

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



U.S. Immigration
and Customs
Enforcement

MEMORANDUM FOR: Katrina S. Kane
Field Office Director
Phoenix Field Office

FROM:

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

JAN 22 2013

Assistant Director for Custody Management

SUBJECT: Central Arizona Detention Center Annual Review 2012

The annual review of the Central Arizona Detention Center conducted on September 25-27, 2012, in Florence, Arizona has been received. A final rating of Acceptable has been assigned and this review is closed.

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

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

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

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

Deputy Assistant Director, Detention Management Division at (202) 732-7300 (b)(6), (b)(7)(c)

cc: Official File

Department of Homeland Security

Immigration and Customs Enforcement: Office of Enforcement and Removal Operations

Condition of Confinement Inspection Worksheet

(This document must be attached to each G-324A Detention Review Form)

This Form is to be used for Inspections of Facilities used over 72 Hours**Performance-Based National Detention Standards
Inspection Worksheet for Over 72 Hour Facilities****REVIEW TEAM USE: (Edits Permitted, ALL FIELDS REQUIRED)**

Facility Information			
Facility Name: Central Arizona Detention Center			Pre-Occupancy: <input type="checkbox"/>
Facility Type: IGSA Intergovernmental Service Agreement (IGSA), ICE Service Processing Center (SPC), ICE Contract Detention Facility (CDF)			
Address:	1155 North Pinal Parkway		
City: Florence	State: AZ	Zip Code: 85132	
County:	Pinal		
CEO Name	(b)(6), (b)(7)(c)	CEO Title: Warden	
Review Information (Use following format for dates: mm/dd/yyyy)			
Start Date: 9/25/2012	End Date: 9/27/2012	Review Type: Headquarters	
Lead Name	(b)(6), (b)(7)(c)	Lead Title: LCI	
Review Document Issue Summary (See Document Check Section to Review/Update)			
Error(s) Found:	0	Items Not Rated:	0

ICE HQ USE ONLY: (DO NOT EDIT*)

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

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

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Introduction to the G324A Over 72hour Facility Detention Inspection Worksheets

What is “Performance-Based”?

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

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

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

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

Worksheet Overview

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

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

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

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

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

Worksheet Completion

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

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

Outcome Measures Completion

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

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

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Section I: SAFETY

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

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

PART 1 – 1. EMERGENCY PLANS (Key: A)		
This Detention Standard ensures a safe environment for detainees and employees by having in place contingency plans to quickly and effectively respond to any emergency situations that arise and to minimize their severity.		
Components	Rating	Remarks (1000 Char Max)
1. No Detainee or detainee groups exercise control or authority over other detainees.	Meets Standard	The handbook and policy reinforce that no detainee groups exercise control or authority over other detainees.
2. Detainees are protected from: <ul style="list-style-type: none"> Personal abuse Corporal punishment Personal injury Disease Property damage Harassment from other detainees 	Meets Standard	Policy states that all detainees will be free from personal abuse, corporal punishment, personal injury, disease, property damage and harassment from other detainees.
3. Staff are trained to identify signs of detainee unrest. <ul style="list-style-type: none"> What type of training and how often? 	Meets Standard	All staff receive pre-service and annual refresher training in identifying signs of detainee unrest.
4. Staff effectively disseminate information on facility climate, detainee attitudes, and moods to the Facility Administrator.	Meets Standard	Staff discusses these areas with the shift commander and or the unit manager to keep them apprised of the facility climate.
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 chief of security and warden are responsible for the emergency plans and their implementation.
6. Each emergency plan is assigned a number and is strictly accounted for. A list identifying the location of each emergency plan is maintained by the Chief of Security or equivalent.	Meets Standard	Emergency plans are assigned a number and strictly accounted for. Copies are disseminated to the warden, central control, quality assurance, the sheriff's office and the local police department.
7. All staff receive training in the emergency plans during their orientation training as well as during their annual training.	Meets Standard	
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: <ul style="list-style-type: none"> Confidentiality Accountability (copies and storage locations) Annual review procedures and schedule Revisions 	Meets Standard	

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

PART 1 – 1. EMERGENCY PLANS (Key: A)

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

Components	Rating	Remarks (1000 Char Max)
10. Contingency plans include a comprehensive general section with procedures applicable to most emergency situations, including procedures for handling detainees with special needs.	Meets Standard	The emergency plans include comprehensive procedures applicable to most emergency situations including procedures for handling detainees with special needs.
11. Contingency plans include a procedure for notification of neighbors residing in close proximity to the facility.	Meets Standard	Contingency plans are in place to notify neighbors and businesses residing in close proximity to the facility. In addition, there are five correctional facilities located within one mile of this facility.
12. The facility has cooperative contingency plans with applicable: <ul style="list-style-type: none"> Local law enforcement agencies State agencies Federal agencies 	Meets Standard	The facility has cooperative contingency plans with the sheriff's office, the town of Florence, the police and fire departments, the Pinal County Department of Health and the Division of Public Health. The chief of security is responsible for maintaining the memorandums of understanding with these agencies.
13. The facility conducts mock emergency exercises with agencies or departments with which they share mutual aid agreements and Memoranda of Understandings. The exercises should test specific emergency plans to assess their effectiveness.	Meets Standard	The facility conducts an annual disaster drill, the last drill having been conducted on 09/11/11. The exercises test specific emergency plans with agencies with which there is a memorandum of understanding.
14. All staff receive copies of the Facility Hostage policy and procedures.	Meets Standard	Staff is trained in the facility hostage policy during basic training and annual training. Staff receives and signs for a copy of the facility hostage policy.
15. (b)(7)e (b)(7)e Within 24 hours after release, hostages are screened for medical and psychological effects.	Meets Standard	(b)(7)e (b)(7)e There have been no hostage situations since the last annual inspection.
16. The facility maintains a list of translator services in the event one is needed during a hostage crisis.	Meets Standard	The facility maintains a list of translator services in the central control unit, the command center and the investigations office.

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

PART 1 – 1. EMERGENCY PLANS (Key: A)

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

Components	Rating	Remarks (1000 Char Max)
17. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	Meets Standard	Medical treatment for staff and detainees during and after an incident is addressed.
18. 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 15-day supply of emergency meals.
19. Written plans illustrate locations of shut-off valves and switches for utilities (water, gas, electric).	Meets Standard	Written plans for the shut off valves and switches for utilities are included in the emergency plan.
20. Written plans include a Staff Work Stoppage procedure. This procedure is available for limited supervisory review.	Meets Standard	The emergency plans include a staff work stoppage procedure which is available for limited supervisory review.
21. (MANDATORY) Written procedures cover: <ul style="list-style-type: none"> • Work/Food Strike • Fire • Environmental Hazard • Detainee Transportation System Emergency • ICE-wide Lockdown • Staff Work Stoppage • Disturbances • Escapes • Bomb Threats • Adverse Weather • Internal Searches • Facility Evacuation • Detainee Transportation System Plan • Hostages (Internal) • Civil Disturbances 	Meets Standard	Written procedures in the emergency plan cover all of the bulleted items 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)*

The facility has an emergency plan in place that covers a variety of potential emergency situations. The control center has each emergency procedure readily accessible. Plans are kept confidential and are disseminated to a core group of staff. Staff receive training on the emergency plan during basic and annual training. In addition, each staff member receives and signs for a copy of the facility hostage policy. The facility conducts an annual disaster emergency drill with other law enforcement agencies in the area.

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

PART 1 – 1. EMERGENCY PLANS – Reviewer Summary

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

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY (Key: B)		
This Detention Standard protects detainees, staff, volunteers, and contractors from injury and illness by maintaining high facility standards of cleanliness and sanitation, safe work practices, and control of hazardous substances and equipment.		
Components	Rating	Remarks (1000 Char Max)
1. (MANDATORY) The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	Meets Standard	Policy outlines the procedures for the control, handling, storage and use of flammable, toxic and caustic materials.
2. Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each area of the facility.	Meets Standard	Constant inventories are maintained for all flammable, toxic and caustic substances.
3. The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. <ul style="list-style-type: none"> The files list all storage areas, and include a plant diagram and legend. The MSDSs and other information in the files are available to personnel managing the facility's safety program. 	Meets Standard	Material Safety Data Sheet (MSDS) files were observed to be up to date for all hazardous substances used. The binders include a list of all storage areas, with a plant diagram and legend. The master MSDS binders also include the emergency contact numbers as required. MSDS binders are available to personnel managing the facility's safety program.
4. All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures: <ul style="list-style-type: none"> Wear personal protective equipment. Report hazards and spills to the designated official. 	Meets Standard	Personal protective equipment was observed to be available in all areas of the facility where hazardous chemicals are used and stored. Hazards and spills are reported to the fire safety manager.
5. The MSDS are readily accessible to staff and detainees in the work areas.	Meets Standard	MSDS binders are maintained and accessible in all areas of the facility where hazardous chemicals are used and stored.
6. Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> Quantities are limited. Detainees are trained. Staff always supervise detainees using these substances. 	Meets Standard	Quantities of chemicals kept in the housing units are limited and are monitored by staff. Detainees coming into contact with hazardous substances receive training in the handling of those substances.
7. All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	Meets Standard	All solid and liquid flammables and combustibles are stored and used according to label recommendations. There are no aerosol materials used within the secure perimeter of the facility.

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

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY (Key: B)		
This Detention Standard protects detainees, staff, volunteers, and contractors from injury and illness by maintaining high facility standards of cleanliness and sanitation, safe work practices, and control of hazardous substances and equipment.		
Components	Rating	Remarks (1000 Char Max)
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	
10. Excess flammables, combustibles, and toxic liquids are disposed of properly in accordance with MSDS.	Meets Standard	The facility has entered into a contract with Safety-Kleen to dispose of excess flammables, combustible and toxic liquids.
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	Interviews with the fire safety manager indicate that there are no products in the facility that contain methyl alcohol as an ingredient.
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	Staff receives "Right To Know Training" during pre-service training and annually during in-service training. Detainees assigned to work details involving the use of hazardous substances receive training prior to being assigned to the detail.
13. (MANDATORY) The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association (NFPA) and the Occupational Safety and Health Administration (OSHA).	Meets Standard	The facility meets the applicable National Fire Protection Association and Occupational Safety and Health Administration (OSHA) standards. The local fire department performs annual inspections of the facility to ensure compliance with applicable codes.
14. A technically qualified staff member conducts fire and safety inspections.	Meets Standard	The fire safety manager has completed a trainer's course for occupational safety and health for general industry (OSHA 501 certification) and has received an Inspector 1 fire certification from the local fire department.
15. The Safety Office (or officer) maintains files of inspection reports, including corrective actions taken.	Meets Standard	

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

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY (Key: B)		
This Detention Standard protects detainees, staff, volunteers, and contractors from injury and illness by maintaining high facility standards of cleanliness and sanitation, safe work practices, and control of hazardous substances and equipment.		
Components	Rating	Remarks (1000 Char Max)
16. (MANDATORY) The facility has an approved fire prevention, control, and evacuation plan.	Meets Standard	The facility has a fire prevention, control and evacuation plan that has been approved by the local fire authority.
17. The plan requires: <ul style="list-style-type: none"> Monthly fire inspections. Fire protection equipment strategically located throughout the facility. Public posting of emergency plan with accessible building/room floor plans. Exit signs and directional arrows. An area-specific exit diagram conspicuously posted in the diagrammed area. 	Meets Standard	The plan requires fire protection equipment, exit signs and diagrammed exit signs posted throughout the facility. The plan also requires that monthly fire inspections be completed by the fire safety manager.
18. Fire drills are conducted and documented quarterly in all facility locations including the administrative area.	Meets Standard	Fire drills are conducted and documented quarterly. The drills are planned so as to ensure that through the course of a year, a fire drill is conducted in each area, on every shift.
19. A sanitation program covers barbering operations.	Meets Standard	
20. The barbershop has the facilities and equipment necessary to meet sanitation requirements.	Meets Standard	The facility has nine barbershops. The barbershops have the required facilities to meet all necessary sanitation requirements.
21. The sanitation standards are conspicuously posted in the barbershop.	Meets Standard	Sanitation standards are conspicuously posted within the barbershop used by ICE detainees.
22. Written procedures regulate the handling and disposal of used needles and other sharp objects.	Meets Standard	Medical policy regulates the handling and disposal of used needles and syringes.
23. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	Meets Standard	Medical items that represent a potential security threat are inventoried by one member of the medical staff on each of the three shifts. An additional inventory using (b)(7) medical staff is conducted once daily.

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

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY (Key: B)		
This Detention Standard protects detainees, staff, volunteers, and contractors from injury and illness by maintaining high facility standards of cleanliness and sanitation, safe work practices, and control of hazardous substances and equipment.		
Components	Rating	Remarks (1000 Char Max)
24. Standard cleaning practices include: <ul style="list-style-type: none"> Using specified equipment; cleansers; disinfectants and detergents. An established schedule of cleaning and follow-up inspections. 	Meets Standard	
25. Spill kits are readily available.	Meets Standard	Spill kits are maintained by medical staff and are located in the control centers and medical areas.
26. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	Meets Standard	Stericycle, a licensed medical waste contractor, disposes of infectious/bio-hazardous waste as required.
27. Staff are trained to prevent contact with blood and other body fluids and written procedures are followed.	Meets Standard	Staff receives training regarding blood-borne pathogens during pre-service training and annually during in-service training.
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. <ul style="list-style-type: none"> At least monthly. The pest-control program includes preventive spraying for indigenous insects. 	Meets Standard	Anteater Pest Control, a licensed pest control company, is contracted to provide monthly exterminating services, to include preventative spraying for indigenous pests.
30. Drinking water and wastewater is routinely tested according to a fixed schedule.	Meets Standard	The town of Florence, AZ provides for the monthly testing of the facility's water systems.
31. Emergency power generators are tested at least every two weeks. <ul style="list-style-type: none"> Other emergency systems and equipment receive testing at least quarterly. Testing is followed-up with timely corrective actions (repairs and replacements). 	Meets Standard	Emergency power generators are tested weekly for one hour, semi-annually for four hours and annually for two hours. Service and testing by an external generator servicing company, Lofton Equipment Company, is conducted quarterly.
32. The Facility appears clean and well maintained.	Meets Standard	
33. Hazardous material storage rooms meet the security and structural requirements of the standard. Storage cabinets meet the physical requirements specified in the standard.	Meets Standard	

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

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY (Key: B)		
This Detention Standard protects detainees, staff, volunteers, and contractors from injury and illness by maintaining high facility standards of cleanliness and sanitation, safe work practices, and control of hazardous substances and equipment.		
Components	Rating	Remarks (1000 Char Max)
34. The Health Services Administrator has implemented a program supporting a high level of environmental sanitation.	Meets Standard	The fire safety manager has responsibility for the environmental sanitation program throughout the main facility. Health services staff are responsible for the environmental health program within the medical department. Sanitation throughout the facility is maintained at a high level.
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 medical staff conducts daily inspections of the medical facility. The sanitation within the health services department was good throughout the inspection.
36. The assigned staff member shall: Conduct special investigations and comprehensive surveys of environmental health conditions, and provide advisory, consultative, inspection, and training services regarding environmental health conditions.	Meets Standard	The fire safety manager is responsible for conducting training, effecting investigations and providing consultation regarding environmental health conditions within the facility.
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	
38. Environmental health and safety conditions shall be maintained at a level that meets recognized standards of safety and hygiene, including those from the: <ul style="list-style-type: none"> American Correctional Association, Occupational Safety and Health Administration, Environmental Protection Agency, Food and Drug Administration, National Fire Protection Association's Life Safety Code, and National Center for Disease Control and Prevention. 	Meets Standard	The facility meets the recognized safety and hygiene standards of all of the applicable agencies and organizations listed in this component.

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY – Reviewer Summary <i>(Use following format for dates: mm/dd/yyyy)</i>
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Performance-Based National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

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)*

Interviews with the fire safety manager, review of policy and a review of files retention was conducted. The approved facility fire plan was also reviewed and found to have been approved by the local fire authority. Physical observation of the facility's systems and practices for storing, issuing and maintaining inventories of hazardous materials indicated that controls are effective. Policy, procedures and practices are adequate to provide the detainees with a level of safety congruent with the expectations of national accrediting and regulatory agencies and organizations.

Overall Rating: Meets Standard

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

Completion Date: 09/27/2012

Reviewer Signature (for printed form submission):

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

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

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
1. Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	N/A	
2. Every transporting officer required to drive a commercial size vehicle has a valid Commercial Driver's License (CDL) issued by the state of employment.	N/A	
3. Supervisors maintain records for each vehicle operated.	N/A	
4. Documentation indicating annual inspection of vehicles and annual inspection in accordance with state statutes is available for review.	N/A	
5. Documentation indicating safety repairs are completed immediately and vehicles are not used until they have been repaired and inspected is available for review.	N/A	
6. Officers use a checklist during every vehicle inspection. <ul style="list-style-type: none"> Officers report deficiencies affecting operability. Deficiencies are corrected before the vehicle goes back into service. 	N/A	
7. Transporting officers: <ul style="list-style-type: none"> Limit driving time to 10 hours in any 15 hour period when transporting detainees. Drive only after eight consecutive off-duty hours. Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours. Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days. During emergency conditions (including bad weather), officers may drive as long as necessary to reach a safe area—exceeding the 10-hour limit. 	N/A	
8. (b)(7)(e) officers with valid Commercial Drivers Licenses, (CDL's) required in any vehicle transporting detainees. <ul style="list-style-type: none"> When buses travel in tandem with detainees, there are (b)(7)(e) qualified officers per vehicle. An unaccompanied driver transports an empty vehicle. 	N/A	
9. The transporting officer inspects the vehicle before the start of each detail.	N/A	

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

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

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

Standard N/A

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

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

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

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

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
<p>19. Vehicles have:</p> <ul style="list-style-type: none"> • (b)(7)e • • • 	N/A	
20. The vehicles are clean and sanitary at all times.	N/A	
<p>21. Personal property of a detainee transferring to another facility:</p> <ul style="list-style-type: none"> • Is inventoried. • Is inspected. • Accompanies the detainee. 	N/A	
<p>22. The following contingencies are included in the written procedures for vehicle crews:</p> <ul style="list-style-type: none"> • Attack • Escape • Hostage-taking • Detainee sickness • Detainee death • Vehicle fire • Riot • Traffic accident • Mechanical problems • Natural disasters • Severe weather • Passenger list is not exclusively men or women or minors 	N/A	

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

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

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

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

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

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

Detainee land transportation is handled by ICE.

Overall Rating: N/A

Reviewer Name (Printed)

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

Completion Date: 09/27/2012

Reviewer Signature (for printed form submission):

Section II SECURITY

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

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

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

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

Components	Rating	Remarks (1000 Char Max)
1. Admission processing includes an orientation of the facility. The orientation includes; unacceptable activities and behavior, and corresponding sanctions. How to contact ICE. The availability of pro-bono legal services and how to pursue such services. Schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.	Meets Standard	All of the areas listed in this component are addressed in the orientation program. The program includes a 45-minute video, in English and Spanish, which is shown to all new admissions. Detainees are given two site-specific handbooks, one for all new admissions and the other for ICE detainees only. Prior to admission, ICE gives each detainee a copy of the National Detainee Handbook. Detainees sign a receipt for all of this information. Receipts are filed in the detention files.
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	All 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	Detainees are classified by ICE prior to admission into this facility. Detainees housed at this facility are also reclassified at a nearby ICE facility. ICE detainees are placed in a dedicated hold room in the reception and discharge area until their admissions 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	All new admissions are pat searched by an officer of the same sex and then placed onto the body orifice security scanner (B.O.S.S.) chair for contraband detection.
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	Per the Immigration Enforcement Agent (IEA), strip searches are rarely conducted on detainees. In the event a strip search is warranted, ICE supervisors approve the action in writing prior to its occurrence. No detainee strip searches have been conducted since the last inspection.

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

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

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

Components	Rating	Remarks (1000 Char Max)
6. The “Contraband” standard governs all personal property searches. IGSAs and CDFs use or have a similar contraband standard. Staff prepare a complete inventory of each detainee’s possessions. The detainee receives a copy. All identity documents are inventoried and given to ICE staff for placement in the A-file. All funds and valuables are safeguarded in accordance with ICE Policy.	Meets Standard	
7. Staff complete Form I-387 or similar form for CDFs and IGSAs for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	Meets Standard	The facility uses a lost/damaged/ stolen personal property claim form to document such concerns. All detainee claim forms are forwarded to ICE.
8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	Meets Standard	
9. All releases are coordinated with ICE.	Meets Standard	ICE Form I-203 is the authorization used to coordinate detainee releases.
10. Staff complete paperwork/forms for release as required.	Meets Standard	
11. Each detainee receives a receipt for personal property secured by the facility.	Meets Standard	
12. The facility has a system to maintain accurate records and documentation for admission, orientation, and release.	Meets Standard	Recordkeeping is accomplished through an electronic and paper documentation system.
13. ICE staff enter all information pertaining to release, removal, or transfer of all detainees into the Enforce Alien Detention Module (EADM) within 8 hours of action.	Meets Standard	Per the IEA, documentation of any release, removal or transfer is entered into the Enforce Alien Detention Module within the timelines established in this component.
14. All orientation material shall be provided in English, Spanish, and other language(s) as determined by the Field Office Director.	Meets Standard	

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)*

An interview with the IEA, review of policy, observation of reception/discharge procedures, interviews with reception and discharge line staff and supervisors, and review of admission and classification documents revealed that an orderly and secure system for processing detainee admissions and releases has been established.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

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

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

Components	Rating	Remarks (1000 Char Max)
1. SPC and CDF facilities use the required Objective Classification System. IGSA's use an objective classification system or similar system for classifying detainees.	Meets Standard	Detainee classifications are completed at the nearby ICE facility. The ICE classification instrument is an objective form that scores risk/custody levels based on detainees' offenses and behavioral histories. The facility accepts the ICE classifications.
2. The facility classification system includes: <ul style="list-style-type: none"> Classifying detainees upon arrival. Separating individuals who cannot be classified upon arrival from the general population. The first-line supervisor or designated classification specialist reviews every classification decision. 	Meets Standard	All of the bullet points listed in this component are addressed in the ICE classification system. The facility accepts the ICE classification.
3. The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	Meets Standard	
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	All ICE detainees are assigned to E Pod, a 78-bed housing unit. The facility only accepts Level 1 and Level 2 detainees.
6. A detainee's classification-level does not affect his or her recreation opportunities. Detainees recreate with persons of similar classification designations.	Meets Standard	There is no separation of rights and/or privileges between custody levels 1 and 2.
7. Detainee work assignments are based upon classification designations.	Meets Standard	
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	Per the Immigration Enforcement Agent (IEA), timely reassessments and reclassifications are conducted at a nearby ICE facility by ICE staff.

