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)

Facilty Information							
Facility Name: Broward Transitional Center					Pre-Occupancy:		
Facility Type: CDF Intergovernmental Service Agr	eement	(IGSA), ICE Service Proce	essing Cent	er (SPC), ICE Contr	act Detenti	on Facility (C	:DF)
Address: 3900) Powe	erline Road					
City: Pompano Beach				State: Florida	1	Z	Zip Code: 33073
County: Brow	County: Broward						
CEO Name (b)(6), (b)(7)(CEO Name (b)(6), (b)(7)(c) CEO Title: Warden				Warden		
Review Information (u	se follov	wing format for dates: m	m/dd/yyyy)			
Start Date: 10/30/2012End Date: 11/1/2012Review Type: Headquarters					eadquarters		
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 Edite are required, contact ICE HO for an undated form				

If Edits are required, contact ICE HQ for an updated form.

Introduction to the G324A Over 72hour Facility Detention Inspection Worksheets

What is "Performance-Based"?

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

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

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

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

Worksheet Overview

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

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

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

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

Worksheet Completion

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

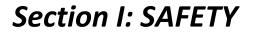
The RIC will review facility outcome measures data and provide analysis of the data to describe facility performance and trends. In a few instances outcome measures are not provided for some the NDS because after careful consideration of the standard the assessment process has been determined to be more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

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Emergency Plans Environmental Health and Safety Transportation (By Land)

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	is Detention Standard ensures a safe environment for detaine		• • • • •		
qu	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	Facility policy states that no detainee or detainee groups are to exercise control or authority over other detainees.		
2.	Detainees are protected from:				
	Personal abuse				
	Corporal punishment				
	Personal injury	Meets Standard			
	• Disease				
	Property damage				
	Harassment from other detainees				
3.	Staff are trained to identify signs of detainee unrest.		Staff members are trained to		
•	What type of training and how often?	Meets Standard	identify signs of detainee unrest during pre-service training and again during annual in-service training.		
4.	Staff effectively disseminate information on facility climate, detainee attitudes, and moods to the Facility	Meets Standard			
	Administrator.	Wielets Standard			
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 fire safety manager is assigned responsibility for the emergency plans and their implementation. The fire safety manager has ample time for development and implementation of the plans.		
6.	Each emergency plan is assigned a number and is strictly accounted for. A list identifying the location of each emergency plan is maintained by the Chief of Security or equivalent.	Meets Standard			
7.	All staff receive training in the emergency plans during their orientation training as well as during their annual training.	Meets Standard	All staff members are provided training on all emergency plans during orientation and annual in service training.		
8.	The General Section of the emergency plans discusses alternate routes to the facility for staff to use in the event the primary route is impassable.	Meets Standard			
9.	 The plans address the following issues: Confidentiality Accountability (copies and storage locations) Annual review procedures and schedule Revisions 	Meets Standard	The plans address all of the bulleted items listed in this component.		

PART 1 – 1. EMERC	GENCY PLANS (Key: A)	
This Detention Standard ensures a safe environment for detain quickly and effectively respond to any emergency situations the		
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	
11. Contingency plans include a procedure for notification of neighbors residing in close proximity to the facility.	Meets Standard	Contingency plans have a protocol to notify neighbors in close proximity to the facility.
 12. The facility has cooperative contingency plans with applicable: Local law enforcement agencies State agencies Federal agencies 	Does Not Meet Standard	The facility does not have any cooperative contingency plans with local law enforcement, state or federal agencies. The warden has informed the Field Office Director and makes periodic contact to revisit the issue with the local, state and federal agencies in accordance with the language of the standard.
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	The facility conducts mock emergency exercises with the local fire department. The facility has no Memoranda of Understanding with any other agencies.
14. All staff receive copies of the Facility Hostage policy and procedures.	Meets Standard	All staff members receive copies of the facility hostage policy and procedures during pre-service and annual in-service 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	Staff members are trained to disregard instructions from any staff member taken as a hostage. Policy requires hostages to be screened for medical and psychological effects within 24 hours of release.
16. The facility maintains a list of translator services in the event one is needed during a hostage crisis.	Meets Standard	The facility has a number of staff members identified to provide translator services and an agreement with Language Line to provide translator services in the event they are needed during a hostage crisis.
17. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	Meets Standard	

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)	
 The Food Service Department maintains at least 3- days' worth of emergency meals for staff and detainees. 	Meets Standard	The food service department maintains a 21-day supply of emergency meals for staff and detainees. During hurricane season (June 1-December 1), a 28-day supply of emergency meals is maintained.	
19. Written plans illustrate locations of shut-off valves and switches for utilities (water, gas, electric).	Meets Standard		
20. Written plans include a Staff Work Stoppage procedure. This procedure is available for limited supervisory review.	Meets Standard		
 21. (MANDATORY) Written procedures cover: 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 written emergency plans for all contingencies listed in this component.	
22. The Emergency Plans specify a procedure for post- emergency debriefings and discussions.	Meets Standard		

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)

This inspector reviewed the emergency plans, facility policy and training files in review of this standard. This inspector also interviewed the compliance manager, the shift supervisor and the chief of security. The facility has in place a comprehensive set of emergency plans that ensure a safe environment for detainees and staff. The plans equip staff to be able to quickly and effectively respond to any emergency situation that may arise and to minimize its severity. If needed, a Hostage Negotiating Team would be provided by ICE. This team is trained according to standard guidelines.

Overall Rating: Meets Standard		
Reviewer Name (Printed)	(b)(6), (b)(7)(c)	

Completion Date: 11/1/2012

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PART 1 – 1. EMERGENCY PLANS – Reviewer Summary

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

Reviewer Signature (for printed form submission):

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	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	The facility has a system for storing, issuing and maintaining inventories of hazardous materials.		
2.	Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each area of the facility.	Meets Standard			
3.	 The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. 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	The facility's safety manager maintains a master copy of the Material Safety Data Sheet (MSDS) files. The files were up- to-date and contained plant diagrams and legends.		
4. •	All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures: Wear personal protective equipment. Report hazards and spills to the designated official.	Meets Standard			
5.	The MSDS are readily accessible to staff and detainees in the work areas.	Meets Standard	MSDS files are readily accessible to all staff and detainees in areas where hazardous materials are used.		
6.	 Hazardous materials are always issued under proper supervision. Quantities are limited. Detainees are trained. Staff always supervise detainees using these substances. 	Meets Standard	Hazardous materials are inventoried and secured in locked areas of the facility. Detainee workers receive chemical training prior to being assigned to jobs that use these materials. The chemicals are diluted prior to being issued to the detainee workers.		
7.	All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	Meets Standard	All flammable/combustible materials and aerosols are stored and used according to label recommendations.		
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	Hazardous materials are maintained in their original containers inside a secure area.		

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	Excess flammables, combustibles and toxic liquids are disposed of in accordance with MSDS disposal instructions.		
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	There are no methyl alcohol products at the 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 Deerfield Beach Fire and Rescue Department conducts an annual fire safety inspection. The last inspection was 05/26/2012. A review of the inspection report confirmed that 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).		
14. A technically qualified staff member conducts fire and safety inspections.	Meets Standard	The staff member conducting fire and safety inspections is technically qualified.		
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's Fire Prevention, Control and Evacuation plan was approved by the Deerfield Fire and Rescue Department. The last inspection was on 5/26/2012.		

PART 1 – 2. ENVIRONMENTA	L HEALTH AND SAFET	Ү (Кеу: В)
This Detention Standard protects detainees, staff, volunteers, a facility standards of cleanliness and sanitation, safe work practi		
Components	Rating	Remarks (1000 Char Max)
 17. The plan requires: Monthly fire inspections. Fire protection equipment strategically located throughout the facility. 	Meets Standard	The facility's Fire Prevention, Control and Evacuation Plan
 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. 		addresses all the elements in this component.
 Fire drills are conducted and documented quarterly in all facility locations including the administrative area. 	Meets Standard	Fire drills are conducted quarterly in all areas of the facility. Results of the drills are documented.
19. A sanitation program covers barbering operations.	Meets Standard	
20. The barbershop has the facilities and equipment necessary to meet sanitation requirements.	Meets Standard	Both the barber shop and beauty salon were clean and sanitary during the inspection.
21. The sanitation standards are conspicuously posted in the barbershop.	Meets Standard	
22. Written procedures regulate the handling and disposal of used needles and other sharp objects.	Meets Standard	The facility has policy and procedures in place that regulate the handling and disposal of used needles and 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: Using specified equipment; cleansers; disinfectants and detergents. An established schedule of cleaning and follow-up inspections. 	Meets Standard	
25. Spill kits are readily available.	Meets Standard	Spill kits are maintained and readily available in areas where hazardous materials are stored and commonly used.
26. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	Meets Standard	Stericycle, a private certified company, is contracted to remove infectious/bio-hazardous waste from the facility.
27. Staff are trained to prevent contact with blood and other body fluids and written procedures are followed.	Meets Standard	

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			
 29. A Licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. At least monthly. The pest-control program includes preventive spraying for indigenous insects. 	Meets Standard	Rent-to-Kill Pest Control, a private pest control company, provides professional pest- control services. Inspections are conducted monthly or as needed.		
30. Drinking water and wastewater is routinely tested according to a fixed schedule.	Meets Standard	Water is tested annually by the Broward County Water and Wastewater Department. It was last tested on 06/18/2012.		
 31. Emergency power generators are tested at least every two weeks. Other emergency systems and equipment receive testing at least quarterly. Testing is followed-up with timely corrective actions (repairs and replacements). 	Meets Standard	Emergency power generators are tested weekly, with load testing conducted quarterly. Testing of emergency generators and systems is followed up by timely corrective actions when warranted.		
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.				
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 a daily inspection of the medical facility and documents the results.		
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.		Health services staff attend weekly Safety Meetings. These meetings provide appropriate training, include discussions on any special investigations and allow for consultation regarding environmental health 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			

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) 38. Environmental health and safety conditions shall be maintained at a level that meets recognized standards of The facility is accredited by the safety and hygiene, including those from the: American Correctional American Correctional Association, Association (ACA). During this Occupational Safety and Health Administration, inspection, there were no Meets Standard Environmental Protection Agency, concerns noted related to any of the standards of the Food and Drug Administration, organizations listed in this National Fire Protection Association's Life Safety Code, component. and National Center for Disease Control and Prevention.

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 is clean and well maintained and provides a safe work environment, appropriate living conditions and control of hazardous materials for both staff and detainees. The standard's rating was based on observations, staff interviews and review of the facility's policies and procedures.

Overall Rating: Meets Standard Reviewer Name (Printed (b)(6), (b)(7)(c)

Completion Date: 11/1/2012

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 or case. (All Line Items and standard will be rated "N/A")	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				
Components	Rating	Remarks (1000 Char Max)			
 Transporting officers comply with applicable local, state and federal motor vehicle laws and regulations. Record support this finding of compliance. 					
 Every transporting officer required to drive a commercia size vehicle has a valid Commercial Driver's License (CDL issued by the state of employment. 		All transportation officers have a Commercial Driver's License (CDL).			
3. Supervisors maintain records for each vehicle operated.	Meets Standard				
 Documentation indicating annual inspection of vehicle and annual inspection in accordance with state statutes i available for review. 					
 Documentation indicating safety repairs are completed immediately and vehicles are not used until they have been repaired and inspected is available for review. 		The Bus Driver's Vehicle Inspection Report is completed and verified by a supervisor to ensure all vehicles have been repaired.			
 6. Officers use a checklist during every vehicle inspection. Officers report deficiencies affecting operability. Deficiencies are corrected before the vehicle goes bac into service. 	k Meets Standard	The Bus Driver's Vehicle Inspection Report is the inspection checklist. Officers report deficiencies affecting operability. Corrected deficiencies are documented on a work order.			
 7. Transporting officers: 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 afte 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. 	r Meets Standard				

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)
 8. (b)(7)(e) officers with valid Commercial Drivers Licenses, (CDL's) required in any vehicle transporting detainees. When buses travel in tandem with detainees, there are b)(7) equalified officers per vehicle. An unaccompanied driver transports an empty vehicle. 	Meets Standard	
9. The transporting officer inspects the vehicle before the start of each detail.	Meets Standard	
10. Positive identification of all detainees being transported is confirmed.	Meets Standard	Positive identification of all detainees is confirmed using face to photo identification.
11. All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.	Meets Standard	Detainees are pat searched prior to boarding the transport vehicle.
12. The facility ensures that the number of detainees transported does not exceed the vehicle manufacturer's occupancy level.	Meets Standard	
13. All uniformed officers wear their issued body armor in accordance with the ICE Body Armor policy and/or applicable contract policy when transporting detainees.	Meets Standard	Transportation officers are required to wear issued body armor when transporting detainees.
 14. The vehicle crew conducts a visual count once all passengers are on board and seated. Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop. 	Meets Standard	
15. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	Meets Standard	There is policy covering the use of restraining equipment on transportation vehicles.
 16. Officers ensure that no one contacts the detainees. One officer remains in the vehicle at all times when detainees are present. 	Meets Standard	Policy directs officers to ensure that no one contacts the detainees. One officer remains in the vehicle at all times when detainees are present.

PART 1 – 3. TRANSPORTATION (BY LAND	(Key: C)
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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) 17. Meals are provided during long distance transfers. The vehicle crew will provide meals and snacks during any long The meals meet the minimum dietary standards, as distance transfer. Meals meet identified by dieticians utilized by ICE. the nutritional requirements as Meets Standard identified by the dietitian. Food service staff members are notified of dietary needs 24 hours in advance of transport so suitable meals can be arranged. 18. The vehicle crew inspects all Food Service meals before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). Before accepting the meals, the vehicle crew raises Meets Standard 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. 19. Vehicles have: (b)(7)e Meets Standard (b)(7)e 20. The vehicles are clean and sanitary at all times. Meets Standard 21. Personal property of a detainee transferring to another Personal property is inventoried facility: and inspected and accompanies Is inventoried. Meets Standard the detainees when transported Is inspected. to or from this facility. Accompanies the detainee.

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 S	Sub-Office in control of the detainee	
case. (All Line Items and standard will be rated "N/A")			
Components	Rating	Remarks (1000 Char Max)	
22. The following contingencies are included in the written			
procedures for vehicle crews:			
Attack			
• Escape			
Hostage-taking			
Detainee sickness			
Detainee death			
Vehicle fire	Meets Standard	Policy covers all contingencies listed in this component.	
• Riot		insted in this component.	
Traffic accident			
Mechanical problems			
Natural disasters			
Severe weather			
 Passenger list is not exclusively men or women or minors 			

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)

This inspector interviewed the transportation manager, administrative assistant to the transportation manager and detention officers in review of this standard. The inspector also reviewed policy and inspection files, motor vehicle driver's certification, the driver's daily log, the Bus Driver's Vehicle Inspection Reports, work orders and annual commercial inspection reports. This inspector observed the loading of a transport vehicle for a trip to a local medical facility. Three vehicles in the fleet were inspected, including the transport van used for detainees with physical disabilities. Detainees are transported in a secure, safe and humane manner, under the supervision of trained and experienced staff.

Overall Rating: Meets Standard			
Reviewer Name (Printed): (b)(6), (b)(7)(c)	Completion Date: 11/1/2012		
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

	PART 2 – 4. ADMISSIO	N 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	Each detainee views a video orientation and receives both a facility detainee handbook and the ICE National Detainee Handbook. The admission and orientation process addresses all of the topics listed in this component.	
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 medical staff.	
3.	When available, accompanying documentation is used to identify and classify each new arrival. In SPCs and CDFs, new detainees shall remain segregated from the general population during the orientation and classification period.	Meets Standard	In this CDF, all detainees are classified by ICE prior to arrival and are not moved to general population until the orientation process is complete.	
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	Detainees are pat searched and checked with a hand held metal detector as part of the admissions process. An officer of the same sex does the search. This was observed during the inspection.	
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	Reasonable suspicion and supervisory approval is required before a strip search is conducted. Staff advised that there have been no strip searches performed in the past twelve months. Any strip search would be documented on a facility form and ICE would be notified.	
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	All detainee property is inventoried and a copy of the inventory is provided to the detainee. Funds are placed in the detainee's account and valuables are stored in a secure room. A copy of the inventory is placed in the detainee's detention file.	

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. Rating Components Remarks (1000 Char Max) 7. Staff complete Form I-387 or similar form for CDFs and For every lost or missing property IGSAs for every lost or missing property claim. Facilities claim, a staff member completes forward all I-387 claims to ICE. Meets Standard a Form 1-387. The form is forwarded to the Assistant Field Office Director (AFOD). Detainees are issued appropriate and sufficient clothing 8 Meets Standard and bedding for the climatic conditions. 9. All releases are coordinated with ICE. On-site ICE staff members Meets Standard coordinate all releases. 10. Staff complete paperwork/forms for release as required. Meets Standard Each detainee is given a receipt 11. Each detainee receives a receipt for personal property secured by the facility. Meets Standard for personal property secured by the facility. 12. The facility has a system to maintain accurate records and Meets Standard documentation for admission, orientation, and release. 13. ICE staff enter all information pertaining to release, An ICE staff member enters all removal, or transfer of all detainees into the Enforce Alien information pertaining to Detention Module (EADM) within 8 hours of action. release, removal or transfer of a Meets Standard detainee into the Enforce Alien Detention Module (EADM) within eight hours of the action. 14. All orientation material shall be provided in English, Orientation material is provided Spanish, and other language(s) as determined by the Field Meets Standard in English and Spanish. Office Director.

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 ICE/facility staff members and detainees, review of documentation and on-site observation confirmed that the facility protects the community, detainees, staff, volunteers and contractors by ensuring secure and orderly operations when detainees are admitted to or released from the facility.

Overall Rating: Meets Standard

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

Completion Date: 11/1/2012

	PART 2 – 5. CLASSIFIC	CATION SYSTEM (Key: E)			
ord	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. IGSAs use an objective classification system or similar system for classifying detainees.	Meets Standard	All detainees are classified by ICE prior to arrival at the facility. The classification is completed using the Objective Classification System.		
2.	The facility classification system includes:				
	Classifying detainees upon arrival.				
	 Separating individuals who cannot be classified upon arrival from the general population. 	Meets Standard			
	• The first-line supervisor or designated classification specialist reviews every classification decision.				
3.	The intake/processing officer reviews work-folders, A- files, etc., to identify and classify each new arrival.	Meets Standard	A supervisory ICE official reviews the initial classification of each detainee after arrival.		
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	Only detainees classified as Level 1 are admitted to this facility. Therefore all housing is classified as Level 1 housing.		
6.	A detainee's classification-level does not affect his or her recreation opportunities. Detainees recreate with persons of similar classification designations.	Meets Standard	Only detainees classified as Level 1 are admitted to this facility. All detainees have the same recreation opportunities.		
7.	Detainee work assignments are based upon classification designations.	Meets Standard	Only detainees classified as Level 1 are admitted to this facility. All detainees are given the opportunity to participate in work assignments.		
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			

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.

ven				
	Components	Rating	Remarks (1000 Char Max)	
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	All detainees at this facility are classified as Level 1. Policy allows for classification appeals to be sent directly to ICE. This has not happened in the past twelve months.	
10.	Classification appeals are resolved w/in 5 business days. Detainees are notified of the outcome within 10 business days.	Meets Standard		
11.	Classification designations may be appealed to a higher authority such as the Facility Administrator or equivalent.	Meets Standard		
12.	The Detainee Handbook or equivalent for IGSAs explains the classification levels, with the conditions and restrictions applicable to each.	Meets Standard		
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	This CDF requires that male detainees wear orange uniforms and female detainees wear gray uniforms. All detainees are classified as Level 1.	

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 by ICE prior to arrival. Interviews with ICE and facility staff members, a review of documentation and on-site observation confirmed that the facility protects the community, detainees, staff, volunteers and contractors by having a formal classification process for managing detainees that is based on verifiable and documented data.

Overall Rating: Meets Standard Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/1/2012

	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 written procedures for handling contraband. The procedures direct staff to hold hard contraband, report it and turn it over to the proper legal authority for possible prosecution.	
2.	Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	Meets Standard	The facility retains government property as evidence for potential 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		
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 has policy in place requiring staff to consult with the chaplain prior to confiscating religious items from detainees.	
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. 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 may be retained for training purposes. Hard contraband that is used for training is secured in the shift supervisors' (b)(7)e Soft contraband is mailed to a third party or placed in the detainee's personal property.	
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		
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)

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)

This inspector reviewed policy, post orders and contraband seizure and disposition logs, and interviewed the compliance manager, shift supervisor and chief of security in review of this standard. The facility has a comprehensive contraband control plan. The plan protects detainees and staff and enhances facility security and good order by identifying, detecting and properly disposing of contraband.

Overall Rating: Meets Standard Reviewer Name (Printed): (b)(6), (b)(7)(c)

Completion Date: 11/1/2012

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.			
1. The facility administrator or assistant administrator and department heads visit detainee living quarters and activity areas weekly.	Meets Standard	The warden and other facility managers visit detainee living areas and activity areas at least weekly.	
2. At least one male and one female staff are on duty where both males and females are housed.	Meets Standard		
3. Comprehensive annual staffing analysis determines staffing needs and plans.	Meets Standard		
 Essential posts and positions are filled with qualified personnel. 	Meets Standard		
5. Every Control Center officer receives specialized training.	Meets Standard	The control center officers are provided specialized on-the-job training for control center operations.	
6. Policy restricts staff access to the Control Center.	Meets Standard	Policy restricts staff access to the control center.	
7. Detainees do not have access to the Control Center.	Meets Standard	Policy specifically states that detainees are not to have access to the control center at any time.	
8. Communications are centralized in the Control Center.	Meets Standard	Facility communications are centralized in the control center.	
 Facility security and safety will be monitored and coordinated by a secure, well-equipped, and continuously staffed control center. 	Meets Standard		
10. The Control Center maintain employee Personal Data Cards (Form G-74 or contract equivalent).	Meets Standard	The control center maintains employee personal data information.	
11. Recall lists include the current home telephone number of each employee. Phone numbers are updated as needed.	Meets Standard	The facility recall list includes the staff member's current home telephone number.	
12 (b)(7)e	Meets Standard	(b)(7)e	
 Information about routine procedures, emergency situations, and unusual incidents will be continually recorded in permanent post logs and shift reports. 	Meets Standard		
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 to the facility are officially recorded in a visitor logbook.	

