. Under no circumstances is a detainee permitted to participate in general visitation while in restraints.	Meets Standard	Detainees are not permitted to participate in general visitation while in restraints.
28. In SPCs and CDFs, detainees in protective custody and violent and disruptive detainees are not permitted to use the visitation room during normal visitation hours.	N/A	This facility is an IGSA. Disruptive or violent detainees would not be permitted to visit during normal visitation hours.
29. In SPCs and CDFs, violent and disruptive detainees are limited to non-contact visits and, in extreme cases, not permitted to visit.	N/A	This facility is an IGSA. Violent or disruptive detainees would not remain in the facility.
30. Ordinarily, detainees in SMUs are not denied legal visitation.	Meets Standard	The facility does not have an SMU. Therefore, detainees are not denied legal visitation due to confinement in segregation. Policy also states that legal visits should never be denied.

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)		
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	Rating	Remarks (1000 Char Max)
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.	Does Not Meet Standard	The facility does not have an SMU for either administrative segregation or disciplinary segregation purposes. Therefore, no policy exists for special security precautions for legal visitation with segregated detainees.
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.	Does Not Meet Standard	The facility does not have an SMU for either administrative or disciplinary segregation purposes. Therefore, there are no visits from the clergy in segregation.
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.	Does Not Meet Standard	The facility does not have an SMU. Therefore, no access to reading materials is provided.
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.	Does Not Meet Standard	The facility does not have an SMU. Therefore, no access to legal materials is provided.
35. Detainees in Administrative Segregation or Disciplinary Segregation have the same law library access as the general population, unless compelling and documented security concerns require limitations.	Does Not Meet Standard	The facility does not have an SMU for either administrative or disciplinary segregation purposes. Therefore, no law library access is provided.
36. Policy and procedures provide for legal material to be brought to individuals in Disciplinary Segregation under certain circumstances.	Does Not Meet Standard	The facility does not have an SMU for either administrative or disciplinary segregation purposes. Therefore, no policy exists to provide legal materials to segregated detainees.

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)		
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	Rating	Remarks (1000 Char Max)
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. 	Meets Standard	The facility does not have an SMU. Therefore, law library access is never denied as there are never any requests for such from segregation.
38. Recreation for detainees in the SMU is separate from the general population.	Does Not Meet Standard	The facility does not have an SMU. Therefore, no recreation is offered.
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.)	Does Not Meet Standard	The facility does not have an SMU for either administrative or disciplinary segregation purposes. Therefore, no policy exists to ensure detainees who must be kept apart never participate in activities in the same location.
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.	Does Not Meet Standard	The facility does not have an SMU. Therefore, no recreation is offered.
41. The recreation privilege is denied or suspended only if it would unreasonably endanger safety or security. Ordinarily, a detainee is denied recreation privileges only with the facility administrator's written authorization that documents why the detainee poses an unreasonable risk even when recreating alone. For an immediate safety or security situation, the shift supervisor may verbally authorize denial of an instance of recreation. When a detainee in an SMU is deprived of recreation (or any usual authorized items or activity), a report of the action is forwarded to the facility administrator.	Meets Standard	The facility does not have an SMU for either administrative or disciplinary segregation purposes. Therefore, recreation is never denied.
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.	Meets Standard	The facility does not have an SMU for either administrative or disciplinary segregation purposes. Therefore, recreation is never denied.

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)

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	Rating	Remarks (1000 Char Max)
<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>	Meets Standard	The facility does not have an SMU for either administrative or disciplinary segregation purposes. Therefore, recreation is never denied.
<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>	Does Not Meet Standard	The facility does not have an SMU for either administrative segregation or disciplinary segregation purposes. Therefore, there is no telephone access.
<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>	Does Not Meet Standard	The facility does not have an SMU for administrative segregation purposes. Therefore, no written orders are prepared for a detainee's placement into administrative segregation.

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)

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	Rating	Remarks (1000 Char Max)
<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>	Does Not Meet Standard	The facility does not have an SMU for administrative segregation purposes. Therefore, no written procedures exist.
<p>47. A copy of the decision and justification for each review is given to the detainee, unless, in exceptional circumstances, this provision would jeopardize security. The detainee is given an opportunity to appeal a review decision to a higher authority within the facility.</p>	Does Not Meet Standard	The facility does not have an SMU for either administrative or disciplinary segregation purposes. Therefore, no copies of reviews are given to detainees.
<p>48. After seven consecutive days in Administrative Segregation, the detainee may exercise the right to appeal to the facility administrator the conclusions and recommendations of any review conducted. The detainee may use any standard form of written communication (for example, detainee request form), to file the appeal.</p>	Does Not Meet Standard	The facility does not have an SMU for administrative segregation purposes. Therefore, there are no appeal procedures.
<p>49. If a detainee has been in Administrative Segregation for more than 30 days and objects to this status, the facility administrator reviews the case to determine whether that status should continue, taking into account the views of the detainee. A written record is made of the decision and the justification.</p> <p>A similar review is done every 30 days thereafter.</p>	Does Not Meet Standard	The facility does not have an SMU for administrative segregation purposes. Therefore, detainees may not object to their status.

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)

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	Rating	Remarks (1000 Char Max)
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.	Does Not Meet Standard	The facility does not have an SMU for administrative segregation purposes. Therefore, no notifications are made to ICE concerning how long a detainee is held in administrative segregation.
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.	Does Not Meet Standard	The facility does not have an SMU for administrative segregation purposes. Therefore, no notifications are made regarding the length of time a detainee is in administrative segregation.
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.	Does Not Meet Standard	The facility does not have an SMU for disciplinary segregation purposes. Therefore, no detainees are placed in disciplinary segregation.
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.	Does Not Meet Standard	The facility does not have an SMU for disciplinary segregation purposes. Therefore, no written justifications are sent to ICE.
54. Before a detainee is placed in Disciplinary Segregation, a written order is completed and signed by the chair of the IDP (or equivalent). A copy is given to the detainee within 24 hours (unless delivery would jeopardize safety, security, or the orderly operation of the facility). The IDP chairman (or equivalent) prepares the Disciplinary Segregation Order (I-883 or equivalent), detailing the reasons for Disciplinary Segregation and attaching all relevant documentation. When the detainee is released from the SMU, the releasing officer records the date and time of release on the Disciplinary Segregation Order, and forwards the completed order to the chief of security or supervisor for insertion into the detainee's detention file.	Does Not Meet Standard	The facility does not have an SMU for disciplinary segregation purposes. Therefore, no written orders for disciplinary segregation placement are completed.

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)

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	Rating	Remarks (1000 Char Max)
<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>	Does Not Meet Standard	The facility does not have an SMU for disciplinary segregation purposes. Therefore, there are no written procedures for the regular review of detainees in disciplinary segregation.

PART 2 – 15. SPECIAL MANAGEMENT UNITS – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

The warden and command staff were interviewed regarding this standard. The facility does not have an SMU for the purposes of administrative or disciplinary segregation. Detainees in need of segregated housing for protective custody, investigation and/or discipline are removed from the facility.

Overall Rating: Does Not Meet Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 16. STAFF-DETAINEE COMMUNICATION (Key: P)

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	Rating	Remarks (1000 Char Max)
1. The ICE/DRO Field Office Director ensures that weekly announced and unannounced visits occur.	Meets Standard	The Supervisory Detention and Deportation Officer (SDDO) maintains a file documenting weekly announced and unannounced visits by ICE staff.
2. Detention Staff and Deportation Staff conduct scheduled weekly visits with detainees.	Meets Standard	ICE has offices in the facility, and detention and deportation staff visit the housing units everyday, Monday thru Friday. The Assistant Field Office Director, Supervisory Immigration Enforcement Agents and Immigration Enforcement Agents routinely visit the housing unit. Staff from Spectrum Security Services, Inc., under contract to assist ICE staff with administrative detention and deportation duties, also visit the housing units.
3. Scheduled visits are posted in ICE/DRO detainee housing areas.	Meets Standard	
4. Visiting ICE staff observe and note current climate and conditions of confinement.	Meets Standard	Visiting ICE staff complete a weekly liaison checklist that documents overall living conditions, equipment working order, access to program services and general observations.
5. ICE/DRO Detainee Request Forms are available for use by ICE/DRO detainees.	Meets Standard	Request forms are available in the housing units. Forms are two-sided, with one side in English and the other in Spanish.
6. The facility treats detainee correspondence to ICE/DRO staff as Special Correspondence.	Meets Standard	
7. A secure box is located in an accessible location for detainee's to place their Detainee Request Forms.	Meets Standard	Each housing unit has a dedicated mail box for deposit of request forms.
8. Only ICE staff are able to retrieve the contents of the secure box containing Detainee Request Forms,	Meets Standard	Only ICE staff have access to the restricted mail box key and the responsibility to retrieve the contents.

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

PART 2 – 16. STAFF-DETAINEE COMMUNICATION (Key: P)

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	Rating	Remarks (1000 Char Max)
9. ICE/DRO staff respond to a detainee request from a facility within 72 hours and document the response in a log.	Meets Standard	Request forms are addressed within 72 hours of receipt. ICE electronically logs and monitors receipt and disposition of all request forms. Timeline alerts are programmed into the system to inform ICE supervisory staff of approaching and past due 72-hour response deadlines.
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.	Meets Standard	The handbook informs detainees of their right to correspond with ICE staff. All new admissions sign a receipt for the handbook.
11. OIG Hotline Informational Posters are mounted in all appropriate common areas (recreation, dining, etc.) and, in SPCs and CDFs, in all housing areas.	Meets Standard	
12. Daily telephone serviceability checks are documented in the housing unit logbook.	Does Not Meet Standard	Post orders require daily checks of all telephone equipment and the generation of work orders when broken equipment is discovered. Interviews with staff indicated the checks are done; however, there was no documentation of these daily checks in the housing unit logbooks. Staff reported no entry is made unless a problem is discovered and a repair order is generated. ICE and Spectrum staffs indicated they perform housing unit telephone checks once and twice a week, respectively. Documentation confirmed these actions.

PART 2 – 16. STAFF-DETAINEE COMMUNICATION – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

Interviews with the SDDO, detention officers and ICE and Spectrum staffs, review of housing unit postings, documentation of weekly ICE and Spectrum staff visits, housing unit logbook entries and an officer's post order, and observation of interactions between staff and detainees revealed an established system that provides for open communication among staff and detainees.

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

PART 2 – 16. STAFF-DETAINEE COMMUNICATION – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 17. TOOL CONTROL (Key: Q)

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	Rating	Remarks (1000 Char Max)
1. (MANDATORY) There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	Meets Standard	The facility administrator schedules and establishes procedures for the regular inventorying of all tools.
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 sallyport 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.	Meets Standard	There is no warehouse at this facility. All new tools are received at an adjacent facility, are added to this facility's tool inventory and are then delivered to the front lobby. The tools are then added to the secure shadow-boarded tool cages/storage areas.
3. (MANDATORY) The use of tools, keys, medical equipment, and culinary equipment is controlled.	Meets Standard	Each department manager maintains an inventory of tools stored in his/her respective area. Daily tool inspections are conducted and documented to ensure strict accountability for assigned tools. Completed inventory forms are forwarded to the fire and safety manager on a weekly basis. Exceptions to this requirement include the medical department, which forwards tool inspections when inventories are conducted.
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.	Meets Standard	A metal chit is taken in exchange for all tools issued. When the tool is returned to the shadow board, the chit is removed. The chit is visible 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 	Meets Standard	There is no maintenance department, electronics shop or recreation department at this facility. Inventories are in place for medical, food service and the armory.
6. Tool Inventories are conspicuously posted on all tool boards, tool boxes and tool kits.	Meets Standard	Tool inventories are posted in all required locations.

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

PART 2 – 17. TOOL CONTROL (Key: Q)		
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	Rating	Remarks (1000 Char Max)
7. The facility has a policy for the regular inventory of all tools. <ul style="list-style-type: none"> The policy sets minimum time lines for physical inventory and all necessary documentation. ICE facilities use AMIS bar code labels when required. 	Meets Standard	Policy sets minimum timelines for physical inventories at weekly, monthly and quarterly intervals.
8. The facility has a tool classification system. Tools are classified according to: <ul style="list-style-type: none"> Restricted (dangerous/hazardous) Non Restricted (non-hazardous). 	Meets Standard	All tools are considered restricted ("R"). Department heads prepare a computer-generated inventory of all class "R" tools in the medical unit, food service department and the armory.
9. Department heads are responsible for implementing proper tool control procedures as described in the standard.	Meets Standard	All department heads are responsible for implementing and complying with the tool control policy.
10. There are policies and procedures in place to ensure that all tools are properly marked and readily identifiable.	Meets Standard	
11. The facility has an approved tool storage system. <ul style="list-style-type: none"> The system ensures that all stored tools are accountable. Tools are stored on shadow boards in which the shadows resemble the tool. Shadow boards have a white background. Restricted tools are shadowed in red. Non-restricted tools are shadowed in black. Commonly used tools (tools that can be mounted) are stored in such a way that missing tools are readily noticed. 	Meets Standard	Policy addresses all aspects of this component. All tools that can be shadowed are marked in the appropriate color code and are readily noticed if missing from their storage area/shadow board.
12. Tools removed from service have their shadows removed from shadow boards.	Meets Standard	Tools removed from service have their shadows removed from the shadow boards.
13. Tools not adaptable to a shadow board are stored in a locked drawer or cabinet.	Meets Standard	Tools that cannot be hung on boards are located in locked cabinets.
14. Sterile packs are stored under lock and key.	Meets Standard	Sterile packs are secured in a room that is locked, and cabinets within that room are also locked.
15. Each facility has procedures for the issuance of tools to staff and detainees.	Meets Standard	

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

PART 2 – 17. TOOL CONTROL (Key: Q)

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	Rating	Remarks (1000 Char Max)
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. 	Meets Standard	(b)(7)(e)
17. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	Meets Standard	
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.	Meets Standard	All visitors, including repair and maintenance workers, submit to an inspection and inventory of all tools, tool boxes and equipment before entering/leaving the facility. Inventories are also conducted when the vendor enters and leaves the area where the work is being done.
19. Hoses longer than three feet in length are classified as a restricted tool.	N/A	No hoses are used at the facility.
20. Scissors used for in-processing detainees are tethered to the furniture (e.g. table, counter, etc.) where they are used.	N/A	Scissors are not used at intake or for the in-processing of detainees.

PART 2-17. TOOL CONTROL – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

The facility has a tool control policy. All aspects of this standard are addressed in the policy. Inventories of tools are mandatory and an inventory schedule has been established. Food service, medical and armory inventories were current and documentation was complete. The facility does not have a maintenance department. All tools entering and leaving the facility are inventoried.