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

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

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

Components	Rating	Remarks (1000 Char Max)
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	Classification appeals are allowed, and addressed upon receipt by the assigned Supervisory Detention and Deportation Officer (SDDO). All reclassification scores are approved by the SDDO. There have been no classification appeals received since the last inspection.
10. Classification appeals are resolved w/in 5 business days. Detainees are notified of the outcome within 10 business days.	Meets Standard	According to the IEA, classification appeals will be addressed upon receipt and appeal results will be provided to the detainee within ten days. No classification appeals have been received since the last inspection.
11. Classification designations may be appealed to a higher authority such as the Facility Administrator or equivalent.	Meets Standard	Detainees may appeal their classification score to any ICE staff member at any time.
12. The Detainee Handbook or equivalent for IGSA's 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	At this IGSA facility, detainees are assigned a teal jumpsuit and a color-coded classification identifier badge or wristband.

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)

An interview with the IEA, review of policy and the handbooks, interviews with reception and discharge line staff and supervisors, interviews with quality assurance staff and review of completed classification documents revealed a formal classification system that manages and separates populations.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 6. CONTRABAND (Key: F)

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

Components	Rating	Remarks (1000 Char Max)
1. The facility follows a written procedure for handling contraband. Staff inventories, holds, and reports it when necessary to the proper authority for action/possible seizure.	Meets Standard	Policy on contraband requires staff to inventory, hold and report contraband for action and possible seizure.
2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	Meets Standard	Policy includes the requirement listed in this component.
3. Staff return property not needed as evidence to the proper authority. Written procedures cover the return of such property.	Meets Standard	The contraband procedure contains instructions for the return of property which is not needed as evidence.
4. Altered property is destroyed following documentation and using established procedures.	Meets Standard	Staff interviews and review of documentation on file revealed that altered property is being disposed of according to established policy.
5. Before confiscating religious items, the Facility Administrator or designated investigator contacts a religious authority.	Meets Standard	The chaplain is consulted prior to confiscating any religious items.
6. Staff follow written procedures when destroying hard contraband that is illegal.	Meets Standard	Written procedures for destroying hard contraband are included in the policy. Destruction of hard contraband is completed by the evidence custodian and another staff witness. All contraband destroyed is documented in the contraband logbook.
7. Hard contraband that is illegal (under criminal statutes) is retained and used for official use, e.g. training purposes. <ul style="list-style-type: none"> If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use. Soft Contraband is mailed to a third party or stored in accordance with the Detention Standard on Funds and Personal Property. 	Meets Standard	The facility has used some confiscated contraband for training purposes and written procedures are in place for this purpose. Current practice is to take pictures of the contraband to be shown during training. Soft contraband is stored or mailed to a third party.
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	Detainees receive notification of contraband rules via the handbook.
9. Facilities with Canine Units only use them for contraband detection.	Meets Standard	

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

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)*

Contraband is properly logged and secured by the evidence custodian. All contraband destroyed is logged. Detainees are notified of contraband rules via the handbook.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 7. FACILITY SECURITY AND CONTROL (Key: G)		
This Detention Standard protects the community, staff, contractors, volunteers, and detainees from harm by ensuring that facility security is maintained and that events that pose a risk of harm are prevented.		
Components	Rating	Remarks (1000 Char Max)
1. The facility administrator or assistant administrator and department heads visit detainee living quarters and activity areas weekly.	Meets Standard	Policy requires the facility administrator and department heads to visit detainee living quarters weekly. All visits are logged into the housing unit logbook.
2. At least one male and one female staff are on duty where both males and females are housed.	N/A	The facility houses only male detainees.
3. Comprehensive annual staffing analysis determines staffing needs and plans.	Meets Standard	The staffing analysis dated 05/08/2012 was reviewed.
4. Essential posts and positions are filled with qualified personnel.	Meets Standard	
5. Every Control Center officer receives specialized training.	Meets Standard	Officers selected are trained by the shift supervisor to work in the control center.
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	Detainees are not allowed access to the control center.
8. Communications are centralized in the Control Center.	Meets Standard	Communications are centralized in the control center.
9. Facility security and safety will be monitored and coordinated by a secure, well-equipped, and continuously staffed control center.	Meets Standard	The control center monitors the perimeter security system and security gates throughout the facility via closed circuit TV systems. The facility fire suppression and alarm systems are also monitored by the control center.
10. The Control Center maintain employee Personal Data Cards (Form G-74 or contract equivalent).	Meets Standard	Employee personal data is maintained in the control center.
11. Recall lists include the current home telephone number of each employee. Phone numbers are updated as needed.	Meets Standard	Recall lists are maintained for all facility employees in the emergency manual.
12. Staff make watch calls every half-hour between 6 PM and 6 AM.	Meets Standard	Watch calls are made electronically and recorded every half-hour.
13. Information about routine procedures, emergency situations, and unusual incidents will be continually recorded in permanent post logs and shift reports.	Meets Standard	All pertinent information is recorded in the housing unit logbook and on the daily shift report.

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

PART 2 – 7. FACILITY SECURITY AND CONTROL (Key: G)		
This Detention Standard protects the community, staff, contractors, volunteers, and detainees from harm by ensuring that facility security is maintained and that events that pose a risk of harm are prevented.		
Components	Rating	Remarks (1000 Char Max)
14. The front-entrance officer checks the ID of everyone entering or exiting the facility.	Meets Standard	The front entrance officer checks the identification of everyone entering or exiting the facility. All visitors entering the facility must walk through a metal detector.
15. All visits officially recorded in a visitor logbook or electronically recorded.	Meets Standard	All visitor names are recorded in a visitor logbook.
16. The facility has a secure, color-coded visitor pass system.	Meets Standard	Secure color-coded passes are issued by the front lobby officer.
17. Officers monitor all vehicular traffic entering and leaving the facility.	Meets Standard	There is an officer assigned at the sally port to 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: <ul style="list-style-type: none"> The driver's name Company represented Vehicle contents Delivery date and time Date and time out Vehicle license number Name of employee responsible for the vehicle during the facility visit 	Meets Standard	The sally port officer maintains a log of all incoming and departing vehicles. The log includes all of the bulleted information listed in this component.
19. Officers thoroughly search each vehicle entering and leaving the facility.	Meets Standard	All vehicles entering and exiting the facility are searched. This inspector observed a thorough search of a vehicle exiting 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	Policy provides written guidelines to prevent the introduction of contraband into the facility.
21. The front entrance has a sally-port type entrance, with interlocking electronic doors or grilles.	Meets Standard	
22. The facility's perimeter will ensure that detainees remain within and that public access is denied without proper authorization.	Meets Standard	(b)(7)(e)

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

PART 2 – 7. FACILITY SECURITY AND CONTROL (Key: G)		
This Detention Standard protects the community, staff, contractors, volunteers, and detainees from harm by ensuring that facility security is maintained and that events that pose a risk of harm are prevented.		
Components	Rating	Remarks (1000 Char Max)
23. Written procedures govern searches of detainee housing units and personal areas.	Meets Standard	
24. Housing area searches occur at irregular times.	Meets Standard	Searches of housing units and personal areas occur 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	Officers' posts are located inside the detainee living areas.
26. There are post orders for every security officer post.	Meets Standard	
27. Detainee movement from one area to another area is controlled by staff.	Meets Standard	
28. Living areas are constructed to facilitate continuous staff observation of cell or room fronts, dayrooms, and recreation space.	Meets Standard	Officers are present in the detainee living areas and continuously observe cells and dayrooms.
29. Every search of the SMU and other housing units is documented.	Meets Standard	All searches of the special management unit (SMU) or other housing units are documented in the unit logbook, the daily shift report and the unit search log.
30. The SMU entrance has a sallyport.	Meets Standard	The SMU has a sally port.
31. All tools entering SMU will be inspected and inventoried by the SMU officer prior to entering the housing unit.	Meets Standard	All tools entering the SMU are inventoried and inspected by the SMU officer. The inspections and inventory are logged into the SMU logbook.
32. The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> Posts to be inspected Required inspection forms Frequency of inspections Guidelines for checking security features Procedures for reporting weak spots, in-consistencies, and other areas needing improvement 	Meets Standard	Policy includes written procedures for all bulleted items listed in this component.
33. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	Meets Standard	All security checks conducted are documented in the unit logbook and on the daily shift report.
34. Documentation of security inspections is kept on file.	Meets Standard	Documentation of security inspections is maintained in the security chief's office.

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

PART 2 – 7. FACILITY SECURITY AND CONTROL (Key: G)		
This Detention Standard protects the community, staff, contractors, volunteers, and detainees from harm by ensuring that facility security is maintained and that events that pose a risk of harm are prevented.		
Components	Rating	Remarks (1000 Char Max)
35. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	Meets Standard	Policy requires that the shift supervisor report incomplete maintenance work to the department head and/or assistant facility administrator.
36. Tools being taken into the secure area of the facility are inspected and inventoried before entering and prior to departure.	Meets Standard	The main tool crib is located in the maintenance department, which is located inside the facility perimeter. When tools are taken into a housing unit, the officer checks the inventory and the tools that are brought in by the maintenance worker. When the work is completed, the officer once again checks the inventory and the tools to ensure everything that was brought in is then taken out.
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	
39. Daily procedures include: <ul style="list-style-type: none"> Perimeter alarm system tests. Physical checks of the perimeter fence. Documenting the results. 	Meets Standard	Procedures include a perimeter alarm system test and physical checks of the perimeter fence (b)(7)e These tests/checks are logged into the central control logbook.
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	The chief of security is responsible for ensuring security inspections are conducted in all areas of the facility.
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
<i>(Use following format for dates: mm/dd/yyyy)</i>
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.) (5000 Character Max)</i> Review of facility procedures and post orders, staff interviews and review of facility logs confirmed that the facility has an inspection process in place and other necessary controls to limit the introduction of contraband into the facility and to prevent escapes. All tools taken in and out of the facility are inventoried and logged. All vehicles entering the facility are searched by the sally port officer. Security inspections are recorded in security logs. The control center is staffed twenty-four hours a day, seven days a week. A list of staff authorized entry into the control center is maintained. Control center staff

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

PART 2 – 7. FACILITY SECURITY AND CONTROL – Reviewer Summary

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

interviewed were very knowledgeable of the various duties involved with this post.

Overall Rating: Meets Standard

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

Completion Date: 09/27/2012

Reviewer Signature (for printed form submission):

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

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

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

Standard N/A

Click the button above (IGSA ONLY) if all ICE detainee Funds, Valuables and Property are handled only by the ICE Field Office or Sub-Office in control of the detainee case. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
1. Detainee funds and valuables are properly separated and stored. Detainee funds and valuables are accessible to designated supervisor(s) only.	N/A	
2. Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	N/A	
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.	N/A	
4. (b)(7)(e) officers are present during the processing of detainee funds and valuables during admissions processing to the facility. (b)(7)(e) officers verify funds and valuables.	N/A	
5. For IGSA's and CDFs, Is the facility using a personal property inventory form that meets the ICE standard?	N/A	
6. Staff give the detainee the original inventory form, filing copies in the detainee's detention file and the personal property container.	N/A	
7. Staff forward an arriving detainee's medicine to the medical staff.	N/A	
8. Staff search arriving detainees and their personal property for contraband.	N/A	
9. Property discrepancies are immediately reported to the Chief of Security or equivalent.	N/A	
10. Staff follow written procedures when returning property to detainees.	N/A	
11. CDF/IGSA facility procedures for handling detainee property claims are similar to the ICE standard.	N/A	
12. The facility attempts to notify an out-processed detainee that he/she left property in the facility. <ul style="list-style-type: none"> By sending written notice to the detainee's last known address; via certified mail; The notice states that the detainee has 30 days in which to claim the property, after which it will be considered abandoned. 	N/A	
13. Staff obtain a forwarding address from each detainee.	N/A	

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

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

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

Standard N/A

Click the button above (IGSA ONLY) if all ICE detainee Funds, Valuables and Property are handled only by the ICE Field Office or Sub-Office in control of the detainee case. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
14. It is standard procedure for (b)(7)(e) officers to be present when removing/documenting the removal of funds from a detainee's possession.	N/A	
15. Staff issue and maintain property receipts (G-589s) in numerical order.	N/A	
16. Staff complete and distribute the G-589 in accordance with the ICE standard.	N/A	
17. The processing officer records each G-589 issuance in a G-589 logbook. The record includes the initials and star numbers of receipting officers.	N/A	
18. Staff tag large valuables with both a G-589 and an I-77.	N/A	
19. The supervisor verifies the accuracy of every G-589.	N/A	
20. The supervisor ensures that: <ul style="list-style-type: none"> • Detainee funds are, without exception, deposited into the cash box; • Every property envelope is sealed. • All sealed property envelopes are placed in the safe. • Large, valuable property is kept in the secured locked area. 	N/A	
21. Staff tag every baggage/facility container with an I-77, completed in accordance with the ICE standard.	N/A	
22. Staff secure every container used to store property with a tamper-proof numbered strap.	N/A	
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.	N/A	
24. In SPCs, the Supervisory Immigration Enforcement Agent, accompanied by a detention staff member conducts a comprehensive weekly audit.	N/A	
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.	N/A	
26. The facility positively identifies every detainee being released or transferred.	N/A	

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

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

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

Standard N/A

Click the button above (IGSA ONLY) if all ICE detainee Funds, Valuables and Property are handled only by the ICE Field Office or Sub-Office in control of the detainee case. (All Line Items and standard will be rated "N/A")

Components	Rating	Remarks (1000 Char Max)
27. Staff routinely inform supervisors of lost/damaged property claims. Claims are properly investigated and missing or damaged property claim reports are filed.	N/A	
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.	N/A	

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

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

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

Per the Immigration Enforcement Agent, all detainee property is processed at the nearby Florence Service Processing Center.

Overall Rating: N/A

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES (Key: I)		
This Detention Standard ensures the safety, security, and comfort of detainees temporarily held in Hold Rooms pending further processing. The maximum aggregate time an individual may be confined in a facility's Hold Room is 12 hours.		
Components	Rating	Remarks (1000 Char Max)
1. The hold room is situated in a location within the secure perimeter.	Meets Standard	The facility has eight hold rooms in the admissions area, all of which are located inside the secure perimeter.
2. The hold rooms are clean, in good repair, well ventilated, well lit, and all activating switches located outside the room.	Meets Standard	The hold rooms were in the process of being painted. All switches are located outside of the rooms.
3. The hold rooms contain sufficient seating for the number of detainees held.	Meets Standard	The hold rooms contain secure benches and provide sufficient seating for the room's capacity.
4. No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside hold rooms.	Meets Standard	No sleeping material was observed in the hold rooms.
5. Hold room walls and ceilings are escape and tamper resistant.	Meets Standard	On-site observation confirmed the hold rooms are escape and tamper resistant.
6. Detainees are not held in hold rooms for more than 12 hours.	Meets Standard	Detainees are not kept in the hold rooms for more than twelve hours. Individual logs are maintained on each detainee that document the time spent in the hold room.
7. Male and females detainees are segregated from each other at all times.	N/A	The facility houses only male detainees.
8. Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	Meets Standard	
9. If the hold room is not equipped with toilet facilities, an officer is posted within visual or audible range to allow detainees access to such on a regular basis.	Meets Standard	
10. All detainees are given a pat down search for weapons or contraband before being placed in the hold room.	Meets Standard	
11. When the last detainee has been removed, the hold room is inspected for the following: <ul style="list-style-type: none"> ▪ Cleaning. ▪ Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair. 	Meets Standard	After the last detainee has been removed, the officer inspects the hold room for evidence of tampering with doors, locks and electrical fixtures. Any problems found are reported to the shift supervisor for corrective action or repair. The cleaning of the room is supervised by staff.

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

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES (Key: I)		
This Detention Standard ensures the safety, security, and comfort of detainees temporarily held in Hold Rooms pending further processing. The maximum aggregate time an individual may be confined in a facility's Hold Room is 12 hours.		
Components	Rating	Remarks (1000 Char Max)
12. (MANDATORY) There is a written evacuation plan. <ul style="list-style-type: none"> There is a designated officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency. 	Meets Standard	There is a written evacuation plan for the hold room areas. The plan designates the staff member responsible for removing detainees from the hold rooms in case of fire and/or building evacuation or other emergency.
13. An appropriate emergency service is called immediately upon a determination that a medical emergency exists.	Meets Standard	Southwest ambulance service is immediately called whenever a medical emergency exists.
14. Single occupant hold rooms contain a minimum of 37 square feet (7 unencumbered square feet for the detainee, 5 square feet for a combination lavatory/toilet fixture, and 25 square feet for a wheelchair turn-around area). <ul style="list-style-type: none"> If multiple-occupant hold rooms are used, there is an additional 7 unencumbered square feet for each additional detainee. 	Meets Standard	Each of the facility hold rooms contains the requisite number of square feet for the number of detainees held.
15. <u>In SPCs designed after 1998</u> the hold rooms are equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They are: <ul style="list-style-type: none"> Compliant with the American Disabilities Act. Small hold rooms (1 to 14 detainees) have at least one combi-unit. Large hold rooms (15 to 49 detainees) are provided with at least two combi-units. 	Meets Standard	The hold rooms are equipped with the required lavatory/toilet fixtures listed in this component. The fixtures are compliant with the Americans with Disabilities Act.
16. <u>In SPCs designed after 1998</u> the hold rooms have floor drain(s).	Meets Standard	The hold rooms have floor drains.
17. <u>In SPCs designed after 1998</u> , the door to the hold room swings outward and the door complies with the specifications outlined in the standard.	Meets Standard	The design of the doors in the hold room area is consistent with the specifications listed in this component.
18. Family units, persons of advanced age (over 70), females with children, and unaccompanied juvenile detainees (under the age of 18) are not placed in hold rooms.	N/A	This facility does not house family units, persons of advanced age, females with children or unaccompanied juvenile detainees.
19. Minors (under 18) are confined apart from adults, except for immediate relatives or guardians.	N/A	This facility does not house minors.
20. Each detention facility maintains a detention log (manually or by computer) for each detainee placed in a hold cell. <ul style="list-style-type: none"> The log includes the required information specified in the standard. 	Meets Standard	The facility maintains a detention log for each detainee placed in a hold room. The log contains the required information.

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

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES (Key: I)		
This Detention Standard ensures the safety, security, and comfort of detainees temporarily held in Hold Rooms pending further processing. The maximum aggregate time an individual may be confined in a facility's Hold Room is 12 hours.		
Components	Rating	Remarks (1000 Char Max)
21. Officers provide a meal to any detainee detained in a hold room for more than six hours. <ul style="list-style-type: none"> Juveniles, babies and pregnant women have access to snacks, milk or juice. Meal are served to juveniles regardless of time in custody 	Meets Standard	Meals are provided to any detainee held in a hold room for more than six hours. This facility does not house juveniles or pregnant women.
22. Any detainee with disabilities, including temporary disabilities, will be housed in a manner that provides for his or her safety and security.	Meets Standard	The hold rooms meet the Americans with Disabilities Act requirements.
23. The maximum occupancy for the hold room will be posted.	Meets Standard	The maximum occupancy number for each hold room is printed above the door on the outside or on an inside wall.
24. Before placing a detainee in a room, an officer shall observe each individual to screen for obvious mental or physical problems.	Meets Standard	Medical staff screen the detainees for obvious mental or physical problems before they enter the facility.
25. Staff does not permit detainees to smoke in a hold room.	Meets Standard	This is a smoke-free facility.
26. Officers closely supervise hold rooms through direct supervision, to ensure: <ul style="list-style-type: none"> Continuous auditory monitoring, even when the hold room is not in the officer's direct line of sight, and Visual monitoring at irregular intervals at least every 15 minutes, each time recording in the detention log, the time and officer's printed name and any unusual behavior or complaints under "Comments." Constant surveillance of any detainee exhibiting signs of hostility, depression, or similar behaviors. 	Meets Standard	Intake staff were observed monitoring the hold rooms on a consistent basis. A log is kept to record the time of officers' rounds. Rounds are conducted at least every 15 minutes.