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)	
16. The facility has a secure, color-coded visitor pass system.	Meets Standard	The facility has a secure, color- coded visitor pass system.	
17. Officers monitor all vehicular traffic entering and leaving the facility.	Meets Standard	Officers monitor all vehicular traffic entering and leaving the facility.	
 18. The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: 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	The facility maintains a vehicle log with all items listed in this component for all vehicles entering and leaving the facility.	
19. Officers thoroughly search each vehicle entering and leaving the facility.	Meets Standard	Policy directs staff to search all vehicles entering and leaving the facility.	
20. The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	Meets Standard	The facility has a written policy on preventing the introduction of contraband.	
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	There are written procedures covering searches of housing units and personal areas.	
24. Housing area searches occur at irregular times.	Meets Standard	Housing unit post orders direct assigned staff to conduct housing area searches at irregular times.	
25. Security officer posts located in or immediately adjacent to detainee living areas to permit officers to see or hear and respond promptly to emergency situations. Personal contact and interaction between staff and detainees is required and facilitated.	Meets Standard		
26. There are post orders for every security officer post.	Meets Standard	Each security officer post has a post order.	
27. Detainee movement from one area to another area is controlled by staff.	Meets Standard		

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)	
28. Living areas are constructed to facilitate continuous staff observation of cell or room fronts, dayrooms, and recreation space.	Meets Standard		
29. Every search of the SMU and other housing units is documented.	Meets Standard	There is no Special Management Unit (SMU) at this facility. Housing unit searches are documented.	
30. The SMU entrance has a sallyport.	N/A	There is no SMU at this facility.	
31. All tools entering SMU will be inspected and inventoried by the SMU officer prior to entering the housing unit.	N/A	There is no SMU at this facility.	
 32. The facility has a comprehensive security inspection policy. The policy specifies: 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	The facility has a comprehensive security inspection policy which specifies posts to be inspected, the forms to be used, the frequency of inspections, guidelines for checking security features and the procedures for reporting weak spots or areas needing improvement.	
 Every officer is required to conduct a security check of his/her assigned area. The results are documented. 	Meets Standard	Policy requires all officers to conduct and document security checks of their assigned areas.	
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	Facility procedures ensure that recurring problems and a failure to take corrective action are reported to the chief of security or shift supervisor.	
36. Tools being taken into the secure area of the facility are inspected and inventoried before entering and prior to departure.	Meets Standard		
37. Storage and supply rooms; walls, light and plumbing fixtures, accesses, and drains, etc. undergo frequent, irregular searches. These searches are documented.	Meets Standard		
38. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	Meets Standard		

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)

 39. Daily procedures include:
 Image: Component Char Max)

 39. Daily procedures include: Perimeter alarm system tests. Physical checks of the perimeter fence. Documenting the results. 	Meets Standard	(b)(7)e
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	
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: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

This inspector reviewed facility policy, post orders, inspection files and logbooks in review of this standard. The inspector also interviewed the chief of security, shift supervisor, compliance manager and detention officers. The facility has a comprehensive security and control program that protects the community, staff, contractors, volunteers and detainees from harm by ensuring that facility security is maintained and that events that pose a threat are prevented.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 11/1/2012

	PART 2 - 8. FUNDS AND P	ERSONAL PROPERTY (K	еу: Н)
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.			
Sta	Standard N/A		
	k the button above (IGSA ONLY) if all ICE detainee Funds, \		
Offi	ce or Sub-Office in control of the detainee case. (All Line I	tems 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	All detainee property is inventoried, separated and stored in a secure property room, accessible only to designated property room staff and supervisors.
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	
4. (b)(7)(epfficers are present during the processing of detainee funds and valuables during admissions processing to the facility. Both officers verify funds and valuables.	Meets Standard	(b)(7)(e)officers are present when processing detainee funds and property (b)(7)(e)officers verify funds and valuables.
5.	For IGSAs 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	The detainee is given a copy of the inventory and copies are placed in the detainee's detention file and with the property being stored.
7.	Staff forward an arriving detainee's medicine to the medical staff.	Meets Standard	
8.	Staff search arriving detainees and their personal property for contraband.	Meets Standard	
9.	Property discrepancies are immediately reported to the Chief of Security or equivalent.	Meets Standard	Property discrepancies are immediately reported to the shift supervisor.
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	

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")

Offi	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)	
12.	 The facility attempts to notify an out-processed detainee that he/she left property in the facility. 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	The facility attempts to notify a detainee of left property by using the forwarding address obtained from the detainee during intake. The notification letter includes all of the elements listed in this component.	
13.	Staff obtain a forwarding address from each detainee.	Meets Standard		
14.	It is standard procedure for(b)(7)(d)fficers to be present when removing/documenting the removal of funds from a detainee's possession.	Meets Standard	b)(7)(e)staff members are present during the inventory of detainee funds. The detainee receives a copy of the receipt signed by both staff and the detainee.	
15.	Staff issue and maintain property receipts (G-589s) in numerical order.	Meets Standard	Property receipts (G-589s) are issued, kept in numerical order and maintained in a log in the property room.	
16.	Staff complete and distribute the G-589 in accordance with the ICE standard.	Meets Standard		
17.	The processing officer records each G-589 issuance in a G- 589 logbook. The record includes the initials and star numbers of receipting officers.	Meets Standard		
18.	Staff tag large valuables with both a G-589 and an I-77.	Meets Standard	Detainee large valuables are secured and maintained in the property room utilizing both the G-589 and I-77 forms. A copy is placed with the property. Accountability is maintained by recording the form number in a logbook.	
19.	The supervisor verifies the accuracy of every G-589.	Meets Standard	The shift supervisor verifies the accuracy of inventory documents.	

	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.		
Sta	andard N/A		
	k the button above (IGSA ONLY) if all ICE detainee Funds, ce or Sub-Office in control of the detainee case. (All Line I		
	Components	Rating	Remarks (1000 Char Max)
20.	The supervisor ensures that:	in a constant of the second se	All detainee funds, valuables and
	 Detainee funds are, without exception, deposited into the cash box; 		property are inventoried and secured. The shift supervisor
	• Every property envelope is sealed.	Meets Standard	ensures that the detainee's funds are placed inside a sealed
	• All sealed property envelopes are placed in the safe.	Meets Standard	envelope and placed in a safe.
	 Large, valuable property is kept in the secured locked area. 		Large valuables are maintained in the facility's secure property room.
21.	Staff tag every baggage/facility container with an I-77, completed in accordance with the ICE standard.	Meets Standard	
22.	Staff secure every container used to store property with a tamper-proof numbered strap.	Meets Standard	Property is maintained in a plastic container and secured with tamper proof tape.
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 detainee's name, A-number, property description, date issued and date returned and I-77 number are recorded in the logbook. Property is maintained in a box and secured with tamper proof tape.
24.	In SPCs, the Supervisory Immigration Enforcement Agent, accompanied by a detention staff member conducts a comprehensive weekly audit.	Meets Standard	At this CDF, ICE and facility staff members conduct property audits weekly.
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	
26.	The facility positively identifies every detainee being released or transferred.	Meets Standard	
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	Missing and damaged property claims are filed and maintained at the facility. All detainee personal property discrepancies are immediately forwarded to the shift supervisor for investigation.

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)
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	

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.) (500	0 Character Max)		
The facility's policies and procedures ensure the secure and safe storage of detainee property. Detainees are pat searched and their property is searched and inventoried during the intake process to ensure contraband is not introduced into the facility. The standard's rating was based on a review of policies, procedures and detention files and on staff member interviews.			
Overall Rating: Meets Standard			
Reviewer Name (Printed): (b)(6), (b)(7)(c)	Completion Date: 11/1/2012		
Reviewer Signature (for printed form submission):			

	PART 2 – 9. HOLD ROOMS IN	DETENTION FACILIT	IES (Key: I)
	s Detention Standard ensures the safety, security, and comfo ocessing. The maximum aggregate time an individual may be	-	
- p. c	Components	Rating	Remarks (1000 Char Max)
1.	The hold room is situated in a location within the secure perimeter.	N/A	The facility does not have hold rooms.
2.	The hold rooms are clean, in good repair, well ventilated, well lit, and all activating switches located outside the room.	N/A	The facility does not have hold rooms.
3.	The hold rooms contain sufficient seating for the number of detainees held.	N/A	The facility does not have hold rooms.
4.	No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside hold rooms.	N/A	The facility does not have hold rooms.
5.	Hold room walls and ceilings are escape and tamper resistant.	N/A	The facility does not have hold rooms.
6.	Detainees are not held in hold rooms for more than 12 hours.	N/A	The facility does not have hold rooms.
7.	Male and females detainees are segregated from each other at all times.	N/A	The facility does not have hold rooms.
8.	Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	N/A	The facility does not have hold rooms.
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.	N/A	The facility does not have hold rooms.
10.	All detainees are given a pat down search for weapons or contraband before being placed in the hold room.	N/A	The facility does not have hold rooms.
11.	 When the last detainee has been removed, the hold room is inspected for the following: Cleaning. Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair. 	N/A	The facility does not have hold rooms.
12. •	(MANDATORY) There is a written evacuation plan. There is a designated officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency.	N/A	The facility does not have hold rooms.
13.	An appropriate emergency service is called immediately upon a determination that a medical emergency exists.	N/A	The facility does not have hold rooms.
14.	 Single occupant hold rooms contain a minimum of 37 square feet (7 unencumbered square feet for the detainee, 5 square feet for a combination lavatory/toilet fixture, and 25 square feet for a wheelchair turn-around area). If multiple-occupant hold rooms are used, there is an additional 7 unencumbered square feet for each additional detainee. 	N/A	The facility does not have hold rooms.

PART 2 – 9. HOLD ROOMS IN	DETENTION FACILIT	IES (Key: I)
This Detention Standard ensures the safety, security, and comfo processing. The maximum aggregate time an individual may be	-	
Components	Rating	Remarks (1000 Char Max)
 15. <u>In SPCs designed after 1998</u> the hold rooms are equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They are: Compliant with the American Disabilities Act. Small hold rooms (1 to 14 detainees) have at least one combi-unit. Large hold rooms (15 to 49 detainees) are provided with at least two combi-units. 	N/A	The facility does not have hold rooms.
16. <u>In SPCs designed after 1998</u> the hold rooms have floor drain(s).	N/A	The facility does not have hold rooms.
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.	N/A	The facility does not have hold rooms.
 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 have hold rooms.
19. Minors (under 18) are confined apart from adults, except for immediate relatives or guardians.	N/A	The facility does not have hold rooms.
 20. Each detention facility maintains a detention log (manually or by computer) for each detainee placed in a hold cell. The log includes the required information specified in the standard. 	N/A	The facility does not have hold rooms.
 21. Officers provide a meal to any detainee detained in a hold room for more than six hours. Juveniles, babies and pregnant women have access to snacks, milk or juice. Meal are served to juveniles regardless of time in custody 	N/A	The facility does not have hold rooms.
22. Any detainee with disabilities, including temporary disabilities, will be housed in a manner that provides for his or her safety and security.	N/A	The facility does not have hold rooms.
23. The maximum occupancy for the hold room will be posted.	N/A	The facility does not have hold rooms.
24. Before placing a detainee in a room, an officer shall observe each individual to screen for obvious mental or physical problems.	N/A	The facility does not have hold rooms.
25. Staff does not permit detainees to smoke in a hold room.	N/A	The facility does not have hold rooms.

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)	
26. Officers closely supervise hold rooms through direct supervision, to ensure:			
 Continuous auditory monitoring, even when the hold room is not in the officer's direct line of sight, and 		The facility does not have hold	
 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." 	N/A	rooms.	
 Constant surveillance of any detainee exhibiting signs of hostility, depression, or similar behaviors. 			

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES – Reviewer Summary				
(Use following format for dates: mm/dd/	<i>(yyyy</i>)			
Overall Remarks: (Record significant facts, observations, other sources used,	etc.) (5000 Character Max)			
There are no hold rooms in this Level 1 facility. The facility has an intake processing room from which all detainees are admitted and released. Interviews with the warden, policy review and observation of the admitting/releasing area were used in rating this standard.				
Overall Rating: N/A				
Reviewer Name (Printed) (b)(6), (b)(7)(c) Completion Date: 11/1/2012				
Reviewer Signature (for printed form submission):				

	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 armory/key control officer has attended an approved locksmith training program.		
2.	The security officer, or equivalent, has responsibility for all administrative duties and responsibilities relating to keys, locks etc.	Meets Standard	The armory/key control officer is assigned all responsibilities related to keys and locking devices.		
3.	The security officer, or equivalent, provides training to all employees in key and lock control.	Meets Standard			
4.	The security officer, or equivalent, maintains inventories of all keys, locks and locking devices.	Meets Standard	The armory/key control officer maintains inventories of all keys, locks and locking devices.		
5.	The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	Meets Standard			
6.	Facility policies and procedures address the issue of compromised keys and locks.	Meets Standard	Policy addresses the issue of compromised keys and locks.		
7.	The security officer, or equivalent, develops policy and procedures to ensure safe combinations integrity.	Meets Standard			
8.	Only dead bolt or dead lock functions are used in detainee accessible areas.	Meets Standard	Policy states that only dead bolt or dead function locks are to be used in detainee accessible areas.		
9.	Non-authorized locks (as specified in the Detention Standard) are not used in detainee accessible areas.	Meets Standard			
10.	The facility does not use grand master keying systems.	Meets Standard	The facility does not use or permit grand master keying systems.		
11.	All worn or discarded keys and locks cut up and properly disposed of.	Meets Standard	Policy states that all worn or discarded keys and locks are to be cut up and properly disposed of.		
12.	Padlocks and/or chains are not used on cell doors.	Meets Standard	The facility does not use padlocks or chains on cell doors.		
13.	The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to	Moote Standard			
	 Occupational Safety and Environmental Health Manual, Chapter 3 National Fire Protection Association Life Safety Code 101. 	Meets Standard			

	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)		
14.	The operational keyboard sufficient to accommodate all the facility key rings including keys in use is located in a secure area.	Meets Standard	The facility uses the Morse Watchman Key Watcher system. The operational keyboard is sufficient to accommodate all facility key rings.		
15.	 Procedures in place to ensure that key rings are: Identifiable Numbers of keys on the ring are cited? Keys cannot be removed from issued key rings 	Meets Standard			
16.	Emergency keys are available for all areas of the facility.	Meets Standard			
17.	The facility uses a key accountability system.	Meets Standard	The facility uses the Morse Watchman Key Watcher accountability system.		
18.	Authorization is necessary to issue any restricted key.	Meets Standard			
19.	 Individual gun lockers are provided. They are located in an area that permits constant officer observation. In an area that does not allow detainee or public access. 	Meets Standard			
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 policy ensuring key accountability. The keys are counted daily on the 12:00 a.m. to 8:00 a.m. shift.		
21.	 All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. 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 and held responsible for the proper handling of facility keys. Policy directs staff to immediately return a key if it is inadvertently taken home. Policy also directs staff to immediately notify the shift commander if a key is lost or misplaced. Policy states that detainees are not to handle keys assigned to staff.		
22.	Locks and locking devices are continually inspected, maintained, and inventoried.	Meets Standard			
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/key control officer is the only employee who is authorized to add or remove a key from an institution key ring.		

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	Components Rating Remarks (1000 Char Max)				
25. The splitting of key rings into separate rings is not authorized. Meets Standard					

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)				
The shift supervisor, compliance manager and armory/key control officer were interviewed. A locksmith training certificate, training records, work orders, key inventories, daily key count logs and incident reports were observed in the review of this standard. The facility has an integral key and lock control/accountability system. The system effectively maintains and controls the facility keys, enhancing overall safety and security of the facility.				
Overall Rating: Meets Standard				
Reviewer Name (Printed) (b)(6), (b)(7)(c) Completion Date: 11/1/2012				
Reviewer Signature (for printed form submission):				

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	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	The facility has five formal counts each day. One of the formal counts is a face-to-photo count.	
2.	Activities cease or are strictly controlled while a formal count is being conducted.	Meets Standard	Detainee activities cease during formal counts.	
3.	There is a system for counting each detainee, including those who are outside the housing unit.	Meets Standard	The facility has a system in place to count all detainees, even those not in the housing units.	
4.	Formal counts in all units take place simultaneously.	Meets Standard		
5.	Officers do not allow detainee participation in the count.	Meets Standard	Policy directs staff not to allow detainee participation in counts.	
6.	A face-to-photo count follows each unsuccessful recount.	Meets Standard	Policy directs staff to conduct a face-to-photo count following an unsuccessful recount.	
7.	Officers positively identify each detainee before counting him/her as present.	Meets Standard	Policy directs staff to positively identify each detainee before counting him/her present.	
8.	Written procedures cover informal and emergency counts.	Meets Standard		
9.	The control officer (or other designated position) maintains an "out-count" record of all detainees temporarily out of the facility.	Meets Standard		
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		

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)

This inspector reviewed facility policy, post orders, training records and count documents and interviewed the shift supervisor and detention officers in review of this standard. The formal count was observed by the inspection team on 10/31/2012. The facility has an ongoing, effective system of population counts and detainee accountability which protects the community from harm and enhances facility security, safety and good order.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 11/1/2012

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

PART 2 – 12. PO	ST 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	The facility has a set of post orders for every fixed post.	
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.	
 Each set contains the latest inserts (emergency memoranda, etc.) and revisions. 	Meets Standard		
 One individual or department is responsible for keeping all Post Orders current with revisions that take place between reviews. 	Meets Standard	The chief of security is responsible for keeping all post orders current with revisions that take place between reviews.	
5. Review, updating, and reissuing of Post Orders occurs regularly and at least annually.	Meets Standard		
 The facility administrator authorizes all Post Order changes. 	Meets Standard		
 The facility administrator has signed and dated the last page of every section. 	Meets Standard	The warden has signed the last page and initialed and dated all pages of the post orders.	
8. A Post Orders master file is available to all staff.	Meets Standard	The post order master file is kept in the lieutenants' office and is available to all staff.	
 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	Copies of applicable post orders are only retained at the post if they can be secured so that detainees have no access.	
11. Supervisors ensure that officers understand the Post Orders, regardless of whether the assignment is temporary, permanent, or due to an emergency.	Meets Standard		
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	Policy directs staff to read, sign and date post orders for any newly assigned post to indicate that the officer has read and understands them.	
 Anyone assigned to an armed post qualifies with the post weapons before assuming post duty. 	Meets Standard		
 14. Post Orders for armed posts, and for posts that control access to the institution perimeter, clearly state that: Any staff member who is taken hostage is considered to be under duress, and Any order issued by such a person, regardless of his or her position of authority, is to be disregarded. 	Meets Standard		

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	ComponentsRatingRemarks (1000 Char Max)			
15. Post Orders for armed posts provide instructions for escape attempts.	Meets Standard	Post orders for the transportation officers provide specific instructions in the event of an escape or attempted escape.		
16. The Post Orders for housing units track the daily event schedule.	Meets Standard	The housing units' post orders track 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			

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)

This inspector examined post orders and logbooks in review of this standard. The inspector also interviewed the chief of security, compliance manager, detention officers and shift supervisor in review of this standard. The facility has developed and implemented an effective set of post orders, ensuring that each officer assigned to a security post knows the procedures, duties and responsibilities of that post. This enhances security and good order.

Overall Rating: Meets Standard Reviewer Name (Printed):

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

Completion Date: 11/1/2012

PART 2 -	13. SEARCHES	OF DETAINEES (Key: M)
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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	Written policy and post orders address both area and detainee searches. Interviews with staff members indicated that they are familiar with the policy and post orders for their assigned posts.
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	Post orders include the requirement that the least intrusive method of search practicable is used for all detainee searches.
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	Facility policy states that officers must maintain a professional decorum and extend the appropriate level of respect and courtesy toward the detainee being searched. Policy also forbids that searches be performed to punish or discipline detainees.
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	Observation of facility operations showed that detainees are routinely pat searched and screened by hand held metal detectors throughout the facility.
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	
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	The Assistant Field Office Director must approve a body cavity search. If approved, only health care personnel may conduct the search. There have been no body cavity searches in the past year.
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.