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

PART 2-17. TOOL CONTROL – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 18. USE OF FORCE AND RESTRAINTS (Key: R)

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	Rating	Remarks (1000 Char Max)
1. (MANDATORY) The facility has a Use of Force Policy.	Meets Standard	Policy authorizes staff to use force only as a last alternative after all other reasonable efforts to resolve a situation have failed. When authorized, staff must use only that amount of force necessary to gain control of the detainee.
2. Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	Meets Standard	Staff may respond without a supervisor's direction or presence if an immediate use of force is necessary.
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.	Meets Standard	The use-of-force continuum is a five-level model used to illustrate the levels of force staff may use to gain control of a detainee. Staff are trained to first try to resolve the situation through compliance with verbal commands.
4. Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	Meets Standard	Policy is in place that instructs staff to use calculated use of force, if feasible.
5. The facility subscribes to the prescribed Confrontation Avoidance Procedures. <ul style="list-style-type: none"> Ranking detention official, health professional, and others confer before every calculated use of force. 	Meets Standard	In calculated use-of-force situations, the assistant warden of security or shift supervisor, the designated health professional or anyone else so designated confer and assess the situation.

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

PART 2 – 18. USE OF FORCE AND RESTRAINTS (Key: R)

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	Rating	Remarks (1000 Char Max)
<p>6. When a detainee must be forcibly moved and/or restrained and there is time for a calculated use of force, staff use the Use-of-Force Team Technique.</p> <ul style="list-style-type: none"> Under staff supervision. 	Meets Standard	<p>When a detainee must be forcibly moved and/or restrained during a calculated use of force, staff use the use-of-force team technique under staff supervision to prevent injury to detainees.</p> <div style="background-color: #cccccc; padding: 20px; text-align: center;">(b)(7)(E)</div>
7. Staff members are trained in the performance of the Use-of-Force Team Technique.	Meets Standard	All security staff are trained in use-of-force team techniques during orientation and annual refresher training.
8. All use-of-force incidents are documented and reviewed.	Meets Standard	Use-of-force incidents are documented and reviewed. All calculated use-of-force incidents are videotaped and reviewed.
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.	Meets Standard	Following any incident involving the use of force, whether calculated or immediate, and the application of restraints, if applicable, the facility administrator, assistant facility administrator, captain, health services administrator and the ICE Field Office Director/designee shall meet and review the incident.

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

PART 2 – 18. USE OF FORCE AND RESTRAINTS (Key: R)		
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	Rating	Remarks (1000 Char Max)
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. 	Meets Standard	All bulleted items listed in this component are addressed in the use of force policy.
11. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	N/A	Medication is not used for restraint purposes.
12. (MANDATORY) Use-of-Force Teams follow written procedures that attempt to prevent injury and exposure to communicable disease(s).	Meets Standard	Use of force policy addresses procedures for the deployment of use-of-force teams. Safeguards are in place to minimize injury to staff and detainees. Protective gear is used and medical personnel are on the scene before force is applied.
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." 	Meets Standard	Policy addresses all of the bulleted items listed in this component.
14. The shift supervisor monitors the detainee's position/condition every two hours. He/she allows the detainee to use the restroom at these times under safeguards.	Meets Standard	Fifteen-minute checks of detainees placed in four-point restraints are recorded. Documentation of 15-minute checks continues until the four-point restraint is terminated.
15. All detainee checks are logged.	Meets Standard	

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

PART 2 – 18. USE OF FORCE AND RESTRAINTS (Key: R)

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	Rating	Remarks (1000 Char Max)
16. In immediate-use-of-force situations, officers contact medical staff once the detainee is under control.	Meets Standard	
17. When the Facility Administrator authorizes use of non-lethal weapons: <ul style="list-style-type: none"> Medical staff are consulted before staff use pepper spray/non-lethal weapons. Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized. 	Meets Standard	Qualified health care staff are consulted prior to staff using chemical agents or other non-lethal weapons, unless the circumstances are such that immediate use is necessary. Whenever possible, the detainee's medical file is first reviewed to determine if a condition is present which would jeopardize the detainee if a chemical agent or other non-lethal weapon is used.
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.	Meets Standard	(b)(7)(E)
19. If Intermediate Force Weapons are stored in the Special Management Unit (SMU), they are stored and maintained the same as Class R tools.	N/A	The facility does not have a special management unit.
20. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> Medical personnel are consulted 	N/A	The facility does not house female detainees.
21. Protective gear is worn when restraining detainees with open cuts or wounds.	Meets Standard	
22. Staff document every use of force, including what type of restraints was used during the incident.	Meets Standard	Staff document every use-of-force incident. Documentation includes the type of restraints used and, in the event of calculated use of force, the incident is videotaped.

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

PART 2 – 18. USE OF FORCE AND RESTRAINTS (Key: R)

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	Rating	Remarks (1000 Char Max)
23. It is standard practice to review any use of force and the non-routine application of restraints.	Meets Standard	Following any incident involving the use of force and the application of restraints, if applicable, the facility administrator, assistant facility administrator, captain, health services administrator and the Field Office Director/designee meet and review the incident.
24. All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. <ul style="list-style-type: none"> Specialized training is given to officers ensuring they are certified in all devices approved for use. 	Meets Standard	All detention officers receive a total of sixteen hours of training in restraint use and self-defense techniques. Training records were reviewed. (b)(7)(E) receive advanced training in all equipment they use.
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.	Meets Standard	(b)(7)(E) receive specialized training in OC (oleoresin capsicum) spray use and the decontamination of individuals exposed to it. Training records confirm the training. (b)(7)(E) (b)(7)(E)
26. The use of canines is restricted to contraband detection purposes only.	N/A	No canines are used at this facility.
27. The officers are thoroughly trained in the use of soft and hard restraints.	Meets Standard	Detention officers are trained in the use of soft and hard restraints. Training records where reviewed for verification.
28. In SPCs, the Use of Force form is used. In other facilities (IGSAs / CDFs) this form or its equivalent is used.	Meets Standard	A use-of-force/restraints report is prepared by the shift supervisor when use of force, chemical agents, the application of progressive restraints or non-lethal weapons are used.

PART 2 – 18. USE OF FORCE AND RESTRAINTS – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

Use-of-force reports were reviewed to determine if the facility was following policy. All reports were complete. Medical staff were always contacted on use-of-force incidents. Protocol established for both immediate and calculated use of force was followed. Detention officers receive training in the use of force, restraint techniques and self-defense tactics. (b)(7)(E) members receive 40 hours of additional advanced training at the (b)(7)(E) is the response unit called for in calculated use-of-force situations.

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

PART 2 – 18. USE OF FORCE AND RESTRAINTS – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6), (b)(7)(c)

Completion Date: 11/08/2012

Reviewer Signature (for printed form submission):

Section III ORDER

Disciplinary System

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

PART 3 – 19. DISCIPLINARY SYSTEM (Key: S)

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	Rating	Remarks (1000 Char Max)
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	Meets Standard	The facility has in place a system of detainee discipline that serves to protect the public, detainees and staff. It maintains order in the facility through the impartial application of a fully-developed, well understood set of rules and regulations. It also has a hearing procedure that incorporates all applicable due process requirements.
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	Meets Standard	
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 	Meets Standard	Policy prohibits the sanctions listed in this component.
4. The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	Meets Standard	The handbook is issued to each detainee upon admission. It provides notice of rules of conduct and the sanctions imposed for violations of the rules.
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 	Meets Standard	Policy addresses all of the bulleted items listed in this component. Housing unit postings included these items.

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

PART 3 – 19. DISCIPLINARY SYSTEM (Key: S)

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	Rating	Remarks (1000 Char Max)
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	Meets Standard	
7. Incident Reports and Notice of Charges are promptly forwarded to the designated supervisor.	Meets Standard	The shift supervisor reviews all incident reports and notice of charges at the end of shift.
8. Incident Reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before investigations end.	Meets Standard	Incident investigations are started within 24 hours of the incident.
9. An intermediate disciplinary process is used to adjudicate minor infractions.	Meets Standard	
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 	Meets Standard	Policy addresses all of the bulleted items listed in this component. Disciplinary packets were examined. The institutional disciplinary panel conducts the disciplinary process.
11. A staff representative is available if requested for a detainee facing a disciplinary hearing	Meets Standard	The facility administrator, upon a detainee's request, assigns a staff representative to help prepare a defense. This help is automatically provided for illiterate detainees, those with limited English-language skills and detainees without means of collecting and presenting essential evidence.
12. The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	Meets Standard	Postponements or continuances are documented and permitted under certain circumstances. The circumstances can include defense preparation, physical or mental illness, security concerns, escape, disciplinary transfer, deportation or pending criminal prosecution.

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

PART 3 – 19. DISCIPLINARY SYSTEM (Key: S)

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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	The duration of punishment is within set policy limits. Neither the panel recommending sanctions nor the facility administrator making the final decision can impose arbitrary sanctions. The maximum sanction per offense cannot exceed 60 days.
14. Written procedures govern the handling of confidential-source information. Procedures include criteria for recognizing "substantial evidence".	N/A	The facility does not use confidential informants.
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	Meets Standard	

PART 3 – 19. DISCIPLINARY SYSTEM – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

Disciplinary policy is complete; all aspects of this standard are addressed in policy. A review of disciplinary hearings and sanctions confirmed practice follows policy. Detainees are issued a handbook that includes information on disciplinary procedures.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

Section IV CARE

Food Service

Hunger Strikes

Medical Care

Personal Hygiene

Suicide Prevention and Intervention

Terminal Illness, Advance Directives, and Death

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

PART 4 – 20. FOOD SERVICE (Key: T)

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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	The food service department is operated by facility staff. The Food Service Administrator (FSA) is assigned multiple facilities, but is ServSafe-certified and determines the duties and responsibilities of staff. The facility has an assistant FSA who is also ServSafe-certified and is responsible for daily operations.
2. The Cook Foreman is on duty on days when the FSA is off duty and vice versa.	Meets Standard	The facility has eleven food service staff members. A food service employee is on duty when the department is in operation to supervise detainee workers.
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	Meets Standard	The facility and FSA provide employees with initial training that addresses detainee-related issues as well as the ICE food service standard.
4. (MANDATORY) Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device. Knives and keys are inventoried and stored in accordance with the Detention Standard on Tool Control	Meets Standard	The facility maintains a metal lockable knife cabinet secured on the wall in the food service department. The key is controlled by department staff. Knives are not used; the facility provides dough cutters, which are used by staff.
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	Meets Standard	The facility does not use knives. Dough cutters are available for use as cutting instruments; they are not secured to workstations when in use, but are used by staff. Staff monitors the use and condition of utensils.
6. Special procedures (when necessary) govern the handling of food items that pose a security threat.	N/A	The facility does not identify any food items that pose an additional security risk.
7. Operating procedures include daily searches (shakedowns) of detainee work areas.	Meets Standard	Food service staff conducts daily searches of detainee work areas.
8. The FSA monitors staff implementation of the facility population count procedures. These procedures are in writing. Staff are trained in count procedures.	Meets Standard	Food service staff conducts daily population counts in the food service department.

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

PART 4 – 20. FOOD SERVICE (Key: T)

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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	Food service staff monitors detainees daily for health and cleanliness. Visual observations are noted in the food service daily log book.
10. The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	Meets Standard	The FSA maintains the annual review of detainee job descriptions. The last review was conducted 04/01/2012.
11. The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	Meets Standard	
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. 	Meets Standard	The food service department maintains comprehensive training documentation for each detainee assigned to the department. The training includes safe work practices, safety instructions for food service equipment and hazardous materials training.
13. The Cook Foreman documents all training in individual detainee detention files.	Meets Standard	The FSA maintains individual detainee files containing training information.
14. Detainees at SPCs and CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSAs are subject to local and State rules and regulations regarding detainee pay.	Meets Standard	Detainees are allowed to work in the food service department and are paid \$1.00 per day.
15. Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.	Meets Standard	Facility meal times include breakfast at 5:15 a.m., lunch at 11:30 a.m. and the evening meal at 4:15 p.m.
16. For cafeteria-style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	N/A	The facility uses a satellite feeding operations to support detainee dietary needs.
17. The facility has a standard 35-day menu cycle. IGSAs use a 35 day or similar system for rotating meals.	Meets Standard	The facility is operated by The GEO Group, Inc. GEO uses a 42-day menu cycle.

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

PART 4 – 20. FOOD SERVICE (Key: T)

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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	The facility's corporate office maintains a registered dietitian on staff. The dietitian conducts the nutritional analysis to ensure the master menu meets recommended daily allowances. The nutritional analysis was visually inspected.
19. The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	Meets Standard	The facility uses approved recipes for the production of food products.
20. The Cook Foreman has the authority to change menu items if necessary. <ul style="list-style-type: none"> If yes, documenting each substitution, along with its justification, with copy to the FSA 	Meets Standard	The food service department maintains acceptable substitution guidelines to which staff must adhere when making menu changes. The FSA is notified of any substitutions.
21. All staff and volunteers know and adhere to written "food preparation" procedures.	Meets Standard	
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 provide hot water for instant beverages and foods. <ul style="list-style-type: none"> Common Fare meals are served with: Disposable plates and utensils. Reusable plates and utensils. Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the Common Fare diet items. 	Meets Standard	The facility maintains an approved common fare menu that adheres to the recommended daily allowances and requirements established in this component. During the inspection, the facility did not have a detainee on an approved religious diet.
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	Meets Standard	The chaplain provides the FSA a list of detainees authorized to receive religious diets.
24. A supervisor at the command level must approve a detainee's removal from the Common Fare Program.	Meets Standard	The chaplain approves the removal of a detainee from the common fare program. The removal is documented.

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

PART 4 – 20. FOOD SERVICE (Key: T)		
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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	
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. 	Meets Standard	The food service program maintains a common fare menu to accommodate religious requests. It will support Muslims, Jews and other religious groups when they are housed at the facility.
27. The food service program addresses medical diets.	Meets Standard	The medical department provides a listing of detainees requiring medical diets. During the inspection, the FSA reported seventeen ICE detainees were receiving medical diets.
28. Satellite-feeding programs follow guidelines for proper sanitation.	Meets Standard	
29. Hot and cold foods are maintained at the prescribed, "safe" temperature(s) as served. See Detention Standard on Food Service for guidance.	Meets Standard	Food temperatures were visually observed during the inspection. They were maintained within the prescribed safe range.
30. All meals provided in nutritionally adequate portions.	Meets Standard	
31. Food is not used to punish or reward detainees based upon behavior.	Meets Standard	
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. 	Meets Standard	Detainee workers are trained on cleanliness/sanitation techniques, hygiene, preparation and maintenance of equipment. The training is recorded and maintained by the FSA.
33. Everyone working in the food service department complies with food safety and sanitation requirements.	Meets Standard	
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.	Meets Standard	The facility has established procedures for the FSA or assistant FSA to make weekly inspections of the department.