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES – Reviewer Summary	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.) (5000 Character Max)</i> Review of policy and practice and staff interviews confirmed that the facility is using the hold rooms in the intake area for the temporary detention of detainees being processed in or out of the facility. Detainees being processed into the facility are not kept in the hold rooms in excess of twelve hours. The facility only houses adult male detainees.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) <div style="border: 1px solid black; padding: 2px; display: inline-block;">(b)(6), (b)(7)(c)</div>	Completion Date: 9/27/2012
Reviewer Signature (for printed form submission):	

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

PART 2 – 10. KEY AND LOCK CONTROL (Key: J)		
This Detention Standard maintains facility safety and security by requiring that keys and locks be properly controlled and maintained.		
Components	Rating	Remarks (1000 Char Max)
1. The security officer[s], or equivalent, has attended an approved locksmith training program.	Meets Standard	The security officer responsible for maintaining the keys attended the Arizona Institute of Locksmithing and became a certified locksmith effective March 2010.
2. The security officer, or equivalent, has responsibility for all administrative duties and responsibilities relating to keys, locks etc.	Meets Standard	The chief of security is responsible for all administrative duties relating to keys and locks.
3. The security officer, or equivalent, provides training to all employees in key and lock control.	Meets Standard	The chief of security and key control officer provide training to employees in key and lock control.
4. The security officer, or equivalent, maintains inventories of all keys, locks and locking devices.	Meets Standard	
5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	Meets Standard	The key control officer conducts and documents preventive maintenance on all locks.
6. Facility policies and procedures address the issue of compromised keys and locks.	Meets Standard	The issue of compromised keys and locking devices is addressed in policy.
7. The security officer, or equivalent, develops policy and procedures to ensure safe combinations integrity.	Meets Standard	Combinations are changed every twelve months or whenever there is a staff change.
8. Only dead bolt or dead lock functions are used in detainee accessible areas.	Meets Standard	
9. Non-authorized locks (as specified in the Detention Standard) are not used in detainee accessible areas.	Meets Standard	
10. The facility does not use grand master keying systems.	Meets Standard	
11. All worn or discarded keys and locks cut up and properly disposed of.	Meets Standard	The key control officer is responsible for the disposal of worn or discarded keys and locks, with the approval of the chief of security.
12. Padlocks and/or chains are not used on cell doors.	Meets Standard	
13. The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to <ul style="list-style-type: none"> Occupational Safety and Environmental Health Manual, Chapter 3 National Fire Protection Association Life Safety Code 101. 	Meets Standard	

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

PART 2 – 10. KEY AND LOCK CONTROL (Key: J)		
This Detention Standard maintains facility safety and security by requiring that keys and locks be properly controlled and maintained.		
Components	Rating	Remarks (1000 Char Max)
14. The operational keycard sufficient to accommodate all the facility key rings including keys in use is located in a secure area.	Meets Standard	
15. Procedures in place to ensure that key rings are: <ul style="list-style-type: none"> Identifiable Numbers of keys on the ring are cited? Keys cannot be removed from issued key rings 	Meets Standard	Policy provides written procedures to address all bulleted items in this component.
16. Emergency keys are available for all areas of the facility.	Meets Standard	Emergency keys are available for all areas of the facility and are maintained in the control center, the armory and the correctional facility located next door.
17. The facility uses a key accountability system.	Meets Standard	The facility uses a chit system for key accountability. Key inventories are also conducted every shift.
18. Authorization is necessary to issue any restricted key.	Meets Standard	The shift supervisor must authorize the issuance of any restricted key. An approval form is used to document this authorization.
19. Individual gun lockers are provided. <ul style="list-style-type: none"> They are located in an area that permits constant officer observation. In an area that does not allow detainee or public access. 	Meets Standard	<div style="background-color: #d3d3d3; text-align: center; padding: 5px; margin-bottom: 5px;">(b)(7)(e)</div> Both are outside of the secure perimeter, and neither area is accessible to the public or to detainees.
20. The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	Meets Standard	Policy contains procedures to ensure key accountability. The keys are physically counted daily on each shift.
21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. Detainees are not permitted to handle keys assigned to staff. 	Meets Standard	Policy addresses the bullet points listed in this component.
22. Locks and locking devices are continually inspected, maintained, and inventoried.	Meets Standard	The facility has a preventive maintenance plan in place for the locks and locking devices.

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

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

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

Components	Rating	Remarks (1000 Char Max)
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 key control officer is authorized to add or remove keys from a ring, with the approval of the chief of security.
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)*

All keys are inventoried three times a day, once on each shift. The key control security officer has a comprehensive preventive maintenance program for the facility keys and locks. Documentation of all preventive maintenance is maintained in the security chief's office. The issuance of a restricted key requires a written request approved by a shift supervisor. Emergency keys are maintained in three locations including the central control center, the armory and a neighboring correctional facility.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

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

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

Components	Rating	Remarks (1000 Char Max)
1. Staff conduct a formal count at least once each 8 hours (no less than three counts per day). At least one of these counts shall be a face to photo count.	Meets Standard	Counts are conducted at 2:00, 4:00, 5:45 and 9:30 a.m. and at 3:00, 8:00 and 10:15 p.m. The 10:15 p.m. count is a face-to-photo.
2. Activities cease or are strictly controlled while a formal count is being conducted.	Meets Standard	The inspection team observed a 3:00 p.m. count. All activities ceased while the count was being conducted.
3. There is a system for counting each detainee, including those who are outside the housing unit.	Meets Standard	An out-count system is in place.
4. Formal counts in all units take place simultaneously.	Meets Standard	Counts in all units take place simultaneously.
5. Officers do not allow detainee participation in the count.	Meets Standard	Detainee participation in counts is not allowed.
6. A face-to-photo count follows each unsuccessful recount.	Meets Standard	Facility procedures include a face-to-photo count to resolve an unsuccessful count.
7. Officers positively identify each detainee before counting him/her as present.	Meets Standard	Detainees are positively identified prior to being counted 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	The out count record of all detainees temporarily out of the facility is maintained in the receiving and discharge area.
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	Training on count procedures is provided to staff during pre-service and annual training.

PART 2 – 11. POPULATION COUNTS – Reviewer Summary

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

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

The main count is called into the shift supervisor's office. All housing unit count sheets and out-counts sheets are brought to that office. The shift supervisor added all counts to match the master count. The count sheets are then checked by the supervising captain. Once the accuracy of the count is verified, the supervising captain clears the count.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 12. POST ORDERS (Key: L)		
This Detention Standard protects detainees and staff and enhances facility security and good order by ensuring that each officer assigned to a security post knows the procedures, duties, and responsibilities of that post.		
Components	Rating	Remarks (1000 Char Max)
1. Every fixed post has a set of Post Orders.	Meets Standard	
2. In SPCs and CDFs, Post Orders are arranged in the required six-part folder format.	Meets Standard	The post orders are arranged in a six-part folder format.
3. Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	Meets Standard	
4. One individual or department is responsible for keeping all Post Orders current with revisions that take place between reviews.	Meets Standard	The quality assurance manager is responsible for keeping all post orders current.
5. Review, updating, and reissuing of Post Orders occurs regularly and at least annually.	Meets Standard	Post orders are reviewed quarterly for possible updating.
6. The facility administrator authorizes all Post Order changes.	Meets Standard	
7. The facility administrator has signed and dated the last page of every section.	Meets Standard	The facility administrator reviews post orders annually and signs and dates the last page of every section.
8. A Post Orders master file is available to all staff.	Meets Standard	Master files of post orders are available in the quality assurance office.
9. Procedures keep Post Orders and logbooks secure from detainees at all times.	Meets Standard	Policy requires that post orders be kept secure. Post orders reviewed throughout the facility were found to be in secure locations.
10. Copies of the applicable Post Orders are retained at the post only if secure from detainee access.	Meets Standard	
11. Supervisors ensure that officers understand the Post Orders, regardless of whether the assignment is temporary, permanent, or due to an emergency.	Meets Standard	
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	All post orders reviewed had officers' signatures documenting review of the post orders.
13. Anyone assigned to an armed post qualifies with the post weapons before assuming post duty.	Meets Standard	All security staff must qualify with the duty weapons annually.
14. Post Orders for armed posts, and for posts that control access to the institution perimeter, clearly state that: <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> ■ (b)(7)e ■ </div>	Meets Standard	Post orders for the armed posts address the bulleted items in this component.

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

PART 2 – 12. POST ORDERS (Key: L)

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

Components	Rating	Remarks (1000 Char Max)
15. Post Orders for armed posts provide instructions for escape attempts.	Meets Standard	
16. The Post Orders for housing units track the daily event schedule.	Meets Standard	
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)*

Post orders were reviewed at multiple locations throughout the facility and were found to be current, signed by the facility administrator and filed in a six-part folder format. Housing unit post orders contained the daily event schedule. Post order binders were located in secure locations, and detainee access was not allowed. The quality assurance manager and chief of security review the post orders quarterly and make changes as needed, with the approval of the warden. Master copies of all post orders are readily available to staff in the quality assurance office. Post orders for armed posts include all required instructions for emergency situations including hostages and escapes.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 13. SEARCHES OF DETAINEES (Key: M)		
This Detention Standard protects detainees and staff and enhances facility security and good order by detecting, controlling, and properly disposing of contraband.		
Components	Rating	Remarks (1000 Char Max)
1. There are written policy and procedures governing searches of housing areas, work areas and of detainees.	Meets Standard	
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	Policy addresses resolving suspicion of contraband through the least intrusive means possible.
3. Written policy and procedures require staff to avoid unnecessary force during searches and to preserve the dignity of the detainee being searched, to the extent practicable.	Meets Standard	
4. Written policy and procedures require staff to leave a searched housing area, work area and detainee property in its original order, to the extent practicable.	Meets Standard	
5. Detainees are pat searched and screened by metal detectors routinely to control contraband.	Meets Standard	All new admissions are pat searched and then placed onto the body orifice security scanner (B.O.S.S.) chair for inspection. The facility also has seven walk-thru metal detectors placed at various locations in facility access hallways.
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 facility is operated by the Corrections Corporation of America (CCA). Policy requires that body cavity searches be conducted only by authorized medical personnel upon approval by the CCA Vice President of Operations.
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	Meets Standard	Policy dictates dry cell requirements, placement procedures/conditions, health evaluations, use supervision and status reviews. There have been no detainees placed on dry cell watch since the last inspection.

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

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

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

Components	Rating	Remarks (1000 Char Max)
9. Contraband that may be evidence in connection with a violation of a criminal statute is preserved, inventoried, controlled, and stored so as to maintain and document the chain of custody.	Meets Standard	
10. Canines are not used in the presence of detainees	Meets Standard	

PART 2 – 13. SEARCHES OF DETAINEES – Reviewer Summary

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

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

Review of policy and interviews with command staff and the quality assurance manager revealed that security and order are maintained through systematic and defined search procedures outlined in policy and accomplished through routine practice and documentation.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 14. SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (Key: N)		
This Detention Standard requires that facilities that house ICE/DRO detainees affirmatively act to prevent sexual abuse and assaults on detainees, provide prompt and effective intervention and treatment for victims of sexual abuse and assault, and control, discipline, and prosecute the perpetrators of sexual abuse and assault.		
Components	Rating	Remarks (1000 Char Max)
1. The facility has a Sexual Abuse and Assault Prevention and Intervention Program.	Meets Standard	The facility has a comprehensive Sexual Abuse and Assault Prevention and Intervention Program.
2. For SPCs and CDFs, the written policy and procedure has been approved by the Field Office Director.	N/A	This IGSA facility policy has been approved by the warden and the clinical director.
3. Tracking statistics and reports are readily available for review by the inspectors.	Meets Standard	There have been no reported ICE detainee incidents in the past twelve months. The reports and statistics would be available through facility investigative services.
4. All staff are trained, during orientation and in annual refresher training, in the prevention and intervention areas required by the Detention Standard.	Meets Standard	A review of staff training records and the training curriculum revealed that all staff are trained during orientation and annually in the prevention and intervention of sexual abuse and assault.
5. Detainees are informed about the program in facility orientation and the detainee handbook (or equivalent).	Meets Standard	Detainees are informed about the program in a language they understand through the facility orientation, the handbook and postings in the housing units.
6. The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	Meets Standard	The Sexual Awareness Notices were observed to be posted on the housing bulletin boards, the hallways, the intake area and the medical unit.
7. The Sexual Assault Awareness Information brochure is available for detainees. (Required in SPCs and CDFs.)	Meets Standard	The Sexual Assault Awareness Information brochure is available to detainees through the medical unit and is on the housing unit bulletin boards.
8. Detainees are screened upon arrival for “high risk” sexual assaultive and sexual victimization potential and housed and counseled accordingly.	Meets Standard	Detainees are screened for sexual abuse, assault and victimization potential during the admission health screening. Any positive answer generates an immediate referral to mental health services and the special investigations office.

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

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

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

Components	Rating	Remarks (1000 Char Max)
9. All incidents of sexual abuse or assault by a detainee on a detainee have been documented in the past year.	Meets Standard	There have been no reported incidents of sexual assault or abuse by a detainee on a detainee in the past year.
10. All incidents or allegations of sexual abuse or assault by staff on a detainee have been documented in the past year.	Meets Standard	There have been no reported incidents of sexual assault or abuse by staff on a detainee in the past year.
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	There have been no reported incidents of sexual abuse or assault in the past twelve months; however, procedure is in place for proper chain of command reporting.
12. When there is an alleged sexual assault, staff conduct a thorough investigation, gather and maintain evidence, and make referrals to appropriate law enforcement agencies for possible prosecution.	Meets Standard	There have been no reported incidents of sexual abuse or assault in the past year. Policy is in place for investigative services to conduct a thorough investigation and make referrals as appropriate.
13. When there is an alleged or proven sexual assault, the required notifications are promptly made.	Meets Standard	Policy requires prompt notification to ICE.
14. Victims of sexual abuse or assault are referred to specialized community resources for treatment and gathering of evidence.	Meets Standard	Policy indicates victims of sexual assault are to be transported to Scottsdale Medical Center for treatment, gathering of evidence and counseling.
15. All records associated with claims of sexual abuse or assault is maintained, and such incidents are specifically logged and tracked by a designated staff coordinator.	Meets Standard	The facility has a trained Prison Rape Elimination Act (PREA) investigator who coordinates, logs, tracks and maintains all files associated with any allegations of sexual abuse or assault.

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

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

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

The facility has a comprehensive sexual abuse and assault prevention and intervention program in place. Detainees are provided verbal and written education in a language they can understand upon admission to the facility. Educational information is also conspicuously posted throughout the housing units, the hallways and the medical unit. There have been no detainee sexual assault or abuse incidents since the last inspection and therefore no tracking statistics or reports were available for review. The rating for this standard was based on policies and procedure, on interviews with the investigative officer assigned as the PREA coordinator, detainees, other facility staff and the Immigration Enforcement Agent and on a review of the training curriculum.

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

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

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

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)		
<p>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.</p>		
Components	Rating	Remarks (1000 Char Max)
1. Written policy and procedures are in place for special management units.	Meets Standard	The facility has a comprehensive policy for the Special Management Unit (SMU).
2. A detainee is placed in protective custody status in Administrative Segregation only when there is documentation that it is warranted and that no reasonable alternatives are available.	Meets Standard	
3. A detainee will be placed in Disciplinary Segregation only after a finding by a Disciplinary Hearing Panel that the detainee is guilty of a prohibited act or rule violation classified at a "Greatest", "High", or "High-Moderate" level, as defined in the Detention Standard on Disciplinary System.	Meets Standard	A detainee can only be placed in disciplinary segregation following a hearing by the disciplinary hearing panel and a finding of being guilty of the appropriate level violation.
4. (MANDATORY) Health care personnel are immediately informed when a detainee is admitted to an SMU to provide assessment and review as indicated by health care protocols.	Meets Standard	Policy requires that health care personnel be immediately informed when a detainee is admitted to the SMU in order to provide an assessment and review of medical needs. Documentation was reviewed and contained the signed and dated evaluation form from health care personnel indicating the detainee had been seen prior to placement in the SMU. The medical assessment is documented.
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.	Meets Standard	
6. The number of detainees confined to each cell or room does not exceed the capacity for which it was designed.	Meets Standard	
7. Cells and rooms are well ventilated, adequately lit, appropriately heated and maintained in a sanitary condition at all times.	Meets Standard	
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.	Meets Standard	The SMU maintains a permanent logbook to record pertinent information on detainees in the unit. A separate logbook is also used by supervisory staff and official visitors to record their visits to the unit.

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)		
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Components	Rating	Remarks (1000 Char Max)
<p>9. A permanent log is maintained in each SMU to record all activities concerning SMU detainees (meals served, recreation, visitors, etc.).</p> <p>In SPCs and CDFs, the SMU log records the detainee's name, A-number, housing location, date admitted, reasons for admission, tentative release date for detainees in Disciplinary Segregation, the authorizing official, and date released.</p>	Meets Standard	A segregation activity record is maintained for each detainee in the SMU. Information including meals, recreation, visits and other activity is logged in the record and includes all information listed in this component.
<p>10. In SPCs and CDFs, a separate log is maintained in the SMU that all persons visiting the unit must sign and record:</p> <ul style="list-style-type: none"> ▪ The time and date of the visit, and ▪ Any unusual activity or behavior of an individual detainee, with a follow-up memorandum sent through the facility administrator to the detainee's file. 	Meets Standard	The visitors log was inspected and found to contain the time and date of the visit. Any unusual detainee activity is logged and reported to the facility administrator.
<p>11. A Special Management Housing Unit Record is maintained on each detainee in an SMU:</p> <ul style="list-style-type: none"> ▪ In SPCs form I-888 (Special Management Housing Unit Record) is prepared immediately upon the detainee's placement in the SMU. ▪ In CDFs and IGSA facilities form I-888 or a comparable form is used. <p>In SPCs and CDFs:</p> <ul style="list-style-type: none"> ▪ By the end of each shift, the special housing unit officer records: <ul style="list-style-type: none"> ○ Whether the detainee ate, showered, exercised, and took any medication, and ○ Any additional information, for example, if the detainee has a medical condition, has exhibited suicidal or assaultive behavior, etc. ▪ When a health care provider visits an SMU detainee, he or she signs that individual's record, and the housing officer initials the record after all medical visits are completed and no later than the end of the shift. 	Meets Standard	A segregation activity record is maintained on each detainee in the SMU of this IGSA facility. The forms noted contained information on all detainee activity including meals, showers, recreation and meds. Health care visits are recorded in the SMU logbook and on the segregation activity record.
<p>12. Upon a detainee's release from the SMU, the releasing officer attaches the entire housing unit record to the Administrative Segregation Order or Disciplinary Segregation Order and forwards it to the Supervisor for inclusion in the detainee's detention file.</p>	Meets Standard	Upon a detainee's release from the SMU, the entire housing unit record is forwarded to the records department for review and placement into the detainee's detention file.

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)		
This Detention Standard protects detainees, staff, contractors, volunteers, and the community from harm by segregating certain detainees from the general population in Special Management Units (SMUs) with an Administrative Segregation section for detainees segregated for administrative reasons and a Disciplinary Segregation section for detainees segregated for disciplinary reasons.		
Components	Rating	Remarks (1000 Char Max)
13. There are written policy and procedures concerning the property detainees may retain in each type of segregation.	Meets Standard	
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.)	Meets Standard	Policy specifies the privileges detainees can have in each type of segregation. Detainees in administrative segregation generally receive the same privileges as the general population, consistent with available resources and safety and security considerations.
15. Detainees in Administrative Segregation are provided opportunities to spend time outside their cells (over and above the required recreation periods), for such activities as socializing, watching TV, and playing board games and may be assigned to work details (for example, as orderlies in the SMU).	Does Not Meet Standard	The assistant chief of security indicated detainees in administrative segregation are not provided opportunities to spend time outside of their cells over and above the required recreation period.
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).	Meets Standard	
17. The shift supervisor sees each segregated detainee daily, including weekends and holidays.	Meets Standard	The shift supervisor tours and sees each detainee in the SMU each day, including weekends and holidays.
18. The facility administrator (or designee) visits each SMU daily.	Meets Standard	The facility administrator or duty administrative officer visits each SMU daily.
19. A health care provider visits every detainee in an SMU at least three times a week, and detainees are provided any medications prescribed for them. In SPCs and CDFs, a nurse, doctor or other appropriate health care professional visits the SMU at least once each workday and questions each detainee to identify any medical problems or requests. Any action taken is documented in a separate logbook, and the medical visit is recorded on the detainee's SMU Housing Record (Form I-888).	Meets Standard	This facility is an IGSA. A health care professional visits the SMU every day. The medical visit is recorded on the detainees' segregation housing records and in the SMU logbook.
20. Detainees in SMUs are provided three nutritionally adequate meals per day, ordinarily from the general population menu.	Meets Standard	

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)		
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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.	Meets Standard	Detainees are given the opportunity to shave and shower three times weekly and receive other basic services on the same basis as the general population.
22. Only for documented medical or mental health reasons are detainees denied such items as clothing, mattress, bedding, linens, or a pillow. If a detainee is so disturbed that he or she is likely to destroy clothing or bedding or create a disturbance risking harm to self or others, the medical department is notified immediately and a regimen of treatment and control instituted by the medical officer.	Meets Standard	Mental health staff would assess the detainee, place him on a watch and develop a treatment plan.
23. Detainees in an SMU may write and receive letters the same as the general population.	Meets Standard	Detainees in the SMU maintain the same correspondence privileges as the general population.
24. Detainees in an SMU ordinarily retain visiting privileges.	Meets Standard	
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.	Meets Standard	Any restriction of visiting privileges is documented per policy. There have been no recent occasions where a detainee's visiting privileges were curtailed or not allowed.
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.	Meets Standard	No detainees in the SMU during the inspection had restricted visiting. Any visiting restriction would be documented and approved by the facility administrator.
27. Under no circumstances is a detainee permitted to participate in general visitation while in restraints.	Meets Standard	Detainees are escorted to visits in restraints. However, the restraints are removed before the detainee's visitor enters the visiting area.
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.	Meets Standard	Any detainees in protective custody, and any violent and disruptive detainees, would not be permitted to use the visitation room during normal visitation hours.