	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)				
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	N/A	Canines are not used at this 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)		
This inspector reviewed facility policy and post orders and interviewed a shift supervisor in evaluating this standard. The facility has a system of detainee and area searches that enhances facility security and good order by detecting, controlling and properly disposing of contraband.			
Overall Rating: Meets Standard			
Reviewer Name (Printed) (b)(6), (b)(7)(c) Completion Date: 11/1/2012			
Reviewer Signature (for printed form submission):			

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.	
 For SPCs and CDFs, the written policy and procedure has been approved by the Field Office Director. 	Meets Standard	The Miami Field Office Director approved the Sexual Abuse and Assault Prevention and Intervention policy on 3/2/2012.	
 Tracking statistics and reports are readily available for review by the inspectors. 	Meets Standard	A system for maintaining information on such incidents is in place.	
 All staff are trained, during orientation and in annual refresher training, in the prevention and intervention areas required by the Detention Standard. 	Meets Standard	Sexual abuse training is provided during both initial and annual refresher training for all staff. This was verified by a review of training records and curricula.	
5. Detainees are informed about the program in facility orientation and the detainee handbook (or equivalent).	Meets Standard	Detainees are informed about sexual abuse in the handbook which is distributed at intake. Detainees are also informed about the program in the orientation video. Additionally, a pamphlet is available in the medical waiting area. Both are written in English and Spanish.	
 The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards. 	Meets Standard	Sexual Assault Awareness Notices are posted in the male and female housing areas, dayrooms, the medical wait area and the intake area.	
7. The Sexual Assault Awareness Information brochure is available for detainees. (Required in SPCs and CDFs.)	Meets Standard	The brochure is available in both English and Spanish and is distributed during intake with the detainee handbook. Additionally, the brochure is available in dayrooms and common areas throughout the facility.	

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)
8.	Detainees are screened upon arrival for "high risk" sexual assaultive and sexual victimization potential and housed and counseled accordingly.	Meets Standard	Detainees are screened upon arrival for high risk sexual assaultive and victimization potential. High risk predatory detainees would be immediately transferred to an appropriate facility. If victimization is indicated, the detainee would be housed and counseled accordingly.
9.	All incidents of sexual abuse or assault by a detainee on a detainee have been documented in the past year.	Meets Standard	A system is in place to document all allegations of sexual abuse or assault.
10.	All incidents or allegations of sexual abuse or assault by staff on a detainee have been documented in the past year.	Meets Standard	No incidents of sexual abuse or assault were reported since the last review. However, a system is in place to document all allegations of sexual abuse or assault by a staff member on a detainee.
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	Policy requires prompt and effective intervention to include medical screening and treatment, mental health assessment, counseling, separation of the victim and follow-up care.
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	Policy requires that staff to conduct a thorough investigation, to gather and maintain evidence via the local hospital and to make referrals to law enforcement agencies as indicated.
13.	When there is an alleged or proven sexual assault, the required notifications are promptly made.	Meets Standard	A system is in place to make the required notifications to the chief of security and Field Office Director, as well as other internal staff and supervisors.
14.	Victims of sexual abuse or assault are referred to specialized community resources for treatment and gathering of evidence.	Meets Standard	Policy requires that victims of sexual assault are referred and transported to a local sexual assault treatment center.

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)
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	A system is in place to track all allegations of sexual abuse or assault. The Health Services Administrator maintains this information.

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)

There have been no reported incidents of sexual abuse or assault since the last inspection. Facility policy and procedure include staff training, notification, medical and mental health care, follow-up and guidelines for processing an allegation of sexual abuse or assault. Detainees are given written information in English and Spanish about the Sexual Abuse and Assault Prevention and Intervention Program.

Overall Rating: Meets Standard Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/1/2012

	Components	Rating	Remarks (1000 Char Max)
1.	Written policy and procedures are in place for special management units.	N/A	The facility does not have a Special Management Unit (SMU) for either administrative segregation or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
6.	The number of detainees confined to each cell or room does not exceed the capacity for which it was designed.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
7.	Cells and rooms are well ventilated, adequately lit, appropriately heated and maintained in a sanitary condition at all times.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.

Components	Rating	Remarks (1000 Char Max)
 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. 	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
 10. In SPCs and CDFs, a separate log is maintained in the SMU that all persons visiting the unit must sign and record: 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	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
 11. A Special Management Housing Unit Record is maintained on each detainee in an SMU: 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: By the end of each shift, the special housing unit officer records: 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. 	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.

	Components	Rating	Remarks (1000 Char Max)
13.	There are written policy and procedures concerning the property detainees may retain in each type of segregation.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.)	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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).	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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).	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
17.	The shift supervisor sees each segregated detainee daily, including weekends and holidays.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
18.	The facility administrator (or designee) visits each SMU daily.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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).	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
20.	Detainees in SMUs are provided three nutritionally adequate meals per day, ordinarily from the general population menu.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.

	Components	Rating	Remarks (1000 Char Max)
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
23.	Detainees in an SMU may write and receive letters the same as the general population.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
24.	Detainees in an SMU ordinarily retain visiting privileges.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
27.	Under no circumstances is a detainee permitted to participate in general visitation while in restraints.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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	The facility does not have an SMU for either administrative or disciplinary segregation purposes.

	Components	Rating	Remarks (1000 Char Max)
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	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
30.	Ordinarily, detainees in SMUs are not denied legal visitation.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
36.	Policy and procedures provide for legal material to be brought to individuals in Disciplinary Segregation under certain circumstances.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.

	Components	Rating	Remarks (1000 Char Max)
	 Any denial of access to the law library is always: 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. 	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
38.	Recreation for detainees in the SMU is separate from the general population.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.)	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
43.	Denial of recreation privileges for more than 15 days requires the concurrence of the facility administrator and the health authority. It is expected that such denials shall rarely occur, and only in extreme circumstances. The facility notifies ICE/DRO when a detainee is denied recreation privileges for more than 15 days.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.

	Components	Rating	Remarks (1000 Char Max)
44.	Ordinarily, detainees in Administrative Segregation have telephone access similar to detainees in the general population, in a manner consistent with the special security and safety requirements of an SMU. Detainees in Disciplinary Segregation may be restricted		The facility does not have an
	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.	N/A	SMU for either administrative or disciplinary segregation purposes.
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.	N/A	
	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.		
	If the segregation is for protective custody, the order states whether the detainee requested the segregation and whether the detainee requests a hearing.		The facility does not have an SMU for either administrative or disciplinary segregation
	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.		purposes.
	(An Administrative Segregation Order is not required for a detainee awaiting removal, release, or transfer within 24 hours.)		

	Components	Rating	Remarks (1000 Char Max)
	There are implemented written procedures for the regular review of all detainees in Administrative Segregation. 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. 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. 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. A reviewing authority who concludes a detainee should be removed from Administrative Segregation, submits that recommendation to the facility administrator (or designee) for approval.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
49.	If a detainee has been in Administrative Segregation for more than 30 days and objects to this status, the facility administrator reviews the case to determine whether that status should continue, taking into account the views of the detainee. A written record is made of the decision and the justification. A similar review is done every 30 days thereafter.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.

	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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
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.	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
54.	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	N/A	The facility does not have an SMU for either administrative or disciplinary segregation purposes.
	the Disciplinary Segregation Order, and forwards the completed order to the chief of security or supervisor for insertion into the detainee's detention file.		

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)
55.	The facility has implemented written procedures for the regular review of all Disciplinary Segregation cases.		
	A supervisor interviews and reviews the status of each detainee in Disciplinary Segregation every seven days and documents his or her findings on a Disciplinary Segregation Review Form (I-887).		The facility does not have an SMU for either administrative or disciplinary segregation purposes.
	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.	N/A	
	The reviewer may recommend the detainee's early release upon finding that Disciplinary Segregation is no longer necessary to regulate the detainee's behavior. Early release and return to the general population requires approval of the facility administrator.		
	All review documents are placed in the detainee's detention file.		

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 facility does not have a Special Management Unit. The facility is a Level 1, minimum security detention center. ICE immediately transfers to another facility any detainee who is identified as needing segregated housing. While the transfer is being processed, a staff member closely monitors the detainee.

Overall Rating: N/A

Reviewer Name (Printed) (b)(7)(e)

Completion Date: 11/01/2012

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	Weekly announced and unannounced visits are conducted by ICE staff members.
2.	Detention Staff and Deportation Staff conduct scheduled weekly visits with detainees.	Meets Standard	Review of logbooks confirmed that ICE staff members visit the housing areas at least weekly. Postings throughout the facility show the scheduled days and times for visits by detention and deportation staff. ICE staff members make scheduled visits to the facility on Tuesday and Thursday mornings.
3.	Scheduled visits are posted in ICE/DRO detainee housing areas.	Meets Standard	Postings throughout the facility show the scheduled days and times of visits by detention and deportation staff.
4.	Visiting ICE staff observe and note current climate and conditions of confinement.	Meets Standard	A review of Liaison Visit Checklists indicated that ICE staff members note the current climate and conditions of confinement on the form.
5.	ICE/DRO Detainee Request Forms are available for use by ICE/DRO detainees.	Meets Standard	ICE provides Detainee Request Forms which are available to detainees at various locations throughout the facility.
6.	The facility treats detainee correspondence to ICE/DRO staff as Special Correspondence.	Meets Standard	Facility policy requires that correspondence to ICE staff be treated as Special Correspondence.
7.	A secure box is located in an accessible location for detainee's to place their Detainee Request Forms.	Meets Standard	
8.	Only ICE staff are able to retrieve the contents of the secure box containing Detainee Request Forms,	Meets Standard	Only ICE staff members have a key to the secure box where detainees place their Detainee Request Forms.
9.	ICE/DRO staff respond to a detainee request from a facility within 72 hours and document the response in a log.	Meets Standard	A review of the Staff Detainee Request Logbook indicated that detainees receive a response within 72 hours.

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)
 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	This information is provided to detainees in the detainee handbook.
 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	Office of Inspector General (OIG) Hotline Informational Posters are posted throughout the facility.
12. Daily telephone serviceability checks are documented in the housing unit logbook.	Meets Standard	

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)

This standard was evaluated by on-site observation of the housing areas, interviews with ICE staff members and a review of several logbooks. Facility policy governing the handling of detainee communication with ICE staff was also reviewed. ICE staff members were observed throughout the facility interacting with detainees.

Overall Rating: Meets Standard Reviewer Name (Printed): (b)(6), (b)(7)(c)

Completion Date: 11/1/2012

	PART 2 – 17. TOOL CONTROL (Key: Q)		
	s Detention Standard protects detainees, staff, contractors, erations by maintaining control of tools, culinary utensils, an	and volunteers from harm	
	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 maintenance supervisor has responsibility for developing a tool control procedure and an inspection system to ensure accountability.
2.	If the warehouse is located outside the secure perimeter, the warehouse receives all tool deliveries. If the warehouse is located inside the secure perimeter the facility administrator shall develop site-specific procedures, for example; storing tools at the rear 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. The maintenance supervisor is contacted when a tool arrives at the front entrance. He receives, identifies, inventories and ensures accountability of all tools delivered to the facility.
3.	(MANDATORY) The use of tools, keys, medical equipment, and culinary equipment is controlled.	Meets Standard	The facility has policy controlling the use of tools, keys and medical and culinary equipment.
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	The chit system is used in issuing tools at this facility. When a tool is issued, a chit is placed on the shadow board in its place. The tool is also signed out on a log.
5.	 Tool inventories are required for: Facility Maintenance Department Medical Department Food Service Department Electronics Shop Recreation Department Armory 	Meets Standard	Tool inventories are required for the maintenance, medical and food service departments and the armory. The recreation department has no tools. There is no electronics shop at this facility.
6.	Tool Inventories are conspicuously posted on all tool boards, tool boxes and tool kits.	Meets Standard	
7.	 The facility has a policy for the regular inventory of all tools. The policy sets minimum time lines for physical inventory and all necessary documentation. ICE facilities use AMIS bar code labels when required. 	Meets Standard	
8.	 The facility has a tool classification system. Tools are classified according to: Restricted (dangerous/hazardous) Non Restricted (non-hazardous). 	Meets Standard	Facility policy classifies tools as Restricted and Non-Restricted.

	PART 2 – 17. TOO	L CONTROL (Key: Q)			
	Detention Standard protects detainees, staff, contractors,	and volunteers from harm			
ope	operations by maintaining control of tools, culinary utensils, and medical and dental instruments, equipment, and supplies.				
	Components	Rating	Remarks (1000 Char Max)		
9.	Department heads are responsible for implementing proper tool control procedures as described in the standard.	Meets Standard	Policy states that department heads are responsible for implementing proper tool control procedures for their respective departments.		
10.	There are policies and procedures in place to ensure that all tools are properly marked and readily identifiable.	Meets Standard			
	 The facility has an approved tool storage system. 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	This facility has an approved tool storage system that ensures all tools are accountable. Tools are stored on boards with shadows resembling the tools and with a white background. Restricted tools are shadowed in red. Non- restricted tools are shadowed in black.		
12.	Tools removed from service have their shadows removed from shadow boards.	Meets Standard	Policy directs staff to remove the shadows of tools that have been removed from service.		
13.	Tools not adaptable to a shadow board are stored in a locked drawer or cabinet.	Meets Standard	Tools not adaptable to a shadow board are stored in a locked drawer or cabinet, or in some other secure manner.		
14.	Sterile packs are stored under lock and key.	Meets Standard			
15.	Each facility has procedures for the issuance of tools to staff and detainees.	Meets Standard			
16.	 There are policies and procedures to address the issue of lost tools. The policy and procedures include: Verbal and written notification. Procedures for detainee access. Necessary documentation/review for all incidents of lost tools. 	Meets Standard			
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			

	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)	
19.	Hoses longer than three feet in length are classified as a restricted tool.	Meets Standard	Policy classifies hoses and electric cords longer than three feet as restricted tools.	
20.	Scissors used for in-processing detainees are tethered to the furniture (e.g. table, counter, etc.) where they are used.	N/A	No scissors are used for in- processing 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)

This inspector reviewed facility policy, post orders and tool control inventories in review of this standard. The maintenance supervisor and compliance manager were interviewed. The medical unit, kitchen and maintenance tool storage areas were observed. A tool storage box carried by maintenance staff was inspected. Inventory contained in the toolbox was within policy guidelines. The facility has a tool control program that is effective in protecting detainees, staff, visitors, contractors and volunteers from harm by maintaining control of tools, culinary utensils and medical and dental equipment and supplies.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 11/1/2012

	PART 2 – 18. USE OF FORG		Key: R)
situ	s Detention Standard authorizes staff to use necessary phy lation have failed, and only for protection of self, detainees, c 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	The facility has a Use of Force policy.
2.	Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	Meets Standard	Policy authorizes staff to respond to an immediate use-of-force situation without a supervisor's presence or direction.
3.	When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, policy requires that staff must try to resolve the situation without resorting to force.	Meets Standard	
4.	Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	Meets Standard	
•	The facility subscribes to the prescribed Confrontation Avoidance Procedures. Ranking detention official, health professional, and others confer before every calculated use of force.	Meets Standard	Confrontation Avoidance Procedures are part of facility policy. Policy also directs the ranking detention officials to meet with a health care professional prior to any calculated use of force.
6.	 When a detainee must be forcibly moved and/or restrained and there is time for a calculated use of force, staff use the Use-of-Force Team Technique. Under staff supervision. 	Meets Standard	
7.	Staff members are trained in the performance of the Use- of-Force Team Technique.	Meets Standard	
8.	All use-of-force incidents are documented and reviewed.	Meets Standard	Policy directs staff to prepare written reports on all use-of- force incidents. These reports are reviewed by management.
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	

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: Policy and post orders direct staff • Does not use force as punishment. to not use force as punishment, Attempts to gain the detainee's voluntary cooperation to attempt to gain the detainee's before resorting to force voluntary cooperation before Meets Standard resorting to the force necessary Uses only as much force as necessary to control the to control the detainee and to detainee. use restraints only when other Uses restraints only when other non-confrontational non-confrontational methods means, including verbal persuasion, have failed or are have failed or are impractical. impractical. 11. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically Meets Standard necessary. 12. (MANDATORY) Use-of-Force Teams follow written The Use-of-Force Team at this procedures that attempt to prevent injury and exposure facility is identified as a to communicable disease(s). Disturbance Control Team (DCT). The DCT uses universal Meets Standard precautions and safety equipment to prevent injury and exposure to communicable diseases. 13. Standard procedures associated with using four/five point restraints include: 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. • N/A (b)(7)e Logging each check. • Repositioning detainee often enough to prevent soreness or stiffness. Medical evaluation of the restrained detainee twice per eight-hour shift. When gualified medical staff are not immediately available, staff position the detainee "face-up." 14. The shift supervisor monitors the detainee's position/condition every two hours. N/A He/she allows the detainee to use the restroom at these times under safeguards. (b)(7)e 15. All detainee checks are logged. N/A

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	Policy directs staff to contact medical staff in an immediate use-of-force situation after the detainee is under control.	
17. When the Facility Administrator authorizes use of non-lethal weapons:			
 Medical staff are consulted before staff use pepper spray/non-lethal weapons. 	Meets Standard		
 Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized. 			
 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	There is no Special Management Unit at this facility.	
20. Special precautions are taken when restraining pregnant detainees.Medical personnel are consulted	Meets Standard		
21. Protective gear is worn when restraining detainees with open cuts or wounds.	Meets Standard	Policy and post orders require that staff members wear protective gear when restraining detainees with open cuts or wounds.	
22. Staff document every use of force, including what type of restraints was used during the incident.	Meets Standard		
23. It is standard practice to review any use of force and the non-routine application of restraints.	Meets Standard		
 24. All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. Specialized training is given to officers ensuring they are certified in all devices approved for use. 	Meets Standard		
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.	N/A	(b)(7)e	
26. The use of canines is restricted to contraband detection purposes only.	N/A	The facility does not use canines.	
27. The officers are thoroughly trained in the use of soft and hard restraints.	Meets Standard		
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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) 28. In SPCs, the Use of Force form is used. In other facilities This facility is a CDF. A locally (IGSAs / CDFs) this form or its equivalent is used. produced form is used to

Meets Standard

document any use of force.

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)				
This inspector reviewed facility policy, post orders, training rosters and use-of-force documentation in review of this standar				
The Disturbance Control Team (DCT) has not been used in this facility during the past year. Detention officers, including a				
member of the DCT, a shift supervisor, the compliance manager and the chief of security were interviewed. (b)(7)e				
(b)(7)e Facility policy does not allow unauthorized or				
unsafe types of force. Policy authorizes staff to use the force necessary, only after reasonable efforts to otherwise resolve a				
situation have failed and only for the protection of self or others, for the prevention of escape or serious property damage o				
to maintain the security and orderly operation of the facility.				
Overall Rating: Meets Standard				
Reviewer Name (Printed): (b)(6), (b)(7)(c) Completion Date: 11/1/2012				
Reviewer Signature (for printed form submission):				

Section III ORDER

Disciplinary System

Page **68** of **154** FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE) G-324A (Coded 10132010) Detention Review Worksheet - Rev: 6/19/2012 – Form Key 3

	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 a written disciplinary system that is explained in the detainee handbook.		
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:				
	corporal punishment				
	deviations from normal food service				
	clothing deprivation		Policy prohibits the sanctions		
	bedding deprivation	Meets Standard	listed in this component.		
	denial of personal hygiene items				
	loss of correspondence privileges				
	deprivation of legal access and legal materials				
	deprivation of physical exercise				
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 detainee handbook and orientation video explain the discipline policy to detainees.		
5.	 The following items are conspicuously posted in Spanish and English or other dominate languages used in the facility: Rights and Responsibilities Prohibited Acts Disciplinary Severity Scale 	Meets Standard	Policy requires that the bulleted items listed in this component be posted conspicuously in Spanish and English. The items are posted in all housing areas and are played on a continuous loop on the closed circuit television		
	 Sanctions 		system for detainee viewing.		
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	Incident reports are forwarded to the shift supervisor before the end of the 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			

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)	
 An intermediate disciplinary process is used to adjudicate minor infractions. 	Meets Standard	Policy states that the Unit Disciplinary Committee or an informal resolution may be used to resolve minor infractions.	
10. A disciplinary panel (or equivalent in IGSAs) adjudicates infractions. The panel:			
 Conducts hearings on all charges and allegations referred by the UDC 		The compliance manager is the	
 Considers written reports, statements, physical evidence, and oral testimony 	Meets Standard	disciplinary hearing officer and conducts hearings in accordance with the items noted in this	
Hears pleadings by detainee and staff representative		component.	
Bases its findings on the preponderance of evidence			
Imposes only authorized sanctions			
11. A staff representative is available if requested for a detainee facing a disciplinary hearing	Meets Standard		
12. The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	Meets Standard		
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	Policy states that punishment cannot exceed established sanctions. The facility does not have a special management unit for disciplinary segregation. A detainee who requires segregation would be transferred to another facility.	
14. Written procedures govern the handling of confidential- source information. Procedures include criteria for recognizing "substantial evidence".	Meets Standard		
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	Meets Standard	Proper forms are distributed to the detainee and are placed in the detainee's detention file.	

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)

The compliance manager and shift supervisor were interviewed and policy was reviewed concerning this standard. Incident reports and notice of charges were reviewed. All reports were within policy and standard guidelines. Policy has been established to control detainee behavior through a system of discipline to provide a safe and orderly facility environment and to correct unwanted or prohibited acts.