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

PART 4 – 20. FOOD SERVICE (Key: T)		
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	Rating	Remarks (1000 Char Max)
35. Reports of discrepancies are forwarded to the Facility Administrator or designated department head and corrective action is scheduled and completed.	Meets Standard	
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.	Meets Standard	Food service staff document dishwashing temperatures after each meal. The documentation is reviewed and maintained by the FSA or the assistant FSA.
37. (MANDATORY) Staff document the results of every refrigerator/ freezer temperature check, in accordance with the Detention Standard on Food Service.	Meets Standard	Food service staff document refrigerator/freezer temperatures daily. The documentation is reviewed and maintained by the FSA or the assistant FSA.
38. The cleaning schedule for each food service area is conspicuously posted.	Meets Standard	The food service cleaning schedule is posted in several locations throughout the department.
39. Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	Meets Standard	
40. Storage areas are locked when not in use.	Meets Standard	Storage areas were locked during an inspection of the food service department.
41. Food service personnel conduct shakedowns along with detention staff.	Meets Standard	
42. <u>In SPCs only:</u> The ICE supervisor on duty ensures that ICE officers participate in dining room supervision.	N/A	Satellite feeding is used in this IGSA facility.
43. Menus are certified by a registered dietitian prior to being incorporated into the Food Service Program.	Meets Standard	
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.	N/A	This IGSA facility does not prepare quarterly cost estimates of the common fare program.
45. When required, only food service staff prepare the sack lunches for detainee transportation.	Meets Standard	The food service department supplies sack lunches when requested by transport staff. The lunches are made by facility food service staff.
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.	Meets Standard	
47. Staff comply with the ICE requirements for "food receipt and storage.	Meets Standard	

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

PART 4 – 20. FOOD SERVICE (Key: T)

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	Rating	Remarks (1000 Char Max)
48. Stock inventory levels are monitored and adjusted to correct overage and shortage problems.	Meets Standard	
49. Staff comply with all ICE Housekeeping, Storeroom/Refrigerator requirements. Identify and explain any shortcomings.	Meets Standard	
50. Dining room facilities and operating procedures will provide sufficient space and time for detainees to eat meals in a relatively relaxed, unregimented atmosphere.	<i>Meets Standard</i>	
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.	Meets Standard	The County of San Bernardino, Department of Public Health conducts annual inspections of the facility. The last inspection was conducted 02/16/2012.
52. Personnel inspecting the food service department shall note needed corrective action(s), if any, in a written report to the Facility Administrator.	Meets Standard	
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.	Meets Standard	
54. (MANDATORY) The FSA is responsible for pest control in the food service department, including contracting the services of an outside exterminator.	Meets Standard	Pest control services are provided through a contract with Orkin International, Commercial Services of Pasadena, CA.

PART 4 – 20. FOOD SERVICE – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

The food service department is operated by facility employees working for The GEO Group, Inc. GEO operates numerous detention contracts throughout the nation and provides corporate support for the department. It provides detainees with a nutritionally balanced diet that is prepared and presented in a sanitary and hygienic operation. During the inspection, food service operations were found to be clean and organized. The facility has trained staff on the detention standards and maintains a consistent operation with documentation to support the food service function. Food items are prepared to be nutritionally adequate and are presented in a palatable manner.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 4 – 21. HUNGER STRIKES (Key: U)

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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	Policy requires staff to refer a detainee to the medical department when a detainee has refused nine meals or has declared a hunger strike.
2. Facility immediately reports via the chain of command a hunger strike to ICE/DRO.	Meets Standard	The facility notifies the on-site ICE staff if a detainee is on a hunger strike; the detainee is then transferred to another facility for observation and management.
3. The facility has established procedures to ensure staff respond immediately to a hunger strike.	Meets Standard	Policy requires that staff respond immediately to a hunger strike.
4. Policy and procedure require that staff isolate a hunger-striking detainee from other detainees.	Meets Standard	Policy requires that a detainee identified as a hunger striker be transferred to another facility.
5. Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	N/A	Detainees identified as being on a hunger strike are transferred to another facility.
6. Medical staff record the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	N/A	Hunger striking detainees are not housed at this facility.
7. The facility medical authority obtains a hunger striker's consent before medical treatment.	N/A	Hunger striking detainees are not housed at this facility.
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.	N/A	Hunger striking detainees are not housed at this facility.
9. Unless otherwise directed by the medical authority, staff deliver three meals per day to the detainee's room, regardless of the detainee's response to a verbally offered meal and document those meal offers.	N/A	Hunger striking detainees are not housed at this facility.
10. Staff maintain the hunger striker's supply of drinking water/other beverages.	N/A	Hunger striking detainees are not housed at this facility.
11. During a hunger strike, staff remove all food items from the hunger striker's living area.	N/A	Hunger striking detainees are not housed at this facility.
12. Staff are directed to record the hunger striker's fluid intake and food consumption on the Hunger Strike Monitoring Form I-839 or equivalent.	N/A	Hunger striking detainees are not housed at this facility.
13. The medical staff have written procedures for treating hunger strikers.	N/A	Hunger striking detainees are not housed at this facility.
14. Staff document all treatment attempts in the medical record, including attempts to persuade the hunger striker by counseling him or her of the medical risks.	N/A	

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

PART 4 – 21. HUNGER STRIKES (Key: U)

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	Rating	Remarks (1000 Char Max)
15. All staff receive orientation and annual training on recognizing the signs of a hunger striker and on the procedures for referral for medical assessment. Medical staff receive training in hunger-strike evaluation and treatment and remain up-to-date on these techniques.	Meets Standard	Interviews with staff and review of training curriculum revealed that all staff received orientation and annual training on recognizing the signs of a hunger striker and on the procedures for referral for medical assessment. Medical staff has received training in hunger strike evaluation and monitoring.

PART 4 – 21. HUNGER STRIKES – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

Procedures are in place to protect the health and well-being of hunger strikers. There were no detainee hunger strikes since the previous inspection. Identified hunger strikers are not managed at this facility; they are promptly transferred to an adjacent facility. The standard's rating was based on a review of policies, medical protocols and training records and on staff interviews.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 4 – 22. MEDICAL CARE (Key: V)

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	Rating	Remarks (1000 Char Max)
1. The facility operates a health care facility in compliance with state and local laws and guidelines.	Meets Standard	Health care at this facility is provided by GEO Care, a division of The GEO Group, Inc. The facility is not accredited by any national accrediting body. Clinical Laboratory Improvement Amendment of 1988 (waived category) certificate is current. Review of credential files revealed that all professional licenses are current and verified.
2. The facility's in-processing procedures of arriving detainees include medical screening.	Meets Standard	A review of 25 detainee medical records revealed that all detainees receive a medical screening, performed by a nurse, 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.	Meets Standard	The current staffing plan has been approved by the health authority. Staffing includes a health services administrator (HSA), an assistant HSA, (b)(7)(E) physician, (b)(7)(E) dentist, (b)(7)(E) psychologist, (b)(7)(E) nurse practitioners, (b)(7)(E) registered nurses (RNs), (b)(7)(E) licensed vocational nurses (LVNs), a data entry clerk, (b)(7)(E) medical records clerks, a full-time contract psychiatrist, a medical assistant and a dental assistant.
4. (MANDATORY) Newly admitted detainees will be informed, orally and in writing (in a language they can understand), about how to access health services.	Meets Standard	Detainees are given oral and written instructions on how to access health services at intake and sign a statement attesting to receipt and understanding of this information. Both written and verbal instructions are provided in English and Spanish, and a language interpretation phone line can be used for detainees who do not speak either language.
5. Detainees will have access to and receive specified 24-hour emergency medical, dental, and mental health services.	Meets Standard	Medical staff is on duty 24 hours per day, 7 days a week. A physician, dentist and psychiatrist are always on call.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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	Rating	Remarks (1000 Char Max)
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.	Does Not Meet Standard	Review of medical staff medical files revealed that of (b)(7)(E) direct care staff, (b)(7)(E) did not have documentation of being offered Hepatitis B vaccination, (b)(7)(E) did not have annual tuberculosis (TB) tests and (b)(7)(E) did not have a TB test prior to job assignment.
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.	Meets Standard	Review of credential files revealed that all professional staff is properly licensed, certified, credentialed and/or registered in compliance with applicable state and federal requirements. Written job descriptions are provided and were reviewed.
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).	Meets Standard	All detainees are provided a detainee handbook upon admission. Detainees sign a form that states they have been advised on how to access health care services. This information is also clearly explained in the handbook.
9. In SPCs and CDFs, medical personnel credentialing and verification complies with the standards established by the NCCHC and Joint Commission.	Meets Standard	Credential files in this IGSA facility were reviewed and found to be current and in compliance with the standards of these organizations.
10. Within 12 hours of arrival, all newly admitted detainees receive initial medical, dental and mental health screening by a health care provider or a detention officer specially trained to perform this function. <ul style="list-style-type: none"> When screening is performed by a detention officer, the facility maintains documentation of the officer's special training. 	Meets Standard	Nursing staff provide initial medical, dental and mental health screening for all newly admitted detainees within 12 hours of arrival.
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.	Meets Standard	The telephonic Language Line is used extensively for purposes of completing the medical screening.

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

PART 4 – 22. MEDICAL CARE (Key: V)		
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	Rating	Remarks (1000 Char Max)
12. The facility has sufficient space and equipment to afford each detainee privacy when receiving health care.	Meets Standard	The medical department is of adequate size and is well equipped with modern and functional equipment. Examining rooms are available in the medical department and adjacent to the housing units. All provide privacy when receiving medical care.
13. The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	Meets Standard	The medical department is located within the secure perimeter and access is restricted.
14. The medical facility entrance includes a holding/waiting room.	Meets Standard	There is a holding room located just outside the entrance to the department that can hold 20 detainees.
15. The medical facility's holding/waiting room under the direct supervision of custodial staff.	Meets Standard	A detention officer is assigned to provide supervision of the holding room.
16. Detainees in the holding/waiting room have access to a toilet and a drinking fountain.	Meets Standard	Detainees in the holding room have access to a toilet and a sink with 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. 	Meets Standard	Observation revealed that medical records are kept apart from other files in a locked records room within the medical unit, with physical access restricted to authorized medical staff. Procedurally, no copies of medical records are made and placed in detainee files.
18. (MANDATORY) A signed and dated consent form is obtained from a detainee before medical treatment is administered.	Meets Standard	A general consent form is completed as part of the intake process. Specific consent forms for any invasive procedure are obtained prior to performance of such procedures. This was verified by review of 25 detainee medical records.
19. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	Meets Standard	GEO form HS-106, Authorization for Release of Information, is used.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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	Rating	Remarks (1000 Char Max)
20. The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	Meets Standard	Per the HSA, normally at least 12 hours notice is given prior to the release, transfer or removal of a detainee.
21. A detainee's medical records will be transferred as appropriate. All detainees will be transferred with a copy of their transfer summary.	Meets Standard	Interviews with staff and observation revealed that all detainees are transferred with a transfer summary and other pertinent medical records.
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."	Meets Standard	Observation revealed that medical records are placed in a sealed envelope labeled with the detainee's name and A-number and marked "medical confidential".
23. Medical screening includes a Tuberculosis (TB) test.	Meets Standard	Review of detainee medical records revealed that medical screening includes a digital chest x-ray.
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. 	Meets Standard	Review of medical records revealed that all detainees receive a mental health screening upon arrival. It is conducted by a nurse before a detainee's assignment to a housing unit.
25. The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.	Meets Standard	A nurse reviews all medical information arriving with a detainee to identify detainees needing medical attention.
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.	Meets Standard	Review of 25 detainees medical records revealed that all had a health appraisal and physical examination completed within 14 days of arrival. The physical examinations were conducted by a physician, a mid-level provider or an RN who had been credentialed and trained by the physician. Physical examinations conducted by the nurses were reviewed by the physician.
27. Detainees in the Special Management Unit have access to the same level of health care as detainees in the general population.	N/A	This facility does not have a Special Management Unit.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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	Rating	Remarks (1000 Char Max)
28. Staff provide detainees with health- services (sick call) request slips daily, upon request. <ul style="list-style-type: none"> Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population. Service-request slips are delivered in a timely fashion to the health care provider. 	Meets Standard	Observation revealed that medical request slips are available in all housing units in English and Spanish and that request slips are picked up daily by a nurse on the night shift.
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.	Meets Standard	Health care staff are on duty 24 hours a day, seven days a week. Policy provides procedures for when immediate outside medical attention is required.
30. The plan includes an on-call provider.	Meets Standard	The physician and dentist are always on call.
31. The plan includes a list of telephone numbers for local ambulances and hospital services.	Meets Standard	Telephone numbers for the ambulance service and hospital services are located in the medical department.
32. The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.	Meets Standard	The plan includes procedures for maintaining security and safety during medical emergencies.
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.	Meets Standard	All staff receive first aid, cardiopulmonary resuscitation (CPR) and automated external defibrillator (AED) training as part of their initial orientation and annual training. The curriculum includes responding to emergencies within four minutes. This was confirmed through review of training curricula and staff files.
34. Where staff are used to distribute medication, a health care provider properly trains these officers.	N/A	All medication is distributed by medical staff.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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	Rating	Remarks (1000 Char Max)
35. Pharmaceuticals and nonprescription medicines will be stored, inventoried, dispensed, and administered in accordance with sound standards and facility needs for safety and security.	Meets Standard	The facility obtains medication from Correct Rx. A pharmacist provides quarterly on-site oversight of pharmacy operations. All medications are stored, inventoried and distributed with safety and security concerns in mind. Medications that are not "Keep on Person" are administered by health care staff. Controlled substances or medications that are subject to abuse are monitored closely and their administration is documented thoroughly. As confirmed per direct observation, perpetual inventories are maintained on the controlled substances and the needles/syringes.
36. (MANDATORY) Each facility has written policy and procedures for the management of pharmaceuticals that include: <ul style="list-style-type: none"> • A formulary of all prescription and nonprescription medicines stocked or routinely procured from outside sources. • A method for obtaining medicines not on the formulary. • Prescription practices, including requirements that medications are prescribed only when clinically indicated and that prescription are reviewed before being renewed. • Procurement, receipt, distribution, storage, dispensing, administration, and disposal of medications. • Secure storage and perpetual inventory of all controlled substances (DEA Schedule II-V), syringes, and needles. 	Meets Standard	Policy provides guidance to medical staff on obtaining formulary and non-formulary medication, on prescription practices, medication procurement, receipt, distribution, storage and disposal, and on the storage, security and inventory of controlled items.