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)		
<p>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.</p>		
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	There have been no recent cases in this IGSA facility where violent and disruptive detainees were limited to non-contact visits or not permitted to visit. If visits were denied, a written report which included the rationale for the denial would be filed.
30. Ordinarily, detainees in SMUs are not denied legal visitation.	Meets Standard	
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.	Meets Standard	
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.	Meets Standard	Facility clergy visits the SMU on a regular basis. Detainees may also request visits by other members of the clergy.
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.	Meets Standard	The SMU staff offers detainees reading material, including religious material.
34. Detainees in SMUs have access to legal materials, in accordance with the Detention Standard on Law Libraries and Legal Material. Detainees are permitted to retain a reasonable amount of personal legal material in the SMU, provided it does not create a safety, security and/or sanitation hazard. Detainee requests for access to legal material in their personal property are accommodated as soon as possible and always within 24 hours of a detainee's request.	Meets Standard	Additional legal material may be requested. Detainees are allowed to retain a reasonable amount of legal material in the SMU. They are provided access to legal material in their personal property as soon as possible or within 24 hours of a request.
35. Detainees in Administrative Segregation or Disciplinary Segregation have the same law library access as the general population, unless compelling and documented security concerns require limitations.	Meets Standard	
36. Policy and procedures provide for legal material to be brought to individuals in Disciplinary Segregation under certain circumstances.	Meets Standard	

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)		
<p>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.</p>		
Components	Rating	Remarks (1000 Char Max)
<p>37. Any denial of access to the law library is always:</p> <ul style="list-style-type: none"> ▪ Supported by compelling security concerns, ▪ For the shortest period required for security, and ▪ Fully documented in the SMU housing logbook. ▪ ICE/DRO is notified every time law library access is denied. 	Meets Standard	Procedures are in place to address the bulleted items in this component. Staff interviewed advised that there have been no denials of access to the law library in the SMU since the last inspection.
<p>38. Recreation for detainees in the SMU is separate from the general population.</p>	Meets Standard	
<p>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.)</p>	Meets Standard	Policy establishes procedures for detainees that need to be kept separate. Protective custody detainees, however, are generally not housed at this facility. None were in the facility during the inspection.
<p>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.</p>	Meets Standard	Detainees receive at least one hour of outdoor recreation a day at least five days a week. The recreation area in the SMU is covered. Raincoats are also issued.
<p>41. The recreation privilege is denied or suspended only if it would unreasonably endanger safety or security.</p> <p>Ordinarily, a detainee is denied recreation privileges only with the facility administrator's written authorization that documents why the detainee poses an unreasonable risk even when recreating alone. For an immediate safety or security situation, the shift supervisor may verbally authorize denial of an instance of recreation.</p> <p>When a detainee in an SMU is deprived of recreation (or any usual authorized items or activity), a report of the action is forwarded to the facility administrator.</p>	Meets Standard	Staff advised that there have been no recreation privilege denials since the last inspection.
<p>42. The case of a detainee denied recreation privileges is reviewed at least once each week, as part of the reviews required for all detainees in SMU status. The reviewer documents whether the detainee continues to pose a threat to self, others, or facility security and, if so, why.</p>	Meets Standard	There have been no recreation privilege denials since the last inspection.

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)		
This Detention Standard protects detainees, staff, contractors, volunteers, and the community from harm by segregating certain detainees from the general population in Special Management Units (SMUs) with an Administrative Segregation section for detainees segregated for administrative reasons and a Disciplinary Segregation section for detainees segregated for disciplinary reasons.		
Components	Rating	Remarks (1000 Char Max)
<p>43. Denial of recreation privileges for more than 15 days requires the concurrence of the facility administrator and the health authority. It is expected that such denials shall rarely occur, and only in extreme circumstances.</p> <p>The facility notifies ICE/DRO when a detainee is denied recreation privileges for more than 15 days.</p>	Meets Standard	<p>There have been no denials of recreation privileges for more than 15 days since the last inspection.</p>
<p>44. Ordinarily, detainees in Administrative Segregation have telephone access similar to detainees in the general population, in a manner consistent with the special security and safety requirements of an SMU.</p> <p>Detainees in Disciplinary Segregation may be restricted from using telephones to make general calls as part of the disciplinary process; however, ordinarily, they are permitted to make direct and/or free and legal calls as described in the Detention Standard on Telephone Access, except for compelling and documented reasons of safety, security, and good order.</p>	Meets Standard	<p>Detainees in administrative segregation are permitted the same phone privileges as general population detainees. Detainees in disciplinary segregation are permitted one personal phone call every 30 days. They are permitted legal calls as needed.</p>
<p>45. Ordinarily, a written order is completed and approved by a supervisor before a detainee is placed in Administrative Segregation. If exigent circumstances make that impracticable, the order is prepared as soon as possible.</p> <p>A copy of the order is given to the detainee within 24 hours, unless delivery would jeopardize the safety, security, or orderly operation of the facility.</p> <p>If the segregation is for protective custody, the order states whether the detainee requested the segregation and whether the detainee requests a hearing.</p> <p>The order remains on file in the SMU until the detainee is released from the SMU, at which point the releasing officer records the date and time of release on the order and forwards it to the chief of security or supervisor for the detainee's detention file.</p> <p>(An Administrative Segregation Order is not required for a detainee awaiting removal, release, or transfer within 24 hours.)</p>	Meets Standard	<p>The facility uses a segregation confinement record to place a detainee in administrative segregation. The form includes a reason for the placement and is authorized by the shift supervisor. The form remains in the detainee's file in the SMU and is put in the detainee's detention file upon his release from the unit.</p>

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

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

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

Components	Rating	Remarks (1000 Char Max)
<p>46. There are implemented written procedures for the regular review of all detainees in Administrative Segregation.</p> <p>A supervisor conducts a review within 72 hours of the detainee's placement in Administrative Segregation to determine whether segregation is still warranted. The review includes an interview with the detainee, and a written record is made of the decision and the justification. In SPCs and CDFs, the Administrative Segregation Review Form (I-885) is used.</p> <p>If a detainee is segregated for the detainee's protection, but not at the detainee's request, continued detention requires the authorizing signature of the facility administrator or assistant facility administrator on the I-885.</p> <p>When a detainee has spent seven days in Administrative Segregation, and every week thereafter for the first 60 days and at least every 30 days thereafter, a supervisor conducts a similar review, including an interview with the detainee, and documents the decision and justification.</p> <p>A reviewing authority who concludes a detainee should be removed from Administrative Segregation, submits that recommendation to the facility administrator (or designee) for approval.</p>	Meets Standard	Policy provides written procedures for the regular review of detainees in administrative segregation. An initial review is conducted within 72 hours of the detainee's placement in the SMU. This review is documented on the segregation confinement record. If the detainee spends seven days in administrative segregation, another review is completed. Documented reviews are conducted every 30 days thereafter.
<p>47. A copy of the decision and justification for each review is given to the detainee, unless, in exceptional circumstances, this provision would jeopardize security. The detainee is given an opportunity to appeal a review decision to a higher authority within the facility.</p>	Meets Standard	Detainees are provided a copy of the decision and justification for each review. The detainee may appeal the review decision.
<p>48. After seven consecutive days in Administrative Segregation, the detainee may exercise the right to appeal to the facility administrator the conclusions and recommendations of any review conducted. The detainee may use any standard form of written communication (for example, detainee request form), to file the appeal.</p>	Meets Standard	
<p>49. If a detainee has been in Administrative Segregation for more than 30 days and objects to this status, the facility administrator reviews the case to determine whether that status should continue, taking into account the views of the detainee. A written record is made of the decision and the justification.</p> <p>A similar review is done every 30 days thereafter.</p>	Meets Standard	Detainees are normally not housed in segregation for more than three days. A documented review procedure is in place for use when necessary.

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)		
This Detention Standard protects detainees, staff, contractors, volunteers, and the community from harm by segregating certain detainees from the general population in Special Management Units (SMUs) with an Administrative Segregation section for detainees segregated for administrative reasons and a Disciplinary Segregation section for detainees segregated for disciplinary reasons.		
Components	Rating	Remarks (1000 Char Max)
50. When a detainee has been held in Administrative Segregation for more than 30 days, the facility administrator notifies the Field Office Director, who notifies the ICE/DRO Deputy Assistant Director, Detention Management Division.	Meets Standard	Detainees are normally not housed in segregation for more than three days. A documented notification procedure is in place for use when necessary.
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.	Meets Standard	Detainees are normally not housed in segregation for more than three days. A documented notification/review procedure is in place for use when necessary.
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.	Meets Standard	All detainees are placed in disciplinary segregation by order of the institution disciplinary panel (IDP) or equivalent after a hearing in which the detainee was found guilty of a prohibited act. The maximum sanction for a single incident is 60 days. The facility administrator must approve the placement.
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.	Meets Standard	Within 72 hours of a segregation placement, an ICE detainee is transferred.
54. Before a detainee is placed in Disciplinary Segregation, a written order is completed and signed by the chair of the IDP (or equivalent). A copy is given to the detainee within 24 hours (unless delivery would jeopardize safety, security, or the orderly operation of the facility). The IDP chairman (or equivalent) prepares the Disciplinary Segregation Order (I-883 or equivalent), detailing the reasons for Disciplinary Segregation and attaching all relevant documentation. When the detainee is released from the SMU, the releasing officer records the date and time of release on the Disciplinary Segregation Order, and forwards the completed order to the chief of security or supervisor for insertion into the detainee's detention file.	Meets Standard	Before a detainee is placed in disciplinary segregation, a report is completed and signed by the chair of the IDP. The detainee receives a copy of the order within 24 hours. When the detainee is released from SMU, the disciplinary segregation order is forwarded for placement into the detainee's detention file.

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

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

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

Components	Rating	Remarks (1000 Char Max)
<p>55. The facility has implemented written procedures for the regular review of all Disciplinary Segregation cases.</p> <p>A supervisor interviews and reviews the status of each detainee in Disciplinary Segregation every seven days and documents his or her findings on a Disciplinary Segregation Review Form (I-887).</p> <p>At each formal review, the detainee is to be given a written copy of the reviewing officer's decision and the basis for this finding, unless institutional security would be compromised.</p> <p>The reviewer may recommend the detainee's early release upon finding that Disciplinary Segregation is no longer necessary to regulate the detainee's behavior. Early release and return to the general population requires approval of the facility administrator.</p> <p>All review documents are placed in the detainee's detention file.</p>	Meets Standard	

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)

This facility has (b)(7) segregation units. The units were clean and well maintained. Cells were clean and well lit. Logs were present for staff and visitors to sign when entering the unit. A detainee segregation housing record and segregation 30-minute check sheet for each detainee were located outside of their respective cells. The logs contained all pertinent information on the detainee to include activities such as meals, showers, recreation and law library usage. Shift supervisor and medical staff signatures were present on the documents. Detainee files contained all of the proper paperwork to include administrative or disciplinary segregation rationale, medical clearance for the unit and documentation of reviews conducted. Detainees in administrative segregation do not receive any additional recreation time from the required one hour, five days a week.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

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

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

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

Components	Rating	Remarks (1000 Char Max)
1. The ICE/DRO Field Office Director ensures that weekly announced and unannounced visits occur.	Meets Standard	A Deportation Officer (DO) visits the facility every Tuesday and Thursday. An Immigration Enforcement Agent (IEA) and the Supervisory Detention and Deportation Officer (SDDO) visit on an unannounced weekly basis.
2. Detention Staff and Deportation Staff conduct scheduled weekly visits with detainees.	Meets Standard	A DO visits the facility every Tuesday and Thursday, spending time in the detainee housing unit and touring the facility.
3. Scheduled visits are posted in ICE/DRO detainee housing areas.	Meets Standard	
4. Visiting ICE staff observe and note current climate and conditions of confinement.	Meets Standard	The IEA tours the facility weekly and completes a liaison checklist noting facility climate, conditions, sanitation and overall observations.
5. ICE/DRO Detainee Request Forms are available for use by ICE/DRO detainees.	Meets Standard	
6. The facility treats detainee correspondence to ICE/DRO staff as Special Correspondence.	Meets Standard	
7. A secure box is located in an accessible location for detainee's to place their Detainee Request Forms.	Meets Standard	
8. Only ICE staff are able to retrieve the contents of the secure box containing Detainee Request Forms,	Meets Standard	Detainee request forms are deposited into a locked mail box inside the detainee housing unit. Only ICE staff retrieve its contents.
9. ICE/DRO staff respond to a detainee request from a facility within 72 hours and document the response in a log.	Meets Standard	
10. ICE/DRO detainees are notified in writing upon admission to the facility of their right to correspond with ICE/DRO staff regarding their case or conditions of confinement.	Meets Standard	The handbooks address detainee rights and procedures for corresponding with ICE.
11. OIG Hotline Informational Posters are mounted in all appropriate common areas (recreation, dining, etc.) and, in SPCs and CDFs, in all housing areas.	Meets Standard	

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)
12. Daily telephone serviceability checks are documented in the housing unit logbook.	Meets Standard	Telephones are checked at the start of each shift. Documentation is recorded in the housing unit shift logbook.

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)*

Review of handbook content, an interview with the IEA, inspection of housing unit telephones and request form mail boxes, interviews with detainees, observation of housing unit postings and an interview with the quality assurance manager revealed that open communication between staff and detainees has been established in policy and practice.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 17. TOOL CONTROL (Key: Q)		
This Detention Standard protects detainees, staff, contractors, and volunteers from harm and contributes to orderly facility operations by maintaining control of tools, culinary utensils, and medical and dental instruments, equipment, and supplies.		
Components	Rating	Remarks (1000 Char Max)
1. (MANDATORY) There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	Meets Standard	The chief of security is responsible for developing a tool control procedure and an inspection system to ensure accountability.
2. If the warehouse is located outside the secure perimeter, the warehouse receives all tool deliveries. If the warehouse is located inside the secure perimeter the facility administrator shall develop site-specific procedures, for example; storing tools at the rear 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	All tools are delivered to the warehouse, which is outside the secure perimeter. The tool control officer takes the tools to the maintenance shop for etching and placement on the tool inventory.
3. (MANDATORY) The use of tools, keys, medical equipment, and culinary equipment is controlled.	Meets Standard	The use of tools, keys, medical equipment and culinary equipment is controlled. All tools in the maintenance, medical and food service departments and in the armory are inventoried. Inventories of all tools are conducted and maintained by the tool control officer.
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	Plastic photo chits are used by facility staff to obtain tools.
5. Tool inventories are required for: <ul style="list-style-type: none"> Facility Maintenance Department Medical Department Food Service Department Electronics Shop Recreation Department Armory 	Meets Standard	The facility does not have an electronics shop or recreation department. Tool inventories are maintained for all other bulleted areas.
6. Tool Inventories are conspicuously posted on all tool boards, tool boxes and tool kits.	Meets Standard	Tool inventories are posted on all tool boards and inside all tool kits.
7. The facility has a policy for the regular inventory of all tools. <ul style="list-style-type: none"> The policy sets minimum time lines for physical inventory and all necessary documentation. ICE facilities use AMIS bar code labels when required. 	Meets Standard	Each respective area performs a tool inventory at least daily. The tool control officer conducts tool inventories of the entire facility monthly and quarterly. Policy on tools provides written procedures for tool inventories.

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

PART 2 – 17. TOOL CONTROL (Key: Q)		
This Detention Standard protects detainees, staff, contractors, and volunteers from harm and contributes to orderly facility operations by maintaining control of tools, culinary utensils, and medical and dental instruments, equipment, and supplies.		
Components	Rating	Remarks (1000 Char Max)
8. The facility has a tool classification system. Tools are classified according to: <ul style="list-style-type: none"> • Restricted (dangerous/hazardous) • Non Restricted (non-hazardous). 	Meets Standard	Tools are classified as: Class A (restricted, dangerous/hazardous); and Class B (non-restricted, non-hazardous).
9. Department heads are responsible for implementing proper tool control procedures as described in the standard.	Meets Standard	Department heads are responsible for implementing tool control procedures.
10. There are policies and procedures in place to ensure that all tools are properly marked and readily identifiable.	Meets Standard	Policy requires that all tools are marked and readily identifiable. All tools were found to be appropriately marked.
11. The facility has an approved tool storage system. <ul style="list-style-type: none"> • The system ensures that all stored tools are accountable. • Tools are stored on shadow boards in which the shadows resemble the tool. • Shadow boards have a white background. • Restricted tools are shadowed in red. • Non-restricted tools are shadowed in black. • Commonly used tools (tools that can be mounted) are stored in such a way that missing tools are readily noticed. 	Meets Standard	The facility has an approved tool storage system. All tools were found to be accountable. All tools were stored on shadow boards with a white back ground. Restricted tools are shadowed in red and non-restricted are shadowed in black. Tools were stored in such a manner that missing tools are readily noticed.
12. Tools removed from service have their shadows removed from shadow boards.	Meets Standard	Shadows are removed when tools are removed from service.
13. Tools not adaptable to a shadow board are stored in a locked drawer or cabinet.	Meets Standard	Tools that are not adaptable to a shadow board are stored in locked cabinets.
14. Sterile packs are stored under lock and key.	Meets Standard	Sterile packs are located on the emergency carts and in first aid kits, the pharmacy department and the dental office. All are stored under lock and key.
15. Each facility has procedures for the issuance of tools to staff and detainees.	Meets Standard	No tools are issued to detainees.
16. There are policies and procedures to address the issue of lost tools. The policy and procedures include: <ul style="list-style-type: none"> • Verbal and written notification. • Procedures for detainee access. • Necessary documentation/review for all incidents of lost tools. 	Meets Standard	The facility has a tool disposition report on which to address lost tools. Policy includes procedures to address the bulleted items in the component.

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

PART 2 – 17. TOOL CONTROL (Key: Q)

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

Components	Rating	Remarks (1000 Char Max)
17. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	Meets Standard	The tool disposition report is used to track the disposal of worn out tools.
18. All private or contract repairs and maintenance workers under contract with ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility. The inventory is reviewed and verified prior to the contractor entering/departing the facility.	Meets Standard	All private/contract repair or maintenance workers must submit an inventory of all tools prior to admittance to and departure from the facility. The inventory is reviewed and reconciled prior to the contractor entering/departing the facility.
19. Hoses longer than three feet in length are classified as a restricted tool.	Meets Standard	All hoses were properly secured in the maintenance shop.
20. Scissors used for in-processing detainees are tethered to the furniture (e.g. table, counter, etc.) where they are used.	Meets Standard	All scissors used in the medical department and the armory are tethered to the counter where they are used.

PART 2-17. TOOL CONTROL – Reviewer Summary

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

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

The facility has a dedicated tool control officer. Review of tool control practice, inventories and accountability throughout the facility found that the facility procedures are being followed by staff. All staff interviewed were familiar with the requirements for tool control and the inventory of all tools. Inventory control and secure storage of all instruments and tools used in the maintenance, food service and medical departments were reviewed and found to be correct and current. The facility uses a photo chit to place on the shadow board when a tool is being used. In addition to use of the chit, all tools being used are logged for accountability. Tool inventories accompany all tools brought into the facility by maintenance staff. All tools were properly etched and color-coded for identification at the time of the inspection.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

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

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

Components	Rating	Remarks (1000 Char Max)
1. (MANDATORY) The facility has a Use of Force Policy.	Meets Standard	The facility has a comprehensive use of force policy.
2. Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	Meets Standard	
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	Policy requires that staff try to resolve situations whenever possible without resorting to the use of force.
4. Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	Meets Standard	Policy asserts that calculated rather than immediate use of force is feasible in most cases.
5. The facility subscribes to the prescribed Confrontation Avoidance Procedures. <ul style="list-style-type: none"> Ranking detention official, health professional, and others confer before every calculated use of force. 	Meets Standard	Staff is trained in confrontation avoidance procedures. Prior to a calculated use of force, staff confer as referenced in this component.
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. <ul style="list-style-type: none"> Under staff supervision. 	Meets Standard	
7. Staff members are trained in the performance of the Use-of-Force Team Technique.	Meets Standard	All security staff are trained in the use-of-force team technique.
8. All use-of-force incidents are documented and reviewed.	Meets Standard	All use-of-force incidents are documented and reviewed by the assistant chief of security, chief of security, assistant warden, unit manager, investigations unit, health service administrator and facility administrator.
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	

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

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

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

Components	Rating	Remarks (1000 Char Max)
<p>10. Staff:</p> <ul style="list-style-type: none"> Does not use force as punishment. Attempts to gain the detainee's voluntary cooperation before resorting to force Uses only as much force as necessary to control the detainee. Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical. 	Meets Standard	Policy and practice address all of the bullet points listed in this component.
11. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	N/A	Medication for restraint purposes is not used at this facility.
12. (MANDATORY) Use-of-Force Teams follow written procedures that attempt to prevent injury and exposure to communicable disease(s).	Meets Standard	Policy provides written procedures on use-of-force teams to include taking necessary precautions to prevent injury and exposure to communicable disease. This includes not permitting staff members with a skin disease or skin injury to participate in a calculated use-of-force situation.
<p>13. Standard procedures associated with using four/five point restraints include:</p> <ul style="list-style-type: none"> Soft (nylon/leather) restraints. Dressing the detainee appropriately for the temperature. A bed, mattress, and blanket/sheet. Checking the detainee at least every 15 minutes. Logging each check. Repositioning detainee often enough to prevent soreness or stiffness. Medical evaluation of the restrained detainee twice per eight-hour shift. When qualified medical staff are not immediately available, staff position the detainee "face-up." 	N/A	(b)(7)e
<p>14. The shift supervisor monitors the detainee's position/condition every two hours.</p> <p>He/she allows the detainee to use the restroom at these times under safeguards.</p>	N/A	(b)(7)e
15. All detainee checks are logged.	N/A	(b)(7)e

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

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

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

Components	Rating	Remarks (1000 Char Max)
16. In immediate-use-of-force situations, officers contact medical staff once the detainee is under control.	Meets Standard	Detainees involved in immediate use of force situations are immediately brought to the medical department for assessment.
17. When the Facility Administrator authorizes use of non-lethal weapons: <ul style="list-style-type: none"> Medical staff are consulted before staff use pepper spray/non-lethal weapons. Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized. 	Meets Standard	(b)(7)e
18. Intermediate Force Weapons, when not in use are stored in areas where access is limited to authorized personnel and to which detainees have no access.	Meets Standard	
19. If Intermediate Force Weapons are stored in the Special Management Unit (SMU), they are stored and maintained the same as Class R tools.	Meets Standard	
20. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> Medical personnel are consulted 	Meets Standard	
21. Protective gear is worn when restraining detainees with open cuts or wounds.	Meets Standard	Policy requires staff to wear protective gear, (b)(7)e 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	All information is documented on the use of force form.
23. It is standard practice to review any use of force and the non-routine application of restraints.	Meets Standard	Any use of force is reviewed by the chief of security, health services administrator, assistant warden and warden.
24. All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. <ul style="list-style-type: none"> Specialized training is given to officers ensuring they are certified in all devices approved for use. 	Meets Standard	All officers receive training in self-defense, confrontation avoidance techniques and the use of force during basic training and annual refresher training.
25. All staff authorized to use OC spray receive training not only in its use, but also in the decontamination of individuals exposed to it. This training must be documented in the staff training record.	Meets Standard	(b)(7)e

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

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

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

Components	Rating	Remarks (1000 Char Max)
26. The use of canines is restricted to contraband detection purposes only.	Meets Standard	
27. The officers are thoroughly trained in the use of soft and hard restraints.	Meets Standard	All officers receive training in the use of soft and hard restraints during basic training and annual refresher training.
28. In SPCs, the Use of Force form is used. In other facilities (IGSAs / CDFs) this form or its equivalent is used.	Meets Standard	This IGSA facility uses Form 51D to document all use of force incidents.