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

PART 3 – 19. DISCIPLINARY SYSTEM – Reviewer Summary (Use following format for dates: mm/dd/yyyy)	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 11/1/2012
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

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 under the supervision of a professionally trained and ServSafe-certified Food Service Manager (FSM). All food service staff responsibilities are documented in writing.
2.	The Cook Foreman is on duty on days when the FSA is off duty and vice versa.	Meets Standard	
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	
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	N/A	This is a no knife facility.
5.	All knives not in a secure cutting room are physically secured to the workstation and staff directly supervises detainees using knives at these workstations. Staff monitor the condition of knives and dining utensils	Meets Standard	This is a no knife facility. All food service staff members monitor the condition of dining utensils.
6.	Special procedures (when necessary) govern the handling of food items that pose a security threat.	Meets Standard	
7.	Operating procedures include daily searches (shakedowns) of detainee work areas.	Meets Standard	
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	
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	All staff and detainees assigned to food service are medically screened and cleared prior to working in the kitchen. Daily inspections to ensure health and cleanliness are conducted by the FSM. Detainees were observed to be clean, neatly groomed and appropriately dressed during this inspection.
10.	. The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	Meets Standard	

PART 4 -	- 20. FOOD SERVICE	(Key: T)
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	D SERVICE (Key: T)	
This Detention Standard ensures that detainees are provided a sanitary and hygienic food service operation.	nutritionally balanced die	t that is prepared and presented in a
Components	Rating	Remarks (1000 Char Max)
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: 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	Food service training records confirmed that detainee workers receive training in safe work practices, safety features of individual products and equipment, and the safe handling of hazardous materials used in food service.
13. The Cook Foreman documents all training in individual detainee detention files.	Meets Standard	
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	ICE detainees are paid one dollar per day in accordance with the Voluntary Work Program standard.
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	At least two hot meals are served daily. Times between meals do not exceed 14 hours.
16. For cafeteria-style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	Meets Standard	There is a sneeze guard protecting the serving line. Detainees are served their meals through a serving window. There is no salad bar in the dining facility.
 The facility has a standard 35-day menu cycle. IGSAs use a 35 day or similar system for rotating meals. 	Meets Standard	The facility utilizes a 35-day menu cycle.
18. (MANDATORY) A registered dietitian shall conduct a complete nutritional analysis that meets U.S. Recommended Daily Allowances (RDA), at least annually, of every master-cycle menu planned by the FSA. The dietitian must certify menus before they are incorporated into the food service program. If necessary, the FSA shall modify the menu in light of the nutritional analysis to ensure nutritional adequacy. The menu will need to be revised and re-certified by the registered dietician in that event.	Meets Standard	A registered dietitian has conducted a complete nutritional analysis of every master-cycle menu plan. Any revisions to the menus require re-certification by the dietitian.
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	

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)	
 20. The Cook Foreman has the authority to change menu items if necessary. If yes, documenting each substitution, along with its justification, with copy to the FSA 	Meets Standard		
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. 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. 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	A common fare menu is available to detainees at no charge. The menu satisfies the required nutritional daily allowances. Food service policies and procedures address all elements of this component.	
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	Meets Standard		
24. A supervisor at the command level must approve a detainee's removal from the Common Fare Program.	Meets Standard		
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. 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 Kosherfor- 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 common fare program accommodates the religious dietary needs of all faiths represented in the facility.	

PART 4 – 20. FOO		at that is propared and presented in a	
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)	
27. The food service program addresses medical diets.	Meets Standard	The food service program addresses medical diets. The medical department provides an approved list of all detainees receiving medical diets.	
28. Satellite-feeding programs follow guidelines for proper sanitation.	N/A	Satellite-feeding is not used at this facility. All detainees eat their meals in the dining area.	
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	Visual observation during this inspection confirmed that food temperatures were being 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: Personal cleanliness and hygiene; Sanitary techniques for preparing, storing, and serving food, and; The sanitary operation, care, and maintenance of equipment. 	Meets Standard	ICE detainee worker training records showed that they are receiving training in personal cleanliness and hygiene, in sanitary techniques for preparing, storing and serving food, and in the sanitary operation, care and maintenance of equipment.	
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	Daily and weekly inspections of food service are conducted and documented by the FSM. The facility also requires that weekly inspections of all food service areas be performed by medical and administrative staff.	
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	Staff document dishwashing machine temperatures after each meal. The temperatures were observed to be within the acceptable range.	

PART 4 – 20. FOOI	D SERVICE (Key: T)	
This Detention Standard ensures that detainees are provided a n sanitary and hygienic food service operation.	utritionally balanced die	et that is prepared and presented in a
Components	Rating	Remarks (1000 Char Max)
37. (MANDATORY) Staff document the results of every refrigerator/ freezer temperature check, in accordance with the Detention Standard on Food Service.	Meets Standard	A log is maintained with recorded temperatures for the refrigerator and freezer. All temperatures were within the acceptable range.
 The cleaning schedule for each food service area is conspicuously posted. 	Meets Standard	
39. Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	Meets Standard	All incoming food shipments are inspected by food service staff for damage, contamination, temperature and pest infestation.
40. Storage areas are locked when not in use.	Meets Standard	
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	This is a CDF facility. ICE supervisors do not routinely supervise dining activities at the facility. Facility staff members are assigned to the dining room to supervise meals.
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 is a CDF facility. The common fare program is not factored into the food service quarterly budget estimate.
45. When required, only food service staff prepare the sack lunches for detainee transportation.	Meets Standard	
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	
48. Stock inventory levels are monitored and adjusted to correct overage and shortage problems.	Meets Standard	Overage and shortage issues are maintained on a spreadsheet by the FSM.
49. Staff comply with all ICE Housekeeping, Storeroom/Refrigerator requirements. Identify and explain any shortcomings.	Meets Standard	All storage areas were observed to be clean and orderly.
50. Dining room facilities and operating procedures will provide sufficient space and time for detainees to eat meals in a relatively relaxed, unregimented atmosphere.	Meets Standard	

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) 51. (MANDATORY) An independent, external source shall Equipment is inspected quarterly conduct annual inspections to ensure that the food service by the Florida Department of facilities and equipment meet governmental health and Health. The last inspection was Meets Standard safety codes. 09/24/2012. The facility received a satisfactory rating. Corrective action is taken on deficiencies, if any. 52. Personnel inspecting the food service department shall note needed corrective action(s), if any, in a written report Meets Standard to the Facility Administrator. 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 Meets Standard Data Sheets (MSDSs) will be maintained on all flammable, toxic, and caustic substances used. 54. (MANDATORY) The FSA is responsible for pest control in Pest control services are the food service department, including contracting the Meets Standard provided by a private contractor, services of an outside exterminator. Ready-to-Kill Pest Control.

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 provides detainees with a nutritious and appetizing menu certified by a registered dietitian. Medical and special diets are made available to detainees through coordination with the medical department and religious services. Department staff members are knowledgeable in food safety and the ICE food standards. Detainee workers are appropriately trained in safe food practices, food service sanitation and equipment operation. The food service operation was observed to be clean and well maintained. The standard's rating was based on a review of policies and procedures, observation and staff and detainee interviews.

Overall Rating: Meets Standard

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

Completion Date: 11/1/2012

	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	The Health Services Administrator (HSA) is notified as soon as a detainee declares a hunger strike or is observed engaging in a hunger strike.	
2.	Facility immediately reports via the chain of command a hunger strike to ICE/DRO.	Meets Standard	Local operating procedure defines the chain of command for immediate reporting of a hunger strike to ICE.	
3.	The facility has established procedures to ensure staff respond immediately to a hunger strike.	Meets Standard	The hunger strike policy requires proper and prompt notification, assessment/mental health evaluation and counseling, separate housing of the detainee, monitoring of fluid and food intake, documentation and clinical treatment recommendations for a continued hunger strike.	
4.	Policy and procedure require that staff isolate a hunger- striking detainee from other detainees.	Meets Standard	Policy requires that the hunger striker be placed in a single occupancy observation cell.	
5.	Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	Meets Standard	This facility has no special management unit. The detainee would be placed in an observation room in the medical clinic or, if medically indicated, would be transferred to a hospital.	
6.	Medical staff record the weight and vital signs of a hunger- striking detainee at least once every 24 hours.	Meets Standard	Weights and vital signs are taken each shift per policy. These are documented on a hunger strike monitoring form by the nurse.	
7.	The facility medical authority obtains a hunger striker's consent before medical treatment.	Meets Standard	There is a separate hunger strike consent and refusal form for the detainee to sign.	
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.	Meets Standard	The Refusal of Treatment form contains a signature line for two witnesses and documentation of counseling.	
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.	Meets Standard	Three meals a day are delivered to the detainee on a hunger strike and consumption is recorded for each meal.	

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)	
10. Staff maintain the hunger striker's supply of drinking water/other beverages.	Meets Standard	Staff maintains the hunger striker's supply of drinking water and other beverages.	
 During a hunger strike, staff remove all food items from the hunger striker's living area. 	Meets Standard	During a hunger strike, policy requires that staff remove all food items from the hunger striker's living area.	
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.	Meets Standard	Medical staff are instructed to record the hunger striker's fluid intake and food consumption on the I-839 form.	
13. The medical staff have written procedures for treating hunger strikers.	Meets Standard	There are written protocols for medical treatment of a hunger striker.	
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.	Meets Standard	All screening, evaluation, intervention and encounters are documented in the detainee's medical record.	
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 the training curriculum revealed that all staff receive orientation and annual training on recognizing the signs of a hunger strike and on the procedures for referral for medical assessment. Medical staff members have 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)

The standard's rating was based on an interview with the Health Services Administrator and on a review of the medical record of a detainee who went on a hunger strike in November 2011. Documentation was present in accordance with written policy and nursing hunger strike protocol. Vital signs and weights were documented on a daily treatment record, consent was obtained, and procedures were followed to place the detainee in a single room and for physical examination, clinical monitoring, food and water intake monitoring, and education and counseling. ICE was notified. After refusing food for sixty hours, the detainee was transferred to another detention facility.

Overall Rating: Meets Standard

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

Completion Date: 11/1/2012

	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	Staff licenses were found to be current. The pharmacy license is valid through February 2013. The facility is accredited by the American Correctional Association.	
2.	The facility's in-processing procedures of arriving detainees include medical screening.	Meets Standard	All detainees are medically screened during intake by a registered nurse (RN) or licensed practical nurse (LPN). A review of 25 medical records indicated that all were screened within three hours of arrival.	
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	Onsite medical coverage is provided 24 hours a day. The staffing plan was last reviewed on 10/11/2012. The plan includes the essential positions needed to provide the required scope of services. Staffing includes the Health Services Administrator (HSA), (b)(7)e physicia(b)(7)(B)(sb)(7)(d)PNs and one medical records clerk. Dental, pharmacy, laboratory and x-ray services are provided through contracts. Mental health telepsychiatry is used for psychotropic medication management. The facility physician and nursing staff handle mental health crisis intervention and referral.	
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	Newly admitted detainees are informed, orally and in writing in a language they can understand, about how to access health services. Written notices in English and Spanish are posted in the intake area and in the housing units. A language line interpretation service is available for use as needed.	

	PART 4 – 22. MEI	DICAL CARE (Key: V)	
	Detention Standard ensures that detainees have access to Ith education, so that their health care needs are met in a t		
	Components	Rating	Remarks (1000 Char Max)
5.	Detainees will have access to and receive specified 24- hour emergency medical, dental, and mental health services.	Meets Standard	Medical staff is on site 24 hours a day, seven days a week. On-call emergency medical, dental and mental health services are available 24 hours per day.
6.	New direct care staff will receive tuberculosis tests prior to their job assignment and periodically thereafter and will be offered the hepatitis B vaccine series.	Meets Standard	The infection control program requires employee tuberculosis (TB) testing pre-employment and annually thereafter. The Hepatitis B vaccination series is offered.
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	Job descriptions were reviewed and all licenses were found to be current and properly maintained.
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	A handbook, written in English and Spanish, is given to each detainee upon admission. The handbook provides instructions for accessing health care. Information is also provided in an orientation video.
9.	In SPCs and CDFs, medical personnel credentialing and verification complies with the standards established by the NCCHC and Joint Commission.	Meets Standard	Medical personnel credentialing and verification is in accordance with National Commission on Correctional Health Care (NCCHC) and The Joint Commission standards.
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. When screening is performed by a detention officer, the facility maintains documentation of the officer's special training. 	Meets Standard	All incoming detainees receive a health care screening within 12 hours of arrival. A review of 25 medical records confirmed that all detainees were screened by an RN.
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	Medical personnel have access to bilingual staff and/or a language line to communicate with non- English speaking detainees. Use of the language line is documented in a log.

	PART 4 – 22. MEI	DICAL CARE (Key: V)	
	Detention Standard ensures that detainees have access to Ith education, so that their health care needs are met in a ti		
	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 facility has sufficient space including two examination rooms, a medical records room, two storage rooms, a nursing area, digital x-ray and two observation cells. The medical unit also includes two waiting areas for males and females, administrative offices and a medication room. In addition, the medical unit contains telemedicine equipment which is utilized primarily for telepsychiatry.
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 unit is centrally located within the confines of the secure perimeter. It is a restricted access area.
14.	The medical facility entrance includes a holding/waiting room.	Meets Standard	The medical unit has two separate waiting rooms with chairs for male and female detainees.
15.	The medical facility's holding/waiting room under the direct supervision of custodial staff.	Meets Standard	A detention officer continuously supervises the waiting rooms.
16.	Detainees in the holding/waiting room have access to a toilet and a drinking fountain.	Meets Standard	Each waiting room has access to a restroom and drinking water. Each also includes a flat screen television and health education materials.
17.	 Medical records are kept apart from other files. They are: 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	Medical records are secured in a locked area next to the nursing station. Physical access is restricted to authorized medical staff. A medical records clerk supervises the area. Procedurally, no copies are made or placed in detainee non- medical files.
18.	(MANDATORY) A signed and dated consent form is obtained from a detainee before medical treatment is administered.	Meets Standard	Signed and dated consent forms were observed in the medical records. They are obtained prior to medical treatment being administered.

	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)	
19.	Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	Meets Standard	Detainees use an Authorization for Release of Confidential Information form to authorize the release of confidential medical records.	
20.	The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	Meets Standard	The HSA receives release and transfer lists in advance.	
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	The detainee's medical record or medical transfer summary as appropriate is prepared and transferred with the detainee.	
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	Medical records are sealed in a mailing envelope or other container and marked "Medical Confidential".	
23.	Medical screening includes a Tuberculosis (TB) test.	Meets Standard	Medical screening includes a chest x-ray for all detainees. Screening for symptoms of active TB disease is also conducted on all incoming detainees. If the detainee arrives with documentation of an x-ray within the past year, it will not be repeated unless there are symptoms or risk factors.	
24.	 All detainees receive a mental-health screening upon arrival. It is conducted: By a health care provider or specially trained officer; Before a detainee's assignment to a housing unit. 	Meets Standard	An RN conducts the mental health screening within 12 hours of the detainee's arrival. Review of medical records verified that all detainees received a mental health screening and were referred as needed prior to 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	The physician reviews the medical records of incoming detainees. This was verified by his signature and date on all screening and physical examination documentation.	

	PART 4 – 22. MEI				
	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.				
neu	Components	Rating	Remarks (1000 Char Max)		
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	All newly admitted detainees receive a health appraisal and physical examination. The detainee's medical history is taken by a nurse. The physician or an RN trained by the physician conducts the physical examination. The physician trained the RNs in January and February 2012. The physician reviews any examination conducted by a trained RN. A review of 25 medical records confirmed that all detainees had received a physical examination within 14 days of arrival. Two detainees had also received an annual examination after one year.		
27.	Detainees in the Special Management Unit have access to the same level of health care as detainees in the general population.	N/A	There is no special management unit at this facility.		
28.	 Staff provide detainees with health- services (sick call) request slips daily, upon request. 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	Sick call slips in English and Spanish are available in the housing areas. Detainees can place requests in a locked box by the dining room three times a day. Sick call slips are triaged by the RN daily at 6:00 p.m. and are signed and dated. Detainees are then seen by the RN or physician within 24 to 48 hours. Sick call logs and medical records reviewed confirmed that detainees are seen within this timeframe unless the matter is urgent and they are seen immediately. Detainees may also walk to the medical unit without an appointment.		
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	Medical staff is on site 24 hours per day, seven days per week. The facility has a written plan for the delivery of emergency health care when immediate outside medical attention is required.		

	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)		
30.	The plan includes an on-call provider.	Meets Standard	The HSA and physician are on call.		
31.	The plan includes a list of telephone numbers for local ambulances and hospital services.	Meets Standard	The plan includes a list of phone numbers for local ambulances and hospital services. The facility utilizes the 911 system for emergency medical services.		
32.	The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.	Meets Standard	Security coordinates with health care staff to ensure the provision of emergency care consistent with safety and security.		
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	Both detention and health care personnel are trained annually to respond to health-related situations within four minutes. A medical emergency response bag is maintained in the medical unit. Automated external defibrillators (AEDs) are placed throughout the facility and are checked regularly.		
34.	Where staff are used to distribute medication, a health care provider properly trains these officers.	N/A	Nurses administer all medications.		
35.	Pharmaceuticals and nonprescription medicines will be stored, inventoried, dispensed, and administered in accordance with sound standards and facility needs for safety and security.	Meets Standard	Off-site pharmacy services are provided through a contract with Correct Rx Pharmacy Services. Medications are provided in detainee-specific blister packs and are stored in locked medication carts and cabinets in the secured medication room. Medications are administered through a medication window four times a day. A pharmacist makes documented monthly visits to inspect the medication room. An inspection of the pharmacy revealed no expired medications. Controlled substances were stored under double lock, and counts were accurate. The pharmacy license is valid through February 2013.		

	PART 4 – 22. ME	DICAL CARE (Key: V)		
	This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and			
heal	th education, so that their health care needs are met in a t	- -		
26	Components	Rating	Remarks (1000 Char Max)	
36.	(MANDATORY) Each facility has written policy and procedures for the management of pharmaceuticals that include:			
	• A formulary of all prescription and nonprescription medicines stocked or routinely procured from outside sources.		The facility has written policy and procedure for management of the pharmacy. The policy	
	• A method for obtaining medicines not on the formulary.		addresses all items listed in this component and includes an	
	• Prescription practices, including requirements that medications are prescribed only when clinically indicated and that prescription are reviewed before being renewed.	Meets Standard	established formulary, as well as a method for obtaining non- formulary medications. Medications are administered only upon the order of a physician. Pharmacy and Therapeutics Committee meetings are held quarterly.	
	 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.			
37.	All pharmaceuticals are stored in a secure area with the following features:		T he sub-sub-sub-sub-sub-sub-sub-sub-sub-sub-	
	• A secure perimeter;		The pharmacy area was found to be secure with a solid door and	
	• Access limited to authorized medical staff (never detainees);	Meets Standard	walls, a locked entrance and a locked medication administration	
	 Solid walls from floor to ceiling and a solid ceiling; 		window. Controlled substances	
	• A solid core entrance door with a high security lock (with no other access); and		are stored in cabinets under double locks.	
	A secure medication storage area.			
38.	In SPCs and CDFs, the pharmacy has a locking pass-through window.			
	• Administration and management in accordance with state and federal law.		The pharmacy has a locking pass- through window for the	
	Supervision by properly licensed personnel.		administration of medications by	
	• Administration of medications by personnel properly trained and under the supervision of the health services administrator, or equivalent.	Meets Standard	nursing staff. Medication Administration Records (MARs) are used to document the administration of medications.	
	• Accountability for administering or distributing medications in a timely manner and according to physician orders.		auministration of medications.	

	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)	
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	Medications are distributed according to specific medical provider orders. MARs are utilized to document prescription medications given to detainees. Over-the-counter medications administered by nursing staff are logged. Detainees may keep inhalers and nitroglycerin pills on their persons for self- administration. No other medications are kept by the detainees.	
40.	 Medication may not be delivered or administered by detainees. 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 are on duty 24 hours a day, seven days a week. Nurses administer all medications.	
41.	The facility maintains documentation of the training given any officer required to distribute medication, and the officer has available for reference the training syllabus or other guide or protocol provided by the health authority.	N/A	Nurses administer all medications.	
42.	The Warden/Facility receives notification that a detainee that has special medical needs.	Meets Standard	A special needs form is completed to inform the warden and specified staff of any detainee with special medical needs. A copy of the form is placed in the detainee's medical record.	
43.	Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	Meets Standard	Requests for examinations by independent medical providers and experts would be accommodated.	

	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		
hea	Ith education, so that their health care needs are met in a t	imely and efficient manner.	
	Components	Rating	Remarks (1000 Char Max)
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: 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	The infection control plan was last revised 2/15/2012. It addresses the management of infectious and communicable diseases. The plan includes coordination and reporting to public health authorities and local and state health departments, education and media relations. Clinical practice guidelines are available for TB, HIV, hepatitis, MRSA (methicillin- resistant staphylococcus aureus), avian influenza and other infectious and communicable diseases. Detainees are offered HIV testing.
45.	Detainees diagnosed with a communicable disease are isolated according to local medical operating procedures.	Meets Standard	Detainees identified with a communicable disease are transferred to a nearby hospital for medical isolation.
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	The facility contracts with Swissray for x-ray services. All arriving detainees receive a digital chest x-ray to screen for TB unless the detainee arrives with documentation of an x-ray taken within the past year. X-ray results are received within two hours and before detainees are moved to a housing unit. Detainees with any questionable symptoms are held in medical observation until the results of the chest x-ray are received.
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 identified with a communicable disease are transferred to a nearby hospital for medical isolation. Any detainee with abnormal chest x- ray results is transported to the hospital within two hours.