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

PART 4 – 22. MEDICAL CARE (Key: V)		
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	Rating	Remarks (1000 Char Max)
37. All pharmaceuticals are stored in a secure area with the following features: <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. 	Meets Standard	Pharmaceuticals are stored in the pharmacy located in the medical department, which is within the secure perimeter. Access is limited to the pharmacy nurse. The walls are solid from floor to roof through the dropped ceiling. The pharmacy has a solid core entrance door with a high security lock and no other access. Medication is stored in locked cabinets and medication carts.
38. In SPCs and CDFs, the pharmacy has a locking pass-through window. <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. 	Meets Standard	LVNs or RNs perform medication administration at this facility. Accountability is ensured by proper documentation on Medication Administration Records (MARs). The medication room in this IGSA facility does have a pass-through window. A contracted pharmacist provides quarterly on-site oversight of pharmacy operations.
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.	Meets Standard	Observation revealed that medication is distributed in accordance with procedures established in policy. All medications given to detainees are recorded on an MAR.
40. Medication may not be delivered or administered by detainees. <ul style="list-style-type: none"> • In facilities that are medically staffed 24 hours a day, the health care provider distributes medication. • In facilities that are not medically staffed 24 hours a day, medication may be distributed by detention officers, who have received proper training by the health care provider, only when medication must be delivered at a specific time when medical staff are not on duty. 	Meets Standard	Medical staff is on duty 24 hours a day. All medication at this facility is delivered or administered by medical staff.
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.	N/A	Medical staff is on duty 24 hours a day. All medication at this facility is delivered or administered by medical staff.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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	Rating	Remarks (1000 Char Max)
42. The Warden/Facility receives notification that a detainee that has special medical needs.	Meets Standard	The Warden receives notification that a detainee has special medical needs via GEO form HS-132, Health Summary for Classification.
43. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	Meets Standard	Policy includes procedures for examinations by independent medical service providers and experts.
44. (MANDATORY) Each facility has a written plan (or plans) that address the management of infectious and communicable diseases, including prevention, education, identification, surveillance, immunization (when applicable), treatment, follow-up, isolation (when indicated), and reporting to local, state, and federal agencies. Plans include: <ul style="list-style-type: none"> • Coordination with public health authorities; • Ongoing education for staff and detainees; • Control, treatment, and prevention strategies; • Protection of individual confidentiality; • Media relations; • Management of tuberculosis, hepatitis A, B, and C, HIV infection, avian influenza, and • Reporting communicable diseases to local and/or state health departments in accordance with local and state regulations. 	Meets Standard	Policy addresses the management of infectious and communicable diseases, including prevention, education, identification, surveillance, immunization, treatment, follow-up, isolation and reporting to local, state and federal agencies. Policy includes coordination with public health authorities, ongoing education for staff and detainees, control, treatment and prevention strategies, protection of individual confidentiality, media relations, management of TB, hepatitis A, B, and C, HIV infection and avian influenza, and reporting communicable disease to local and/or state health departments in accordance with local and state regulations.
45. Detainees diagnosed with a communicable disease are isolated according to local medical operating procedures.	Meets Standard	Detainees diagnosed with a communicable disease are isolated in an observation room in the medical department or, if a negative airflow/respiratory isolation room is required, they are transferred to a facility which has such rooms.
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.	Meets Standard	Review of 25 medical records revealed that all detainees were screened for TB via a digital chest x-ray taken upon arrival at the facility.

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

PART 4 – 22. MEDICAL CARE (Key: V)		
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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	Detainees with symptoms suggestive of active TB are transferred to a facility with negative airflow/respiratory 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.	Meets Standard	Emergency transportation is available through the 911 EMS system. Transportation to a specialty or other off-site provider is arranged with custody staff based on urgency and medical need.
49. Detainee who requires close, chronic, or convalescent medical supervision will be treated in accordance with a plan approved by licensed physician, physician assist, nurse practitioner, dentist, or mental health practitioner that includes directions to health care and other involved personnel.	Meets Standard	Detainees who require close or frequent supervision are managed according to written orders issued by a licensed independent practitioner.
50. (MANDATORY) Female detainees have access to pregnancy testing and pregnancy management services that include routine high-risk prenatal care, addiction management, comprehensive counseling and assistance, nutrition, and postpartum follow-up.	N/A	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	Meets Standard	Per review of the medical records of 10 detainees with chronic care conditions, such detainees are followed closely by the physician. Chronic care includes appropriate treatment with and monitoring of medications, laboratory testing, scheduled follow-up appointments and outside referrals as deemed necessary.
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.	Meets Standard	A local form is used to notify the facility of any detainees whose medical or mental health needs require special consideration in such matters as housing, transfer or transportation.
53. Detainees will have access to emergency and specified routine dental care provided under direction and supervision of a licensed dentist.	Meets Standard	A full-time dentist and dental assistant provide routine as well as emergency dental care. The facility also has a Panorex dental x-ray unit on site.

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

PART 4 – 22. MEDICAL CARE (Key: V)		
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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	Review of medical records revealed that detainees identified with mental health problems on intake are referred to a mental health provider based on urgency. A full-time psychologist is available onsite and a psychiatrist is available via telemedicine.
55. Crisis intervention services are available for detainees who experience acute mental health episodes.	Meets Standard	The psychologist is available onsite and the psychiatrist is available via telemedicine for acute mental health episodes.
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.	Meets Standard	Observation revealed that medical and mental health encounters are conducted in rooms that provide privacy. Female detainees are not housed at this facility.
57. (MANDATORY) Any detainee referred for mental health treatment receives a comprehensive evaluation by a licensed mental health provider within 14 days of the referral.	Meets Standard	Review of medical records revealed that detainees referred for mental health treatment receive a comprehensive evaluation by the psychologist within 14 days of referral.
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. 	Meets Standard	Policy specifies the conditions under which restraints may be applied, the types of restraints to be used, how a detainee in restraints is to be monitored, the length of time restraints are to be applied, requirements for documentation, including efforts to use less restrictive alternatives, and after incident reviews. Order for Discontinuation of Restraint or Seclusion is used in lieu of DIHS-867.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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	Rating	Remarks (1000 Char Max)
<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. 	Meets Standard	Policy states that the authorizing physician or psychiatrist will specify the duration of therapy, document that less restrictive intervention options have been exercised without success, detail how the medication is to be administered, monitor the detainee for adverse reactions and side effects and prepare treatment plans for less restrictive alternatives as soon as possible. ICE would be notified prior to the involuntary administration of psychotropic medication to an ICE detainee.
<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>	Does Not Meet Standard	The facility has a full-time dentist onsite, but dental screenings were conducted by RNs who were not trained by the dentist. Per the HSA, in the future the dentist will perform all initial dental screenings.
<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>	Meets Standard	The health authority and facility administrator have determined the contents, location, number and use protocols for first aid kits. Nursing staff perform monthly inspections of the first aid kits.
<p>62. An automatic external defibrillator should be available for use at the facility.</p>	Meets Standard	Observation revealed that there is an AED in the medical department. All medical staff are trained in the use of the AED.
<p>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.</p>	Meets Standard	The requirements of this component are specifically required by policy.
<p>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.</p>	Meets Standard	At this IGSA facility, the warden and the HSA meet with other department heads weekly.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	Biohazardous waste handling and disposal was observed to be in compliance with sound medical standards and applicable laws. Disposal is contracted to Stericycle. Sterilization procedures were observed and found to be sound. Spore testing is performed weekly and documented results were available.
66. (MANDATORY) The health authority will implement a system of internal review and quality assurance.	Meets Standard	The HSA has established and implemented a system of internal review and quality assurance.

PART 4 – 22. MEDICAL CARE – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

Medical care at this facility is a shared service with an adjacent facility. Health care services are provided in a clean environment, which is adequately staffed and properly equipped. Detainees with acute and chronic needs are identified during the intake screening and physical assessment processes. Timely and regular follow up is conducted for detainees with chronic medical and mental health conditions. Routine medical, dental and mental health services are also provided in a timely manner. The facility does not have a certified negative airflow/respiratory isolation room. There are two observation rooms in the medical department that are used for suicide watches if the detainee cannot be transferred to another facility for this purpose. Detainees requiring care beyond the scope available in this facility are transferred to a local hospital or to another facility. Detainees are not charged co-pay fees for medical, dental or mental health services.

The standard's rating was based on review of policies, procedures, medical staff credentialing files, 25 detainee medical records and other medical documentation and the detainee handbook; on observation in the medical unit, detainee housing units and other areas of the facility; and on observation of intake screenings. Interviews with the HSA, the clinical director and other medical staff, detainees, the Assistant Field Office Director, the compliance manager and the warden were also conducted. There have been no unresolved medical issues or detainee grievances regarding medical care at this facility since the last inspection.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 4 – 23. PERSONAL HYGIENE (Key: W)

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	Rating	Remarks (1000 Char Max)
1. There is a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items. The supply of these items exceeds the minimum required for the number of detainees.	Meets Standard	Policy outlines the procedure for the regular issuance and exchange of clothing, bedding, linens, towels and personal hygiene items. The supply of these items far exceeds the minimum required for the number of detainees.
2. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive, at a minimum: <ul style="list-style-type: none"> One uniform shirt and one pair of uniform pants or one jumpsuit. One pair of socks. One pair of underwear (daily change). One pair of facility-issued footwear. 	Meets Standard	All new detainees are issued clean, temperature appropriate, presentable clothing during in-processing. Items issued are: two uniforms, three pairs each of socks and underwear, one pair of shower sandals and one pair of shoes.
3. Additional clothing is available for changing weather conditions and as is seasonally appropriate.	Meets Standard	Detainees are issued one sweatshirt as weather conditions dictate.
4. New detainees are issued clean bedding, linens and towels, at a minimum: <ul style="list-style-type: none"> One mattress One blanket Two sheets One pillow One pillowcase One towel Additional blankets, based on local weather conditions. 	Meets Standard	New detainees are issued clean bedding, linens and towels. Items issued include one mattress, one pillow, two sheets, one pillowcase, one towel, and when necessary, sufficient blankets to provide comfort under existing temperature controls.
5. The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE detainees are not charged for these items.	Meets Standard	Policy states that all arriving detainees will be provided with all necessary personal hygiene articles to include soap, shampoo, a comb or brush, toothbrush, toothpaste, skin lotion and toilet paper. Female detainees are not housed at this facility.

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

PART 4 – 23. PERSONAL HYGIENE (Key: W)

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	Rating	Remarks (1000 Char Max)
<p>6. Toilet facilities are:</p> <ul style="list-style-type: none"> Clean Adequate in number and can be used without staff assistance 24 hours per day when detainees are confined in their cells or sleeping areas. <p>ACA Expected Practice 4-ALDF-4B-08 requires that toilets be provided at a minimum ratio of one for every 12 male detainees or one for every 8 female detainees. For males, urinals may be substituted for up to one-half of the toilets.</p>	Meets Standard	Observation revealed that toilet facilities are clean, adequate in number and can be used without staff assistance 24 hours per day.
<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>	Meets Standard	Observation revealed that bathing facilities are clean, operable and adequate in number. Temperatures were within industry standards.
<p>8. Detainees with disabilities are provided adequate facilities, support, and assistance needed for self-care and personal hygiene.</p>	Meets Standard	All housing units are handicapped-accessible to include showers, toilets and wash basins.
<p>9. Detainees are provided clean clothing, linen and towels.</p> <ul style="list-style-type: none"> Socks and undergarments - daily. Outer garments - twice weekly. Sheets - weekly. Towels - weekly. Pillowcases - weekly. 	Meets Standard	Laundering of socks and underwear is available twice a week. Clothing and linen exchange are also available twice a week.
<p>10. Food service detainee volunteer workers are permitted to exchange outer garments daily.</p>	Meets Standard	Food service detainee volunteer workers are provided clean white shirts and trousers daily.
<p>11. Volunteer detainee workers are permitted to exchanges of outer garments more frequently.</p>	Meets Standard	Detainee workers are permitted to exchange or launder outer garments as needed.

PART 4 – 23. PERSONAL HYGIENE – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

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

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

PART 4 – 23. PERSONAL HYGIENE – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION (Key: X)

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	Rating	Remarks (1000 Char Max)
1. The facility has a written suicide prevention and intervention program approved and signed by the health authority and Facility Administrator and reviewed annually.	Meets Standard	The suicide prevention and intervention program has been approved and signed by the health authority and the warden. It is reviewed annually.
2. At a minimum, the Program shall include procedures to address: <ul style="list-style-type: none"> • Intake screening and referral requirements; • The identification and supervision of suicide-prone detainees; • Staff training requirements; • The management and reporting of suicidal incidents, suicide watches, and deaths; • Provision of safe housing for suicidal detainees; • Debriefing of any suicides and suicide attempts by administrative, security, and health services staff; • Guidelines for returning a previously suicidal detainee to a facility's general population, upon written authorization of the clinical director.; • Reporting guidelines for facility personnel when suspected suicidal behavior is observed; and Written procedures for the proper handling of detainees who exhibit suicidal behavior.	Meets Standard	The suicide prevention and intervention program includes procedures addressing all of the items listed in this component.
3. Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation and annual training.	Meets Standard	Review of the training curriculum and interviews with staff indicated that every staff member receives suicide prevention training during the initial employee orientation and annual training.

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

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION (Key: X)

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	Rating	Remarks (1000 Char Max)
<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. 	Meets Standard	Review of the training outline revealed that training prepares staff with effective methods for identifying the warning signs and symptoms of impending suicidal behavior; demographic, cultural, and precipitating factors of suicidal behavior; responding to suicidal and depressed detainees; effective communication between correctional and health care personnel; necessary referral procedure,, housing observation and suicide-watch level procedures; follow-up monitoring of detainees who have already attempted suicide; and reporting and written documentation procedures.
<p>5. A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process.</p> <ul style="list-style-type: none"> • Screening does not occur later than one working day after the detainee's arrival. • Documentation exists that "specially trained officers" have completed training in accordance with a syllabus approved by the medical authority. 	Meets Standard	Review of medical records revealed that a nurse screens all detainees for suicide potential as part of the admission process. The screening is conducted upon arrival at the facility. Officers do not screen detainees for suicide potential.
<p>6. Written procedures contain when and how to refer at-risk detainees to medical staff and procedures are followed.</p>	Meets Standard	Policy provides procedures for referring at-risk detainees to medical staff.
<p>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.</p>	Meets Standard	Policy states that the mental health professional or physician can authorize the return of a previously suicidal detainee to the general population.

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

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION (Key: X)

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	Rating	Remarks (1000 Char Max)
8. The facility has a designated isolation room for evaluation and treatment.	N/A	The facility does not have a designated isolation room for evaluation and treatment of suicidal detainees as detainees in need of suicide watch are normally transferred to another facility. During this inspection, however, a detainee was observed to be on a suicide watch in one of the observation rooms in the medical department pending transfer.
9. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	Does Not Meet Standard	The facility does not have a designated room as detainees in need of suicide watch are normally transferred to another facility. During the inspection, however, one detainee was placed on constant one-on-one suicide watch in a medical observation room. Per staff, the room was being used because the adjacent facility was temporarily without space for the detainee. The room that was used for this suicide watch has a privacy wall in front of the toilet. The detainee was hidden from the view of the detention officer behind the privacy wall. This was brought to the attention of the health services administrator, and the detainee was subsequently removed from this room and transferred to another facility.
10. Medical staff have approved the room for this purpose.	N/A	The facility does not have a designated room for suicide watches as detainees in need of this service are normally transferred to another facility.
11. Staff observe and document the status of a suicide-watch detainee at least once every 15 minutes/constant observation.	Meets Standard	There are two levels of suicide watch; one calls for constant, direct one-on-one observation and the other for observation at least every 15 minutes.