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)

Review of policy and staff interviews showed that force is used only after all other reasonable means to resolve the situation have failed. Policy and training reinforce that only the minimum force needed to control the situation will be used. Policy also ensures that all precautions are taken to prevent injury or exposure to communicable diseases by staff involved in a use of force incident. (b)(7)e

(b)(7)e. A recent video of calculated use of force by the use-of-force team was reviewed during the inspection. This review revealed that facility procedures were followed, that protective gear was worn and that force was used only after all verbal attempts to gain compliance failed. (b)(7)e

(b)(7)e All uses of force are documented and reviewed. The chief of security maintains files on all use-of-force incidents.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

Section III ORDER

Disciplinary System

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

PART 3 – 19. DISCIPLINARY SYSTEM (Key: S)		
This Detention Standard promotes a safe and orderly living environment for detainees by expecting detainees to comply with facility rules and regulations and imposing disciplinary sanctions to control the behavior of those who do not.		
Components	Rating	Remarks (1000 Char Max)
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	Meets Standard	Policy provides for a disciplinary system using progressive levels of reviews and appeals.
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	Meets Standard	Policy on inmate rights states that disciplinary action shall not be capricious or retaliatory.
3. Written rules prohibit staff from imposing or permitting the following sanctions: <ul style="list-style-type: none"> corporal punishment deviations from normal food service clothing deprivation bedding deprivation denial of personal hygiene items loss of correspondence privileges deprivation of legal access and legal materials deprivation of physical exercise 	Meets Standard	Policy and procedure do not allow the sanctions listed in this component to be imposed.
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 rules of conduct, sanctions and procedures for violations are communicated in writing to the detainees via the handbook and are explained verbally in the "Know Your Rights" video.
5. The following items are conspicuously posted in Spanish and English or other dominate languages used in the facility: <ul style="list-style-type: none"> Rights and Responsibilities Prohibited Acts Disciplinary Severity Scale Sanctions 	Meets Standard	All of the bullet-pointed information listed in this component was conspicuously posted on the detainee housing unit bulletin board.
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 for review and signature.
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	

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

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

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

Components	Rating	Remarks (1000 Char Max)
9. An intermediate disciplinary process is used to adjudicate minor infractions.	Meets Standard	
10. A disciplinary panel (or equivalent in IGSA's) adjudicates infractions. The panel: <ul style="list-style-type: none"> Conducts hearings on all charges and allegations referred by the UDC Considers written reports, statements, physical evidence, and oral testimony Hears pleadings by detainee and staff representative Bases its findings on the preponderance of evidence Imposes only authorized sanctions 	Meets Standard	The assistant chief of security, unit manager and a sergeant comprise the disciplinary panel for major infractions. All of the bulleted items in the component are taken into consideration when adjudicating infractions.
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	The facility allows hearing postponements when conditions warrant. Such continuances are documented
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	Sixty days is the maximum sanction for any single offense.
14. Written procedures govern the handling of confidential-source information. Procedures include criteria for recognizing "substantial evidence".	Meets Standard	Written procedures for the handling of confidential-source information are included in policy.
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	Meets Standard	

PART 3 – 19. DISCIPLINARY SYSTEM – Reviewer Summary

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

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

A review of numerous completed rule violation reports reflected that facility procedures and policy regarding disciplinary hearings are being followed. Review of procedures and staff interviews confirmed that staff are managing the disciplinary process in a manner which affords detainees their due process rights.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 9/27/2012

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 Signature (for printed form submission):

Section IV CARE

Food Service

Hunger Strikes

Medical Care

Personal Hygiene

Suicide Prevention and Intervention

Terminal Illness, Advance Directives, and Death

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

PART 4 – 20. FOOD SERVICE (Key: T)

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

Components	Rating	Remarks (1000 Char Max)
1. The food service program is under the direct supervision of a professionally trained and certified Food Service Administrator (FSA). The Responsibilities of cooks and cook foremen are in writing. The FSA determines the responsibilities of the Food Service Staff.	Meets Standard	Food service is provided under a contract with Trinity Food Service. The food service director has 22 years of military food service training and is ServSafe-certified. The responsibilities of the food service staff are in writing and determined by the food service director.
2. The Cook Foreman is on duty on days when the FSA is off duty and vice versa.	Meets Standard	The department's administrative positions include (b)(7)(e) food service director and (b)(7)(e) assistant food service directors. Scheduling ensures that at least <div style="background-color: #cccccc; height: 20px; width: 100%;"></div>
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	Meets Standard	No knives are used at this facility; dough cutters are used to prepare foods that require cutting. The one key to the tool cabinet is controlled by a correctional officer assigned to a food service post. All tools and keys in the food service department are inventoried and maintained in accordance with the standard on tool control.
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	Staff monitor the condition of all utensils in the food service department. There are no knives used in this facility.
6. Special procedures (when necessary) govern the handling of food items that pose a security threat.	N/A	Food items that pose a security threat are not used in this facility.
7. Operating procedures include daily searches (shakedowns) of detainee work areas.	Meets Standard	Post orders for the officer assigned to the kitchen require that security checks of all areas be conducted at least every 30 minutes.

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

PART 4 – 20. FOOD SERVICE (Key: T)

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

Components	Rating	Remarks (1000 Char Max)
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	Officers handle the population counts in the food service department.
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	ICE detainees are not authorized to work at this facility. Non-ICE detainee workers are screened by medical staff prior to assignment to the food service department. Staff receive physicals prior to being hired into the department. Non-ICE detainee food service workers are subject to a daily hygiene inspection upon reporting for work. Clothing and grooming comply with industry standards.
10. The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	Meets Standard	
11. The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	Meets Standard	ICE detainees are not authorized to work in this facility. Food service staff instruct newly hired non-ICE detainee workers in the rules and procedures of the department.
12. During orientation and training session(s), the Cook Supervisor (CS) explains and demonstrates: <ul style="list-style-type: none"> • Safe work practices and methods. • Safety features of individual products/ pieces of equipment. • Training covers the safe handling of hazardous material[s] the detainee are likely to encounter in their work. 	Meets Standard	The department's orientation training instructs the non-ICE detainee workers in all of the bulleted requirements of the component.
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 IGSA are subject to local and State rules and regulations regarding detainee pay.	Meets Standard	Non-ICE detainee workers in this IGSA facility are paid one dollar a day to work in the food service department.
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	Detainees are served three hot meals each day. There are no more than 14 hours between the serving of the evening meal and the next morning's breakfast meal.

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

PART 4 – 20. FOOD SERVICE (Key: T)		
This Detention Standard ensures that detainees are provided a nutritionally balanced diet that is prepared and presented in a sanitary and hygienic food service operation.		
Components	Rating	Remarks (1000 Char Max)
16. For cafeteria-style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	N/A	There are no cafeteria style feeding operations at this facility.
17. The facility has a standard 35-day menu cycle. IGSA's use a 35 day or similar system for rotating meals.	Meets Standard	The facility uses a 35-day cycle menu for rotating meals.
18. (MANDATORY) A registered dietitian shall conduct a complete nutritional analysis that meets U.S. Recommended Daily Allowances (RDA), at least annually, of every master-cycle menu planned by the FSA. The dietitian must certify menus before they are incorporated into the food service program. If necessary, the FSA shall modify the menu in light of the nutritional analysis to ensure nutritional adequacy. The menu will need to be revised and re-certified by the registered dietitian in that event.	Meets Standard	The Trinity corporate dietitian prepares a nutritional analysis of the food service menus using the food processor SQL program. The menus are certified prior to being implemented.
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	Computerized recipes are used for preparing food items on the master cycle menu.
20. The Cook Foreman has the authority to change menu items if necessary. <ul style="list-style-type: none"> If yes, documenting each substitution, along with its justification, with copy to the FSA 	Meets Standard	If management staff are not available to approve menu changes, the cook supervisors will document the changes made and the justification for the changes. The documentation is submitted for the food service director's review.
21. All staff and volunteers know and adhere to written "food preparation" procedures.	Meets Standard	
22. A Common Fare menu available to detainees, at no charge, whose dietary requirements cannot be met on the main. <ul style="list-style-type: none"> Changes to the planned Common Fare menu can be made at the facility level. Hot entrees are offered three times a week. The Common Fare menus satisfy nutritional recommended daily allowances (RDAs). Staff routinely provide hot water for instant beverages and foods. <ul style="list-style-type: none"> Common Fare meals are served with: Disposable plates and utensils. Reusable plates and utensils. Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the Common Fare diet items. 	Meets Standard	The common fare program is available at no cost to detainees whose religious dietary tenets cannot be met with the mainline menu. The common fare program meets all of the bulleted requirements of this component.

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

PART 4 – 20. FOOD SERVICE (Key: T)		
This Detention Standard ensures that detainees are provided a nutritionally balanced diet that is prepared and presented in a sanitary and hygienic food service operation.		
Components	Rating	Remarks (1000 Char Max)
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	Meets Standard	Detainees requiring a religious diet are referred to the chaplain.
24. A supervisor at the command level must approve a detainee's removal from the Common Fare Program.	Meets Standard	The chaplain is the designated approving official for removing detainees from the common fare program.
25. The Facility Administrator, in conjunction with the chaplain and/or local religious leaders provides the FSA a schedule of the ceremonial meals for the following calendar year.	Meets Standard	
26. The Common Fare Program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. <ul style="list-style-type: none"> Muslims fasting during Ramadan receive their meals after sundown. Jews who observe Passover but do not participate in the Common Fare Program receive the same Kosher-for-Passover meals as those who do participate. Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. 	Meets Standard	The common fare program accommodates detainees abstaining from particular foods during prescribed times of the year by meeting all of the bulleted requirements of this component.
27. The food service program addresses medical diets.	Meets Standard	
28. Satellite-feeding programs follow guidelines for proper sanitation.	Meets Standard	
29. Hot and cold foods are maintained at the prescribed, "safe" temperature(s) as served. See Detention Standard on Food Service for guidance.	Meets Standard	On 09/25/2012, food temperatures were checked during the plating of the lunch meal. All menu items were found to be within the safe temperature zone.
30. All meals provided in nutritionally adequate portions.	Meets Standard	
31. Food is not used to punish or reward detainees based upon behavior.	Meets Standard	
32. The food service staff instruct detainee volunteers on: <ul style="list-style-type: none"> Personal cleanliness and hygiene; Sanitary techniques for preparing, storing, and serving food, and; The sanitary operation, care, and maintenance of equipment. 	Meets Standard	The department's training program addresses all of the bulleted requirements of this component.
33. Everyone working in the food service department complies with food safety and sanitation requirements.	Meets Standard	

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

PART 4 – 20. FOOD SERVICE (Key: T)		
This Detention Standard ensures that detainees are provided a nutritionally balanced diet that is prepared and presented in a sanitary and hygienic food service operation.		
Components	Rating	Remarks (1000 Char Max)
34. (MANDATORY) The facility implements written procedures for the administrative, medical, and/or dietary personnel conducting the weekly inspections of all food service areas, including dining, storage, equipment, and food-preparation areas.	Meets Standard	The assistant food service directors conduct and document weekly inspections of all food service areas.
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	The department uses a dish machine that is equipped with a low temperature chemical sanitizer. The machine temperatures and sanitizing solution are checked during each meal.
37. (MANDATORY) Staff document the results of every refrigerator/ freezer temperature check, in accordance with the Detention Standard on Food Service.	Meets Standard	Freezer and refrigerator temperatures are checked at the beginning and end of each shift.
38. 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	Warehouse staff fill out a food delivery record for all goods received. The form describes the condition of all food items received and allows for documentation of temperatures and other pertinent condition issues.
40. Storage areas are locked when not in use.	Meets Standard	
41. Food service personnel conduct shakedowns along with detention staff.	Meets Standard	Food service staff participate in area shakedowns.
42. <u>In SPCs only:</u> The ICE supervisor on duty ensures that ICE officers participate in dining room supervision.	N/A	This facility is an IGSA. There is no dining room operation at this facility.
43. Menus are certified by a registered dietitian prior to being incorporated into the Food Service Program.	Meets Standard	
44. <u>In SPCs only:</u> the FSA prepares quarterly cost estimates for the Common Fare Program. This quarterly estimate is factored into the quarterly budget.	N/A	This facility is not an SPC. The food service contractor does not prepare quarterly budgets. An annual budget is prepared and the contractor is reimbursed for the number of Common Fare meals served.

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

PART 4 – 20. FOOD SERVICE (Key: T)

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

Components	Rating	Remarks (1000 Char Max)
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	The door that leads to the outside of the food service department is equipped with an air curtain.
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	
49. Staff comply with all ICE Housekeeping, Storeroom/Refrigerator requirements. Identify and explain any shortcomings.	Meets Standard	
50. Dining room facilities and operating procedures will provide sufficient space and time for detainees to eat meals in a relatively relaxed, unregimented atmosphere.	<i>Meets Standard</i>	Detainee meals are eaten in the housing unit. The facility does not use a dining room operation.
51. (MANDATORY) An independent, external source shall conduct annual inspections to ensure that the food service facilities and equipment meet governmental health and safety codes. Corrective action is taken on deficiencies, if any.	Meets Standard	On 05/10/2012, the Pinal County Environmental Health Services Department conducted an inspection of the food service department. Corrective action was taken as required.
52. Personnel inspecting the food service department shall note needed corrective action(s), if any, in a written report to the Facility Administrator.	Meets Standard	The county health inspection report describes all findings in need of corrective action. The inspection report is forwarded to administrative staff.
53. Only those toxic and caustic materials required for sanitary maintenance of the facility, equipment, and utensils shall be used in the food service department. Material Safety Data Sheets (MSDSs) will be maintained on all flammable, toxic, and caustic substances used.	Meets Standard	
54. (MANDATORY) The FSA is responsible for pest control in the food service department, including contracting the services of an outside exterminator.	Meets Standard	Anteater Pest Control, a licensed pest control company, is contracted to provide monthly exterminating services, to include preventative spraying for indigenous pests.

PART 4 – 20. FOOD SERVICE – Reviewer Summary

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

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

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)

A review of policy and food service records, interviews with the food service director, direct observation of meal preparation and a physical plant inspection were conducted during the review. A satellite meal service is provided through a contract with Trinity Food Service. The food service department's physical plant consists of two production kitchens, a satellite dish room operation and nine satellite serving lines. Meals for the ICE detainees are prepared in kitchen #1 and sent to a serving area in close proximity to the ICE detainee housing unit. Detainees are escorted from the unit where they pick up their food tray and take it back into the housing unit to consume. Food temperatures taken during the lunch meal on 09/25/2012 revealed that the food is maintained at temperatures that preserve the safety and enhance the quality of the meal.

All menus were properly analyzed by a registered dietitian. All detainee workers and staff receive pre-employment food handler's exams. Food service staff conduct weekly sanitation inspections of all food service areas, and staff properly monitor and document freezer, refrigerator and dish machine temperatures. The common-fare program is available for detainees requiring religious diets that cannot be met through the 35-day master cycle menu.

Chemical control within the department was achieved through the use of secure, pre-metered chemical dispensers. Knives are not used in the preparation of food. Tools used in the department were properly stored and controlled. Food service utensils such as spoons, whisks, tongs and dough cutters are properly shadowed, marked, inventoried and maintained. ICE detainees are not assigned to work in the food service department.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

PART 4 – 21. HUNGER STRIKES (Key: U)

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

Components	Rating	Remarks (1000 Char Max)
1. When a detainee has refused food or observed to have not eaten for 72 hours, it is standard practice for staff to refer him or her to the medical department.	Meets Standard	Policy requires staff to refer detainees to health services when a detainee has not eaten for 72 hours.
2. Facility immediately reports via the chain of command a hunger strike to ICE/DRO.	Meets Standard	Per policy, the warden immediately notifies ICE of a detainee on a hunger strike.
3. The facility has established procedures to ensure staff respond immediately to a hunger strike.	Meets Standard	There are established procedures ensuring staff will respond immediately to a hunger strike.
4. Policy and procedure require that staff isolate a hunger-striking detainee from other detainees.	Meets Standard	Per policy, the detainee is taken to the medical unit and placed in an observation cell.
5. Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	Meets Standard	Medical personnel are authorized to make the decision as to where the hunger striking detainee is housed.
6. Medical staff record the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	Meets Standard	Policy requires the medical staff to record the weight and vital signs at least every 24 hours.
7. The facility medical authority obtains a hunger striker's consent before medical treatment.	Meets Standard	Policy requires a signed consent from the hunger striking detainee before any medical treatment is provided.
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	Policy requires a refusal of treatment form to be completed if a detainee refuses treatment or care.
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	Policy states three meals per day are to be delivered to the detainee.
10. Staff maintain the hunger striker's supply of drinking water/other beverages.	Meets Standard	Staff maintain the hunger striker's supply of drinking water, providing water via a pitcher or cups.
11. During a hunger strike, staff remove all food items from the hunger striker's living area.	Meets Standard	Per policy, all commissary and personal food items are to be removed from the hunger-striking detainee's cell.
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	Staff is to record fluid intake and food consumption on a hunger strike monitoring form.

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

PART 4 – 21. HUNGER STRIKES (Key: U)

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

Components	Rating	Remarks (1000 Char Max)
13. The medical staff have written procedures for treating hunger strikers.	Meets Standard	There are medical procedures for treating detainees on hunger strikes.
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 treatment attempts, including attempts to persuade the hunger striker by counseling, are documented in the 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	Medical and detention staff receive training, at orientation and annually, on how to recognize and refer a hunger striker. Medical staff receive additional training on evaluation and treatment at orientation and annually.

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)

In the past twelve months there have been no hunger strikes in this facility; therefore, no documentation of medical treatment was available for review and this inspector was unable to determine if the medical practices of the facility fully comply with the standard. The rating was based on a review of policies, procedures and forms, and interviews with the health services administrator and ICE and nursing staff.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

PART 4 – 22. MEDICAL CARE (Key: V)

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

Components	Rating	Remarks (1000 Char Max)
1. The facility operates a health care facility in compliance with state and local laws and guidelines.	Meets Standard	The facility operates in compliance with State of Arizona and Pinal County laws and regulations and is accredited by the American Correctional Association (ACA). The medical unit has current accreditation by the National Commission on Correctional Health Care (NCCCHC) and a Clinical Laboratory Improvement Amendment of 1988 (CLIA) waiver. The licenses, registrations and certifications of health care staff were reviewed, and all had current and verified credentials.
2. The facility's in-processing procedures of arriving detainees include medical screening.	Meets Standard	Policy requires a medical screening as part of the intake process. A licensed practical nurse (LPN) or registered nurse (RN) conducts the health screening using a computerized form in the detainee's electronic health record. A review of 20 ICE detainee health records confirm these screenings were conducted in a timely manner, with the average elapsed time from admission to screening being four hours.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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

Components	Rating	Remarks (1000 Char Max)
3. (MANDATORY) The essential positions needed to perform the health services mission and provide the required scope of services are described in a staffing plan that is reviewed at least annually by the health authority.	Meets Standard	The staffing plan is reviewed annually by the health services administrator (HSA) and the chief medical director. The last review on 05/08/2012 included positions for one HSA, (b)(7)(e) full-time physicians, (b)(7)(e) mid-level providers, (b)(7)(e) NPs, (b)(7)(e) PNs, (b)(7)(e) licensed mental health providers, (b)(7)(e) psychiatrist for 20 hours a week, (b)(7)(e) full-time dentist and dental assistant and one 20 hour per week dentist and dental assistant, one 20 hour per week dental hygienist, (b)(7)(e) medical records technicians and (b)(7)(e) certified medical assistants. There is 24-hour, seven day a week medical coverage. Current vacancies include a 20 hour per week physician, a part-time LPN and a full-time RN. The physician, dentist and psychiatrist are on call when not on site. The staffing plan includes the essential staff needed to provide the necessary medical, mental health and dental care.
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	At intake, detainees are given oral and written instructions on how to access health services and sign a statement attesting to receipt of this information. Both written and verbal instructions are provided in Spanish and English, and the language interpretation phone line can be used for detainees who do not speak either language.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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

Components	Rating	Remarks (1000 Char Max)
5. Detainees will have access to and receive specified 24-hour emergency medical, dental, and mental health services.	Meets Standard	Medical staff is on duty 24 hours a day, seven days a week. A physician, dentist and psychiatrist are always on call. If necessary, detainees are transported to the local emergency room for medical, dental or mental health services not available at the facility.
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	Review of personnel files confirmed that medical and detention staff receive tuberculosis (TB) testing prior to their job assignments and annually thereafter. The hepatitis B vaccine is offered to all staff when hired and the acceptance or declination form is completed.
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	Medical staff credential files were reviewed and revealed that all professional staff are properly licensed, certified, credentialed and/or registered in compliance with state and federal requirements. On file are also the current job descriptions and privilege statements.
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	Instructions for accessing medical care are included in the detainee handbook issued to each detainee at intake. The handbook is written in English and Spanish. If another language is required, the language interpretation line is used.
9. In SPCs and CDFs, medical personnel credentialing and verification complies with the standards established by the NCCHC and Joint Commission.	Meets Standard	The credentialing of medical staff was verified as meeting NCCHC standards.