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)		
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	Policy and practice ensure transport and access to outside health care. Transport is prioritized by medical urgency.		
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 clinical supervision are managed according to written orders issued by the physician.		
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.	Meets Standard	All female detainees receive a pregnancy test upon admission. Under contract, Sun Life provides all needed obstetrical and gynecological care including high- risk pregnancy management, addiction management, counseling and assistance, nutrition and post partum follow- up. None of the 64 female detainees in the facility during the inspection were pregnant. Detainees with a high-risk pregnancy would be transferred to another facility.		
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	The physician manages all complex medical cases, utilizing established clinical practice guidelines. He sees all chronic care detainees within thirty days and schedules follow-up based upon clinical need. Medical record reviews confirmed that those with chronic conditions receive regular monitoring, testing and referrals for outside consultation as needed.		
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	The warden is notified in writing of any detainee with special medical or mental health needs. A copy of the notification is placed in the medical record.		
53.	Detainees will have access to emergency and specified routine dental care provided under direction and supervision of a licensed dentist.	Meets Standard	Dental services are provided off- site through a contract with Sunshine Dental.		

	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	Detainees that present with mental health problems are evaluated by the nurse and/or physician. Telepsychiatry is available for routine mental health treatment/ medication management. Detainees with urgent mental health concerns are sent to the community mental health hospital for evaluation and treatment.		
55.	Crisis intervention services are available for detainees who experience acute mental health episodes.	Meets Standard	Crisis intervention services are provided by the nurse or physician. If clinically indicated, a request for the detainee's transfer to a facility with mental health staff would be coordinated with ICE.		
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	Medical and mental health interviews and examinations are conducted in private examination rooms.		
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	There are limited mental health services on site. Nurses conduct a mental health screening the day a detainee arrives. A psychiatrist evaluates any detainee with a diagnosed clinical (Axis I) mental health disorder via telemedicine and provides medication management services. If further evaluation is needed, the detainee would be transported to Atlantic Shore Hospital, a psychiatric hospital and clinic, for evaluation and/or admission. Per the HSA, approximately four to five percent of the population receives psychotropic medications.		

		DICAL CARE (Key: V)	
	Detention Standard ensures that detainees have access to th education, so that their health care needs are met in a t		
	Components	Rating	Remarks (1000 Char Max)
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: 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. 	N/A	Policy prohibits the use of medical or mental health restraints at this facility.
59.	 (MANDATORY) Involuntary administration of psychotropic medications to detainees complies with applicable laws and regulations and the authorizing physician or psychiatrist will: 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. 	N/A	Policy prohibits the involuntary administration of psychotropic medication at this facility.
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.	Meets Standard	An initial dental screening is conducted by the nurse during the intake health screening. No on-site dentist is available. Detainees needing dental care are transported to Sunshine Dental, a community dental provider. Dental consults and referrals were noted in the medical records. Dental services provided included cleanings, fillings and extractions. Approximately four detainees are seen by the dentist each month.

Page **92** of **154** FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE) G-324A (Coded 10132010) Detention Review Worksheet - Rev: 6/19/2012 – Form Key 3

	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)		
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.	Meets Standard	First aid kits are maintained in all housing and intake areas and in other areas designated by the HSA and warden.		
62.	An automatic external defibrillator should be available for use at the facility.	Meets Standard	AEDs are available in the medical unit and throughout the facility and are checked regularly.		
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.	Meets Standard	ICE is notified of any detainee refusing treatment.		
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.	Meets Standard	The facility administrator and HSA meet quarterly. Review of meeting minutes confirmed that health services topics were discussed and documented. The physician also meets monthly with the HSA and health care staff.		
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	Stericycle is under contract for bio-hazardous waste disposal and picks up waste every two weeks or sooner as needed. The facility does not have a dental clinic.		
66.	(MANDATORY) The health authority will implement a system of internal review and quality assurance.	Meets Standard	The facility has a comprehensive quality improvement/risk management program that reviews areas such as infection control, grievances, chart review, sick call services and fire/safety/sanitation. Minutes of meetings were reviewed and documented discussion of compliance issues. The physician reviews five medical records per month; the nurses and records clerk also conduct record audits. There is less than one medical grievance per month.		

PART 4 – 22. MEDICAL CARE – Reviewer Summary

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

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)

The facility provides outpatient and emergency health care services, with medical staff on duty 24 hours a day. Dental services are provided off-site. Sick call is held seven days a week by RNs and five days a week by the physician. Response time for sick call requests is prompt, with detainees being seen within 24 to 48 hours. Those referred to outside specialists are generally seen within two weeks. Records included referrals to an optometrist and for physical therapy. Master problem lists and the provision of health education was well documented in the medical records. Onsite mental health services are limited to crisis management and medication management via telepsychiatry. Detainees with complex or serious medical or mental health conditions are not retained in this facility. There are two medical observation rooms adjacent to the medical unit for housing detainees in need of closer medical monitoring. Detainees are not charged a co-pay for medical services.

The facility is accredited by the American Correctional Association and was last inspected November 2011. The standard's rating was based on interviews with medical staff, detention officers and detainees; on a review of 25 medical records; on observation of sick call and medication administration; and on an inspection of documents, policies, training records and curricula, forms and logs.

Overall Rating: Meets Standard

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

Completion Date: 11/1/2012

PART 4 – 23. PERSONAL HYGIENI	(Key: W)
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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 addresses the issuance of clothing, linens, bedding and personal hygiene items. The supply of clothing, bedding and linens exceeds the minimum needed for the number of detainees housed in the facility.
2.	 All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive, at a minimum: 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 two uniforms, three pairs of socks and underwear and one pair of shoes.
3.	Additional clothing is available for changing weather conditions and as is seasonally appropriate.	Meets Standard	Appropriate protective clothing and equipment is issued to those assigned to food service, maintenance and other special work details.
4.	 New detainees are issued clean bedding, linens and towels, at a minimum: One mattress One blanket Two sheets One pillow One pillowcase One towel Additional blankets, based on local weather conditions. 	Meets Standard	The items listed in this component are issued to new detainees.
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	The facility provides soap, shampoo, toothbrush and toothpaste, comb, deodorant, toilet paper, feminine hygiene items and lotion. These items are replenished as needed.

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)		
 6. Toilet facilities are: Clean Adequate in number and can be used without staff assistance 24 hours per day when detainees are confined in their cells or sleeping areas. ACA Expected Practice 4-ALDF-4B-08 requires that toilets be provided at a minimum ratio of one for every 12 male detainees or one for every 8 female detainees. For males, urinals may be substituted for up to one-half of the toilets. 	Meets Standard	Toilets were found to be clean and in good repair. There was an adequate number of toilets for the detainees.		
 7. Bathing facilities are: Clean Operable with temperatures between 100 and 120 degrees Fahrenheit. ACA Expected Practice 4-ALDF-4B-08 requires one washbasin for every 12 detainees. ACA Expected Practice 4-ALDF-4B-09 requires a minimum ratio of one shower for every 12 detainees. 	Meets Standard	Bathing facilities are clean. Water temperatures are logged monthly and are within acceptable ranges. Bathing facilities were adequate in number.		
8. Detainees with disabilities are provided adequate facilities, support, and assistance needed for self-care and personal hygiene.	Meets Standard	Facilities including bathrooms that are handicapped-accessible are available. Rooms are accessible by elevator. There were no detainees confined to wheelchairs during the inspection.		
 9. Detainees are provided clean clothing, linen and towels. Socks and undergarments - daily. Outer garments - twice weekly. Sheets - weekly. Towels - weekly. Pillowcases - weekly. 	Meets Standard	Detainees have unlimited use of the washers and dryers in each housing area.		
10. Food service detainee volunteer workers are permitted to exchange outer garments daily.	Meets Standard	Food service detainee volunteer workers are permitted to exchange outer garments daily or as needed.		
11. Volunteer detainee workers are permitted to exchanges of outer garments more frequently.	Meets Standard	Volunteer detainee workers are permitted to exchange outer garments daily or as needed.		

PART 4 – 23. PERSONAL HYGIENE – Reviewer Summary

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

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)

The rating for this standard was based on review of written policy, on staff and detainee interviews and on observation of the intake area and the intake process. Detainees are housed in a clean and sanitary environment. Through the provision of adequate bathing facilities and the issuance and exchange of clean clothing, bedding, linens, towels and personal hygiene items, each detainee is able to maintain acceptable personal hygiene. Detainees have access to clean clothes and linens either through frequent exchanges or by doing their personal laundry.

Overall Rating: Meets Standard Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/1/2012

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)	
 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	Policy establishes a suicide prevention and intervention program. The policy was last reviewed on 9/25/2012.	
 2. At a minimum, the Program shall include procedures to address: 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 program addresses all of the items listed in this component including staff training and identification, screening, assessment, monitoring, documentation, evaluation and referral of suicidal detainees. The program also includes written procedures and protocols for handling all aspects of a suicide watch, as well as a critical incident debriefing.	
 Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation and annual training. 	Meets Standard	All new staff members receive initial and annual suicide prevention training.	
 4. Training prepares staff to: 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	Policy and training curricula address all of the items in this component. Training prepares staff to identify the warning signs and symptoms of suicidal behavior, to understand precipitating factors and to appropriately respond to suicidal detainees. It also addresses necessary communication between security and medical staff, referrals, housing considerations, follow-up monitoring and documentation.	

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)	
 5. A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process. 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	Nurses screen all newly admitted detainees upon arrival. A review of 25 medical records confirmed that all had received timely screening for suicide potential.	
6. Written procedures contain when and how to refer at-risk detainees to medical staff and procedures are followed.	Meets Standard	Policy addresses when and how to refer at risk detainees. A nurse or officer may identify a potentially suicidal detainee. The physician will order the detainee transferred to a mental health facility, and pending transfer, the detainee will be placed on a one- on-one watch with the detainee seated in the health services waiting area.	
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.	Meets Standard	Policy addresses the return of a previously suicidal detainee to general population.	
8. The facility has a designated isolation room for evaluation and treatment.	N/A	Except for the brief time a detainee is awaiting transfer, the facility does not conduct suicide watches. Assessments and monitoring are conducted in the medical area until the detainee is transferred.	
9. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	N/A	There are no designated suicide watch rooms in this facility.	
10. Medical staff have approved the room for this purpose.	N/A	There are no designated suicide watch rooms in this facility.	
11. Staff observe and document the status of a suicide-watch detainee at least once every 15 minutes/constant observation.	N/A	Detainees in need of suicide watch are promptly transferred to an outside mental health facility.	

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	Constant direct one-on-one supervision by an officer is provided to a suicidal detainee pending prompt transfer to an outside mental health facility. Medical staff assesses and documents the detainee's status pending transfer.
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 contacted and requested to authorize the transfer of a suicidal detainee, in conjunction with the medical authority. The suicidal detainee is under constant observation while awaiting transfer.
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	Policy addresses mortality review requirements and critical incident debriefing.

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)

Suicide precautions at this facility include one-on-one supervision by an officer pending the detainee's prompt transfer to an appropriate outside facility. Review of the medical record of the one detainee identified as potentially suicidal confirmed that the detainee was placed on one-on-one watch and transferred from the facility within thirty minutes. There have been no suicides in this facility in the past year.

Overall Rating: Meets Standard

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

Completion Date: 11/01/2012

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 detai			
references to detainee death and related notifications. (All Li	-		
Components	Rating	Remarks (1000 Char Max)	
 Detainees, who are chronically or terminally ill, are transferred to an appropriate off-site medical facility. 	Meets Standard	This facility does not house terminally ill detainees. If a detainee should become terminally ill while at the facility, he/she would be transferred to an appropriate medical facility.	
 2. The facility or appropriate ICE office promptly notifies the next-of-kin of the detainee's: medical condition. The detainee's location. 	Meets Standard	The facility would notify ICE of a detainee's medical condition. ICE	
 The visiting hours and rules at that location. 		would notify the next of kin.	
 3. There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives. 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 on advanced directives and end-of-life decision making addresses the requirements of this component. The facility adheres to the State of Florida law and follows ICE policy regarding detainee living wills, advanced directives and Do Not Resuscitate (DNR) orders.	
4. There is a policy addressing "Do Not Resuscitate Orders"	Meets Standard	Facility policy addresses DNR orders.	
5. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation.	Meets Standard	Detainees 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 IGSAs, this notification is made through the local ICE representative.	Meets Standard	The facility notifies ICE regarding the basic circumstances of any detainee with a DNR order in the medical record. ICE makes further notifications as indicated.	
 The facility has written procedures to address the issues of organ donation by detainees. 	Meets Standard	Policy addresses this component. Organ donation procedures are in accordance with the ICE contract. It is allowed for immediate family members only.	
8. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in custody.	Meets Standard	Policy addresses this component. The facility would notify ICE staff, who in turn would notify family members.	

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 is a policy to 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 ICE staff, the detainee's remains would be disposed of in accordance with this standard.
 11. In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. If the detainee is a U.S. military veteran, the Department of Veterans Affairs notified. 	Meets Standard	Per ICE staff, in the event that neither family nor consulate claims the remains, the Field Office would schedule an indigent's burial after consultation with the Department of Veterans Affairs.
 An original or certified copy of a detainee's death certificate is placed in the subject's A-File. 	Meets Standard	An original or certified copy of a detainee's death certificate would be placed in the A-File.
 13. The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as; Performance of an autopsy. Person(s) to perform the autopsy. Obtaining State approved death certificates. Local transportation of the body. 	Meets Standard	Facility policy addresses this component. The warden is required to notify the medical examiner or coroner immediately in the event of a death. The facility also notifies ICE. The medical examiner or coroner makes decisions regarding autopsy and transportation of the body. The facility requests a copy of the state-approved death certificate.
 ICE staff follow established procedures to properly close the case of a deceased detainee. 	Meets Standard	Per ICE staff, closing the case would include placing the death certificate in the file, writing a note in the file and sending the file to the National Records Center.

PART 4 – 25. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH – Reviewer Summary (Use following format for dates: mm/dd/yyyy)

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)

There have been no detainee deaths at this facility since the last inspection. The facility provides an outpatient level of health care and does not house seriously or terminally ill detainees or those with complex severe medical or mental health conditions. The Health Services Administrator, physician and other health care staff were interviewed and facility policies were reviewed to determine procedures and practices related to terminal illness, advance directives and detainee deaths. This facility has the required procedures and policies in place for an appropriate response to the death of an ICE detainee.

Overall Rating: Meets Standard Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/1/2012

Section V ACTIVITIES

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

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.			
Com	ponents	Rating	Remarks (1000 Char Max)
correspondence and correspondence and oth	oolicy and procedures concerning other mail. The rules for er mail are posted in each housing rovided to each detainee via a	Meets Standard	The rules for correspondence are posted in common areas and are included in the detainee handbook.
	v information in English, Spanish, oken by a significant number of	Meets Standard	Key information is provided in English and Spanish.
_	ited to detainees within 24 hours to received and inspected.	Meets Standard	Incoming detainee mail is distributed to detainees within one business day after it is received.
	ed to the postal service within one tering the internal mail system d holidays).	Meets Standard	
-	-recording acceptance of priority, certified mail delivered to the	Meets Standard	A log of all mail received by the facility is maintained.
correspondence and ot publications) without documented and autho	and inspect incoming general her mail (including packages and the detainee present unless prized in writing by the Facility ent for prevailing security reasons.	Meets Standard	Mail is opened in the detainee's presence. If the mailroom officer believes the envelope or package contains contraband, the warden must authorize it to be opened without the detainee being present.
	oming general correspondence inistrator's prior approval.	Meets Standard	Facility policy directs staff not to read incoming detainee general correspondence without the warden's direct approval.
-	ming Special Correspondence for to verify the "special" status of detainee present.	Meets Standard	Special Correspondence is opened in the presence of the detainee.
-	reading or copying incoming and pondence without the detainee	Meets Standard	Policy and post orders state that Special Correspondence is not read or copied by staff without the detainee present.
correspondence or oth present when there is r present a threat to t	norized to inspect outgoing ner mail without the detainee reason to believe the item might the facility's secure or orderly e recipient or the public, or might y.	Meets Standard	

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)	
11. Correspondence to a politician or to the media is processed as Special Correspondence and is not read or copied.	Meets Standard	Facility policy requires that correspondence to the media or a politician be processed as Special Correspondence and not be read or copied.	
12. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	Meets Standard		
 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	A review of mailroom logs confirmed that a written record of every item removed from detainee mail is maintained.	
15. The Facility Administrator or designee monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	Meets Standard	Contraband is handled in accordance with written facility policy. Records were checked and found to be current.	
16. The procedure for safeguarding cash removed from a detainee protects the detainee from loss of funds and theft. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.	Meets Standard		
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	Identity documents removed from detainee mail are secured until picked up by an ICE staff member for placement in the detainee's A-File.	
18. Staff provide the detainee a copy of his or her identity document(s) upon request.	Meets Standard	ICE staff will provide copies of a detainee's identification documents upon written request.	
19. Staff dispose of prohibited items found in detainee mail in accordance with the Detention Standard on "Contraband".	Meets Standard		
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	Postage is provided free of charge to indigent detainees for three pieces of general correspondence and five pieces of Special Correspondence per week. Postage for a package deemed necessary by ICE is also provided. Writing paper, pencils and envelopes are provided at no cost.	

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)			
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		
22. The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	Meets Standard		
23. SMU detainees have the same correspondence privileges as general population.	N/A	The facility does not have an SMU.	
24. Detainees have access to outside publications.	Meets Standard	Detainees may make a written request to the warden asking authorization to have outside publications mailed into the facility.	

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)

A review of documentation and both detainee and staff member interviews confirmed that, consistent with the safe and orderly operation of the facility, there are written procedures and appropriately trained staff to ensure that detainees are able to correspond with their families, the community and government officials.

Overall Rating: Meets Standard Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/01/2012

	PART 5 – 27. ESCORTED TRIPS FOR NON-MEDICAL EMERGENCIES (Key: AA)			
en	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.			
S	tandard N/A			
	ck the above button if all ICE Non-Medical Emergency Escort ntrol of the detainee case. (All Line Items and standard wil		y the ICE Field Office or Sub-Office in	
	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:	N/A		
	Funeral			
	Deathbed			
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 (6)(7)(6)fficers.	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		

PART 5 – 27. ESCORTED TRIPS FOR NON-MEDICAL EMERGENCIE	S (K∈	y: AA
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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)
 Escort officers ensure that detainees: 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, 	N/A	Remarks (1000 Char Max)
breathalyzer, or comparable test upon return to the facility. 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: 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) The compliance manager confirmed that ICE Field Office staff members conduct all escorted trips for non-medical emergencies.

Overall Rating: N/A

Reviewer Name (Printed):

Completion Date: 11/1/2012

Reviewer Signature (for printed form submission):

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

	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	All requests are forwarded to the ICE Field Office Director (FOD) for action.
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	
4.	The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	Meets Standard	The written request includes signed documentation 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	
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	
7.	The Facility Administrator provides the detainee with a place and time to make wedding arrangements.	Meets Standard	The facility provides a place for the wedding after approval from ICE.
8.	The detainee handbook explains the marriage request process.	Meets Standard	
9.	<u>In SPCs</u> the Facility Administrator or highest ranking ICE official on-site is the only officer authorized to approve a request to marry.	N/A	This is a CDF facility. All requests are forwarded to ICE for disposition, and only ICE approves marriage requests.

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 has written policy and procedures outlining the marriage request process. All marriage requests receive case-bycase consideration by ICE management. The standard's rating was based on a review of policy and procedures and ICE/facility staff member interviews.

Overall Rating: Meets Standard Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/01/2012

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

	PART 5 – 29. REC	REATION (Key: AC)	
cor	s Detention Standard ensures that each detainee has access t istraints of safety, security, and good order. andard N/A	o recreational and exerc	ise programs and activities, within the
Clic	k the above button if outdoor recreation is offered. Items	19-27 will be marked "N	-
	Components	Rating	Remarks (1000 Char Max)
1.	The Facility provides:An indoor recreation program.An outdoor recreation program.	Meets Standard	Indoor and outdoor recreation programs are provided.
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 has three recreational specialists who oversee the recreation program activities offered at the facility.
3.	Regular maintenance keeps recreational facilities and equipment in good condition.	Meets Standard	
4.	The recreational specialist or trained equivalent supervises detainee recreation workers.	Meets Standard	
5.	The recreational specialist or trainee equivalent oversees recreation programs for Special Management Unit and special-needs detainees.	Meets Standard	The recreational specialists oversee all recreation program activities offered at the facility. The facility does not have a Special Management Unit (SMU).
6.	Dayrooms offer sedentary activities, e.g., board games, cards, television.	Meets Standard	
7.	Outside activities are restricted to limited-contact sports.	Meets Standard	Detainees are allowed to play soccer, basketball and volleyball.
8.	Each detainee has the opportunity to participate in daily recreation.	Meets Standard	Detainees are allowed recreation at least one hour per day, seven days per week.
9.	Detainees have access to recreation activities outside the housing units for at least one hour daily.	Meets Standard	Detainees are allowed at least one hour of outside recreation daily.
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	
13.	Supervising staff are equipped with radios.	Meets Standard	
14.	The facility provides detainees in the SMU at least one hour of outdoor recreation time daily, five times per week.	N/A	The facility does not have an SMU.

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	Standard N/A			
Click the above button if outdoor recreation is offered. Items	19-27 will be marked "N/A	Α".		
Components	Rating	Remarks (1000 Char Max)		
 Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his or her recreation privileges. 	N/A	The facility does not have an SMU for administrative or disciplinary segregation purposes.		
 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	A review of the volunteer training files confirmed that volunteers must complete the facility's forty-hour orientation program and sign a waiver prior to coming into contact with any detainees.		
18. Visitors, relatives or friends of detainees are not allowed to serve as volunteers.	Meets Standard	Visitors, relatives and friends are not permitted to volunteer.		
19. If the facility has no outside recreation, are detainees considered for transfer after six months?	N/A	Outdoor recreation is provided at the facility.		
20. If yes, written procedures ensure timely review of all eligible detainees.	N/A	Outdoor recreation is provided at the facility.		
21. Case officers make written transfer recommendations about every six-month detainee to the Facility Administrator.	N/A	Outdoor recreation is provided at the facility.		
22. The Facility Administrator documents all detainee-transfer decisions, whether yes or no.	N/A	Outdoor recreation is provided at the facility.		
23. The detainee's written decision for or against an offered transfer documented in his or her A-file.	N/A	Outdoor recreation is provided at the facility.		
24. Staff notify the detainee's legal representative of his or her decision to accept/decline a transfer.	N/A	Outdoor recreation is provided at the facility.		
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 provided at the facility.		
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 provided at the facility.		
27. The detainee's legal representative is notified of the detainee's/Facility Administrator's decision.	N/A	Outdoor recreation is provided at the facility.		