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

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION (Key: X)

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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	The facility has 24-hour medical coverage. All suicide watches involve constant observation until the detainee is evaluated by a mental health provider. Medical staff documents the status of the detainee at least 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	Meets Standard	ICE is notified and advised of the condition of any ICE detainee placed on suicide watch.
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.	Meets Standard	Per policy, a mortality review and critical incident debriefing would be conducted for every suicide and serious attempt.

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

No suicides or suicide attempts have been reported at this facility in the past 12 months. The Suicide Prevention Program is detailed and comprehensive. The standard's evaluation was based on a review of established policies and training documentation, on interviews with facility medical and detention staff, on a review of detainee medical records, on inspections of the designated observation room and on observation of a suicide watch.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 4 – 25. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH (Key: Y)

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.

Standard N/A

Click the above button if the facility does not accept ICE detainees who are severely or terminally ill. ALWAYS complete all references to detainee death and related notifications. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
1. Detainees, who are chronically or terminally ill, are transferred to an appropriate off-site medical facility.	Meets Standard	The facility does not house detainees who are seriously or terminally ill. The facility has an agreement with Victor Valley and Desert View hospitals in Victorville to temporarily house these types of detainees.
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. 	Meets Standard	ICE staff is located at this facility and would make all notifications.
3. There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives. <ul style="list-style-type: none"> These guidelines include instructions for detainees who wish to have a living will. These guidelines provide the detainee the opportunity to have a private attorney prepare the documents, at the detainee's expense. 	Meets Standard	Policy addresses the guidelines for preparation of a living will and provides the detainee the opportunity to have a private attorney prepare the documents at the detainee's expense.
4. There is a policy addressing "Do Not Resuscitate Orders"	Meets Standard	Policy addresses Do Not Resuscitate (DNR) orders.
5. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation.	Meets Standard	Policy states a detainee with a DNR order would receive maximal 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.	Meets Standard	In this IGSA facility, notification of a DNR order would be made by the health services administrator to the ICE staff onsite.
7. The facility has written procedures to address the issues of organ donation by detainees.	Meets Standard	Policy states procedures for organ donation established by ICE guidelines would be followed.
8. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in custody.	Meets Standard	Per policy, in the event of a detainee death, ICE staff would be notified and ICE would make all other notifications as required.

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

PART 4 – 25. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH (Key: Y)

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.

Standard N/A

Click the above button if the facility does not accept ICE detainees who are severely or terminally ill. ALWAYS complete all references to detainee death and related notifications. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
9. The facility has a policy and procedure to address the death of a detainee while in transport.	Meets Standard	There are policies and procedures in place that address the death of a detainee while in transport.
10. At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	Meets Standard	Per interview with the Assistant Field Office Director (AFOD), ICE would assume the responsibility as detailed in this standard.
11. In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. <ul style="list-style-type: none"> If the detainee is a U.S. military veteran, the Department of Veterans Affairs notified. 	Meets Standard	Per policy and the AFOD, ICE would provide an indigent's burial if neither the family nor the consulate claimed the remains.
12. An original or certified copy of a detainee's death certificate is placed in the subject's A-File.	Meets Standard	The AFOD confirmed this is the procedure.
13. The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as; <ul style="list-style-type: none"> Performance of an autopsy. Person(s) to perform the autopsy. Obtaining State approved death certificates. Local transportation of the body. 	Meets Standard	Policy establishes the responsibilities of the facility, county, state and ICE in the event of a detainee death.
14. ICE staff follow established procedures to properly close the case of a deceased detainee.	Meets Standard	The AFOD stated that this was done in the case of the detainee death.

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

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

The facility is not equipped or staffed to house seriously ill detainees. As confirmed per a review of established policies and interviews with the AFOD and facility medical, administration and supervisory staff, procedures for appropriately responding to the death of an ICE detainee are in place.

One detainee death was reported since the last review. A 58 year old Hispanic male died in a local hospital on 03/04/2012. The detainee arrived at the facility on 11/26/2011. He was sent out to the local hospital twice for complaints of dizziness. A stress test and echocardiogram were performed, with no definitive diagnosis. The detainee was seen in the housing unit the morning of 02/16/2012 by the nurse administering medication. He was taken to the medical department complaining of dizziness, tiredness and weakness, was transferred to the local emergency room and was subsequently admitted to the hospital. His condition continued to deteriorate until his death on 03/04/2012. The autopsy report listed the cause of death as multi-organ failure due to sepsis, due to bronchopneumonia and long-term alcoholic liver disease.

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

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

(Use following format for dates: mm/dd/yyyy)

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

Section V ACTIVITIES

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

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

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL (Key: Z)		
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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	Policy addresses correspondence and other mail. This information is provided to all detainees via the handbook and is posted in the housing units.
2. The facility provides key information in English, Spanish, and other languages spoken by a significant number of detainees.	Meets Standard	
3. Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	Meets Standard	Incoming mail is delivered to the addressee within one business day of its entering the internal mail system.
4. Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	Meets Standard	Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system, excluding weekends and holidays.
5. Staff maintain a logbook-recording acceptance of priority, priority overnight, and certified mail delivered to the facility for a detainee.	Meets Standard	Incoming priority, overnight and certified mail and deliveries from a private package delivery service are recorded in a logbook maintained by the mailroom supervisor.
6. Staff do not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized in writing by the Facility Administrator or equivalent for prevailing security reasons.	Meets Standard	
7. Staff do not read incoming general correspondence without the Facility Administrator's prior approval.	Meets Standard	Per policy and practice, incoming general correspondence is not read unless prior approval has been granted by the facility administrator.
8. Staff do not inspect incoming Special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.	Meets Standard	Policy addresses the requirements of this component. Observed practice is consistent with policy.
9. Staff are prohibited from reading or copying incoming and outgoing Special Correspondence without the detainee present.	Meets Standard	

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

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL (Key: Z)		
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	Rating	Remarks (1000 Char Max)
10. Staff are only authorized to inspect outgoing correspondence or other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity.	Meets Standard	Policy specifies that outgoing general correspondence and other mail may be inspected and/or read without the detainee present only if authorized by the facility administrator and there is reason to believe the item presents a threat to the facility, endangers others or facilitates criminal activity.
11. Correspondence to a politician or to the media is processed as Special Correspondence and is not read or copied.	Meets Standard	
12. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	Meets Standard	The mailroom staff provides written notice to the sender and the addressee citing reasons for the rejection of incoming mail.
13. The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	Meets Standard	
14. Staff maintain a written record of every item removed from detainee mail.	Meets Standard	
15. The Facility Administrator or designee monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	Meets Standard	
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.	Meets Standard	If cash is removed from a detainee's person or property, the detainee signs a receipt confirming the amount. This receipt is subsequently signed by two detention officers attesting to its accuracy. The cash is then credited to the detainee's trust fund account. If discrepancies are alleged, an investigation is initiated.
17. Original identity documents (for example, passports, and birth certificates) are immediately removed and forwarded to ICE staff for placement in the A-files.	Meets Standard	
18. Staff provide the detainee a copy of his or her identity document(s) upon request.	Meets Standard	ICE handles all requests for copies of identity documents.
19. Staff dispose of prohibited items found in detainee mail in accordance with the Detention Standard on "Contraband".	Meets Standard	

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

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL (Key: Z)

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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	
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.	Meets Standard	Detainees are allowed weekly commissary privileges. They may purchase stamped envelopes at that time. Detainees that bear the cost of mailing are not restricted on the number of outgoing correspondence pieces. Indigent detainees are allowed to mail five pieces of special correspondence and three pieces of general correspondence each week, at no cost.
22. The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	Meets Standard	Free writing supplies are available from the housing unit detention officer, upon request.
23. SMU detainees have the same correspondence privileges as general population.	N/A	This facility does not have a special management unit.
24. Detainees have access to outside publications.	Meets Standard	

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

Review of policy and mailroom documentation/logbooks; interviews with the mailroom supervisor, the compliance manager and detainees; and observation of mailroom procedures and housing unit writing supply inventories indicated that detainees are able to correspond with family members, community agencies, governmental representatives and the media through an established mailroom service.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6), (b)(7)(c)

Completion Date: 11/08/2012

Reviewer Signature (for printed form submission):

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

PART 5 – 27. ESCORTED TRIPS FOR NON-MEDICAL EMERGENCIES (Key: AA)

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 N/A

Click the above button 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. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
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 	N/A	
2. The facility recognizes as "immediate family member" a parent (including stepparent or foster parent), brother, sister, child, and spouse (including common-law spouse).	N/A	
3. The CDF/IGSA facility notifies ICE of all detainee requests for non-medical escorts.	N/A	
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.	N/A	
5. Detainees who require overnight housing are placed in approved IGSA facilities.	N/A	
6. Each escort detail includes at least (b)(7)(E) officers.	N/A	
7. The detainee remains under constant, direct visual supervision of escorting staff.	N/A	
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.	N/A	
9. Escorting officers have the discretion to increase or decrease minimum restraints in accordance with written instruction, procedures and classification level of the detainee.	N/A	
10. Escort officers do not accept gifts/gratuities from a detainee, detainee's relative or friend for any reason.	N/A	

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

PART 5 – 27. ESCORTED TRIPS FOR NON-MEDICAL EMERGENCIES (Key: AA)

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 N/A

Click the above button 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. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
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. 	N/A	
12. The facility routinely subjects a detainee returning from an escorted trip to a search, urinalysis, breathalyzer, etc.	N/A	
13. Standard procedure requires the immediate return to the facility of any detainee who violates trip rules.	N/A	
14. The Field Office Director is the approving official for all non-medical escorted trips.	N/A	
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. 	N/A	

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

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

ICE conducts all escorted trips for non-medical emergencies.

Overall Rating: N/A

Reviewer Name (Printed): (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 5 – 28. MARRIAGE REQUESTS (Key: AB)

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	Rating	Remarks (1000 Char Max)
1. The Field Office Director or Facility Administrator considers detainee marriage requests on a case-by-case basis.	Meets Standard	The facility forwards all marriage requests to on-site ICE staff for review and approval.
2. The Field Office Director reviews every marriage request rejected by a Facility Administrator or IGSA. Rejections are documented.	Meets Standard	
3. It is standard practice to require a written request for permission to marry.	Meets Standard	The handbook specifies that written permission is required for a detainee to marry.
4. The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	Meets Standard	Written marriage requests must include documentation of marital intent from the intended spouse.
5. The Facility Administrator provides a written copy of his or her decision to the detainee and his or her legal representative.	Meets Standard	The facility forwards all marriage requests to on-site ICE staff for review and disposition.
6. When permission is denied, the Facility Administrator states the basis for his or her decision along with instructions on how the detainee can file an appeal.	Meets Standard	The facility forwards all marriage requests to on-site ICE staff for review and disposition.
7. The Facility Administrator provides the detainee with a place and time to make wedding arrangements.	Meets Standard	The facility will assist detainees with wedding arrangements when approved by ICE.
8. The detainee handbook explains the marriage request process.	Meets Standard	
9. In SPCs the Facility Administrator or highest ranking ICE official on-site is the only officer authorized to approve a request to marry.	Meets Standard	Marriage requests in this IGSA facility are approved by on-site ICE staff.

PART 5 – 28. MARRIAGE REQUESTS – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

The facility received 31 marriage requests in the past twelve months. Fifteen weddings occurred and one request was cancelled by the ICE field office. Fifteen other requests were approved; eight of the involved detainees were released prior to the weddings and in seven cases the ceremonies have not occurred due to the detainee not completing necessary requirements. The facility has created a procedure to ensure detainee marriage requests are provided to ICE for review and approval. Facility staff makes arrangements for detainees when requests are approved by ICE. Weddings are conducted in the visitation room.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 5 – 29. RECREATION (Key: AC)

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.

Standard N/A

Click the above button if outdoor recreation is offered. Items 19-27 will be marked "N/A".

Components	Rating	Remarks (1000 Char Max)
1. The Facility provides: <ul style="list-style-type: none"> An indoor recreation program. An outdoor recreation program. 	Meets Standard	The facility has established recreation and leisure programs for detainees. They include both indoor and outdoor activities.
2. A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.	Meets Standard	The facility had a population count of 341 during the inspection. The facility maintains a recreation specialist on staff.
3. Regular maintenance keeps recreational facilities and equipment in good condition.	Meets Standard	
4. The recreational specialist or trained equivalent supervises detainee recreation workers.	N/A	The facility does not use detainee recreation workers.
5. The recreational specialist or trainee equivalent oversees recreation programs for Special Management Unit and special-needs detainees.	Does Not Meet Standard	The facility has no special management unit (SMU). Therefore, no recreation specialist oversees recreation.
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	Meets Standard	Board games, playing cards and televisions are available in the housing unit dayrooms.
7. Outside activities are restricted to limited-contact sports.	Meets Standard	
8. Each detainee has the opportunity to participate in daily recreation.	Meets Standard	
9. Detainees have access to recreation activities outside the housing units for at least one hour daily.	Meets Standard	The facility has outdoor recreation yards attached to the housing units for detainee use.
10. Staff check all items for damage and condition when equipment is returned.	Meets Standard	
11. Staff conduct searches of recreation areas before and after use.	Meets Standard	
12. Recreation areas are under constant staff supervision.	Meets Standard	Facility staff supervises detainees during recreation.
13. Supervising staff are equipped with radios.	Meets Standard	Facility staff are issued radios when supervising detainee recreation.
14. The facility provides detainees in the SMU at least one hour of outdoor recreation time daily, five times per week.	Does Not Meet Standard	The facility has no SMU. Therefore, no outdoor recreation is provided in segregation.

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

PART 5 – 29. RECREATION (Key: AC)

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.

Standard N/A

Click the above button if outdoor recreation is offered. Items 19-27 will be marked "N/A".