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

PART 4 – 22. MEDICAL CARE (Key: V)		
This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.		
Components	Rating	Remarks (1000 Char Max)
10. Within 12 hours of arrival, all newly admitted detainees receive initial medical, dental and mental health screening by a health care provider or a detention officer specially trained to perform this function. <ul style="list-style-type: none"> When screening is performed by a detention officer, the facility maintains documentation of the officer's special training. 	Meets Standard	Review of 20 ICE detainee health records confirmed that all newly admitted detainees received initial medical, mental health, dental and sexual assault and abuse screenings within 12 hours of arrival. Intake health screenings are completed by the nursing staff.
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	Many of the nursing staff speak Spanish. The facility has an organized program of staff certified and fluent in various languages and available to interpret. When further assistance is required, the language interpretation line is used.
12. The facility has sufficient space and equipment to afford each detainee privacy when receiving health care.	Meets Standard	The medical unit most frequently used for ICE detainees has two well-equipped exam rooms and a nursing station, lab room, storage room and dental office, as well as four negative pressure rooms and three observation rooms. The clinic has sufficient space to maintain privacy during evaluation and treatment of detainees.
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 located within the secure perimeter and has its own restricted access.
14. The medical facility entrance includes a holding/waiting room.	Meets Standard	The entrance for the ICE detainee medical unit includes two waiting rooms. Each has benches to seat six detainees.
15. The medical facility's holding/waiting room under the direct supervision of custodial staff.	Meets Standard	The two waiting rooms are adjacent and are under the direct supervision of (b)(7) correctional officer.
16. Detainees in the holding/waiting room have access to a toilet and a drinking fountain.	Meets Standard	The waiting rooms have a large water cooler and cups available, and the detainees have access to a toilet in an adjacent room.

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

PART 4 – 22. MEDICAL CARE (Key: V)		
This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.		
Components	Rating	Remarks (1000 Char Max)
17. Medical records are kept apart from other files. They are: <ul style="list-style-type: none"> Secured in a locked area within the medical unit. With physical access restricted to authorized medical staff. Procedurally, no copies made and placed in detainee files. 	Meets Standard	The medical records department is in a secure room within the medical unit. The facility uses an electronic medical record (EMR) that requires a password to access. Passwords are restricted to medical personnel only. Any paper reports or forms are scanned into the EMR and then shredded. No portion of the EMR is copied and placed in non-medical detainee files.
18. (MANDATORY) A signed and dated consent form is obtained from a detainee before medical treatment is administered.	Meets Standard	A signed and dated consent for treatment form is completed by each detainee at the intake health screening. A procedure-specific consent form is required for any invasive procedure, hunger strike treatment or psychotropic medication treatment. A review of 20 detainee health records confirmed this procedure is being followed.
19. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	Meets Standard	Detainees sign an Authorization for Release of Confidential Health Information form to authorize release of medical information to outside sources. The signed form is then scanned into the detainee's electronic medical record.
20. The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	Meets Standard	Notification of an ICE detainee's release, transfer or removal is provided between three and 24 hours 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	Medical staff complete a Medical Summary of a Federal Prisoner/Alien in Transit form for all transferring detainees. When necessary and requested by a provider, pertinent portions of the medical record will also be copied and transferred with the detainee. This process was observed.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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

Components	Rating	Remarks (1000 Char Max)
22. Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL."	Meets Standard	Observation confirmed that when medical records transfer, they are placed in a sealed envelope with the detainee's name and A-number and stamped "medical confidential".
23. Medical screening includes a Tuberculosis (TB) test.	Meets Standard	All arriving detainees are screened for symptoms of active TB, and a TB skin test is administered at the time of the health screening unless contraindicated.
24. All detainees receive a mental-health screening upon arrival. It is conducted: <ul style="list-style-type: none"> • By a health care provider or specially trained officer; • Before a detainee's assignment to a housing unit. 	Meets Standard	Review of 20 ICE detainee health records revealed that all detainees received a mental health screening upon arrival. It is conducted by a nurse as part of the intake health screening and prior to a detainee's assignment to a housing unit.
25. The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.	Meets Standard	All health screenings are promptly reviewed by the shift supervising RN. Any with identified medical concerns are promptly given to the physician. If there are questions after hours, a physician is on call for consultation. All intakes from the previous night are reviewed and signed electronically either by a physician or a midlevel provider. Review of 20 intake health screening forms confirmed appropriate referral and follow up occur.
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	Twenty ICE detainee medical records were reviewed, and all had documentation of complete health appraisal/physical exams completed by a physician or mid-level provider within 14 days of the detainee's arrival.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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

Components	Rating	Remarks (1000 Char Max)
27. Detainees in the Special Management Unit have access to the same level of health care as detainees in the general population.	Meets Standard	Detainees housed in the special management unit (SMU) receive an individual cell visit by the shift supervising RN daily and by the physician, weekly. A detainee in the SMU can request sick call through the daily nurse visit or through the housing unit officer.
28. Staff provide detainees with health- services (sick call) request slips daily, upon request. <ul style="list-style-type: none"> Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population. Service-request slips are delivered in a timely fashion to the health care provider. 	Meets Standard	The sick call request forms are written in Spanish and English which the majority of the detainees speak. For others, assistance is provided through the facility certified interpreter program or use of the language line. Detainees place their requests in a locked box. The requests are picked up each morning by medical staff and then triaged by the shift supervising RN. A reply is returned to the detainee the same day. Detainees with urgent concerns can notify the unit manager or officer and are seen immediately. Documentation in ICE detainee medical records confirmed prompt response to each sick call request.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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

Components	Rating	Remarks (1000 Char Max)
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 are on duty 24 hours a day, seven days a week and are expected to respond to an emergency within four minutes. There are three emergency carts throughout the facility to decrease response time. Each cart is well stocked and contains oxygen, an automated external defibrillator (AED), a first aid kit, suction equipment and a gurney with a backboard. Emergency treatment is provided, emergency medical services (EMS) are summoned, the on-call physician is notified and transportation to an outside medical facility will be available as determined appropriate.
30. The plan includes an on-call provider.	Meets Standard	There is always a physician on call for medical emergencies, a dentist for dental emergencies and a psychiatrist for mental health emergencies.
31. The plan includes a list of telephone numbers for local ambulances and hospital services.	Meets Standard	The 911 system is used to activate immediate EMS response. A list of telephone numbers for local ambulances and hospitals is posted throughout the medical department.
32. The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.	Meets Standard	Policy instructs staff on how to safely and securely arrange emergency health care services for a detainee.
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	A review of the detention and medical staff training curriculum verified that all staff are trained during orientation and annually in first aid and cardiopulmonary resuscitation (CPR), in responding to health-related emergencies within four minutes and in the use of an AED.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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

Components	Rating	Remarks (1000 Char Max)
34. Where staff are used to distribute medication, a health care provider properly trains these officers.	N/A	Only medical staff distribute medication.
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	Medications are stored, inventoried, dispensed and administered in accordance with sound standards and facility needs for safety and security.
36. (MANDATORY) Each facility has written policy and procedures for the management of pharmaceuticals that include: <ul style="list-style-type: none"> • A formulary of all prescription and nonprescription medicines stocked or routinely procured from outside sources. • A method for obtaining medicines not on the formulary. • Prescription practices, including requirements that medications are prescribed only when clinically indicated and that prescription are reviewed before being renewed. • Procurement, receipt, distribution, storage, dispensing, administration, and disposal of medications. • Secure storage and perpetual inventory of all controlled substances (DEA Schedule II-V), syringes, and needles. 	Meets Standard	Policies for the management of pharmaceuticals outline prescription practices, procurement, distribution, storage, dispensing, administration and disposal of medications. A formulary is maintained, and there are procedures for obtaining non-formulary medications. Storage and inventorying of Drug Enforcement Administration (DEA) Schedule II-V controlled substances, syringes and needles are also addressed. A spot check of these inventories verified their accuracy.
37. All pharmaceuticals are stored in a secure area with the following features: <ul style="list-style-type: none"> • A secure perimeter; • Access limited to authorized medical staff (never detainees); • Solid walls from floor to ceiling and a solid ceiling; • A solid core entrance door with a high security lock (with no other access); and • A secure medication storage area. 	Meets Standard	The pharmacy has a secure perimeter with access limited to (b)(7)e (b)(7)e The keys must be signed out from the control room. The walls are of solid concrete construction from floor to true ceiling, with one solid door. Medication is stored in medication carts and in locked cabinets with shelves within the pharmacy. There is a secure medication storage area within the pharmacy for DEA Schedule II-V controlled substances.

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

PART 4 – 22. MEDICAL CARE (Key: V)		
This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.		
Components	Rating	Remarks (1000 Char Max)
<p>38. In SPCs and CDFs, the pharmacy has a locking pass-through window.</p> <ul style="list-style-type: none"> Administration and management in accordance with state and federal law. Supervision by properly licensed personnel. Administration of medications by personnel properly trained and under the supervision of the health services administrator, or equivalent. Accountability for administering or distributing medications in a timely manner and according to physician orders. 	Meets Standard	Supervision of the pharmacy is by an offsite registered pharmacist who performs quarterly audits. Medications are administered by LPNs and certified medical assistants (CMAs) using secure medication carts and under the supervision of the HSA. Medications are delivered in a timely manner and according to physician orders. This was confirmed by observation and an interview with the physician's assistant. The pharmacy has a secure pass-through window; however, it is not use for medication administration.
<p>39. Distribution of medication is in accordance with specific instructions and procedures established by the health care provider. Written records of all medication given to detainees are maintained.</p>	Meets Standard	Observation revealed that medication is distributed in accordance with established policy and procedures. All medications are recorded on a Medication Administration Record in the detainee's electronic medical record at the time of medication administration.
<p>40. Medication may not be delivered or administered by detainees.</p> <ul style="list-style-type: none"> In facilities that are medically staffed 24 hours a day, the health care provider distributes medication. In facilities that are not medically staffed 24 hours a day, medication may be distributed by detention officers, who have received proper training by the health care provider, only when medication must be delivered at a specific time when medical staff are not on duty. 	Meets Standard	No medications are delivered by detainees. Medical staff is on site 24 hours a day. Only health care staff administer medication to detainees.
<p>41. The facility maintains documentation of the training given any officer required to distribute medication, and the officer has available for reference the training syllabus or other guide or protocol provided by the health authority.</p>	N/A	Security officers do not distribute medication at this facility.
<p>42. The Warden/Facility receives notification that a detainee that has special medical needs.</p>	Meets Standard	The warden receives notification of a detainee with special needs through the HSA and participates in the monthly meetings of the special needs committee.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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

Components	Rating	Remarks (1000 Char Max)
43. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	Meets Standard	Procedures are in place addressing examinations by independent medical service providers and experts.
<p>44. (MANDATORY) Each facility has a written plan (or plans) that address the management of infectious and communicable diseases, including prevention, education, identification, surveillance, immunization (when applicable), treatment, follow-up, isolation (when indicated), and reporting to local, state, and federal agencies. Plans include:</p> <ul style="list-style-type: none"> • Coordination with public health authorities; • Ongoing education for staff and detainees; • Control, treatment, and prevention strategies; • Protection of individual confidentiality; • Media relations; • Management of tuberculosis, hepatitis A, B, and C, HIV infection, avian influenza, and • Reporting communicable diseases to local and/or state health departments in accordance with local and state regulations. 	Meets Standard	The infection control plan includes all aspects of infection control and communicable disease from prevention and education through diagnosis, treatment and reporting. The infectious disease manager is a LPN whose duties include surveillance, follow-up, reporting to local, state and federal agencies, managing detainees with latent tuberculosis, coordinating with international agencies the continuity of TB treatment upon a detainee's release from custody and providing health education on Hepatitis A, B, and C, HIV infection, influenza and varicella. All media inquiries are referred to the ICE Field Office.
45. Detainees diagnosed with a communicable disease are isolated according to local medical operating procedures.	Meets Standard	Per infection control policy, detainees diagnosed with or suspected of having a contagious communicable disease will be isolated from the general population. Those with an airborne communicable disease such as TB are placed in one of the four negative pressure cells. Otherwise, they are placed in one of the other observation cells.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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

Components	Rating	Remarks (1000 Char Max)
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	All detainees are processed at an adjacent ICE facility before admission to this facility. The pre-admission processing includes screening, per digital x-ray, for TB. Upon admission to this facility, detainees are screened for symptoms of active TB and are given a TB skin test, unless contraindicated. If the skin test is positive, the infectious disease nurse will attempt to obtain the results of the chest x-ray. If the results are not available, or if medically indicated, another chest x-ray is taken. Health records of 20 ICE detainees confirmed a TB test is consistently administered at the intake health screening.
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 who are symptomatic for TB or have x-ray results suggesting active TB are immediately housed in one of the four negative pressure isolation rooms until cleared by medical staff to enter the general population. If a negative pressure room is unavailable, offsite arrangements will be made in consultation with ICE.
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	Transportation for routine or scheduled outside health care services is provided by ICE. Emergency transportation is by a local ambulance company and is accessed through the 911 system. Medical summaries are provided for these appointments and placed in an envelope with the detainee's name and A-number and marked confidential. In an emergency, information may need to be faxed or communicated telephonically.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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

Components	Rating	Remarks (1000 Char Max)
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	Treatment plans for detainees who require close, chronic or convalescent medical supervision are prepared by qualified medical, dental or mental health providers. Completed plans were observed in ICE detainee medical records.
50. (MANDATORY) Female detainees have access to pregnancy testing and pregnancy management services that include routine high-risk prenatal care, addiction management, comprehensive counseling and assistance, nutrition, and postpartum follow-up.	N/A	This facility does not house female ICE detainees.
51. (MANDATORY) Detainees with chronic conditions (such as hypertension and diabetes) will receive periodic care and treatment that includes monitoring of medications, laboratory testing, and chronic care clinics, and others will be scheduled for periodic routine medical examinations, as determined by the health authority	Meets Standard	Detainees with chronic conditions are tracked on a computerized system that ensures detainees are regularly scheduled for medication evaluations, laboratory testing, physical exams, outside consults if deemed necessary for their conditions and chronic care clinics. Chronically ill detainees are seen by a mid-level provider or physician every 30-90 days, as verified by a medical records review.
52. The Facility Administrator, or other designated staff will be notified in writing of any detainees whose special medical or mental health needs requiring special consideration in such matters as housing, transfer, or transportation.	Meets Standard	A special needs population report is printed weekly for the warden by the RN assigned to track the special needs detainees. ICE is notified directly by the HSA regarding any detainee requiring special consideration or a transfer hold.
53. Detainees will have access to emergency and specified routine dental care provided under direction and supervision of a licensed dentist.	Meets Standard	Medical staffing includes a full-time and a part-time dentist and dental assistant. Access to routine and emergent dental care meets the needs for the detainees. A dentist is on call for after-hours emergencies.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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

Components	Rating	Remarks (1000 Char Max)
54. (MANDATORY) Detainees with mental health problems will be referred to a mental health provider as needed for detection, diagnosis, treatment, and stabilization to prevent psychiatric deterioration while confined.	Meets Standard	Mental health staff include (b)(7)e full-time licensed mental health providers and a psychiatrist for 20 hours a week. Detainees with mental health needs are referred to these providers for evaluation, diagnosis, treatment and management.
55. Crisis intervention services are available for detainees who experience acute mental health episodes.	Meets Standard	During clinic hours, on-duty mental health staff provide crisis intervention. After hours, the shift supervising RN would do the initial intervention and place a call to the on-call psychiatrist. Four mental health observation rooms are available as needed. In the event of an emergent mental health crisis beyond the scope of the medical unit, emergency community resources would be used.
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 exams are conducted in private. There are no female ICE detainees at this facility.
57. (MANDATORY) Any detainee referred for mental health treatment receives a comprehensive evaluation by a licensed mental health provider within 14 days of the referral.	Meets Standard	Detainees referred for mental health treatment receive a comprehensive evaluation by a licensed mental health provider within 14 days or sooner if it is an urgent or emergent request. Review of the medical records of ICE detainees confirmed this.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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

Components	Rating	Remarks (1000 Char Max)
<p>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:</p> <ul style="list-style-type: none"> • The conditions under which restraints may be applied; • The types of restraints to be used; • How a detainee in restraints is to be monitored; • The length of time restraints are to be applied; • Requirements for documentation, including efforts to use less restrictive alternatives; and • After-incident review. • The medical authority or mental health provider completes a Post-Restraints Observation Report form DIHS-867 or similar form. 	Meets Standard	Per policy, restraints for medical or mental health purposes are authorized only by a qualified health care provider who specifies the conditions for use, type of restraint, duration, and monitoring and documenting of the restraint use. Policy also requires an after-incident review and appropriate documentation. According to the mental health provider, in practice a detainee would be transferred to another facility if there was any indication the detainee's mental health condition was deteriorating to the point that restraints would be needed. No such restraints have been used on detainees in the past twelve months or in the past four years.
<p>59. (MANDATORY) Involuntary administration of psychotropic medications to detainees complies with applicable laws and regulations and the authorizing physician or psychiatrist will:</p> <ul style="list-style-type: none"> • Specify the duration of therapy; • Obtain an order authorizing the administration of the drug from a Federal District Court. • Document that less restrictive intervention options have been exercised without success; • Detail how the medication is to be administered; • Monitor the detainee for adverse reactions and side effects; and • Prepare treatment plans for less restrictive alternatives as soon as possible. 	Meets Standard	Procedures require facility staff to notify ICE when forced medication is considered. Policy requires obtaining a federal court order and an order from an authorizing physician that specifies the duration of therapy, documentation that less restrictive interventions have been exercised without success, the route of administration, instructions for monitoring and for adverse reactions and a treatment plan for less restrictive alternatives. ICE is responsible for obtaining the court order. Per the HSA and a licensed mental health provider, no detainees have been considered for involuntary psychotropic medication in the past twelve months.

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

PART 4 – 22. MEDICAL CARE (Key: V)		
This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.		
Components	Rating	Remarks (1000 Char Max)
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	All detainees receive a dental screening exam by the dentist within 14 days of arrival. A review of 20 ICE detainee medical records confirmed completion of the screenings within the 14 days.
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	The HSA and the facility administrator determined the content, number, location and use protocols of first aid kits. Health care staff perform daily inspections and replace missing items when the tamper seal is broken or as items are used.
62. An automatic external defibrillator should be available for use at the facility.	Meets Standard	The facility has three AEDs which are checked and maintained per policy.
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	Per policy, ICE would be consulted prior to the start of any forced treatment except in a medical emergency.
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 warden and HSA meet quarterly. The meeting minutes were available for review.
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	Biohazard waste is placed in Occupational Safety and Health Administration (OSHA) approved containers, which when full are moved to a larger storage container in a locked biohazardous waste storage room. The receptacles are then removed and disposed of by Stericycle, a biohazard waste management company, on a weekly basis. Dental instruments are sterilized after each use.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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

Components	Rating	Remarks (1000 Char Max)
66. (MANDATORY) The health authority will implement a system of internal review and quality assurance.	Meets Standard	The facility has a performance improvement program which provides a system of internal review and quality assurance. An RN is assigned the duties of quality control and assurance. Clinical indicators currently being audited are 14-day physicals, signed consent forms, intake screening times, 14-day comprehensive mental health screens, sick call response time, chronic care referrals, outside referral treatment follow-up and suicide-watch documentation. There are monthly meetings, and the system is reviewed annually by the medical director.

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 standard's rating was based on review of policies and procedures, 20 detainee medical records and the detainee handbook, on observation of the medical unit, detainee housing units and several intake screenings, and on interviews with the HSA, the nursing supervisor and other medical staff, an Immigration Enforcement Agent, the training officer, human resources staff, the investigative services sergeant and detention staff. No unresolved medical issues were found through this process.

The main medical unit houses the medical staff offices, mental health services, medical records, a two-chair dental office, two exam rooms, two provider offices, two nurse's sick call rooms, a lab, the pharmacy and an x-ray room. There are two satellite clinics, one of which is used only for ICE detainees. There is sufficient space and equipment for treatment of ICE detainees. The staffing plan contains a full complement of licensed medical professionals to meet the medical, mental health and dental needs of the detainees. Review of 20 detainee medical records indicate intake screening, TB testing, mental health exams, dental screens and 14-day assessments/physical exams are being done in a timely manner. Detainees requesting medical care through sick call are normally seen by a nurse within 24 to 48 hours, and if needed by a physician or mid-level provider, within three to five days or less if urgent. Detainees with chronic illnesses are followed appropriately and referrals are made as necessary. ICE detainees are not required to pay for medical services.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

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

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

Components	Rating	Remarks (1000 Char Max)
1. There is a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items. The supply of these items exceeds the minimum required for the number of detainees.	Meets Standard	Policy establishes procedure for regular issuance and exchange of clothing, bedding, linens, towels and personal hygiene items. The supply of these items far exceeds the minimum required for the number of detainees.
2. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive, at a minimum: <ul style="list-style-type: none"> One uniform shirt and one pair of uniform pants or one jumpsuit. One pair of socks. One pair of underwear (daily change). One pair of facility-issued footwear. 	Meets Standard	All new detainees are issued three pairs of undergarments, two sets of outer garments, one pair of shoes and one coat.
3. Additional clothing is available for changing weather conditions and as is seasonally appropriate.	Meets Standard	Policy addresses allowance for extra clothing as weather conditions change.
4. New detainees are issued clean bedding, linens and towels, at a minimum: <ul style="list-style-type: none"> One mattress One blanket Two sheets One pillow One pillowcase One towel Additional blankets, based on local weather conditions. 	Meets Standard	When admitted, detainees receive one towel, two sheets, one blanket, one pillowcase and one mattress and pillow or one mattress with a built-in pillow. Additional blankets are available for cold weather.
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	At admission, detainees receive one comb, one toothbrush, toothpaste and deodorant. Body soap, shampoo and lotion are available in the housing unit. All items are available from the housing coordinator to replenish supplies at no cost to the detainee.