PART 5 - 29. RECREATION – Reviewer Summary

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

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)

Detainees are provided access to indoor and outdoor recreation. The recreation program is overseen by recreational specialists that ensure the program is run in an orderly, safe and secure manner. The facility does not have a special management unit. The standard's rating was based on review of policy and procedures, staff and detainee interviews and on-site observation.

Overall Rating: Meets Standard Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/1/2012

This	PART 5 – 30. RELIGIO s Detention Standard ensures that detainees of different reli		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	Policy establishes procedures for providing language assistance for religious services when requested by the detainee. Religious services are provided in both English and Spanish.		
2.	Space is available for detainees to participate in religious services.	Meets Standard			
3.	The facility allows detainees to observe the major "holy days" of their religious faith.	Meets Standard			
٠	List any exceptions.				
4.	The facility accommodates recognized holy-day observances by:				
	 Providing special meals, consistent with dietary restrictions. 		Procedures for accommodating recognized holy-day observances		
	Honoring fasting requirements.Facilitating religious services.		include the bulleted items in this component.		
	 Allowing activity restrictions. 				
5.	Each detainee is allowed religious items in his/her immediate possession; refer to the Funds and Personal Property Standard.	Meets Standard	Detainees are allowed to possess religious items that do not present a threat to the safe, secure and orderly operation of the facility.		
6.	Volunteer's credentials are checked and verified before allowing participation in detainee programs.	Meets Standard			
7.	Members of faiths not represented by clergy may request to present their own services within security allowances.	Meets Standard	Detainees may request to hold their own services. Approval is based on whether the service would interfere with the security of the facility.		
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 religious program allows detainees to participate in their respective religious faith. The program also recognizes holy days and offers special meals. Detainees can request to hold their own services, providing the services do not interfere with the safe, secure and orderly operation of the facility. Religious services are conducted in the facility's chapel. The facility has a full-time chaplain and utilizes local volunteers to coordinate religious activities. The standard's rating was based on observation, staff and detainee interviews and review of policies and procedures.

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE) G-324A (Coded 10132010) Detention Review Worksheet - Rev: 6/19/2012 – Form Key 3

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: 11/1/2012

This	PART 5 – 31. TELEPH Detention Standard ensures that detainees may maintain ti		others in the community by providing
	n 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 are allowed access to telephones during waking hours. Detainees are instructed to contact an ICE official to access a TTY device.
2.	Upon admittance, detainees are made aware of the facility's telephone access policy.	Meets Standard	Detainees are made aware of facility telephone procedures during the intake process.
3.	Notification explaining the facilities telephone policy is in the Detainee Handbook.	Meets Standard	The facility telephone policy is explained in the detainee handbook.
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	Information is provided to detainees in English and Spanish.
6.	Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	Meets Standard	There are 86 telephones throughout the facility. Telephones are provided at a ratio of one telephone per eight detainees.
7.	Telephones are inspected daily by facility staff to ensure that they are in good working order.	Meets Standard	
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	
10.	The facility administration monitors repair progress and takes appropriate measures to ensure that the required repairs are begun and completed timely.	Meets Standard	The ICE Contracting Officer's Representative and the facility's Information Systems Officer ensure that telephone repairs are completed in a timely manner.
11.	Detainees are afforded a reasonable degree of privacy for legal phone calls.	Meets Standard	If a detainee requests a private legal call, it will be provided.
12.	A procedure exists to assist a detainee who is having trouble placing a confidential call.	Meets Standard	The facility will make arrangements for a detainee to make a confidential telephone call if requested in writing.
13.	The facility provides the detainees with the ability to make non-collect (special access) calls.	Meets Standard	Detainees may make a request to an ICE staff member to make this type of call.
	Special Access calls are at no charge to the detainees.	Meets Standard	

PART 5 - 31	. TELEPHONE	ACCESS (Key: AE)
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	PARI 5 – 31. IELEPH Detention Standard ensures that detainees may maintain tion n reasonable and equitable access to telephone services.		others in the community by providing
ther	Components	Rating	Remarks (1000 Char Max)
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	Special access calls are provided at no charge to the detainee.
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	When requested by a detainee, an ICE staff member will make the necessary special arrangements to provide this type of telephone call.
18.	All telephone restrictions are documented.	Meets Standard	
19.	The facility has a system for taking and delivering emergency detainee telephone messages.	Meets Standard	Emergency telephone messages are delivered to the detainee once they have been verified.
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	The shift supervisor ensures that a detainee is allowed to return emergency phone calls as soon as possible.
22.	Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	N/A	The facility has no Special Management Unit (SMU).
23.	Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	N/A	The facility has no SMU.
24.	Detainees in disciplinary segregation are allowed phone calls for family emergencies.	N/A	The facility has no SMU.
25.	Detainees in administrative segregation and protective custody are afforded the same telephone privileges as those in general population.	N/A	The facility has no SMU.
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	
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) telephone number was tested on the second day of the inspection and found to be operable.

	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)
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	A review of logs maintained by ICE staff members showed that phones are checked at least weekly.

PART 5 – 31. TELEPHONE ACCESS – Reviewer Summary			
(Use following format for dates: mm,	/dd/yyyy)		
Overall Remarks: (Record significant facts, observations, other sources use	ed, etc.) (5000 Character Max)		
The facility provides the detainees with the opportunity to maintain ties we providing reasonable and equitable access to telephone services. On-site detainee and staff member interviews confirmed that detainees in all hou	observation, a review of documentation and both		
Overall Rating: Meets Standard			
Reviewer Name (Printed): (b)(6), (b)(7)(c) Completion Date: 11/1/2012			

Thi	s Detention Standard ensures that detainees will be able to ma	VISITATION (Key: AF)	ion with their families, the company it
	al representatives, and consular officials, within the constrair		
0	Components	Rating	Remarks (1000 Char Max)
1.	There is a written visitation procedure, schedule, and hours for general visitation.	Meets Standard	The detainee handbook provides written procedures for visitation to include the schedule and hours of general visiting.
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 facility lobby and are available on the internet
4.	The hours for all categories of visitation are posted in the visitation waiting area.	Meets Standard	
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 facility visiting rules are available to visitors upon request.
6.	A general visitation log is maintained.	Meets Standard	A log is maintained documenting all general visitation.
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 visitation rules, including the visitor dress code, are posted in the facility lobby and are available on the internet.
9.	Visitors are searched and identified according to standard requirements.	Meets Standard	
10.	The requirement on visitation by minors is complied with.	Meets Standard	Minors under the supervision of an adult visitor are allowed to visit.
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	Minors under the supervision of an adult visitor are allowed to visit.
12.	After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.	N/A	Minors under the supervision of an adult visitor are allowed to visit.
13.	Anytime a visit is denied, to either a general population detainee or SMU detainee, the denial is documented.	Meets Standard	There have been no visits denied during the past year. Policy requires that any denial of visiting be documented. This facility does not have an SMU.
14.	Detainees in special housing are afforded visitation.	N/A	The facility does not have any special housing.

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.			
 Legal visitation is available seven (7) days a week, including holidays. 	Meets Standard		
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		
17. On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.		If a legal meeting continues through a scheduled meal, a meal will be saved for the detainee.	
 Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents. 		Contact visits allow for the exchange of documents.	
19. There are written procedures governing detainee searches.	Meets Standard		
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		
21. Per the Standard, prior to each visit, legal service providers and assistants are identified.	Meets Standard		
22. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	Meets Standard	The current list of pro bono organizations is posted in common areas and adjacent to the telephones.	
 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. 		At this CDF, all requests for tours by organizations associated with detention issues are forwarded to the ICE Field Office Director for action.	
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.		ICE must approve all law enforcement visits with detainees.	
26. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the Facility Administrator or ICE Field Office.		ICE approval is required for a former detainee or alien in proceedings to visit a current detainee.	

PART 5 – 32. VISITATION – Reviewer Summary

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

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)

This standard was evaluated based on a review of facility policy, interviews of facility/ICE staff members and observation of both the general and attorney visiting rooms. Since general visiting occurs only on weekends and holidays, this inspector could not observe visiting. No legal visits took place during this inspection.

Overall Rating: Meets Standard Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/1/2012

Reviewer Signature (for printed form submission):

Page 121 of 154 FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE) G-324A (Coded 10132010) Detention Review Worksheet - Rev: 6/19/2012 – Form Key 3

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	The facility has a policy establishing a voluntary work program.
2.	Detainee housekeeping meets acceptable levels of neatness, cleanliness and sanitation standards.	Meets Standard	
3.	At IGSAs 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	This is a Level 1 CDF facility. Female detainees are allowed to work in the front lobby under direct staff supervision and outside the secure perimeter of the facility.
4.	 Written procedures govern selection of detainees for the Voluntary Work Program. The same procedures apply for replacement workers as for "new" workers. Staff follow written procedures. 	Meets Standard	Rules for detainee participation in the work program are outlined in the handbook.
5.	Where possible, physically and mentally challenged detainees participate in the program.	Meets Standard	
6. •	The facility complies with work-hour requirements for detainees, not exceeding: Eight hours a day. Forty hours a week.	Meets Standard	Detainees are not permitted to work in excess of eight hours a day or forty hours a week.
7.	Detainee volunteers ordinarily work according to a fixed schedule.	Meets Standard	
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	Orientation training is given to all detainees prior to working a new job assignment. A review of a detainee's training record confirmed the detainee signs a form acknowledging receiving this training.

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)
 10. The voluntary work program meets: OSHA standards NFPA standards ACA standards 	Meets Standard	A review of the facility's training plans, working conditions and protective and safety equipment indicated the program meets the requirements of the organizations listed in this component.
 11. Medical staff screen and formally certifies detainee food service volunteers; Before the assignment begins As a matter of written procedure 	Meets Standard	All detainees are screened and certified by medical staff prior to being assigned to food service. Both the detainee and medical staff sign the certification form.
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 requires the facility staff to immediately notify the worker's supervisor, medical staff and ICE of a detainee injured while on the job.

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)

The facility's policy and procedures provide detainees the opportunity to work and earn money while at the facility. Detainees are paid and work in accordance with the ICE standards. Under staff supervision, female detainees are permitted to work in the front lobby outside the secure perimeter of this Level 1 security facility. The standard's rating was based on a review of policies and procedures and on detainee and ICE and facility staff interviews.

Overall Rating: Meets Standard Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/1/2012

Section VI JUSTICE

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

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	Each detainee is given the ICE National Detainee Handbook and a facility-specific detainee handbook upon admission.
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	
3.	A procedure for requesting interpretive services for essential communication has been developed.	Meets Standard	The handbook addresses interpretive services and how these services can be requested.
4.	Orientation materials are read to detainees who cannot read, or they are provided the material via audio or video recordings.	Meets Standard	Orientation materials are provided to a detainee who cannot read through classroom instruction within one business day of his/her arrival.
5.	The handbook supplements the facility orientation video where one is provided.	Meets Standard	
6.	The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.	Meets Standard	The handbook is revised annually and as necessary. The last update was 04/18/2012. Revisions are posted for the detainee population when necessary. Copies of the changes are distributed to each staff post and to the supervisors.
7.	There is an annual review of the handbook by a designated committee or staff member.	Meets Standard	
8.	 The detainee handbook address the following issues: 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 the elements 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	All detainees are classified by ICE prior to their arrival at this facility. Classification appeals are explained in the handbook.

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

Components	Rating	Remarks (1000 Char Max)
11. The handbook states when a medical examination will be conducted.	Meets Standard	Medical examination will be conducted within fourteen days of the detainee's arrival.
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 addresses each of the items listed in 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	Disposable razors are available daily. Detainees are required to exchange their identification card for a razor. Detainees attending court are allowed to shave prior to court.
15. The handbook describes barber hours and hair cutting restrictions.	Meets Standard	The hours of operation for both the barbershop and the hair care salon are addressed in the handbook.
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	
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	Commissary schedules are addressed in the handbook. Detainees are not permitted to have money in their possession or to use vending machines.
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	Library hours of operation are Monday-Friday, 2:00 p.m. to 3:30 p.m. for female detainees and 10:00 a.m. to 1:00 p.m. for male detainees.
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	

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	
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	Visitation is scheduled on weekends and holidays. Male detainees are allowed to visit every other weekend between the hours of 8:00 a.m. to 10:30 a.m. Female detainees are allowed to visit on Sunday from 1:30 p.m. to 4:00 p.m.
25. The handbook describes the correspondence policy and procedures.	Meets Standard	
 26. The handbook describes the detainee disciplinary policy and procedures, including: Prohibited acts and severity scale sanctions. Time limits in the Disciplinary Process. Summary of Disciplinary Process. 	Meets Standard	The handbook describes the disciplinary policy and procedures, prohibited acts and severity scale, time limits in the disciplinary process and a summary of the disciplinary process.
 27. The grievance section of the handbook explains all steps in the grievance process – Including: 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	This is a CDF facility. The handbook explains the grievance policy and procedures. It addresses all the elements in this component.
28. The handbook describes the medical sick call procedures for general population and segregation.	Meets Standard	
 29. The handbook describes the facility recreation policy including: Outdoor recreation hours. Indoor recreation hours. In dorm leisure activities. Rules for television viewing. 	Meets Standard	The handbook describes housing unit activities, television rules and outdoor/indoor recreation hours.

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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)
 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	
 Orientation materials are provided to illiterate detainees either orally or via audio/video tapes in a language they can understand. 	Meets Standard	Orientation information is provided to illiterate detainees orally during intake.

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 handbook is written in both English and Spanish and gives the detainee an overview and guide to the facility's policies, rules and regulations, services and available programs. All detainees are given an ICE National Detainee Handbook and a facility-specific handbook upon admission. Each detainee is required to sign for the handbooks. The facility provides an orientation video that is viewed during intake. The standard's rating was based on reviews of the detainee handbook and facility policies and on interviews with staff members and detainees.

Overall Rating: Meets Standard Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/1/2012

	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	The informal and formal grievance systems are addressed in the handbook.	
2.	The admissions process includes providing each new arrival with a copy of the detainee handbook (or equivalent).	Meets Standard		
3.	The grievance section of the handbook explains all steps in the grievance process – Including:			
	 Informal and formal grievance procedures; 			
	• The appeals process and step-by-step procedures;		The grievance section of the	
	 Staff/detainee availability to help during the grievance process 	Meets Standard	facility handbook addresses each of the elements in this	
	 Guarantee against staff retaliation for filing/pursuing a grievance. 		component.	
	• How to file a complaint about officer misconduct with the Department of Justice.			
	• How to file an emergency grievance.			
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		
5.	Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures.		The facility utilizes a multi-step	
	• Detainees may seek help from other detainees or facility staff when preparing a grievance.	Meets Standard	appeals process. Detainees can assist each other and seek assistance from staff when	
	• Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary.		preparing a grievance.	
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	A review of staff training files revealed that all staff members are trained on how to identify and handle emergency grievances during orientation training.	
8.	Staff shall not harass, discipline, punish or otherwise retaliate against a detainee who files a complaint or grievance.	Meets Standard	The requirements of this component are addressed in the grievance section of the handbook given to each detainee and during initial and annual training for all staff members.	

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. 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	A grievance log is maintained by the grievance coordinator. Nuisance or petty grievances are logged with an appropriate notation.	
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	The grievance section of the handbook addresses and cautions detainees about nuisance complaints.	
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	This is a CDF facility. All grievances regarding staff misconduct are forwarded 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		
 14. <u>In SPCs and CDFs</u>, when a Detainee does not accept the grievance committee's decision, he/she files an appeal with the ICE Facility Administrator. In all facilities written procedures cover detainee appeals and are included in the detainee handbook 	Meets Standard	This is a CDF facility. The grievance appeal procedures are addressed in the handbook. Detainees are allowed to appeal to the ICE Assistant Field Office Director.	
15. <u>In SPCs/CDFs</u> , the detainee has a reasonable timeframe after the incident or informal-grievance outcome to file a formal grievance.	Meets Standard		

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 grievance program addresses the grievance process, protects detainee rights and ensures that detainees are treated fairly. The program is explained in the detainee handbook. Informal grievances, formal grievances and appeals are handled in a timely manner and are well documented. The standard's rating was based on a review of policies and procedures, staff and detainee interviews and a review of the grievance log.

Overall Rating: Meets Standard

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

Completion Date: 11/1/2012

	PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL (Key: AJ)			
Th	s Detention Standard protects detainees' rights by ensuring	their access to courts, cou	unsel, and legal materials.	
	Components	Rating	Remarks (1000 Char Max)	
1.	The facility provides a designated law library for detainee use.	Meets Standard	The facility has a designated law library.	
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. 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 library has all materials listed in Attachment A of this standard. In addition, the six computers in the law library have the LexisNexis electronic law library installed.	
3.	 If the Lexis/Nexis CD-ROM service alternative is used for the publications in Attachment A, the facility provides detainees sufficient: Operable computers and printers, in sufficient numbers in order to provide access Photocopiers, and Supplies for both. 	Meets Standard	There are six operable computer systems with LexisNexis installed. Printing, copying and additional supplies are available upon request.	
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	There are six operable computer systems with LexisNexis for detainee use. Printing, copying and other supplies are available upon request.	
6.	Detainees are provided with the means to save legal work in a private electronic format for future use.	Meets Standard		
7.	The facility subscribes to updating services where applicable and legal materials requiring updates are current.	Meets Standard	The installed LexisNexis software is dated October 2012 and is current.	
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 published material is accepted after approval 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	A full-time employee is assigned to the law library. He is responsible for inspecting, updating and maintaining library material and equipment.	
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		

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.			
This Detention Standard protects detainees' rights by ensuring Components	Rating	Remarks (1000 Char Max)	
 Detainees may request material not currently in the law library. Each request is reviewed and where appropriate an acquisition request is initiate and timely pursued. Request for copies of court decisions are accommodated within 3 – 5 business days. 	Meets Standard		
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	Detainees are permitted to assist other detainees in researching and preparing legal materials. Such assistance is voluntary. No detainee is allowed to charge or accept anything of value for such assistance.	
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	Special arrangements are made for a detainee without legal representation who is illiterate or non-English speaking and requests assistance.	
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		
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	There have been no denials of access to the law library in the past twelve months. Should such a denial occur, it would be fully documented and ICE would be notified.	
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	There have been no denials of access to the law library in the past twelve months. Should such a denial occur, it would be fully documented and ICE would be notified.	
 Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties. 	Meets Standard	Facility policy addresses this component.	
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)

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

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)

A review of documentation, on-site observation and staff member and detainee interviews confirmed that the facility provides detainees with access to courts, counsel, legal materials and the support services necessary for them to prepare their legal work. The library is quiet, well lighted, contains appropriate furniture and provides a pleasant work environment. LexisNexis was current on all law library computer stations.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 11/1/2012

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	An approved "Know Your Rights" presentation is given several times each month by the Americans for Immigrant Justice organization.
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	When approval from the Field Office is received, the facility contacts the approved group's representative to set up an agreed upon time and date for the presentation.
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	
4.	Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	Meets Standard	Presentation schedules and sign- up sheets are posted throughout the housing units.
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	Policy specifies the procedures for denying a detainee permission to attend. Denials must be documented and the reason for the denial must be annotated. There have been no such denials during the past 12 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	All presentations are scheduled in advance. If the number of detainees signed up for a presentation exceeds the available space, additional presentations are scheduled.
7.	Detainees in segregation, unable to attend for security reasons may request separate sessions with presenters. Such requests are documented.	N/A	There is no segregation housing at this facility.
8.	Interpreters are admitted when necessary to assist attorneys and other legal representatives.	Meets Standard	Written policy allows for interpreters to enter the facility to assist attorneys and other legal representatives.

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)
 Presenters are afforded a minimum of one hour to make the presentation and additional time to conduct a question-and-answer session. 	Meets Standard	
10. Staff permit presenters to distribute ICE/DRO-approved materials.	Meets Standard	Presenters may distribute brief written materials to detainees and ICE/facility staff members. These materials must have been approved in advance by ICE.
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	The facility permits presenters to meet with small groups of detainees to discuss their cases following a group presentation, consistent with security and the orderly operation of the facility. Neither ICE nor facility staff members are present during these meetings.
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	
 The facility plays ICE/DRO-approved videotaped presentations on legal rights, at regular opportunities at the request of outside organizations. 	Meets Standard	An ICE-approved video on legal rights is played on a continuous loop on the facility's closed circuit television system.
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	

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

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

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)

ICE and facility staff member interviews, a review of documentation and on-site observation confirmed that the facility has the procedures in place to ensure detainees have access to presentations by authorized persons and organizations for the purpose of informing detainees of U.S. immigration laws and procedures. The Americans for Immigrant Justice makes scheduled presentations on Monday and Friday of every week.