Components	Rating	Remarks (1000 Char Max)
15. Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his or her recreation privileges.	Does Not Meet Standard	The facility has no SMU. Therefore, written explanations for denials of recreation privileges do not exist.
16. Special programs or religious activities are available to detainees.	Meets Standard	
17. All volunteers have completed an orientation program with documentation required before entering a secure portion of the facility where detainees are present.	Meets Standard	The facility requires volunteers to submit a formal application and a waiver of liability and to submit to a background check. When approved, volunteers are required to attend a facility orientation program prior to entering the facility.
18. Visitors, relatives or friends of detainees are not allowed to serve as volunteers.	Meets Standard	The facility does not allow friends, relatives or visitors to serve as volunteers.
19. If the facility has no outside recreation, are detainees considered for transfer after six months?	N/A	Outdoor recreation is offered.
20. If yes, written procedures ensure timely review of all eligible detainees.	N/A	Outdoor recreation is offered.
21. Case officers make written transfer recommendations about every six-month detainee to the Facility Administrator.	N/A	Outdoor recreation is offered.
22. The Facility Administrator documents all detainee-transfer decisions, whether yes or no.	N/A	Outdoor recreation is offered.
23. The detainee's written decision for or against an offered transfer documented in his or her A-file.	N/A	Outdoor recreation is offered.
24. Staff notify the detainee's legal representative of his or her decision to accept/decline a transfer.	N/A	Outdoor recreation is offered.
25. If no recreation is available, the ICE Field Office routinely review transfer eligibility for all detainees after 60 days.	N/A	Outdoor recreation is offered.
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.	N/A	Outdoor recreation is offered.
27. The detainee's legal representative is notified of the detainee's/Facility Administrator's decision.	N/A	Outdoor recreation is offered.

PART 5 - 29. RECREATION – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

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

PART 5 - 29. RECREATION – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

The facility has a recreation program established to ensure detainees have access to recreational and exercise programs keeping detainee safety and orderly facility operations in mind. Both indoor and outdoor recreation is offered depending on weather conditions. Sedentary activities are available for dayrooms that include games and televisions.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 5 – 30. RELIGIOUS PRACTICES (Key: AD)

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	Rating	Remarks (1000 Char Max)
1. Detainees are allowed to engage in religious services. When available, these services are provided in major languages spoken within the facility.	Meets Standard	Religious services are provided to the detainee population in English and Spanish.
2. Space is available for detainees to participate in religious services.	Meets Standard	The facility conducts religious programming in the contact visitation room. Multiple services are provided to ensure adequate space is available.
3. The facility allows detainees to observe the major "holy days" of their religious faith. • List any exceptions.	Meets Standard	The facility allows detainees to observe all major holy days. It does not list any exceptions.
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.	Meets Standard	The facility accommodates special meals, fasting and activity restrictions when requested by the detainee and approved by the chaplain.
5. Each detainee is allowed religious items in his/her immediate possession; refer to the Funds and Personal Property Standard.	Meets Standard	
6. Volunteer's credentials are checked and verified before allowing participation in detainee programs.	Meets Standard	The facility requires volunteers to submit a formal application and to submit to a background check. When approved, volunteers are required to attend a facility orientation program prior to entering the facility.
7. Members of faiths not represented by clergy may request to present their own services within security allowances.	Meets Standard	
8. Detainees in the Special Management Unit may participate in religious practices unless otherwise documented for the safety and security of the facility.	N/A	The facility does not have a Special Management Unit.

PART 5 – 30. RELIGIOUS PRACTICES – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

The facility maintains a religious program designed to create reasonable and equitable opportunities for detainees to participate in the practices of their respective faiths. The facility maintains a full-time staff chaplain and also uses seven religious volunteers to offer spiritual programming to the detainee population. The facility attempts to make reasonable accommodations while considering safety and security concerns.

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

PART 5 – 30. RELIGIOUS PRACTICES – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 5 – 31. TELEPHONE ACCESS (Key: AE)		
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	Rating	Remarks (1000 Char Max)
1. Detainees are allowed to access to telephones during established facility waking hours, including access to TTY devices.	Meets Standard	Detainees have access to housing unit telephones 24 hours a day, 7 days a week.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	Meets Standard	Telephone access is addressed in the handbook. All detainees are given a copy of the handbook.
3. Notification explaining the facilities telephone policy is in the Detainee Handbook.	Meets Standard	
4. Access rules, including updated telephone and consulate number, are posted in housing units.	Meets Standard	
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.	Meets Standard	
6. Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	Meets Standard	Each housing unit's bed space configuration and the phones available allow for one telephone for every 25 or fewer detainees.
7. Telephones are inspected daily by facility staff to ensure that they are in good working order.	Meets Standard	Daily equipment/telephone inspections are required by the detention officer post order.
8. Telephones are located a reasonable distance from televisions.	Meets Standard	
9. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	Meets Standard	TALTON is the detainee telephone service provider. Repair orders are submitted upon discovery of a telephone problem.
10. The facility administration monitors repair progress and takes appropriate measures to ensure that the required repairs are begun and completed timely.	Meets Standard	Command staff monitors the status of telephone repair work orders. Per staff, TALTON is prompt and thorough when responding to repair orders, usually within 24 hours of the reported problem.
11. Detainees are afforded a reasonable degree of privacy for legal phone calls.	Meets Standard	
12. A procedure exists to assist a detainee who is having trouble placing a confidential call.	Meets Standard	Protocol requires that detainees having trouble placing a confidential call be taken into a private office in the intake area in order to complete the call on an unmonitored telephone line.

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

PART 5 – 31. TELEPHONE ACCESS (Key: AE)

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	Rating	Remarks (1000 Char Max)
13. The facility provides the detainees with the ability to make non-collect (special access) calls.	Meets Standard	
14. Special Access calls are at no charge to the detainees.	Meets Standard	
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.	N/A	The detainee telephone system accommodates free special access calls.
16. No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".	Meets Standard	
17. Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.	Meets Standard	Command staff considers family to family telephone contact requests.
18. All telephone restrictions are documented.	Meets Standard	When telephone restrictions are imposed, they will be documented. There have been no telephone restrictions issued within the last twelve months.
19. The facility has a system for taking and delivering emergency detainee telephone messages.	Meets Standard	Emergency telephone messages are taken by recording the information onto a notice/message form. Staff delivers these messages with a command staff member and/or the chaplain present.
20. Phone call messages are given to detainees as soon as possible.	Meets Standard	
21. Detainees are allowed to return emergency phone calls as soon as possible.	Meets Standard	
22. Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	Does Not Meet Standard	This facility does not have a special management unit (SMU). Therefore, no phone calls are made in segregation.
23. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	Does Not Meet Standard	This facility does not have a disciplinary segregation unit. Therefore, no phone calls are made in segregation.
24. Detainees in disciplinary segregation are allowed phone calls for family emergencies.	Does Not Meet Standard	This facility does not have a disciplinary segregation unit. Therefore, no phone calls are made in segregation.

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

PART 5 – 31. TELEPHONE ACCESS (Key: AE)

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	Rating	Remarks (1000 Char Max)
25. Detainees in administrative segregation and protective custody are afforded the same telephone privileges as those in general population.	Does Not Meet Standard	There is no administrative segregation or protective custody unit at this facility. Therefore, no telephone privileges are offered.
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.	Meets Standard	Each detainee telephone has a placard posted on the phone stating calls are monitored. A similar announcement is made through the phone before a call is connected. Special access calls are not monitored.
27. The OIG phone number for reporting abuse is programmed into the detainee phone system. The reviewer must verify that the number is operable.	Meets Standard	The Office of Inspector General (OIG) phone system was contacted on 11/07/2012 from a housing unit detainee telephone using a pre-programmed number.
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	Meets Standard	Under contract with ICE, Spectrum Security staff performs twice weekly telephone serviceability checks in all housing units. Documentation confirmed the action.

PART 5 – 31. TELEPHONE ACCESS – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

Review of policy, Spectrum telephone serviceability worksheets and ICE weekly liaison checklist documentation; interviews with Spectrum staff, detainees, the chief of security and the compliance manager; observation of housing unit telephones and an OIG test call from a housing unit revealed that detainees are able to maintain family and community ties through an accessible and functioning telephone service.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 5 – 32. VISITATION (Key: AF)		
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	Rating	Remarks (1000 Char Max)
1. There is a written visitation procedure, schedule, and hours for general visitation.	Meets Standard	Policy and the handbook address visitation rules, schedule and hours.
2. The visitation hours are tailored to the detainee population and the demand for visitation. The minimum duration for a visit is 30 minutes.	Meets Standard	
3. The visitation schedule and rules are available to the public.	Meets Standard	The visitation schedule and rules are posted in the visitors lobby and on the facility website.
4. The hours for all categories of visitation are posted in the visitation waiting area.	Meets Standard	The visitation hours are posted in the visitors lobby and on the facility website.
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.	Meets Standard	Written copies of the visitation schedule, rules, hours and dress code are available from the visitors lobby officer in English and Spanish.
6. A general visitation log is maintained.	Meets Standard	
7. Detainees are permitted to retain authorized personal property items specified in the standard.	Meets Standard	
8. A visitor dress code is available to the public.	Meets Standard	The visitor dress code is posted in the visitors lobby and on the facility website.
9. Visitors are searched and identified according to standard requirements.	Meets Standard	
10. The requirement on visitation by minors is complied with.	Meets Standard	
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.	N/A	This facility allows visits 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.	N/A	This facility allows visits by minors.
13. Anytime a visit is denied, to either a general population detainee or SMU detainee, the denial is documented.	Meets Standard	If a visit is denied, it is documented. This facility does not have a special management unit.
14. Detainees in special housing are afforded visitation.	N/A	This facility does not have special housing.
15. Legal visitation is available seven (7) days a week, including holidays.	Meets Standard	Policy and practice allows legal visits seven days a week.

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

PART 5 – 32. VISITATION (Key: AF)		
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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	There are no time limits placed on attorney visits.
17. On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	Meets Standard	
18. Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	Meets Standard	
19. There are written procedures governing detainee searches.	Meets Standard	Policy addresses 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.	Meets Standard	All visitors pass through a metal detector and may be subject to an additional metal detector wand search if the lobby officer deems it necessary. Parcels, briefcase and other personal items must pass through an x-ray scanner.
21. Per the Standard, prior to each visit, legal service providers and assistants are identified.	Meets Standard	Legal representatives have their credentials validated by the lobby officer prior to entering the facility.
22. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	Meets Standard	
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.	Meets Standard	Tour requests are forwarded to the Field Office Director for approval.
24. Provisions for NGO visitation as stated in the Detention Standards are complied with.	Meets Standard	
25. Law enforcement officials, requesting to visit with a detainee, are referred to the ICE Facility Administrator for approval.	Meets Standard	Outside law enforcement officials requesting visitation with a detainee need prior approval from ICE.
26. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the Facility Administrator or ICE Field Office.	Meets Standard	Former detainees or aliens in proceedings may be allowed to visit pending approval by ICE.

PART 5 – 32. VISITATION – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

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

PART 5 – 32. VISITATION – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

Review of policy, log books and visitor lobby postings; interviews with the visitor lobby officer, the compliance manager and the Supervisory Detention and Deportation Officer; and observation of contractor/tools, entrance/exit procedures and the visiting areas revealed that detainees are able to maintain ties with family, the community, legal representatives and governmental/consulate officials through an established visitation program.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 5 – 33. VOLUNTARY WORK PROGRAM (Key: AG)

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.

Standard N/A

Click the above button if ICE detainees are not authorized to work at the IGSA facility. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
1. The facility has a voluntary work program.	Meets Standard	Policy and the handbook address the detainee volunteer work program.
2. Detainee housekeeping meets acceptable levels of neatness, cleanliness and sanitation standards.	Meets Standard	Visual observation of the facility during the inspection revealed that an acceptable level of housekeeping is maintained.
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.	Meets Standard	Detainees are not allowed to work outside the secure perimeter of the facility.
4. Written procedures govern selection of detainees for the Voluntary Work Program. <ul style="list-style-type: none"> The same procedures apply for replacement workers as for "new" workers. Staff follow written procedures. 	Meets Standard	Policy and procedure outline a means of selection and replacement for detainee job assignments.
5. Where possible, physically and mentally challenged detainees participate in the program.	Meets Standard	Policy and procedures support the inclusion of handicapped detainees in the work program.
6. The facility complies with work-hour requirements for detainees, not exceeding: <ul style="list-style-type: none"> Eight hours a day. Forty hours a week. 	Meets Standard	The facility does not allow detainees to work more than eight hours per day or forty hours per week.
7. Detainee volunteers ordinarily work according to a fixed schedule.	Meets Standard	Policy and procedure require that detainees work fixed shift assignments.
8. If a detainee is removed from a work detail, staff place the written justification for the action in the detainee's detention file.	Meets Standard	
9. Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	Meets Standard	Detainees are given written procedures and responsibilities prior to joining the work program.
10. The voluntary work program meets: <ul style="list-style-type: none"> OSHA standards NFPA standards ACA standards 	Meets Standard	The voluntary work program training addresses the items contained within this component.

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

PART 5 – 33. VOLUNTARY WORK PROGRAM (Key: AG)

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.

Standard N/A

Click the above button if ICE detainees are not authorized to work at the IGSA facility. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
11. Medical staff screen and formally certifies detainee food service volunteers; <ul style="list-style-type: none"> Before the assignment begins As a matter of written procedure 	Meets Standard	Policy and procedure dictate that detainees are seen by the medical department and are medically cleared prior to assuming a work assignment.
12. Detainees receive safety equipment/ training sufficient for the assignment	Meets Standard	
13. Proper procedure is followed when an ICE detainee is injured on the job.	Meets Standard	Policy and procedure require the notification of ICE officials if a detainee sustains a work-related injury.

PART 5 – 33. VOLUNTARY WORK PROGRAM – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

Policy and procedure allow detainees the opportunity to work and earn money while assigned to the facility. Detainees work in various jobs within the facility providing support; they are only allowed to work inside the facility's secure perimeter.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

Section VI JUSTICE

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

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

PART 6 – 34. DETAINEE HANDBOOK (Key: AH)

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	Rating	Remarks (1000 Char Max)
1. The facility has a detainee handbook. Each detainee receives a copy of the local handbook and the ICE National Detainee Handbook.	Meets Standard	Detainees are issued the ICE National Detainee Handbook and the facility supplement prior to admission. Signed receipts document that each detainee has received his copies.
2. The detainee handbook is written in English and translated into Spanish, and other languages spoken by significant numbers of detainees in that facility.	Meets Standard	Both handbooks are produced and distributed in English and Spanish.
3. A procedure for requesting interpretive services for essential communication has been developed.	Meets Standard	The handbook instructs detainees on the process for requesting interpretive services.
4. Orientation materials are read to detainees who cannot read, or they are provided the material via audio or video recordings.	Meets Standard	
5. The handbook supplements the facility orientation video where one is provided.	Meets Standard	The facility uses an orientation video to assist detainees with orientation. It is broadcast in English and Spanish.
6. The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.	Meets Standard	Handbook revisions are posted in the housing units.
7. There is an annual review of the handbook by a designated committee or staff member.	Meets Standard	Policy requires an annual review of the detainee handbook by staff. The current edition was revised 10/05/2012.
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. 	Meets Standard	The handbook addresses all of the bulleted items listed in this component.
9. The detainee handbook states in clear language basic detainee responsibilities.	Meets Standard	
10. The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.	Meets Standard	The handbook addresses the methods of classification, levels of classification and the classification appeals process.