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

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

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

Components	Rating	Remarks (1000 Char Max)
<p>6. Toilet facilities are:</p> <ul style="list-style-type: none"> Clean Adequate in number and can be used without staff assistance 24 hours per day when detainees are confined in their cells or sleeping areas. <p>ACA Expected Practice 4-ALDF-4B-08 requires that toilets be provided at a minimum ratio of one for every 12 male detainees or one for every 8 female detainees. For males, urinals may be substituted for up to one-half of the toilets.</p>	Meets Standard	The detainee housing unit is divided into eight cells; six cells hold twelve bunks and two cells hold two bunks. Each cell contains a clean functioning toilet and sink. At the time of the inspection there were 73 detainees housed in the unit.
<p>7. Bathing facilities are:</p> <ul style="list-style-type: none"> Clean Operable with temperatures between 100 and 120 degrees Fahrenheit. <p>ACA Expected Practice 4-ALDF-4B-08 requires one washbasin for every 12 detainees.</p> <p>ACA Expected Practice 4-ALDF-4B-09 requires a minimum ratio of one shower for every 12 detainees.</p>	Meets Standard	The ICE detainee unit has eight showers and housed 73 detainees during the inspection. The showers were clean, and the water temperature was 100 degrees. One shower was found to have very low water pressure; the ICE officer submitted a work order for repair of the shower.
<p>8. Detainees with disabilities are provided adequate facilities, support, and assistance needed for self-care and personal hygiene.</p>	Meets Standard	Detainees with special needs are followed closely by the quality assurance nurse and are provided adequate support and facilities as appropriate for their needs.
<p>9. Detainees are provided clean clothing, linen and towels.</p> <ul style="list-style-type: none"> Socks and undergarments - daily. Outer garments - twice weekly. Sheets - weekly. Towels - weekly. Pillowcases - weekly. 	Meets Standard	Per the posted schedule, socks, underwear, towels, pillowcases and sheets are laundered three times per week. Outer garments are laundered two times a week and blankets, once a week.
<p>10. Food service detainee volunteer workers are permitted to exchange outer garments daily.</p>	Meets Standard	Non-ICE detainee food service workers are permitted to exchange their outer garments each day.
<p>11. Volunteer detainee workers are permitted to exchanges of outer garments more frequently.</p>	Meets Standard	Non-ICE detainee volunteer workers may exchange their outer garments more frequently.

PART 4 – 23. PERSONAL HYGIENE – Reviewer Summary

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

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

PART 4 – 23. PERSONAL HYGIENE – Reviewer Summary

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

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

The standard's rating was based on review of policy and procedures, the handbook and the laundry schedule, and on detainee and facility and ICE staff interviews. Observation revealed the detainees are housed in a clean and sanitary environment and are able to maintain good personal hygiene through clean bathing facilities and the issuance and exchange of clean clothing and linen.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

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

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

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

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

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

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

Components	Rating	Remarks (1000 Char Max)
<p>4. Training prepares staff to:</p> <ul style="list-style-type: none"> • Effective methods for identifying the warning signs and symptoms of impending suicidal behavior, • Demographic, cultural, and precipitating factors of suicidal behavior, • Responding to suicidal and depressed detainees, • Effective communication between correctional and health care personnel, • Necessary referral procedures, • Housing observation and suicide-watch level procedures, • Follow-up monitoring of detainees who have already attempted suicide, and • Reporting and written documentation procedures. 	Meets Standard	<p>Policy requires that the suicide prevention and intervention training address signs of impending suicidal behavior, demographic and cultural factors which may precipitate suicidal behavior, effective interdisciplinary communication and referral procedures, suicide watch procedures, follow-up monitoring of detainees who have already attempted suicide and reporting and written documentation procedures. Review of the suicide prevention and intervention training curriculum and the web-based required annual training confirmed the training addresses each of these topics.</p>
<p>5. A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process.</p> <ul style="list-style-type: none"> • Screening does not occur later than one working day after the detainee's arrival. • Documentation exists that "specially trained officers" have completed training in accordance with a syllabus approved by the medical authority. 	Meets Standard	<p>All detainees are screened for suicide potential as part of the intake health screening performed by a nurse. As confirmed per a review of 20 ICE detainee medical records, the screening is consistently completed within twelve hours of a detainee's arrival and before he is assigned to a housing unit.</p>
<p>6. Written procedures contain when and how to refer at-risk detainees to medical staff and procedures are followed.</p>	Meets Standard	<p>Policy provides procedures on how to refer at risk detainees to medical and mental health staff.</p>
<p>7. Written procedures include returning a previously suicidal detainee to the general population, upon written authorization of the clinical director or appropriate health care professional.</p>	Meets Standard	<p>Written procedures allow for the psychiatrist or a licensed mental health provider to return a previously suicidal detainee to general population.</p>
<p>8. The facility has a designated isolation room for evaluation and treatment.</p>	Meets Standard	<p>Four isolation rooms in the medical unit are used for suicide watches.</p>
<p>9. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.</p>	Meets Standard	<p>The isolation rooms contain no small structures or items that could be used in a suicide attempt.</p>

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

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

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

Components	Rating	Remarks (1000 Char Max)
10. Medical staff have approved the room for this purpose.	Meets Standard	The health services administrator (HSA) and mental health staff confirmed they have approved the cells.
11. Staff observe and document the status of a suicide-watch detainee at least once every 15 minutes/constant observation.	Meets Standard	Per policy, staff observe and document the status of a detainee on suicide watch at least every fifteen minutes.
12. At facilities with twenty-four-hour medical staff, observation of imminently suicidal detainees by medical or detention staff shall occur no less than every 15 minutes. The Clinical Director (CD) may recommend constant direct supervision. If a detainee is clinically evaluated and determined to be at risk for suicide, medical staff shall document the status of the detainee in the medical record at least every two hours, unless otherwise directed by the CD.	Meets Standard	The facility has 24-hour medical coverage. All suicide watches involve constant observation until the detainee is evaluated by mental health staff. Medical staff document the status of the detainee at least every two hours.
13. In CDFs or IGSAs, and/or at facilities where there is not twenty-four hour medical staff, the facility administrator shall report to ICE/DRO any detainee who has been identified as suicidal. ICE/DRO, shall consult with the CD or designated medical authority for immediate evaluation (with constant observation until evaluation), or for transfer to a local psychiatric facility or emergency room by ambulance	Meets Standard	Per policy, ICE is notified of any ICE detainee identified as suicidal and of the care being provided.
14. Every completed suicide and serious suicide attempt shall be subject to a mortality review process. A critical incident debriefing shall be provided to all affected staff and detainees.	Meets Standard	Per available documentation, a mortality review is conducted and critical debriefing and counseling are provided after any suicide or serious suicide attempt.

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

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

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

The standard's rating was determined by a review of policy, medical records, training curriculum, staff training rosters and suicide watch check lists, by an inspection of the suicide watch cell, by observation of mental health intake screening and by interviews with the HSA and mental health staff. Facility mental health staff consists of three full-time licensed mental health providers and a psychiatrist who is on site 20 hours a week and on call when not on site. Nursing staff perform the initial mental health screen at intake and refer to mental health any detainees with any past history of mental illness or suicidal ideation. The licensed mental health providers complete a comprehensive evaluation within 14 days. Documentation in the medical records of 20 detainees confirmed these evaluations were usually completed within three days. As there were no ICE detainee suicides or serious suicide attempts, medical documentation on detainees involved in such events was not available for review.

One suicide and three suicide attempts involving non-ICE detainees were reported since the last inspection. Information on these incidents was obtained from incident reports and interviews with mental health staff.

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

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

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

A 41 year old male non-ICE detainee admitted to the facility 07/21/2011 was found lying on his bunk covered in blood on 10/02/2011. A medical emergency was called and a 911 call was placed at 07:00 a.m. Medical staff responded and provided cardiopulmonary resuscitation (CPR) until the ambulance arrived at 07:08 a.m. The Florence Fire Department EMS staff assessed the detainee and declared the detainee deceased. The Florence Police Department, Florence Crime Scene Investigators and Pinal County Coroner were notified. A razor was found near his upper torso and a one to two inch wound was found on his right neck. The cause of death was determined to be suicide. Previous to this event, there were no indicators of suicidal behavior. The intake mental health screen and a comprehensive mental health exam performed by a licensed mental health provider several days after his admission were both negative.

A 48 year old male non-ICE detainee attempted suicide by jumping off the upper tier in the housing unit on 04/15/2012. He sustained injuries requiring emergency services and hospitalization, and he was placed on constant suicide watch and followed by mental health staff when he returned. Intake mental health and medical screening was negative, as was the 14 day comprehensive mental health exam.

A 19 year old male non-ICE detainee attempted suicide on 02/01/2012. He was discovered hanging in his cell by an officer. The detainee was cut down and immediately began breathing. Medical staff provided on-site treatment and the detainee was transported by ambulance to the local emergency room for evaluation of possible injuries. A suicide note was found in his cell. He was placed on constant suicide watch upon return and followed by mental health staff. Intake mental health and medical screening and the 14-day comprehensive mental health exam were negative.

A 29 year old male non-ICE detainee attempted suicide by cutting his neck with a razor. He was making noise in his cell and was found to have some blood on his mouth and a three inch wound on his right neck. He was sent by ambulance to the local emergency room for wound repair, placed on constant suicide watch upon his return and followed by mental health staff. Intake mental health and medical screening and the 14-day comprehensive mental health exam were negative.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

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

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
1. Detainees, who are chronically or terminally ill, are transferred to an appropriate off-site medical facility.	Meets Standard	Chronically or terminally ill detainees are transferred to an appropriate medical or detention facility.
2. The facility or appropriate ICE office promptly notifies the next-of-kin of the detainee's: medical condition. <ul style="list-style-type: none"> The detainee's location. The visiting hours and rules at that location. 	Meets Standard	Next of kin notifications are made by ICE following receipt of notification of the detainee's medical condition from the health services administrator (HSA).
3. There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives. <ul style="list-style-type: none"> These guidelines include instructions for detainees who wish to have a living will. These guidelines provide the detainee the opportunity to have a private attorney prepare the documents, at the detainee's expense. 	Meets Standard	Policy on Advanced Directives, Living Wills and Do Not Resuscitate (DNR) orders addresses the guidelines for preparation of a living will and provides the detainee the opportunity to have a private attorney prepare the documents at the detainee's expense.
4. There is a policy addressing "Do Not Resuscitate Orders"	Meets Standard	Policy addresses DNR orders.
5. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation.	Meets Standard	Policy states a detainee would receive maximal therapeutic efforts short of resuscitation.
6. The facility notifies ICE/DRO Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSA's, this notification is made through the local ICE representative.	Meets Standard	In this IGSA facility, notification of a DNR order would be made by the HSA to ICE staff.
7. The facility has written procedures to address the issues of organ donation by detainees.	Meets Standard	Policy addresses organ donation by detainees.
8. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in custody.	Meets Standard	In the event of a detainee death, ICE is notified. Policy requires ICE to make the other notifications as required.

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

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

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

Standard N/A

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

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

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)

As there have been no ICE detainee deaths in this facility in the past twelve months, the inspector was unable to determine if the practices of the facility fully comply with the standard. The standard's rating was based on a review of policies, procedures and forms, and on interviews with the HSA and ICE staff. Policy and procedures for appropriately responding to the death of an ICE detainee are in place. In the past 12 months, there was one non-ICE detainee death by suicide.

Overall Rating: Meets Standard

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

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

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

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

Section V ACTIVITIES

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

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

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL (Key: Z)		
This Detention Standard ensures that detainees will be able to correspond with their families, the community, legal representatives, government offices, and consular officials consistent with the safe and orderly operation of the facility.		
Components	Rating	Remarks (1000 Char Max)
1. The facility has written policy and procedures concerning correspondence and other mail. The rules for correspondence and other mail are posted in each housing or common area or provided to each detainee via a detainee handbook.	Meets Standard	Correspondence and other mail procedures are posted in the detainee housing unit and listed in the handbook.
2. The facility provides key information in English, Spanish, and other languages spoken by a significant number of detainees.	Meets Standard	
3. Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	Meets Standard	Incoming mail is distributed on the day of its receipt. Mail is only received Monday through Friday.
4. Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	Meets Standard	Outgoing mail is delivered to the post office on the day of its pick-up. Mail is only picked up in the housing units Monday through Friday.
5. Staff maintain a logbook-recording acceptance of priority, priority overnight, and certified mail delivered to the facility for a detainee.	Meets Standard	All certified, registered and/or priority mail is logged in upon receipt and signed for by the addressee at delivery.
6. Staff do not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized in writing by the Facility Administrator or equivalent for prevailing security reasons.	Does Not Meet Standard	Policy authorizes and practice confirms that staff open and inspect incoming general correspondence and other mail without the detainee present.
7. Staff do not read incoming general correspondence without the Facility Administrator's prior approval.	Meets Standard	Policy states that all incoming general correspondence is subject to being read, in part or in full. According to the assistant warden of programs, reasonable suspicion must be present before such action is initiated.
8. Staff do not inspect incoming Special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.	Meets Standard	
9. Staff are prohibited from reading or copying incoming and outgoing Special Correspondence without the detainee present.	Meets Standard	

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

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL (Key: Z)		
This Detention Standard ensures that detainees will be able to correspond with their families, the community, legal representatives, government offices, and consular officials consistent with the safe and orderly operation of the facility.		
Components	Rating	Remarks (1000 Char Max)
10. Staff are only authorized to inspect outgoing correspondence or other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity.	Meets Standard	Policy outlines conditions for inspecting outgoing correspondence or other mail without the detainee present. Reasonable suspicion must be present before such action is initiated.
11. Correspondence to a politician or to the media is processed as Special Correspondence and is not read or copied.	Meets Standard	
12. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	Meets Standard	The sender and addressee of rejected incoming mail are provided written notification of the action by the mail room supervisor.
13. The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	Meets Standard	
14. Staff maintain a written record of every item removed from detainee mail.	Meets Standard	
15. The Facility Administrator or designee monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	Meets Standard	The chief of security is the designee for monitoring the handling of contraband. Activity is documented and records were 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	Cash removed from detainee correspondence is forwarded to the business office for crediting to the detainee account. All transactions to a detainee account generate a receipt, which is provided to the detainee. Alleged discrepancies are investigated.
17. Original identity documents (for example, passports, and birth certificates) are immediately removed and forwarded to ICE staff for placement in the A-files.	Meets Standard	
18. Staff provide the detainee a copy of his or her identity document(s) upon request.	Meets Standard	Detainees may have their identity documents, if ICE approves.
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	The facility does not place limitations on indigent detainees' outgoing mail/correspondence or packages.

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

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

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

Components	Rating	Remarks (1000 Char Max)
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	Weekly commissary privileges are available to detainees. No restrictions are placed on spending.
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.	Meets Standard	
24. Detainees have access to outside publications.	Meets Standard	

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

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

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

Review of policy, interviews with the assistant warden of programs and quality assurance office staff, review of log books and interviews with detainees revealed that detainees are able to correspond with family, friends, community agencies and legal/ government representatives through an established mail processing system.

Overall Rating: Meets Standard

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

Completion Date: 09/27/2012

Reviewer Signature (for printed form submission):

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

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

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
1. The Field Office Director considers and approves, on a case-by-case basis, trips to an immediate family member's: <ul style="list-style-type: none"> Funeral Deathbed 	N/A	
2. The facility recognizes as "immediate family member" a parent (including stepparent or foster parent), brother, sister, child, and spouse (including common-law spouse).	N/A	
3. The CDF/IGSA facility notifies ICE of all detainee requests for non-medical escorts.	N/A	
4. The detainee's Deportation Officer reviews the file before forwarding a detainee's request, with recommendation, to the approving official. Each recommendation addresses the individual's suitability for travel, e.g., the kind of supervision required.	N/A	
5. Detainees who require overnight housing are placed in approved IGSA facilities.	N/A	
6. Each escort detail includes at least (b)(7)(e) officers.	N/A	
7. The detainee remains under constant, direct visual supervision of escorting staff.	N/A	
8. Escorting officers report unexpected situations to the originating facility as a matter of procedure and the ranking supervisor on duty has the authority to issue instructions for completion of the trip.	N/A	
9. Escorting officers have the discretion to increase or decrease minimum restraints in accordance with written instruction, procedures and classification level of the detainee.	N/A	
10. Escort officers do not accept gifts/gratuities from a detainee, detainee's relative or friend for any reason.	N/A	

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

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

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
11. Escort officers ensure that detainees: <ul style="list-style-type: none"> Conduct themselves in a manner that does not bring discredit to ICE/DRO. Do not violate federal, state, or local laws. Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants. Do not arrange to visit family or friends unless approved before the trip. Make no unauthorized phone calls. Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return to the facility. 	N/A	
12. The facility routinely subjects a detainee returning from an escorted trip to a search, urinalysis, breathalyzer, etc.	N/A	
13. Standard procedure requires the immediate return to the facility of any detainee who violates trip rules.	N/A	
14. The Field Office Director is the approving official for all non-medical escorted trips.	N/A	
15. Facility procedures comply with the following ICE Standards: <ul style="list-style-type: none"> Transportation (Land Transportation Restraints applied strictly in accordance with the Use of Force Standard. 	N/A	

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

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

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

All escorted trips for non-medical emergencies are handled by ICE.

Overall Rating: N/A

Reviewer Name (Printed):

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

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

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

Components	Rating	Remarks (1000 Char Max)
1. The Field Office Director or Facility Administrator considers detainee marriage requests on a case-by-case basis.	Meets Standard	Policy requires that the warden consider all detainee marriage requests on a case-by-case basis, and notify and consult the Assistant Field Office Director (AFOD). The AFOD will approve or deny the request.
2. The Field Office Director reviews every marriage request rejected by a Facility Administrator or IGSA. Rejections are documented.	Meets Standard	The AFOD makes the decision to approve or deny all marriage requests.
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	
5. The Facility Administrator provides a written copy of his or her decision to the detainee and his or her legal representative.	Meets Standard	ICE staff generate all notifications to the detainee and his legal representative regarding the decision to deny or approve the marriage request.
6. When permission is denied, the Facility Administrator states the basis for his or her decision along with instructions on how the detainee can file an appeal.	Meets Standard	ICE staff generate all notifications to the detainee and his legal representative regarding a denial. Detainees are instructed on how to file an appeal of the decision.
7. The Facility Administrator provides the detainee with a place and time to make wedding arrangements.	Meets Standard	If a marriage is approved, the detainee would be transferred to the Florence Service Processing Center where the ceremony would be held. The detainee would be returned to this facility at the conclusion of the wedding.
8. The detainee handbook explains the marriage request process.	Meets Standard	
9. In SPCs the Facility Administrator or highest ranking ICE official on-site is the only officer authorized to approve a request to marry.	N/A	This is an IGSA facility. The AFOD makes the decision to approve or deny all marriage requests.

PART 5 – 28. MARRIAGE REQUESTS – Reviewer Summary

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

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

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)*

Interviews with an ICE Immigration Enforcement Agent indicated that all required action related to detainee marriages are performed by ICE. Since the last inspection, there have been no requests for marriage.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

PART 5 – 29. RECREATION (Key: AC)

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
1. The Facility provides: <ul style="list-style-type: none"> An indoor recreation program. An outdoor recreation program. 	Meets Standard	The facility provides indoor recreation in each of the housing units. Outdoor recreation is accommodated through the use of nine large outdoor recreation areas and twenty individual outdoor recreation areas for the special housing unit.
2. A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.	Does Not Meet Standard	The facility does not have a recreation specialist or assistant recreation specialist. The total facility count during the inspection averaged 3013 detainees.
3. Regular maintenance keeps recreational facilities and equipment in good condition.	Meets Standard	
4. The recreational specialist or trained equivalent supervises detainee recreation workers.	N/A	Detainees are not assigned to the recreation department.
5. The recreational specialist or trainee equivalent oversees recreation programs for Special Management Unit and special-needs detainees.	Meets Standard	There is no recreation specialist position. The unit manager tailors the recreation programs for the Special Management Unit. The day to day supervision is performed by trained officers assigned to the unit.
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	Meets Standard	Dayroom activities include board games, playing cards, puzzles, bingo and watching television.
7. Outside activities are restricted to limited-contact sports.	Meets Standard	Detainees can participate in soccer, basketball and cardiovascular exercises in the outside recreation areas.
8. Each detainee has the opportunity to participate in daily recreation.	Meets Standard	Detainees can participate in recreational activities seven days a week.
9. Detainees have access to recreation activities outside the housing units for at least one hour daily.	Meets Standard	
10. Staff check all items for damage and condition when equipment is returned.	Meets Standard	Policy requires staff to check the condition of recreation equipment when it is returned.

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

PART 5 – 29. RECREATION (Key: AC)

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
11. Staff conduct searches of recreation areas before and after use.	Meets Standard	
12. Recreation areas are under constant staff supervision.	Meets Standard	A staff member provides constant supervision of detainees using the recreation areas. The recreation areas are also monitored by camera.
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.	Meets Standard	
15. Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his or her recreation privileges.	Meets Standard	If the facility uses the loss of recreation privileges as a disciplinary sanction, the disciplinary report would inform the detainee as to why the privilege is being revoked.
16. Special programs or religious activities are available to detainees.	Meets Standard	
17. All volunteers have completed an orientation program with documentation required before entering a secure portion of the facility where detainees are present.	N/A	The recreation department does not use volunteers.
18. Visitors, relatives or friends of detainees are not allowed to serve as volunteers.	N/A	The recreation department does not use volunteers.
19. If the facility has no outside recreation, are detainees considered for transfer after six months?	N/A	The facility offers outdoor recreation.
20. If yes, written procedures ensure timely review of all eligible detainees.	N/A	The facility offers outdoor recreation.
21. Case officers make written transfer recommendations about every six-month detainee to the Facility Administrator.	N/A	The facility offers outdoor recreation.
22. The Facility Administrator documents all detainee-transfer decisions, whether yes or no.	N/A	The facility offers outdoor recreation.
23. The detainee's written decision for or against an offered transfer documented in his or her A-file.	N/A	The facility offers outdoor recreation.
24. Staff notify the detainee's legal representative of his or her decision to accept/decline a transfer.	N/A	The facility offers outdoor recreation.
25. If no recreation is available, the ICE Field Office routinely review transfer eligibility for all detainees after 60 days.	N/A	The facility offers outdoor recreation.