Overall Rating: Meets Standard Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/1/2012

Section VII ADMINISTRATION & MANAGEMENT

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

	PART 7 – 38. DETE	NTION 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	A detention file is created for every detainee admitted into the facility.
2.	The detainee Detention File contains either originals or copies of documentation and forms generated during the admissions process.	Meets Standard	Fifteen detention files were reviewed and found to have all appropriate documentation.
3.	 The detainee's Detention File also contains documents generated during the detainee's custody. 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	
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 stored in lockable cabinets in the file supervisor's office which is a secure area. Keys to the room and cabinets are restricted to assigned staff members and supervisors.
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	The files reviewed contained completed release documents, closed-out receipts and other required documentation.
6.	The officer closing the Detention File makes a notation that the file is complete and ready to be archived.	Meets Standard	The staff member closing out a detention file makes a notation in red on the front cover that the file is complete and ready to be archived.
7.	Staff make copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.	Meets Standard	When appropriately requested and approved by a supervisor, staff members will make copies and send documents from the file.
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	
9.	Electronic record-keeping systems and data are protected from unauthorized access.	Meets Standard	Electronic record-keeping systems are password protected at this facility.

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 info 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	Staff interviews and on-site observations confirmed that necessary equipment and supplies, including a copier, are available. All equipment was 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	Closed detention files are archived and kept in a file storage room. Archived detention files dating back to 2003 are stored at this facility pending approval of a corporate- wide file purging policy. This component requires that these files be shredded or burned after six years. The standard states that archived files may be purged after six years. 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.	N/A	This facility is a CDF.

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)

Fifteen detention files selected at random for review contained all of the required documents. On-site observation, staff member interviews and a review of documentation confirmed that the facility ensures that a detention file is created and maintained for each detainee.

Overall Rating: Meets Standard Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/1/2012

Reviewer Signature (for printed form submission):

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE) G-324A (Coded 10132010) Detention Review Worksheet - Rev: 6/19/2012 – Form Key 3

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			
thr	ough 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	Written policy requires that all such interviews be approved by the ICE Field Office Director (FOD).
2.	All personal interviews are documented with the News Interview Authorization form (or equivalent) and filed in the detainee's A-file with a copy in the facility's Detention File.	Meets Standard	Policy requires that a News Interview Authorization form be completed, and that copies be filed in both the detainee's A-File and detention file after the interview. There have been four such interviews in the past year.
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	
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	Policy requires that release forms be completed and filed in the detainee's A-File and detention file. Signed release forms for the four interviews were found in the detainees' detention files.
5.7	All press pools are organized `according to the procedures in the Detention Standard.		
	• A press pool may be established when the Field Office Director and facility administrator determine that the volume of interview requests warrants such action.	Meets Standard	Once the warden and the FOD
	 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. 		agree that a press pool should be established, local ICE personnel assigned to the facility will make the notifications.
	• All material generated from such a press pool is made available to all news media, without right of first publication or broadcast.		

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)

A review of documentation and ICE and facility staff member interviews were used to evaluate this standard. The facility has policies and procedures in place to ensure the public and the media are informed of events within the facility's areas of responsibility.

Overall Rating: Meets Standard Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/1/2012

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FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE) G-324A (Coded 10132010) Detention Review Worksheet - Rev: 6/19/2012 – Form Key 3 PART 7 - 39. NEWS MEDIA INTERVIEWS AND TOURS – Reviewer Summary (Use following format for dates: mm/dd/yyyy)

Reviewer Signature (for printed form submission):

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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	The facility has established a training program for orientation, initial training and annual refresher training of staff, volunteers and contractors.
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	
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 officer has completed a 40-hour training- for-trainers course.
4.	Training is governed and guided by a training plan that is reviewed and approved annually by the facility administrator.	Meets Standard	The warden reviews and approves the facility's training plan annually.
5.	 An accurate and complete record is maintained of all formal training activities in: Individual training folders, Other training records systems, and/or Electronic systems. 	Meets Standard	A review of (b)(7)e aff training files confirmed that an accurate and complete record of staff member formal training is being maintained.

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.		
 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: 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 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	All new staff, volunteers and contractors receive 40 hours of orientation and initial training prior to assuming duties. The training includes all elements of this component.

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)
 7. Clerical/support employees who have minimal detainee contact receive a minimum of: 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. 	Meets Standard	All staff, to include clerical and support employees with limited contact with detainees, receive 40 hours of orientation and initial training prior to having contact with detainees. The training includes the subjects listed in this component.

	PART 7 – 40. STAF	F TRAINING (Key: AN)	
	is Detention Standard ensures that staff, contractors, and vo at they receive initial and ongoing refresher training.	lunteers are competent in	their assigned duties by requiring
	Components	Rating	Remarks (1000 Char Max)
8.	Professional and support employees (including contractors) who have regular or daily detainee contact will receive training on the following subjects, at a minimum:		
	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		All staff, volunteers and
	Use-of-force regulations and tactics		contractors receive 40 hours of
	Report writing		orientation and initial training
	Detainee rules and regulations	Meets Standard	prior to assuming duties and
	Key control		having regular contact with detainees. The training includes
	Rights and responsibilities of detainees		all items listed in this
	Safety procedures		component.
	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.		

PART 7 – 40. STAF	F TRAINING (Key: AN)	
This Detention Standard ensures that staff, contractors, and vo that they receive initial and ongoing refresher training.	lunteers are competent in	their assigned duties by requiring
Components	Rating	Remarks (1000 Char Max)
 10. Security personnel (including contractors) will receive training on the following subjects, at a minimum: 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 Interpersonal relations Social/cultural lifestyles of the detainee population Cultural diversity/understanding staff & detainees Communication skills Cardiopulmonary resuscitation (CPR)/first aid Counseling techniques National Detention Standards. 	Meets Standard	All staff, volunteers and contractors receive 40 hours of orientation training prior to having contact with detainees. Security personnel receive an additional 40 hours of on-the-job training before being assigned to a facility post. The training includes all listed items in this component.
 11. Situation Response Teams (SRTs) receive: Specialized training before undertaking their assignments. 	Meets Standard	Disturbance Control Team (DCT) members are required to take 40 hours of specialized training prior to assuming their assignments. The team is also required to conduct eight hours of training each month.
12. Facility management and supervisory staff receive:Management and Supervisory training	Meets Standard	Management and supervisory staff receive 24 hours of supervisory training.

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	All personnel authorized to use firearms are required to demonstrate competency annually.			
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.	N/A	(b)(7)e			
 16. All staff receives orientation and annual training on the facility's drug-free workplace program. Typical contents are: 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	A review of the curriculum and training files indicated that the training addresses the six bulleted items in this component.			
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	Signed copies of staff acknowledgements are maintained in the facility's human resources office.			

PART 7 – 40. STAF	F 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)			
 18. All staff are trained during orientation and annually thereafter, regarding the facility's code of ethics. Typical contents are: 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	All staff members receive initial and annual refresher ethics training. Staff members are required to sign a code of ethics training acknowledgement form to confirm that they have received this training. The training includes all of the subject matter items listed in this component.			
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.	Meets Standard				
 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: 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	All staff members in frequent contact with detainees receive documented initial and annual refresher training regarding health-related emergencies. Quarterly emergency medical and fire safety drills are conducted to ensure that the four-minute or less response time is maintained. The training includes all the listed elements in this component.			

PART 7 – 40. STAF	F 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)			
 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: Understanding that sexual abuse or assault is never an acceptable consequence of detention. 		All staff members in frequent			
 Recognizing housing or other situations where sexual abuse or assault may occur. 	Meets Standard	contact with detainees are required to receive initial orientation training and annual			
 Recognizing the physical, behavioral, and emotional signs of sexual abuse or assault and ways to prevent such occurrences. 		refresher training that includes each of the subjects listed in this component.			
 Knowing how to report knowledge or suspicion of sexual abuse or assault and make intervention referrals in the facility's program. 					
 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: Identifying the warning signs and symptoms of 					
impending suicidal behavior,Demographic, cultural, and precipitating factors of					
suicidal behavior,		The facility's initial training and annual refresher training			
 Responding to suicidal and depressed detainees, Communication between correctional and health care personnel, 	Meets Standard	addresses suicide prevention, including all elements listed in this component.			
 Referral procedures, Housing observation and suicide-watch level procedures, and 					
 Follow-up monitoring of detainees who have attempted suicide. 					
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.	Meets Standard				
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.	Meets Standard				

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)			
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:					
The requirements of this Detention Standard					
The use of force continuum					
Communication techniques		All staff members are required to			
Cultural diversity		attend annual refresher training			
Dealing with the mentally ill	Meets Standard	that includes all the elements			
Confrontation-avoidance techniques		listed in this component.			
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.					
26. Employees are encouraged to continue their education and professional development through incentives such as salary enhancement, reimbursement of costs, and administrative leave.	Meets Standard	Employees are encouraged to continue their professional development through the facility's Employee Tuition Reimbursement Program.			

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's comprehensive training program ensures that staff, volunteers and contractors are provided with appropriate training prior to entering the facility and having contact with the detainee population. A review of staff training files confirmed that an accurate and complete record of formal training is being maintained. The standard's rating was based on a review of policies and procedures, on-site observation, staff member interviews and a review of staff training files.

Overall Rating: Meets Standard Reviewer Name (Printed): (b)(6), (b)(7)(c)

Completion Date: 11/1/2012

Reviewer Signature (for printed form submission):

	PART 7 - 41. TRANSFE	R OF DETAINEES (Key: AO		
	s Detention Standard ensures that transfers of detainees f	•		
ma	naged in regard to notifications, detainee records, safety and			
1	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. The notification is recorded in the detainee's file When the A-File is not available, notification is noted within ENFORCE. 	Meets Standard	If the detainee has a G-28 on file, an ICE staff member will notify the legal representative within 24 hours of transfer.	
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	When security concerns exist, the deportation officer is allowed discretion regarding the timing of the notification.	
4.	The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	Meets Standard	Detainees and attorneys of record are informed that it is their responsibility to notify family members of detainee transfers.	
5.	 Facility policy mandates that: 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	Written facility policy addresses each of the items in this component.	
6.	The detainee is provided with a completed Detainee Transfer Notification Form.	Meets Standard	An ICE staff member provides the detainee with a completed transfer form.	
7.	Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	Meets Standard		
8.	 For medical transfers: 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		

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	ICE staff confirmed that detainees are transferred with a completed transfer summary sheet.			
10. For medical transfers, transporting officers receive instructions regarding medical issues.	Meets Standard				
11. Detainee's funds, valuables and property are returned and transferred with the detainee to his or her new location.	Meets Standard	ICE and facility staff member interviews confirmed that funds, valuables and property are transferred with the detainee to his new location.			
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	ICE procedures require that all detainees be permitted to make a telephone call, at the government's expense, within 12 hours of arrival at their new location.			
14. Meals are provided when transfers occur during normally schedule meal times.	Meets Standard	The facility's food service department would provide the meals if requested by ICE.			
15. An A-File or work folder accompanies the detainee when transferred to a different Field Office or sub-office.	Meets Standard	A-Files normally accompany detainees when transferred.			
16. A-Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.	Meets Standard	A-Files are forwarded to the receiving office via overnight delivery no later than one business day following the transfer if the A-File is not available at the time of the transfer.			

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)

Interviews with facility and ICE staff members confirmed that detainees are transferred with their records, funds, personal property and proper identification. Transfers from this facility are professionally and responsibility managed. Required notifications are made in a timely manner.

Overall Rating: Meets Standard Reviewer Name (Printed) (b)(6), (b)(7)(c)

Completion Date: 11/1/2012

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:	Run Check	Error(s) Found:	0	ltems Not Rated:	0
Errors:					
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U.S. Immigration and Customs Enforcement Office of Enforcement and Removal



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

September 9, 2008

Detention Management Division 801 I Street NW Washington, DC 20536

What is "Performance-Based"?

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

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

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

Worksheet Overview

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

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

The G324B is for use with under 72 hour facilities and does not contain as much detail on the following NDS as is included in the 324A: Correspondence and Other Mail, Escorted Trips for Non-Medical Emergencies, Law Libraries and Legal Material, Legal Rights Group Presentations, Marriage Requests, Recreation, and Voluntary Work Program. These standards were not included in the prior version of the 324B due to the short term nature of the detention in facilities that are used for 72 hours or less. These sections are now included in the 324B but only only to the extent that facilities seek applicability and are not mandated by ICE. For example, voluntary work programs are not required, but if detainees work, compliance with the NDS is required.

Mandatory components in several of the standards are noted on the worksheets. Mandatory items must be met in order for the facility to receive a satisfactory rating for that standard. These mandatory components typically represent life safety issues. A Does Not Meet rating on one of these components is very serious, failing to meet one of the mandatory components means that the overall facility review rating will be Does Not Meet Standards.

The Outcome Measures Worksheet section is completely new for the National Performance-Based Detention Standards. The Outcome Measures Worksheets are to be will be completed by facility staff prior to arrival of the review team. Ideally, this information will be maintained on a continuous basis by the facility as part of an Outcome Measures database to provide a perpetual record for monitoring facility performance. Detention reviewers will review facility outcome measures data and provide analysis of the data to describe facility performance and trends.

Worksheet Completion

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

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

Outcome Measures Completion

The Outcome Measures Worksheets will be completed by facility staff prior to arrival of the review team. Ideally, this information will be maintained on a continuous basis by the facility as part of an Outcome Measures database to provide a perpetual record for monitoring facility performance. Data should be verified as accurate by the facility before including it in the database.

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

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PART 1 – 1. EMERGENCY PLANS

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

		Outcome Measures Worksheet		
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
17	1 (Key)	Number of injuries resulting from fires requiring medical treatment	0	
	(1C09)	divided by the everage daily population (ADD)	636	0
19,21	2 (Key)	divided by the average daily population (ADP) Number of fires that resulted in property damage	0	0
	(1C10)			
		divided by the average daily population (ADP)	636	0
21	3 (Key)	Number of hours that facility operations were suspended due to emergencies that were not	0	
	(1C08)	caused by forces external to the facility		
		divided by the number of emergencies.	0	0
21	4	Number of emergencies, caused by forces external to the facility, that result in property	0	
	(1C01)	damage		
	. ,	divided by the average daily population (ADP)	636	0
21	5	Dollar amount of property damage from fire	0	
	(1C11)	divided by the average daily population (ADP)	636	0
21	6	Number of code violations cited	0	
	(1C12)	divided by the average daily population (ADP)	636	0
21	7	Number of incidents of inventory discrepancies	0	
	(1C14)	divided by the average daily population (ADP)	636	0
21	8	Number of incidents involving toxic or caustic materials	1	
	(1C13)	divided by the average daily population (ADP)	636	.001

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

	Outcome Measures Worksheet						
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure			
3, 8, 13	1 (Key)	Number of worker's compensation claims filed for injuries that resulted from the physical environment.	12				
	(1A01)	divided by the average number of full-time equivalent staff positions	(b)(7)(e)			
1,8,13,18	2 (Key)	Number of physical injuries or emotional	12				
	(1A04)	traumas requiring treatment as a result of the physical environment of the facility					
		divided by the average daily population.	636	.02			
27,30,31	3 (Key)	Number of sanitation or health-code violations identified by external agencies	0				
	(1A06)	divided by the average daily population (ADP)	636	0			

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

their seventy.				
3,10,17,36	4 (Key)	Number of detainee grievances related to safety or sanitation found in favor of detainees	0	
	(1A08)	divided by the number of detainee's grievances related to safety or sanitation.	2	0
9	5 (Key) (1A10)	Number of detainee injuries resulting from fires requiring medical treatment in a 12-month period	0	
		divided by the average daily population (ADP)	636	0
19,30,31,33, 36,37	6 (1A02)	Number of illnesses requiring medical attention as a result of the physical environment of the facility	0	
		facility divided by the average daily population	636	0
27,30,31	7	Number of health code violations corrected	0	U
27,00,01	(1A07)	divided by the number of health code violations identified.	0	0
9	8	Number of fire-code violations corrected	0	
	(1A09)	divided by the number of fire code violations cited by jurisdictional authority.	0	0
15	9	Number of detainee injuries (other than by fire) requiring medical treatment	541	
	(1A11)	divided by the average daily population.	636	.85
9	10	Number of staff injuries resulting from fires requiring medical treatment	0	
	(1A12)	divided by the average daily number of staff in the past 12 months.	(b)(7)(e)	0
15	11	Number of staff injuries (other than fire) requiring medical treatment	12	
	(1A13)	divided by the number of fire related incidents during the past 12 months.	0	12
15	12	Number of detainee lawsuits related to safety or	0	
	(1A14)	sanitation found in favor of the detainee divided by the number of detainee lawsuits related to safety or sanitation	0	0

PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

Outcome Measures Worksheet				
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
1	1 (Key)	Number of vehicle accidents resulting in injuries requiring medical treatment for any party	0	
	(1B02)	divided by the average daily population (ADP)	636	0
12	2	Number of vehicle accidents resulting in property damage	0	
		divided by the total number of trips	3500	0
12	3	Dollar amount of damage from vehicle accidents resulting in property damage	0	
	(1B03)	divided by the total number accidents	0	0

	PART 2 – 4. ADMISSION AND RELEASE				
		tects the community, detainees, staff, volunteers is when detainees are admitted to or released fro		ors by ensuring	
		Outcome Measures Worksheet			
Worksheet	Outcome	Numerator/Denominator	Value	Outcome	
ltem #	Measure			Measure	
1	1 (Key)	Total number of detainees who received orientation presentations over the last year	6428		
		divided by the total number of detainees admitted into the facility over the last year	6428	1	

		PART 2 – 5. CLASSIFICATION SYSTEM		
and contribute	s to orderly fac	tects the detainees, staff, contractors, volunteers, a cility operations, by requiring a formal classification based on verifiable and documented data.		
		Outcome Measures Worksheet		
Worksheet	Outcome	Numerator/Denominator	Value	Outcome
Item #	Measure			Measure
2	1 (Key)	Number of escapes from the facility	0	
	(2A05)	divided by the average daily population.	636	0
2,3,4	2	Number of level 1 detainees admitted during the past 12 months	6428	
		divided by total number of detainees admitted during the past 12 months	6428	1
2,3,4	3	Number of level 2 detainees admitted during the past 12 months	0	
		divided by total number of detainees admitted during the past 12 months	0	0

2,3,4	4	Number of level 3 detainees admitted during the past 12 months	0	
		divided by total number of detainees admitted during the past 12 months	0	0
9,10,11 5	5	Number of classification appeals won over the last 12 months	0	
		divided by the number of classification appeals filed over the last 12 months	0	0

PART 2 – 6. CONTRABAND

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

Outcome Measures Worksheet				
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
6,7	1 (Key)	Number of weapons found in the facility over the past 12 months	1	
	(2C03)	divided by the average daily population.	636	.001
6,7	2 (Key)	Number of controlled substances found in the facility	1	
	(2C04)	divided by the average daily population.	636	.001
8	3	Number of incident reports involving contraband	41	
	(2C01)	divided by the average daily population.	636	.6

PART 2 – 7. FACILITY SECURITY AND CONTROL

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

Outcome Measures Worksheet						
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure		
13	1 (2A01)	Number of incidents	14			
	(2, 101)	divided by the average daily population.	636	.022		
3,4	2	Number of full time employees (FTE) filled Number of FTE authorized	(b)(7)(e)			
3,4	3	Number of security employees (FTE) filled Number of security FTE authorized				

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
29, 30, 31	1 (Key)	Number of missing property claims submitted during the past 12 months	2	
		divided by the number of detainees admitted during the past 12 months	6428	3214

29, 30, 31	2 (Key)	Number of grievances filed by detainees regarding their property	0	
	(7D03)	divided by the average daily population.	636	0
7	3 (Key)	Number of detainee grievances on property decided in favor of detainees	0	
	(7D04)	divided by the total number of detainee grievances on property.	0	0

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

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

Outcome Measures Worksheet					
Worksheet	Outcome	Numerator/Denominator	Value	Outcome	
Item #	Measure			Measure	
6	1 (Key)	Number of detainees kept in hold rooms beyond the 12 hour time constraint in the past 12 months	0		
		divided by the number of admissions	6428	0	
	•	•			

This Detentior	n Standard ma	PART 2 – 10. KEY AND LOCK CONTR intains facility safety and security by requiring the		cks be properly
controlled and	maintained.			
		Outcome Measures Worksheet		
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
21	1	Number of incidents involving keys	22	
	(2D01)	divided by the average daily population.	636	.34
21	2	Number of incidents involving locks	23	
		divided by the average daily population.	636	.36

PART 2 – 11. POPULATION COUNTS

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

Outcome Measures Worksheet					
Worksheet	Outcome	Numerator/Denominator	Value	Outcome	
Item #	Measure			Measure	
2	1	Number of incident reports involving count issues (delayed counts, inaccurate counts, recounts)	5		
		divided by the total number of counts.	1825	.002	
			1825	.002	

PART 2 – 12. POST ORDERS					
This Detention Standard protects detainees and staff and enhances facility security and good order by ensuring that each officer assigned to a security post knows the procedures, duties, and responsibilities of that post.					
		Outcome Measures Worksheet			
Worksheet	Outcome	Numerator/Denominator	Value	Outcome	
ltem #	Measure			Measure	
		NA			
				•	

	PART 2 – 13. SEARCHES OF DETAINEES					
	This Detention Standard protects detainees and staff and enhances facility security and good order by detecting, controlling, and properly disposing of contraband.					
		Outcome Measures Worksheet				
Worksheet	Outcome	Numerator/Denominator	Value	Outcome		
Item #	Measure			Measure		
5	1 (Key)	Number of strip searches conducted over the past 12 months	0			
		divided by number of detainees admitted into the facility over the past 12 months	6428	0		
		· · · ·				

abuse and ass	aults on detair	uires that facilities that house ICE/DRO detainees a nees, provide prompt and effective intervention and ol, discipline, and prosecute the perpetrators of set	l treatment	for victims of sexu
		Outcome Measures Worksheet		
Worksheet	Outcome	Numerator/Denominator	Value	Outcome
Item #	Measure			Measure
10	1 (Key)	Number of confirmed sexual misconduct incidents between staff and detainees	0	
	(4D11)	divided by the average daily population for the past 12 months.	636	0
10	2 (Key)	Number of confirmed sexual misconduct incidents between volunteers and/or contract	0	
	(4D12)	personnel and detainees divided by the average daily population.	636	0
10	3	Number of alleged sexual misconduct incidents between staff and detainees	0	0
	(4D09)	divided by the average daily population.	636	0
10	4 (4D10)	Number of alleged sexual misconduct incidents between volunteers and/or contract personnel and detainees	0	
		divided by the average daily population.	636	0

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

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

PART 2 – 16. STAFF-DETAINEE COMMUNICATION

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

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

Vorksheet tem #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
1,2,3	1 (Key)	Number of ICE scheduled visits during the last 12 months	104	
		divided by 52 (weeks).	52	2
1,2,3	2	Number of ICE unannounced visits during the last 12 months	365	
		divided by 52 (weeks).	52	7.01
5,8,9	3	Number of Staff Detainee Request forms responded to within 72 hours	2159	
		divided total number of Staff Detainee Request forms for the past 12 months	2445	.88

PART 2-17. TOOL CONTROL

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

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
3	1	Number of incidents involving tools	3	
	(2D02)	divided by the average daily population.	636	.004
3	2	Number of incidents involving culinary equipment	1	
	(2D03)	divided by the average daily population.	636	636
3	3	Number of incidents involving medical equipment and sharps	0	
	(2D04)	divided by the average daily population.	636	0

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

Worksheet	Outcome	Numerator/Denominator	Value	Outcome
Item #	Measure			Measure
7, 28	1 (Key)	Number of instances in which force was used	0	
	(2B01)	divided by the average daily population.	636	0
7, 9	2 (Key)	Number of times that staff uses of force were found to have been inappropriate	0	
	(2B03)	divided by the number of uses of force	0	0
16,21	3 (Key)	Number of injuries requiring medical treatment resulting from staff use of force	0	
	(2B06)	divided by the average daily population	636	0
7, 9	4 (Key) (2B04)	Number of detainee grievances filed alleging inappropriate use of force decided in favor of the detainees	0	
	()	divided by the number of grievances alleging inappropriate uses of force.	0	0

PART 3 – 19. DISCIPLINARY SY	YSTEM
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This Detention Standard promotes a safe and orderly living environment for detainees by establishing a fair and equitable disciplinary system, requiring detainees to comply with facility rules and regulations, and imposing disciplinary sanctions to those who do not comply.

Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
1	1 (Key)	Number of rule violation reports	94	
	(3A01)	divided by the average daily population.	636	.147
1	2 (Key)	Number of assaults detainee against detainee	16	
	(3A02)	divided by the average daily population	636	.025
1	3 (Key)	Number of assaults detainee against staff	0	
	(3A02)	divided by the average daily population	636	0
1	4 (Key)	Number of 100 and 200 level violations	43	
		divided by the average daily population.	636	.067
1	5 (Key)	Number of 300 and 400 level violations	51	
		divided by the average daily population.	636	.081
6	6	Number of disciplinary violations resolved at the unit level	7	
		divided by the total number of disciplinary violations adjudicated	45	.15

		PART 4 – 20. FOOD SERVICE		
		ures that detainees are provided a nutritionally ba and hygienic food service operation.	lanced die	t that is prepared
		Outcome Measures Worksheet		
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
3	1 (Key)	Number of documented detainee illnesses attributed to food service operations	0	
	(4A01)	divided by the average daily population (ADP)	636	0
3	2 (Key) (4A02)	Number of detainee grievances about food service decided in favor of the detainee the past 12 months	0	
		divided by the number of detainee grievances about food service.	1	1
52	3 (Key)	Number of violations cited by independent authorities for food sanitation in the past 12	0	
	(4A03)	months.		

PART 4 – 21. HUNGER STRIKES					
This Detention Standard protects detainees' health and well-being by monitoring, counseling, and providing appropriate treatment to any detainee who is on a hunger strike					
	Outcome Measures Worksheet				
Outcome Measure	Numerator/Denominator	Value	Outcome Measure		
1 (Key)	Number of hunger strikes during past 12 months	0			
	divided by the average daily population	636	0		
2 (Key)	Number of detainees transported to outside facilities as a result of a hunger strike	0			
	divided by the number of hunger strikes during the past 12 months	0	0		
e	Outcome Measure 1 (Key)	eatment to any detainee who is on a hunger strike Outcome Measures Worksheet Outcome Numerator/Denominator 1 (Key) Number of hunger strikes during past 12 months divided by the average daily population 2 (Key) Number of detainees transported to outside facilities as a result of a hunger strike divided by the number of hunger strike	eatment to any detainee who is on a hunger strike Outcome Measures Worksheet Outcome Measure Value 1 (Key) Number of hunger strikes during past 12 or months 0 divided by the average daily population 636 2 (Key) Number of detainees transported to outside facilities as a result of a hunger strike 0		

		PART 4 – 22. MEDICAL CARE		
	rgency care se	sures that detainees have access to a continuum of ervices, so that their health care needs are met in a		
		Outcome Measures Worksheet		
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
67	1 (Key) (4C12)	Number of detainee deaths due to injuries	0 636	0
67	2 (Key) (4C13)	divided by the average daily population. Number of medically expected detainee deaths	0	
67	3 (Key)	divided by the average daily population. Number of medically unexpected detainee deaths	636 0	0
	(4C14)	divided by the average daily population.	636	0
	4 (Key)	Number of detainee admissions to off-site hospitals	69	
	(4C16)	divided by the average daily population.	636	.108
5,29	5 (Key) (4C17)	Number of detainees transported off-site (via an ambulance or correctional vehicle) for treatment of emergency health conditions	17	
		divided by the average daily population.	636	.026
1	6 (Key) (4C19)	Number of detainee grievances about access to health care services found in favor of the detainee	0	
		divided by the number of detainee grievances about access to healthcare services	20	0
1	7 (Key)	Number of detainee grievances related to the quality of health care found in favor of detainees	0	
	(4C20)	Divided by the number of detainee grievances related to the quality of health care	5	0
2,9	8 (Key)	Number of staff with lapsed licensure and/or certification	0	
	(4D01)	divided by the number of licensed or certified staff.	(b)(7)(e)	0

23	9	Number of detainees with a positive tuberculin	0	
		skin test on admission		
	(4C01)	divided by the number of admissions.	6428	0
23	10	Number of detainees diagnosed with active tuberculosis	1	
	(4C02)	divided by the average daily population.	636	.001
23	11	Number of conversions to a positive tuberculin skin test	0	
	(4C03)	divided by the number of tuberculin skin tests given.	0	0
23	12	Number of detainees with a positive tuberculin skin test who complete prophylaxis treatment for	23	
	(4C04)	tuberculosis		_
		divided by the number of detainees with a positive tuberculin skin test on prophylaxis treatment for tuberculosis.	0	23
44	13	Number of Hepatitis C positive detainees	1	
	(4C05)	divided by the average daily population.	636	.001
44	14	Number of HIV positive detainees	32	
	(4C06)	divided by the average daily population.	636	.05

PART 4 – 23. PERSONAL HYGIENE

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

Norksheet tem #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
1,2	1 (Key) (4B01)	Detainee grievances regarding detainee access to personal hygiene decided in favor of the detainee	0	
	, ,	divided by the average daily population.	636	0
1,2	2 (Key)	Number of detainee grievances related to hygiene found in favor of the detainee	0	
	(4B04)	divided by the number of detainee grievances related to hygiene.	0	0
7,8	3 (4B03)	Number of detainees diagnosed with hygiene-related conditions (scabies, lice, or fungal infections)	9	
	(divided by the average daily population.	636	.014
7	4	Number of detainee lawsuits related to hygiene found in favor of the detainee.	0	
	(4B05)	divided by the number of detainee lawsuits related to hygiene	0	0

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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

Outcome Measures Worksheet				
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
	1 (Key)	Number of detainee suicide attempts	3	
	(4C09)	divided by the average daily population	636	.004
4	2 (Key)	Number of detainee suicides	0	
	(4C10)	divided by the average daily population.	636	0

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

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

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

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

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

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

Outcome Measures Worksheet				
Worksheet	Outcome	Numerator/Denominator	Value	Outcome
Item #	Measure			Measure
8,9,10	1 (Key)	Number of detainee grievances regarding correspondence and other mail	0	
		divided by the average daily population	636	0
8,9,10	2 (Key)	Number of detainee grievances regarding correspondence and other mail decided in favor of detainees	0	
		divided by the total number of grievances	636	0

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

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

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

		PART 5 – 28. MARRIAGE REQUESTS		
		nsures that each marriage request from an ICE/DR internal guidelines for approval of such requests.		eceives a case-by-
		Outcome Measures Worksheet		
Worksheet	Outcome	Numerator/Denominator	Value	Outcome
Item #	Measure			Measure
		NA		
		L	1	1

		sures that each detainee has access to recreation straints of safety, security, and good order.	nal and exe	ercise programs
		Outcome Measures Worksheet		
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
1,6,7,8 1	1	Average number of detainees participating in recreation per day	636	
		divided by the average daily population	636	1
18	2	Number of detainee grievances, regarding: recreation	0	
		divided by the average daily population.	636	0
1 3	3	Number of detainee voluntary transfers (recreation related) approved	0	
		divided by the total number of voluntary transfers (recreation related) requested	0	0
1	4	Number of voluntary transfers (recreation related) requested	0	
		divided by the average daily population	636	0

PART 5 – 30. RELIGIOUS PRACTICES

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

Outcome Measures Worksheet				
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
1	1 (Key)	Number of detainee grievances regarding religious practices	0	Measure
		divided by the average daily population.	636	0
1	2	Number of detainee grievances regarding religious practices decided in favor of detainees	0	
		divided by the total number of grievances filed	51	0

		PART 5 – 31. TELEPHONE ACCESS		
community, le	gal representa	sures that detainees may maintain ties with their t atives, consulates, courts, and government agenc ccess to telephone services.		
		Outcome Measures Worksheet		
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
27	1	Number of detainee grievances regarding telephone access	0	
		divided by the average daily population.	636	0
27	2	Number of detainee grievances regarding telephone access decided in favor of detainees	0	
		divided by the total number of grievances filed	51	0

PART 5 - 32. VISITATION

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

Outcome Measures Worksheet				
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
1	1	Number of detainee grievances regarding visitation	0	
		divided by the average daily population.	636	0
1	2	Number of detainee grievances regarding visitation decided in favor of detainees	0	
		divided by the total number of grievances filed	51	0

PART 5 – 33. VOLUNTARY WORK PROGRAM

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

Workshee	Outcome	Numerator/Denominator	Value	Outcome Measure
titem #Measure81	1	Number of detainee grievances regarding voluntary work program	0	Measure
		divided by the average daily population.	636	0
8 2	2	Number of detainee grievances regarding voluntary work program decided in favor of detainees	0	
		divided by the total number of grievances filed	51	0
1,3 3	3	Average number of detainees participating in the voluntary work program	151	
		divided by the average daily population	636	.23
1,3	4	Average monthly total wages paid to detainees	3600	
		divided by the average daily population	636	5.66

PART 6 - 34. DETAINEE HANDBOOK

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

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

	PART 6 – 35. GRIEVANCE SYSTEM				
		tects detainees' rights and ensures they are treaty file formal grievances and receive timely respo		/ providing a	
		Outcome Measures Worksheet			
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure	
7	1 (Key)	Number of detainee grievances regarding discrimination	0		
	(6B01)	divided by the average daily population.	636	0	
8,11	2 (Key)	Number of detainee grievances regarding discrimination resolved in favor of detainees	0		
	(6B02)	divided by the total number of detainee grievances filed regarding discrimination.	0	0	
8,11	3 (Key)	Number of grievances resolved in favor of detainees	0		
	(6B03)	divided by the average daily population.	636	0	

8,11	4 (Key)	Number of grievances resolved in favor of detainees	4	
	(6B04)	divided by the total number of grievances filed.	51	.078
			·	

	PA	RT 6 – 36. LAW LIBRARIES AND LEGAL MATE	RIAL	
This Detention comprehensiv		etects detainees' rights by ensuring their access to als.	courts, co	unsel, and
		Outcome Measures Worksheet		
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
18	1	Number of detainee grievances regarding access to court decided in favor of detainees.	0	
		divided by the total number of grievances filed	51	0
18	2	Number of detainee grievances, regarding access to court	0	
		divided by the average daily population.	636	0

	PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS				
This Detention Standard protects detainees' rights by ensuring their access to information presented by authorized persons and organizations for the purpose of informing them of U.S. immigration law and procedures.					
		Outcome Measures Worksheet			
Worksheet	Outcome	Numerator/Denominator	Value	Outcome	
Item #	Measure			Measure	
		NA			

		PART 7 – 38. DETENTION FILES		
		ontributes to efficient and responsible facility man a facility for more than 24 hours a file of all signif		
		Outcome Measures Worksheet		
Worksheet	Outcome	Numerator/Denominator	Value	Outcome

Worksheet	Outcome	Numerator/Denominator	Value	Outcome
Item #	Measure			Measure
2	1	Number of detainee grievances on records decided in favor of detainees	0	
	(7D04)	divided by the total number of detainee grievances.	51	51
2	2	Number of detainee grievances on records	51	
	(7D03)	Divided by the average daily population.	636	.08

PART 7 - 39. NEWS MEDIA INTERVIEWS AND TOURS

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

	Outcome Measures Worksheet				
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure	
1,3	1 (7F03)	Number of complaints filed by the public/media regarding access to information and/or the facility	0		
		divided by the average daily population.	636	0	
1,3	2	Number of positive letters/news articles made by the public/media regarding the facility	0		
	(7F04)	divided by the average daily population.	636	0	

		nsures that staff, contractors, and volunteers are co y receive initial and ongoing refresher training.	mpetent in	their assigned
		Outcome Measures Worksheet		
Worksheet Item #	Outcome Measure	Numerator/Denominator	Value	Outcome Measure
1	1 (Key)	Number of staff who left employment for any reason	12	
	(7B02)	divided by the number of full-time equivalent staff positions.	(b)(7)(e)	(b)(7)(e)
4	2	Number of initial training hours provided in the past 12 months	1280	
		divided by the number of staff hired in the past 12 months	14	91.42
4	3	Number of annual training hours provided in the past 12 months	6760	
		divided by the average number of FTE in the past 12 months	(b)(7	7)(e)
26	4	Number of credit hours in course relevant to their facility responsibilities earned by staff participating in higher education	120	
		divided by the number of full-time equivalent staff positions.	(b)	(7)(e)
26	5	Number of professional development events attended by staff	35	
		divided by the number of full-time equivalent staff positions	(b)(7)(e)

	PART 7 - 41. TRANSFER OF DETAINEES				
This Detention Standard ensures that transfers of detainees from one facility to another are professionally and responsibly managed in regard to notifications, detainee records, safety and security, and protection of detainee funds and personal property.					
		Outcome Measures Worksheet			
Worksheet Item #	Outcome Measure	Numerator/Denominator	Numerator/Denominator Value Outcome Measure		
		NA			

A. Type of Facility Reviewed

	ICE Service Processing Center
\square	ICE Contract Detention Facility

- **ICE Contract Detention Facility**
 - **ICE Intergovernmental Service Agreement**

B. Current Inspection

 \Box

Type of Inspection	
Field Office HQ Inspection	
Date[s] of Facility Review	
10/30/2012 - 11/01/2012	

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Not Available	Review
Previous Rating	
Meets Standards	Does Not Meet Standards

D. Name and Location of Facility

Name
Broward Transitional Center
Address (Street and Name)
3900 Powerline Road
City, State and Zip Code
Pompano Beach, Florida 33073
County
Broward
Name and Title of Facility Administrator
(Warden/OIC/Superintendent)
(b)(6), (b)(7)(c) Warden
Telephone # (Include Area Code)
954-98)(6), (b)(7)(c)
Field Office / Sub-Office (List Office with oversight
responsibilities)
Miami, Florida
Distance from Field Office
25 miles

E. ICE Information

Name of Inspector (Last Name, Title and Duty Station) (b) (6), (b) (7) (c) CI / Nakamoto Group Name of Team Member / Title / Duty Location (b)(6), (b)(7) (cMedical SME / Nakamoto Group Name of Team Member / Title / Duty Location (b)(6), (b)(7)(cSafety-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 Date of Contract or IGSA					
HSCE DM-09-0006 April 21, 2009					
Basic Rates per Man-Day					
\$112.81 up to 500 guarteed; 501-700\$6.42					
Other Charges: (If None, Indicate N/A)					
Transportation \$223,387; \$1 per detainee worker/per day					

Estimated Man-days Per Year 228,125 ADP @ 625

G. Accreditation Certificates

List all State or National Accreditation[s] received:
ACA
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					
1989					
Date Last Remodeled	Date Last Remodeled or Upgraded				
2011					
Date New Constructio	n / Bedspace Added				
May 2011 / No Bed Space Added					
Future Construction Planned					
\Box Yes \boxtimes No Date: N/A					
Current Bedspace Future Bedspace (# New Beds only)					
700 Number: N/A Date: N/A					

J. Total Facility Population

<u>Total Facility Intake</u> for previous 12 months 6428
Total ICE Mandays for Previous 12 months
252,126

K. Classification Level (ICE SPCs and CDFs Only)

	L-1	L-2	L-3
Adult Male	595	0	0
Adult Female	105	0	0

L. Facility Capacity

	Rated	Operational	Emergency	
Adult Male	595	595	595	
Adult Female	105	105	105	
Facility holds Juveniles Offenders 16 and older as Adults				

M. Average Daily Population

	ICE	USMS	Other
Adult Male	564	0	0
Adult Female	72	0	0

N. Facility Staffing Level

Security:		
9	(b)(7)(e)	

Support:

Significant Incident Summary Worksheet

For The Nakamoto Group to complete its review of your facility, the following information <u>must be completed</u> 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.

Incidents	Description	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault:	Types (Sexual ² , Physical, etc.)	0	0	0	0
Offenders on Offenders ¹	With Weapon	0	0	0	0
	Without Weapon	3	11	2	0
Assault:	Types (Sexual Physical, etc.)	0	0	0	0
Detainee on Staff	With Weapon	0	0	0	0
	Without Weapon	0	1	1	15
Number of Forced Moves, incl. Forced Cell moves ³		0	0	0	0
Disturbances ⁴		0	0	1	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	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
Restraints applied/used	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	0
Number of Times Canines Used in Facility		0	0	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.		4	0	10	3
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	31	4	2	4
	# Resolved in favor of Offender/Detainee	1	0	0	0
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	0	0	0	0
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	119	113	180	129
	# Psychiatric Cases referred for Outside Care	23	25	47	25

¹ Any attempted physical contact or physical contact that involves two or more offenders ² Oral analor vaginal penetration or attempted penetration involving at least 2 parties with

² Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting ³ Deuting transportation of detained (for deminent considered "for a d")

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

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)	
	Signature		
Title & Duty Location	Date		
Lead Compliance Inspector, The Nakamoto Group, Inc.	11/01/2012		

n Members				
Name, Title, & Duty Location	Print Name, Title, & Duty Location			
6), (b)(7)(c) Medical SME, The Nakamoto Group, Inc. Name, Title, & Duty Location	(b)(6), (b)(7)(c) Security SME, The Nakamoto Group, Inc. Print Name, Title, & Duty Location			
6), (b)(7)(c) Safety/Food Service SME, The Nakamoto up, Inc.				

Recommended Rating:

⊠ Meets Standards □ Does Not Meet Standards

Comments: The Broward Transitional Center began housing ICE detainees in August 2002 under a contract to house only female detainees. In February 2007, this contract was modified to increase the capacity to 600 detainees and in July 2009 the contract was again amended to increase the maximum capacity to 700 detainees, 595 male and 105 female. The facility currently has four male and one female housing units. The facility only accepts non-criminal Level 1 ICE detainees.

On August 3, 2012, a large group of detainees assembled in the recreation area and began complaining very loudly about proposed changes in the government's immigration policy. A recall was announced over the public address system and all detainees returned to their rooms without incident.

During the past 12 months, detainees filed 41 grievances, a rate of less than 4 grievances per month for a detainee average daily population of 636. Detainees are not restricted to their housing units and have access to the open compound almost the entire day. The detainees have direct access to staff, and there is frequent interaction between the detainees and facility and ICE staff.

There have been no detainee deaths at this facility during the past 12 months. There were no reported detainee on detainee or staff on detainee sexual assaults. Detainees are not charged a co-pay for medical services. The facility does not use (b)(7)e or canines.

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

Office of Enforcement and Removal Operations

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



U.S. Immigration and Customs Enforcement

1 / 2013

MEMORANDUM FOR:

Marc J. Moore Field Office Director Miami Field Office

FROM:

Assistant Director for Custody Management

SUBJECT:

Broward Transitional Center Annual Review 2012

The annual review of the Broward Transitional Center conducted on October 30-November 1, 2012, in Pompano, Florida has been received. A final rating of Meets Standards has been assigned and this review is closed.

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

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

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

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

cc: Official File

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