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

PART 6 – 34. DETAINEE HANDBOOK (Key: AH)

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	Rating	Remarks (1000 Char Max)
11. The handbook states when a medical examination will be conducted.	Meets Standard	The handbook advises detainees that a complete medical examination is to be conducted within fourteen days of arrival at the facility.
12. The handbook describes the facility, housing units, dayrooms, In-dorm activities and special management units.	Meets Standard	
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.	Meets Standard	The handbook includes the items contained within this component.
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.	Meets Standard	The handbook states razors are issued each morning. They are to be returned after use. The handbook specifies that detainees attending court are offered the opportunity to shave first.
15. The handbook describes barber hours and hair cutting restrictions.	Meets Standard	
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.	Meets Standard	The handbook addresses all of the telephone procedures listed in this component.
17. The handbook addresses religious programming.	Meets Standard	
18. The handbook states times and procedures for commissary or vending machine usage. (where available)	Meets Standard	
19. The handbook describes the detainee voluntary work program.	Meets Standard	
20. The handbook describes the library location and hours of operation and law library procedures and schedules.	Meets Standard	The handbook describes general library and law library procedures, schedules and hours of operation.
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.	Meets Standard	

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

PART 6 – 34. DETAINEE HANDBOOK (Key: AH)

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	Rating	Remarks (1000 Char Max)
22. The handbook/supplement provides local ICE contact information.	Meets Standard	The handbook lists the mailing address of the Los Angeles ICE Field Office.
23. The handbook describes the facility contraband policy.	Meets Standard	
24. The handbook describes the facility visiting hours and schedule and visiting rules and regulations.	Meets Standard	
25. The handbook describes the correspondence policy and procedures.	Meets Standard	
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. 	Meets Standard	The handbook provides detainees a summary of the disciplinary process, prohibited acts, sanctions and time limits for action.
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. 	Meets Standard	The handbook describes the items listed in this component, including the process for filing a complaint of officer misconduct with the Department of Homeland Security and policy guaranteeing against staff retaliation.
28. The handbook describes the medical sick call procedures for general population and segregation.	Meets Standard	The handbook describes for the general population process for filing sick call requests to access medical care. There is no segregation housing at this facility.
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. 	Meets Standard	The handbook discusses indoor and outdoor recreation as well as in dorm activities.

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

PART 6 – 34. DETAINEE HANDBOOK (Key: AH)

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	Rating	Remarks (1000 Char Max)
30. The handbook describes the detainee dress code for daily living; and work assignments and the meaning of color-coded uniforms.	Meets Standard	
31. The handbook specifies the rights and responsibilities of all detainees.	Meets Standard	
32. Detainees are required to sign for the handbook to ensure accountability.	Meets Standard	Detainees are issued the ICE National Detainee Handbook and local supplement prior to admission to this facility. Signed receipts document that each detainee has received his copies.
33. Orientation materials are provided to illiterate detainees either orally or via audio/video tapes in a language they can understand.	Meets Standard	

PART 6 - 34. DETAINEE HANDBOOK – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

The facility provides a local handbook as a supplement to the ICE National Detainee Handbook. It provides a comprehensive orientation and outline of facility policy and procedures. It includes subject matter related to facility rules, the disciplinary system, mail, the grievance process and medical care.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 6 – 35. GRIEVANCE SYSTEM (Key: AI)		
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	Rating	Remarks (1000 Char Max)
1. Detainees are informed about the facility's informal and formal grievance system.	Meets Standard	Policy outlines an informal and formal grievance process. The grievance system is also explained in the handbook.
2. The admissions process includes providing each new arrival with a copy of the detainee handbook (or equivalent).	Meets Standard	Detainees are given copies of the ICE National Detainee Handbook and a local supplement prior to admission.
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. 	Meets Standard	The handbook addresses the items contained within 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.	Meets Standard	Policy and the handbook encourage detainees to seek informal resolutions to complaints. There is a five day window within which a detainee may make an informal complaint formal.
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. 	Meets Standard	The facility offers detainees a grievance process. Detainees can appeal decisions with which they do not agree to a grievance committee. Detainees may request assistance when needed.
6. Facility has written procedures for identifying and handling a time-sensitive emergency grievance.	Meets Standard	
7. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	Meets Standard	The facility offers detention staff annual training on how to identify and expedite emergency grievances.
8. Staff shall not harass, discipline, punish or otherwise retaliate against a detainee who files a complaint or grievance.	Meets Standard	Policy and the local handbook specify that staff shall not harass or punish detainees for filing a grievance.

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

PART 6 – 35. GRIEVANCE SYSTEM (Key: AI)

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	Rating	Remarks (1000 Char Max)
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. 	Meets Standard	The facility maintains an electronic grievance log. If nuisance complaints are received, they are noted.
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.	Meets Standard	
11. Staff are required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	Meets Standard	The facility forwards all detainee grievances concerning staff misconduct to ICE.
12. Informal resolution of a written grievance is documented in the detainee's Detention File.	Meets Standard	
13. Staff comply with the requirement to report allegations of officer misconduct to a supervisor or higher-level official in his or her chain of command, and/or to ICE/DRO Office of Professional Responsibility and/or the DHS Inspector General.	Meets Standard	The facility requires staff to notify a supervisor of any allegations of misconduct. Policy requires the notification of ICE if a misconduct allegation occurs
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 	Meets Standard	Grievances and their appeals are addressed in the handbook. Detainees may appeal grievance decisions to the facility administrator.
15. In SPCs/CDFs, the detainee has a reasonable timeframe after the incident or informal-grievance outcome to file a formal grievance.	Meets Standard	Policy gives detainees five days to submit formal or informal grievances.

PART 6 – 35. GRIEVANCE SYSTEM – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

The facility has an established grievance policy and procedures to protect detainee rights and ensure they are treated fairly. It offers detainees informal and formal avenues to address concerns they have within the facility to management staff.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL (Key: AJ)		
This Detention Standard protects detainees' rights by ensuring their access to courts, counsel, and legal materials.		
Components	Rating	Remarks (1000 Char Max)
1. The facility provides a designated law library for detainee use.	Meets Standard	
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. 	Meets Standard	The LexisNexis electronic law library serves as the law library system.
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. 	Meets Standard	The law library consists of two dedicated rooms with six operable computer terminals in each. Supplies, printers and photocopy equipment are available in each room.
4. The library contains a sufficient number of chairs, is well lit and is reasonably isolated from noisy areas.	Meets Standard	
5. The law library is adequately equipped with typewriters, computers or both and has sufficient supplies for daily use by the detainees.	Meets Standard	
6. Detainees are provided with the means to save legal work in a private electronic format for future use.	Meets Standard	Detainees are issued a flash drive, at no charge, to store their casework/files.
7. The facility subscribes to updating services where applicable and legal materials requiring updates are current.	Meets Standard	The October 2012 edition of LexisNexis software has been installed in all law library computers. Software updates are routinely provided and installed upon receipt.
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.	Meets Standard	Outside publications and legal materials are allowed into the law library system if approved by ICE.
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.	Meets Standard	

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

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL (Key: AJ)

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

Components	Rating	Remarks (1000 Char Max)
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.	Meets Standard	The law library is open Monday through Friday from 7:00 a.m. to 4:30 p.m. Individual use time is restricted to one hour each day if demand exceeds capacity. According to law library staff, this is a rare occurrence. In the event demand rises, detainees with pressing court deadlines will receive priority access.
11. Detainees may request material not currently in the law library. Each request is reviewed and where appropriate an acquisition request is initiated and timely pursued. Request for copies of court decisions are accommodated within 3 – 5 business days.	Meets Standard	Outside case law is allowed into the law library system with ICE approval. Accommodation to these requests is subject to source response times.
12. The facility permits detainees to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	Meets Standard	
13. Staff ensure that illiterate or non-English-speaking detainees without legal representation receive more than access to English-language law books after indicating their need for help.	Meets Standard	Comprehension assistance is provided to those in need through the use of internal interpreters, outside language line resources and individual tutorial sessions.
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.	Meets Standard	Printed legal materials are kept in the detainees' possession. Electronically stored legal materials are kept on a flash drive maintained in the law library. These are available upon request from law library staff. This facility does not have a special management unit.
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.	N/A	This facility does not have administrative or disciplinary segregation units.
16. All denials of access to the law library fully documented.	Meets Standard	Documentation of denials for law library access will be made, when imposed. There have been no such denials over the last twelve months.

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

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL (Key: AJ)

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

Components	Rating	Remarks (1000 Char Max)
17. Facility staff inform ICE Management when a detainee or group of detainees is denied access to the law library or law materials.	Meets Standard	ICE would be notified of denials of law library access. There have been no denials of law library access over the last twelve months.
18. Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	Meets Standard	
19. Indigent detainees are provided with free envelopes and stamps to mail related to legal matters.	Meets Standard	

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

Review of policy; observation of the law library rooms and interviews with ICE staff, law library staff, the compliance manager, the law library equipment maintenance staff and detainees revealed that detainees have access to courts, counsel, legal materials, writing/mail supplies and photocopy/prINTER equipment.

Overall Rating: Meets Standard

Reviewer Name (Printed):

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

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 6 – 37. LEGAL RIGHTS GROUP PRESENTATIONS (Key: AK)

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.

Standard N/A

Click the above button if No Group Presentations were conducted within the past 12 months. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
1. The Field Office is responsive to requests by attorneys and accredited representatives for group presentations.	Meets Standard	ICE approves requests for presentations by outside legal rights groups.
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.	Meets Standard	The facility is assigned the responsibility, by ICE, to coordinate approved legal rights group presentations.
3. The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.	Meets Standard	Policy dictates procedures to be followed when the facility administrator rejects or requests modifications to legal rights group presentation materials.
4. Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	Meets Standard	
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.	Meets Standard	All detainees are allowed to attend group legal rights presentations. There have been no denials to attend these presentations over the last twelve months.
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.	Meets Standard	
7. Detainees in segregation, unable to attend for security reasons may request separate sessions with presenters. Such requests are documented.	N/A	This facility does not have a segregation unit.
8. Interpreters are admitted when necessary to assist attorneys and other legal representatives.	Meets Standard	
9. Presenters are afforded a minimum of one hour to make the presentation and additional time to conduct a question-and-answer session.	Meets Standard	If approved by ICE, a post-presentation question and answer session would be allowed.
10. Staff permit presenters to distribute ICE/DRO-approved materials.	Meets Standard	

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

PART 6 – 37. LEGAL RIGHTS GROUP PRESENTATIONS (Key: AK)

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.

Standard N/A

Click the above button if No Group Presentations were conducted within the past 12 months. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
11. The facility permits presenters to meet with small groups of detainees to discuss their cases after the group presentation. ICE/DRO or authorized detention staff are present but do not monitor conversations with legal providers.	Meets Standard	If approved by ICE, a post-presentation question and answer session would be allowed. ICE staff would observe the discussion.
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.	Meets Standard	Legal rights group presenters who have had their privileges suspended would receive written notice of the action from ICE.
13. The facility plays ICE/DRO-approved videotaped presentations on legal rights, at regular opportunities at the request of outside organizations.	Meets Standard	The "Know Your Rights" video is broadcasted in all housing units twice each day on the in-house cable TV network.
14. A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request	Meets Standard	
15. The facility maintains equipment for viewing approved electronically formatted presentations.	Meets Standard	The facility has equipment to accommodate any presentation broadcast format.

PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

Review of policy, observation of the in-house broadcast equipment and video programming and interviews with the compliance manager and the Supervisory Detention and Deportation Officer revealed detainee rights to have access to and be informed of U.S. immigration law and procedures are protected and supported by ICE and the facility.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6), (b)(7)(c) **Completion Date:** 11/8/2012

Reviewer Signature (for printed form submission):

Section VII ADMINISTRATION & MANAGEMENT

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

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

PART 7 – 38. DETENTION FILES (Key: AL)		
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	Rating	Remarks (1000 Char Max)
1. A Detention File is created for every new arrival whose stay will exceed 24 hours.	Meets Standard	
2. The detainee Detention File contains either originals or copies of documentation and forms generated during the admissions process.	Meets Standard	Active detention files include ICE I-203 and I-213 forms, classification instruments, property receipts, request forms, grievance forms, orientation materials receipts and various other documents generated during a detainee's stay.
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 	Meets Standard	All of the bulleted items listed in this component are or would be maintained in the detention file.
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.	Meets Standard	Detention files are located in a locked, controlled-access room secured by a restricted key. Access requires shift supervisor approval.
5. The Detention File remains active during the detainee's stay. When the detainee is released from the facility, staff add copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent and other documentation.	Meets Standard	Upon a detainee's release, the detention file is deactivated. Copies of all release documentation are gathered and then placed in the closed-out file.
6. The officer closing the Detention File makes a notation that the file is complete and ready to be archived.	Meets Standard	When closing a detention file, a record clerk will validate the file content as complete by signing and dating the outside of the file indicating its readiness for archiving.
7. Staff make copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.	Meets Standard	
8. Appropriate staff have access to the Detention Files and other departmental requests are accommodated by making a request for the file. Each file is properly logged out and in by a representative of the responsible department.	Meets Standard	The records clerk maintains a logbook that records the file name, release/return date, requestor/department and authorizing records clerk.
9. Electronic record-keeping systems and data are protected from unauthorized access.	Meets Standard	Electronic data is password protected.

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

PART 7 – 38. DETENTION FILES (Key: AL)

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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	
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.	Meets Standard	
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.	Meets Standard	The record clerks are assigned responsibilities to keep photocopy supplies available and the equipment in good working order.
13. The Detention Operations Supervisor or equivalent can direct certain documents be added to a detainee's detention File.	Meets Standard	
14. Archived files are purged after six years by shredding or burning.	Does Not Meet Standard	Archived files are currently kept on-site permanently. The standard states that detention files may be purged as opposed to the component which requires such purging. The facility adheres to the standard.
15. Field Offices maintains detention files on detainees housed in IGSA Facilities as needed. These files are maintained for a minimum of 18 months.	Meets Standard	

PART 7 – 38. DETENTION FILES – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

Interview with the intake supervisor, a records clerk and the compliance manager; review of detention files and observation of the file storage area and photocopy equipment/supplies revealed that detention files are created at intake, are securely stored, include the required documentation and are protected by controlled access.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 7 – 39. NEWS MEDIA INTERVIEWS AND TOURS (Key: AM)

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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	According to the Supervisory Detention and Deportation Officer (SDDO), the Field Office Director (FOD) approves all media/public interview requests.
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.	Meets Standard	
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.	Meets Standard	ICE protocol requires the FOD to consult with ICE headquarters regarding media sensitive interviews.
4. Signed released forms are obtained and retained in the detainee's a-file from any media representatives who photographed or recorded any detainee in any way that would individually identify him or her.	Meets Standard	Signed release waivers are required from all detainees approved for media photo/recording sessions.
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. 	Meets Standard	ICE has an established protocol for managing press pools. All of the bulleted items listed in this component are addressed in these procedures.

PART 7 - 39. NEWS MEDIA INTERVIEWS AND TOURS – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

An interview with the SDDO revealed that the Field Office is responsible for approving all media/public interview requests, and the SDDO is responsible for managing the approved events.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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	Rating	Remarks (1000 Char Max)
1. The facility conducts appropriate orientation, initial training, and annual training for all staff, contractors, and volunteers.	Meets Standard	Policy outlines a comprehensive training plan for staff, contractors and volunteers. It includes initial, annual and specialized training and education.
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.	Meets Standard	Staff are trained in accordance with their job duties and functions within the scope of facility operations.
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.	Meets Standard	The training director has completed a Training For Trainers course.
4. Training is governed and guided by a training plan that is reviewed and approved annually by the facility administrator.	Meets Standard	The training plan has been approved by the facility administrator.
5. An accurate and complete record is maintained of all formal training activities in: <ul style="list-style-type: none"> Individual training folders, Other training records systems, and/or Electronic systems. 	Meets Standard	The facility maintains electronic training records and hard copies. Each employee has a master training record containing all training documentation. It is maintained by the training department.

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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	Rating	Remarks (1000 Char Max)
<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 	Meets Standard	Each new employee, contractor and volunteer completes an initial training program including the subjects listed in this component.

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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	Rating	Remarks (1000 Char Max)
<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. 	Meets Standard	Clerical/support employees complete an initial training program that includes the subjects listed in this component.

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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	Rating	Remarks (1000 Char Max)
<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. 	Meets Standard	Professional employees complete an initial training program that includes the subjects listed in this component.

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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	Rating	Remarks (1000 Char Max)
<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. 	Meets Standard	Health care employees complete an initial training program that includes the subjects listed in this component.

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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	Rating	Remarks (1000 Char Max)
<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. 	Meets Standard	Security staff members complete a comprehensive training program that includes the subjects listed in this component.
<p>11. Situation Response Teams (SRTs) receive:</p> <ul style="list-style-type: none"> • Specialized training before undertaking their assignments. 	Meets Standard	Situation response team members are required to attend forty hours of initial training and eight hours of training each month to maintain membership.
<p>12. Facility management and supervisory staff receive:</p> <ul style="list-style-type: none"> • Management and Supervisory training 	Meets Standard	Management and supervisory staff receive annual training. It includes supervisory functions within their scope of work.

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	(b)(7)(E)
14. (MANDATORY) All personnel authorized to use firearms demonstrate competency in their use at least annually.	Meets Standard	
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.	Meets Standard	Chemical agent training includes pre and post-exposure training as well as decontamination procedures. Employees authorized to administer chemical agents receive annual recertification training.
16. All staff receives orientation and annual training on the facility's drug-free workplace program. Typical contents are: <ul style="list-style-type: none"> • Staff, contractors, and volunteers prohibited from: • Using illegal drugs. • Possessing illegal drugs except in the authorized performance of official duties. • Procedures to be used to ensure compliance. • Opportunities available for treatment and/or counseling for drug abuse. • Penalties for violation of the policy. 	Meets Standard	Staff, contractors and volunteers are required to sign a statement acknowledging their completion and compliance with the drug-free workplace program.
17. New staff are required to acknowledge in writing that they have reviewed and understand the facility's drug-free workplace program, and a copy of the signed acknowledgement is maintained in that person's personnel file.	Meets Standard	

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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	Rating	Remarks (1000 Char Max)
<p>18. All staff are trained during orientation and annually thereafter, regarding the facility's code of ethics.</p> <p>Typical contents are:</p> <ul style="list-style-type: none"> • 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. 	Meets Standard	Staff receives annual ethics and compliance training. Staff is required to sign an acknowledgement of having received the training. It is maintained by the training director.
<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>	Meets Standard	
<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. 	Meets Standard	Staff attends annual training on first aid and cardiopulmonary resuscitation, using American Heart Association training materials. The facility conducts quarterly medical and fire safety drills to ensure staff respond in the required four-minute timeframe. Staff also completes training on hunger strikes, suicide prevention and intervention.

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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	Rating	Remarks (1000 Char Max)
<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. 	Meets Standard	Comprehensive sexual abuse prevention training is included in the initial orientation for staff. The training includes the items listed in 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. 	Meets Standard	Comprehensive suicide prevention and intervention training is included in the initial orientation and annual in-service training. The training includes the topics listed in this component.
<p>23. All staff are trained during orientation and annually to recognize the signs of a hunger strike and on the procedures for referral for medical assessment.</p>	Meets Standard	
<p>24. All staff are trained in proper procedures for the care and handling of keys. Orientation training shall be accomplished before staff are issued keys, and key control shall be among the topics covered in annual training. Ordinarily, such training is done by the Security Officer or Key Control Officer.</p>	Meets Standard	

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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	Rating	Remarks (1000 Char Max)
<p>25. Through ongoing (at least annual) training, all detention facility staff are made aware of their responsibilities to control situations involving aggressive detainees. At a minimum, training shall include:</p> <ul style="list-style-type: none"> • The requirements of this Detention Standard • The use of force continuum • Communication techniques • Cultural diversity • Dealing with the mentally ill • Confrontation-avoidance techniques • Approved methods of self-defense • Force cell-move techniques • Communicable diseases, particularly precautions to be taken for use of force • Application of restraints (progressive and hard) • Reporting procedures. 	Meets Standard	Staff attends annual training which includes the topics contained in 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>	Meets Standard	The facility offers staff tuition assistance for those wanting to attend college classes.

PART 7 – 40. STAFF TRAINING – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

The facility maintains a comprehensive training plan that ensures staff are properly trained and competent in their assigned duties. Follow-up training is conducted annually in forty-hour blocks of instruction, with specialized training offered for staff wishing to gain additional knowledge. Staff indicated that training was available, useful and presented by instructors who were knowledgeable and enjoyable. Staff training records reviewed during the inspection were inclusive of documentation of all training provided.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

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

PART 7 - 41. TRANSFER OF DETAINEES (Key: AO)		
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	Rating	Remarks (1000 Char Max)
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. 	Meets Standard	Within 24 hours of a detainee's arrival at a new facility, the deportation officer will notify the attorney of record (G-28 designee) of the detainee's location. Detention file and A-file content is updated to denote the movement and notification.
2. Notification includes the reason for the transfer and the location of the new facility,	Meets Standard	
3. The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	Meets Standard	
4. The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	Meets Standard	
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. 	Meets Standard	Policy addresses all of the bulleted items listed in this component.
6. The detainee is provided with a completed Detainee Transfer Notification Form.	Meets Standard	
7. Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	Meets Standard	ICE I-203 and I-216 forms are used as authorization to release/move detainees from the facility.
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. 	Meets Standard	All of the bulleted items listed in this component are addressed when medical transfers occur.

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

PART 7 - 41. TRANSFER OF DETAINEES (Key: AO)

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	Rating	Remarks (1000 Char Max)
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.	Meets Standard	
10. For medical transfers, transporting officers receive instructions regarding medical issues.	Meets Standard	Transport officers are provided medical instructions for their transferees on a need-to-know basis.
11. Detainee's funds, valuables and property are returned and transferred with the detainee to his or her new location.	Meets Standard	Detainee funds and property travel with the detainee in the transport vehicle.
12. Transfer and documentary procedures outlined in Section C and D are followed.	Meets Standard	
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.	Meets Standard	
14. Meals are provided when transfers occur during normally schedule meal times.	Meets Standard	When transfer/travel times intersect with scheduled meal times, the dietary department provides sack lunches for all transport vehicle occupants.
15. An A-File or work folder accompanies the detainee when transferred to a different Field Office or sub-office.	Meets Standard	Detainee files generally travel with the detainee in the transport vehicle.
16. A-Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.	Meets Standard	If a detainee file does not accompany the detainee in the transport vehicle, the file is sent the next business day, via an overnight service such as UPS or FedEx, to the new responsible field office.

PART 7 - 41. TRANSFER OF DETAINEES – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

Review of policy and interviews with the Supervisory Detention and Deportation Officer, the dietary manager and intake/release staff revealed that transfers out of the facility are authorized, documented and processed by informed staff through a safe and secure movement system.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/8/2012

Reviewer Signature (for printed form submission):

DOCUMENT CHECK

The document check should be run upon completion of the review form and PRIOR to submission to DHS-ICE. This check will help ensure the form is ready for upload to DHS-ICE systems. Errors indicate issues were found with specific data entered into the form. Items Not Rated indicate there were line items found on the form which remain in a "Not Rated" status. This action will also update the table of contents.

The check will take several minutes to complete, during which the screen will flash.

Review Document Issue Summary		Ratings Check Status			
Check Document:	<input type="button" value="Run Check"/>	Error(s) Found:	0	Items Not Rated:	0
Errors: <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>					
Items Not Rated: <div style="border: 1px solid black; height: 350px; margin-top: 5px;"></div>					

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



U.S. Immigration
and Customs
Enforcement

MEMORANDUM FOR:

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

MAY 29 2013

(Acting) Field Office Director

FROM:

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

Assistant Director for Custody Management

SUBJECT:

Adelanto Detention Center East Facility Annual Review

The annual review for the Adelanto Detention Center East conducted on November 6-8, 2012, in Adelanto, California has been received. A final rating of **Meets Standards** has been assigned. This review is now closed.

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

- 1) Notify the facility **within** five business days of receipt of this memorandum. Notification shall include copies of the Form G-324 Detention Facility Review Form, the G-324 Worksheet, LCI Summary Memorandum, and a copy of this memorandum.

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

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

, Deputy Assistant Director, Detention Management, at (202) 732-

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

cc: Official File

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

www.ice.gov

ICE 2012FOIA03030.003049

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
11/06/2012 - 11/08/2012

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
Unknown

Previous Rating
☐ Meets Standards ☐ Does Not Meet Standards

D. Name and Location of Facility

Name
Adelanto Detention Center East
Address (Street and Name)
10400 Rancho Road
City, State and Zip Code
Adelanto, CA 92301
County
San Bernardino
Name and Title of Facility Administrator
(Warden/OIC/Superintendent)
(b)(6), (b)(7)(c) Warden
Telephone # (Include Area Code)
980-875 (b)(6), (b)(7)(c)
Field Office / Sub-Office (List Office with oversight responsibilities)
Los Angeles / on-site
Distance from Field Office
84 miles / on-site

E. ICE Information

Name of Inspector (Last Name, Title and Duty Station)
(b)(6), (b)(7)(c) / LCI / Nakamoto Group
Name of Team Member / Title / Duty Location
(b)(6), (b)(7)(c) / Medical SME / Nakamoto Group
Name of Team Member / Title / Duty Location
(b)(6), (b)(7)(c) / Safety/Food Service SME / Nakamoto Group
Name of Team Member / Title / Duty Location
(b)(6), (b)(7)(c) / Security SME / Nakamoto Group
Name of Team Member / Title / Duty Location
/ /

F. CDF/IGSA Information Only

Contract Number
EROIGSA-11-0003
Date of Contract or IGSA
May 27, 2011
Basic Rates per Man-Day
99.00
Other Charges: (If None, Indicate N/A)
43059.00 per month-Transportation; \$0.50 per gallon- Fuel;
\$1.00 per day-Detainee work program;

Estimated Man-days Per Year
237,250 (@ 650x365 days)

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
April 1991
Date Last Remodeled or Upgraded
March 2011
Date New Construction / Bedspace Added
N/A
Future Construction Planned
☐ Yes ☒ No Date: N/A
Current Bedspace
650
Future Bedspace (# New Beds only)
Number: N/A Date: N/A

J. Total Facility Population

Total Facility Intake for previous 12 months
5422
Total ICE Mandays for Previous 12 months
225,006

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	650	650	652
Adult Female	N/A	N/A	N/A
<input type="checkbox"/> Facility holds Juveniles Offenders 16 and older as Adults			

M. Average Daily Population

	ICE	USMS	Other
Adult Male	240	N/A	N/A
Adult Female	N/A	N/A	N/A

N. Facility Staffing Level

Security: (b)(7)(c) Support: (b)(7)(c)

Significant Incident Summary Worksheet

For The Nakamoto Group 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.)	5/P	14/P	8/P	n/a
	With Weapon	0	0	0	0
	Without Weapon	5	14	8	0
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	n/a	1/P	3/P	n/a
	With Weapon	0	0	0	0
	Without Weapon	0	1	3	0
Number of Forced Moves, incl. Forced Cell moves ³		0	0	0	0
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		0	0	0	0
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
	Type (C=Chair, B=Bed, BB=Board, O=Other)	n/a	n/a	n/a	n/a
Number of Times Canines Used in Facility		0	0	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	0	0	0
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	79	107	204	n/a
	# Resolved in favor of Offender/Detainee	38	8	27	n/a
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	1/I	0	0	0
	Number	1	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	48	89	99	0
	# Psychiatric Cases referred for Outside Care	6	4	1	0

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

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

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

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

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

LCI Review Assurance Statement

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

Lead Compliance Inspector: (Print Name)

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

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

Title & Duty Location

Lead Compliance Inspector, The Nakamoto Group, Inc.

Date

11/08/2012

Team Members

Print Name, Title, & Duty Location

(b)(6), (b)(7)(c) Medical SME, Nakamoto Group, Inc.

Print Name, Title, & Duty Location

(b)(6), (b)(7)(c) Food/Safety SME, Nakamoto Group, Inc.

Print Name, Title, & Duty Location

(b)(6), (b)(7)(c), Security SME, Nakamoto Group, Inc.

Print Name, Title, & Duty Location

Recommended Rating:



Meets Standards



Does Not Meet Standards

Comments: The Adelanto Detention Center East is operated by The GEO Group, Inc. The facility was constructed in April 1991 by the city of Adelanto, California. GEO purchased the facility and completed renovations in March 2011; the first ICE detainees were received in August 2011. All seven housing units are dormitory style, ranging in bed capacity from 38 to 107. The facility houses only adult male ICE detainees. The average length of stay is 29 days. ICE maintains a sub-office in this facility.

The facility does not have a Special Management Unit for housing detainees in administrative or disciplinary segregation and/or protective custody status. The facility does not have Tasers on its equipment inventory and does not have a canine unit or allow outside agency canine units to enter the facility. There is no medical co-pay system at this facility.

One ICE detainee death was reported since the last review. A 58 year old Hispanic male died in a local hospital on March 4, 2012. The detainee arrived at the facility on November 26, 2011. He was sent to the local hospital twice for complaints of dizziness. A stress test and an echocardiogram were performed with no definitive diagnosis. The detainee was seen in the housing unit the morning of February 16, 2012 by the nurse administering medications. He was taken to the medical department complaining of dizziness, tiredness and weakness. He was transported to the local emergency room and subsequently admitted to the hospital. His condition continued to deteriorate and he died on March 4, 2012. The autopsy report lists the cause of death as multi-organ failure due to sepsis, due to bronchopneumonia, due to chronic alcoholic liver disease.

A copy of the last annual inspection report and the dates and results of that inspection were not available to the inspection team.