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

PART 5 – 29. RECREATION (Key: AC)

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
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	The facility offers outdoor recreation.
27. The detainee's legal representative is notified of the detainee's/Facility Administrator's decision.	N/A	The facility offers outdoor recreation.

PART 5 - 29. RECREATION – Reviewer Summary

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

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

The recreation program consists of indoor and outdoor recreation activities. Each housing unit allows for dayroom activities in the common areas of the unit. There are also nine large outdoor recreation areas used for general population detainees and twenty individual outdoor recreation areas for detainees housed in the special housing unit. A review of policies, interviews with staff and observation of the recreation programs indicated that recreation is provided under conditions of security that protect the safety and welfare of the detainees. The facility does not have a recreation specialist or assistant recreation specialist.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

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

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

Components	Rating	Remarks (1000 Char Max)
1. Detainees are allowed to engage in religious services. When available, these services are provided in major languages spoken within the facility.	Meets Standard	Religious services are provided in English and Spanish which are the prevalent languages spoken in the facility.
2. Space is available for detainees to participate in religious services.	Meets Standard	The facility uses space in the housing units and recreation areas to accommodate group religious services.
3. The facility allows detainees to observe the major "holy days" of their religious faith. • List any exceptions.	Meets Standard	
4. The facility accommodates recognized holy-day observances by: • Providing special meals, consistent with dietary restrictions. • Honoring fasting requirements. • Facilitating religious services. • Allowing activity restrictions.	Meets Standard	Holy-day observances are accommodated by providing special meals, honoring fasting requirements, providing special religious services and allowing for activity restrictions congruent with the tenets of any approved, recognized religion.
5. Each detainee is allowed religious items in his/her immediate possession; refer to the Funds and Personal Property Standard.	Meets Standard	Detainees are authorized to possess soft cover religious texts, prayer rugs, prayer beads, religious headgear, plastic medallions and rosaries.
6. Volunteer's credentials are checked and verified before allowing participation in detainee programs.	Meets Standard	All volunteers are checked and verified prior to their participation in any detainee programs.
7. Members of faiths not represented by clergy may request to present their own services within security allowances.	Meets Standard	
8. Detainees in the Special Management Unit may participate in religious practices unless otherwise documented for the safety and security of the facility.	Meets Standard	The facility chaplain conducts pastoral rounds of the special housing 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)

Policy allows for religious services to detainees through the use of a facility chaplain and community volunteer clergy. Religious services are conducted in the housing units or recreation yards. The volunteer clergy are scrutinized as to their theological qualifications and are required to pass a background investigation to be eligible for participation within the program. Policy has been developed to provide all detainees with reasonable and equitable opportunities to participate in the practices of their faith. Interviews with the facility chaplain and a review of policy indicated that the religious needs of detainees are being addressed.

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

PART 5 – 30. RELIGIOUS PRACTICES – Reviewer Summary

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

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

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

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

Components	Rating	Remarks (1000 Char Max)
1. Detainees are allowed to access to telephones during established facility waking hours, including access to TTY devices.	Meets Standard	Telephones are available for use between 6:00 a.m. and 10:30 p.m. daily.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	Meets Standard	The handbooks address telephone access policy.
3. Notification explaining the facilities telephone policy is in the Detainee Handbook.	Meets Standard	
4. Access rules, including updated telephone and consulate number, are posted in housing units.	Meets Standard	Pro bono and consulate numbers and telephone procedures are posted in the detainee housing unit.
5. The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	Meets Standard	
6. Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	Meets Standard	Telephones to detainees are available at a ratio of 1:19.
7. Telephones are inspected daily by facility staff to ensure that they are in good working order.	Meets Standard	Telephones are inspected for good working order by housing unit officers at the start of each shift.
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	Per facility and ICE staff, SECURUS, the detainee telephone contractor, is prompt in responding to and repairing telephone problems.
11. Detainees are afforded a reasonable degree of privacy for legal phone calls.	Meets Standard	
12. A procedure exists to assist a detainee who is having trouble placing a confidential call.	Meets Standard	Confidential calls are placed from the privacy of an unmonitored staff office telephone.
13. The facility provides the detainees with the ability to make non-collect (special access) calls.	Meets Standard	Special access (non-collect) calls are placed from the privacy of an unmonitored staff office telephone.
14. Special Access calls are at no charge to the detainees.	Meets Standard	

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

PART 5 – 31. TELEPHONE ACCESS (Key: AE)		
This Detention Standard ensures that detainees may maintain ties with their families and others in the community by providing them reasonable and equitable access to telephone services.		
Components	Rating	Remarks (1000 Char Max)
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 available at no cost to detainees.
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	If approved by ICE, a detainee can speak with an immediate family member detained in another facility. These calls are placed from the privacy of a staff office telephone.
18. All telephone restrictions are documented.	Meets Standard	In the event telephone restrictions are imposed, they would be documented. There have been no such restrictions since the last inspection.
19. The facility has a system for taking and delivering emergency detainee telephone messages.	Meets Standard	
20. Phone call messages are given to detainees as soon as possible.	Meets Standard	Emergency messages are promptly delivered in the privacy of a staff office.
21. Detainees are allowed to return emergency phone calls as soon as possible.	Meets Standard	
22. Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	Meets Standard	
23. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	Meets Standard	
24. Detainees in disciplinary segregation are allowed phone calls for family emergencies.	Meets Standard	
25. Detainees in administrative segregation and protective custody are afforded the same telephone privileges as those in general population.	Meets Standard	A portable telephone kiosk is available for use by detainees in administrative segregation and protective custody.
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	Notification that telephone calls are monitored is mounted on the wall above each telephone and is on each telephone. Special access call are not monitored.

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

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

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

Components	Rating	Remarks (1000 Char Max)
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	Contact was established with the Office of Inspector General (OIG) by dialing the pre-programmed number from a detainee housing unit telephone on 09/26/2012.
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	The Immigration Enforcement Agent (IEA) performs weekly telephone checks and documents these on a liaison checklist.

PART 5 – 31. TELEPHONE ACCESS – Reviewer Summary

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

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

Review of policy, an interview with the IEA, inspection of detainee housing unit telephones, interviews with detainees, use of a housing unit telephone to establish contact with the OIG and review of IEA liaison checklists and housing unit log book entries indicated detainees can maintain contact with their family and the community through an accessible and monitored telephone service.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

PART 5 – 32. VISITATION (Key: AF)		
This Detention Standard ensures that detainees will be able to maintain ties through visitation with their families, the community, legal representatives, and consular officials, within the constraints of safety, security, and good order.		
Components	Rating	Remarks (1000 Char Max)
1. There is a written visitation procedure, schedule, and hours for general visitation.	Meets Standard	
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	Detainees are allowed three two-hour visits per week.
3. The visitation schedule and rules are available to the public.	Meets Standard	The visitation schedule and rules are posted in the visitor entrance area. Written copies are available to the public upon request.
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	The visitation schedule, rules and hours are posted in the visitor entrance area in English and Spanish. Interpretation for other languages is provided with assistance from outside resources.
6. A general visitation log is maintained.	Meets Standard	
7. Detainees are permitted to retain authorized personal property items specified in the standard.	Meets Standard	Personal property items for detainees may be allowed with approval of a shift supervisor and ICE.
8. A visitor dress code is available to the public.	Meets Standard	The visitor dress code is posted in the visitor entrance area.
9. Visitors are searched and identified according to standard requirements.	Meets Standard	
10. The requirement on visitation by minors is complied with.	Meets Standard	
11. At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, within the first 30 days.	N/A	The facility allows visits by minors.
12. After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.	N/A	The facility allows visits by minors.
13. Anytime a visit is denied, to either a general population detainee or SMU detainee, the denial is documented.	Meets Standard	In the event a visit is denied, it would be documented. There have been no denials of detainee visits since the last inspection.
14. Detainees in special housing are afforded visitation.	Meets Standard	
15. Legal visitation is available seven (7) days a week, including holidays.	Meets Standard	

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

PART 5 – 32. VISITATION (Key: AF)		
This Detention Standard ensures that detainees will be able to maintain ties through visitation with their families, the community, legal representatives, and consular officials, within the constraints of safety, security, and good order.		
Components	Rating	Remarks (1000 Char Max)
16. On regular business days legal visitation hours provide for a minimum of eight (8) hours per day and a minimum of four hours per day on weekends and holidays.	Meets Standard	The visiting schedule is 8:00 a.m. to 4:30 p.m. daily. Attorney visits may extend beyond these normal hours.
17. On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	Meets Standard	
18. Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	Meets Standard	Attorney visits are conducted in a non-partitioned environment.
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	Legal service provider credentials are validated prior to their entry.
22. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	Meets Standard	
23. SPCs and CDFs shall submit written requests for tours from domestic or international organizations and associated with detention issues to the appropriate Field Office Director for approval.	Meets Standard	The facility is operated by the Corrections Corporation of America (CCA). Tour requests from outside groups must be in writing and must be approved by ICE and U.S. Marshal Service representatives and by CCA corporate staff.
24. Provisions for NGO visitation as stated in the Detention Standards are complied with.	Meets Standard	
25. Law enforcement officials, requesting to visit with a detainee, are referred to the ICE Facility Administrator for approval.	Meets Standard	Law enforcement officials requesting visitation with a detainee need prior approval from the warden and ICE.
26. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the Facility Administrator or ICE Field Office.	Meets Standard	Former detainees or aliens in proceedings may be allowed to visit pending approval by the warden and ICE.

PART 5 – 32. VISITATION – Reviewer Summary

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

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

PART 5 – 32. VISITATION – Reviewer Summary

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

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

Review of policy, inspection of the visitor entrance area and its postings, interviews with visitor entrance area officers and supervisors, review of visitor log book entries and observation of detainee visits indicated detainees are able to maintain ties to their family, the community, legal representatives and government officials through an established visitation program.

Overall Rating: Meets Standard

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

Completion Date: 09/27/2012

Reviewer Signature (for printed form submission):

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

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

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
1. The facility has a voluntary work program.	N/A	
2. Detainee housekeeping meets acceptable levels of neatness, cleanliness and sanitation standards.	N/A	
3. At IGSA's detainees are never allowed to work outside the secure perimeter. SPCs and CDFs detainees classified as level 1 have the opportunity to participate in special details outside the secure perimeter under direct supervision.	N/A	
4. Written procedures govern selection of detainees for the Voluntary Work Program. <ul style="list-style-type: none"> The same procedures apply for replacement workers as for "new" workers. Staff follow written procedures. 	N/A	
5. Where possible, physically and mentally challenged detainees participate in the program.	N/A	
6. The facility complies with work-hour requirements for detainees, not exceeding: <ul style="list-style-type: none"> Eight hours a day. Forty hours a week. 	N/A	
7. Detainee volunteers ordinarily work according to a fixed schedule.	N/A	
8. If a detainee is removed from a work detail, staff place the written justification for the action in the detainee's detention file.	N/A	
9. Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	N/A	
10. The voluntary work program meets: <ul style="list-style-type: none"> OSHA standards NFPA standards ACA standards 	N/A	
11. Medical staff screen and formally certifies detainee food service volunteers; <ul style="list-style-type: none"> Before the assignment begins As a matter of written procedure 	N/A	
12. Detainees receive safety equipment/ training sufficient for the assignment	N/A	

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)
13. Proper procedure is followed when an ICE detainee is injured on the job.	N/A	

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)*

ICE detainees are not authorized to work at this facility.

Overall Rating: N/A

Reviewer Name (Printed)

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

Section VI JUSTICE

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

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

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

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

Components	Rating	Remarks (1000 Char Max)
1. The facility has a detainee handbook. Each detainee receives a copy of the local handbook and the ICE National Detainee Handbook.	Meets Standard	Each ICE detainee receives two site-specific handbooks, one for all new admissions and the other for ICE detainees only. Detainees also receive a copy of the National Detainee Handbook provided by ICE staff prior to the detainees' arrival at this facility. Detainees sign a receipt for all three handbooks. All of these handbooks are available in English and Spanish.
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	The handbook is written and translated into Spanish. Spanish is the most prevalent language spoken by the non-English speaking detainees.
3. A procedure for requesting interpretive services for essential communication has been developed.	Meets Standard	Interpretive services are available, and the handbook directs detainees to request these services through the case manager.
4. Orientation materials are read to detainees who cannot read, or they are provided the material via audio or video recordings.	Meets Standard	
5. The handbook supplements the facility orientation video where one is provided.	Meets Standard	The handbook supplements the "Know Your Rights" video. There is no facility-specific orientation video.
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 as necessary and the changes are disseminated to staff via email and to detainees via postings on the detainee housing unit bulletin boards.
7. There is an annual review of the handbook by a designated committee or staff member.	Meets Standard	A committee meets to determine what changes to the handbook are required. The quality assurance manager is responsible for the actual updating of the handbook.

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

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

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

Components	Rating	Remarks (1000 Char Max)
8. The detainee handbook address the following issues: <ul style="list-style-type: none"> Personal Items permitted to be retained by the detainee. Initial issue of clothes, bedding and personal hygiene items. How to access care. 	Meets Standard	All of the bulleted requirements of this component are included in the handbook.
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	
11. The handbook states when a medical examination will be conducted.	Meets Standard	A health appraisal by the facility doctor will be conducted within 14 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	All of the requirements listed in this component are included in the facility handbook. Clothes washing and drying are not authorized in the housing units.
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	
15. The handbook describes barber hours and hair cutting restrictions.	Meets Standard	
16. The handbook describes; the telephone policy, debit card procedures, direct and frees calls; locations of telephones; policy when telephone demand is high; and policy and procedures for emergency phone calls.	Meets Standard	The handbook delineates the procedures for using debit cards and making direct and free calls, as well as the policy for using the phones. The locations of the phones, procedures for emergency phone calls and the length of time allowed for each phone call is also described.
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	There are no vending machines available for detainee use.

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

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

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

Components	Rating	Remarks (1000 Char Max)
19. The handbook describes the detainee voluntary work program.	Meets Standard	The handbook describes the detainee voluntary work program; however, ICE detainees in this facility are not authorized to participate in this program.
20. The handbook describes the library location and hours of operation and law library procedures and schedules.	Meets Standard	
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	The handbook advises detainees that the visitation hours, pro bono list, group legal presentations list and signup sheet is located in the housing units.
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	
25. The handbook describes the correspondence policy and procedures.	Meets Standard	
26. The handbook describes the detainee disciplinary policy and procedures, including: <ul style="list-style-type: none"> Prohibited acts and severity scale sanctions. Time limits in the Disciplinary Process. Summary of Disciplinary Process. 	Meets Standard	All of the bulleted requirements are included in the handbook.
27. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> Informal (if used) and formal grievance procedures; The appeals process; In CDFs procedures for filing an appeal of a grievance with ICE. Staff/detainee availability to help during the grievance process. Guarantee against staff retaliation for filing/pursuing a grievance. How to file a complaint about officer misconduct with the Department of Homeland Security. 	Meets Standard	All of the bulleted requirements are included in the handbook. Although this facility is not a CDF, the handbook includes the procedures for filing an appeal of a grievance with ICE.
28. The handbook describes the medical sick call procedures for general population and segregation.	Meets Standard	

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

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

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

Components	Rating	Remarks (1000 Char Max)
29. The handbook describes the facility recreation policy including: <ul style="list-style-type: none"> Outdoor recreation hours. Indoor recreation hours. In dorm leisure activities. Rules for television viewing. 	Meets Standard	All of the bulleted requirements are included in the handbook.
30. The handbook describes the detainee dress code for daily living; and work assignments and the meaning of color-coded uniforms.	Meets Standard	The handbook describes the detainee's daily dress code. Work uniforms are not discussed because ICE detainees are not authorized to have work assignments at this facility. Since the facility only houses security level one and two ICE detainees, all ICE detainees are dressed in green uniforms.
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	
33. Orientation materials are provided to illiterate detainees either orally or via audio/video tapes in a language they can understand.	Meets Standard	Orientation materials are presented to illiterate detainees orally. If there is a language barrier, the facility uses certified in-house staff or the language line translation system to provide interpretation services.

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)

Upon or prior to admission, every ICE detainee receives a copy of two site-specific handbooks and a copy of the ICE National Detainee Handbook. Handbooks are available in English or Spanish. The handbooks describe rules, programs, procedures and requirements for detainees during their detention. The handbooks include all the programs offered by the facility, ICE and outside groups. Interviews were conducted with staff and a review of handbook content was conducted.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

PART 6 – 35. GRIEVANCE SYSTEM (Key: AI)		
This Detention Standard protects detainees' rights and ensures they are treated fairly by providing a procedure by which they may file formal grievances and receive timely responses.		
Components	Rating	Remarks (1000 Char Max)
1. Detainees are informed about the facility's informal and formal grievance system.	Meets Standard	Detainees are issued a copy of the handbook which provides notice of the informal and formal grievance procedures. A copy of the grievance policy is also maintained in the detainee library and made available to any detainee who does not have access to the library.
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: <ul style="list-style-type: none"> Informal and formal grievance procedures; The appeals process and step-by-step procedures; Staff/detainee availability to help during the grievance process Guarantee against staff retaliation for filing/pursuing a grievance. How to file a complaint about officer misconduct with the Department of Justice. How to file an emergency grievance. 	Meets Standard	The handbook addresses all of the bulleted requirements of this component.
4. Written procedures provide for the informal resolution of oral grievances (Not mandatory). If yes, the detainee has up to five days within which to make his or her concern known to a member of the staff.	Meets Standard	The handbook delineates the procedures for the informal resolution of grievances. The facility allows a detainee up to seven days from the alleged incident to make his concern known to a staff member.
5. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. <ul style="list-style-type: none"> Detainees may seek help from other detainees or facility staff when preparing a grievance. Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary. 	Meets Standard	Policy requires that a detainee grievance committee convene within five working days of a detainee's grievance appeal. Policy also allows detainees to receive assistance from staff or other detainees in preparing grievances. ICE translation services are available to staff as a resource for assisting non-English speaking detainees. The facility also will provide staff assistance for disabled or illiterate detainees.

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

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

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

Components	Rating	Remarks (1000 Char Max)
6. Facility has written procedures for identifying and handling a time-sensitive emergency grievance.	Meets Standard	Policy explains emergency grievances and provides steps for staff to follow to ensure a timely response.
7. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	Meets Standard	All staff are trained to appropriately respond to emergency grievances. All staff receive training on the grievance policy during pre-service and in-service training.
8. Staff shall not harass, discipline, punish or otherwise retaliate against a detainee who files a complaint or grievance.	Meets Standard	
9. Procedures include maintaining a Detainee Grievance Log. <ul style="list-style-type: none"> If not, an alternative acceptable record keeping system is maintained. "Nuisance complains" are identified in the records. For quality control purposes, staff document nuisance complaints received but not filed. 	Meets Standard	The facility maintains an electronic grievance log. The log is designed with a series of codes to identify the types of complaint filed. There is a code for nuisance complaints.
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	Policy delineates the procedures to allow the warden to place a detainee on abuse status.
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	Policy requires that ICE receives a copy of all grievances filed by ICE detainees. The policy also specifically requires that any grievance which includes officer misconduct is forwarded to a higher official and 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	Policy requires that staff report any allegation of officer misconduct to a supervisor and to ICE staff.

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

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

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

Components	Rating	Remarks (1000 Char Max)
<p>14. In SPCs and CDFs, when a Detainee does not accept the grievance committee's decision, he/she files an appeal with the ICE Facility Administrator.</p> <ul style="list-style-type: none"> In all facilities written procedures cover detainee appeals and are included in the detainee handbook 	Meets Standard	In this IGSA facility, if a detainee does not accept the result of a grievance, he may file an appeal. A detainee grievance committee is then convened within five days to rule on the appeal. Policy requires that at least one member of the committee be an ICE staff member. The procedure for the appeal of a grievance is included in the handbook.
<p>15. In SPCs/CDFs, the detainee has a reasonable timeframe after the incident or informal-grievance outcome to file a formal grievance.</p>	Meets Standard	Detainees have five days after the informal grievance outcome to file a formal grievance.

PART 6 – 35. GRIEVANCE SYSTEM – Reviewer Summary

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

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

The facility has procedures in place to address detainee grievances in a timely manner. Policy ensures that every staff member knows how to identify emergency grievances and the procedures for expediting them. Interviews with staff, review of policy and a review of the facility grievance log indicated that the grievance program is in place and available if needed. ICE detainees have not filed any grievances with the facility in the past twelve months.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL (Key: AJ)		
This Detention Standard protects detainees' rights by ensuring their access to courts, counsel, and legal materials.		
Components	Rating	Remarks (1000 Char Max)
1. The facility provides a designated law library for detainee use.	Meets Standard	The detainee housing unit contains a dedicated room that serves as its 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. <ul style="list-style-type: none"> In lieu of/or in addition to the physical law library, ICE detainees have access to the Lexus Nexus electronic law library. 	Meets Standard	
3. If the Lexis/Nexis CD-ROM service alternative is used for the publications in Attachment A, the facility provides detainees sufficient: <ul style="list-style-type: none"> Operable computers and printers, in sufficient numbers in order to provide access Photocopiers, and Supplies for both. 	Meets Standard	The law library has two LexisNexis computer terminals, two copiers/printers and sufficient supplies to accommodate its users.
4. The library contains a sufficient number of chairs, is well lit and is reasonably isolated from noisy areas.	Meets Standard	
5. The law library is adequately equipped with typewriters, computers or both and has sufficient supplies for daily use by the detainees.	Meets Standard	
6. Detainees are provided with the means to save legal work in a private electronic format for future use.	Meets Standard	Detainees are allowed to copy and possess their legal materials in an electronic file format.
7. The facility subscribes to updating services where applicable and legal materials requiring updates are current.	Meets Standard	The Immigration Enforcement Agent (IEA) has the responsibility for installing updates to the LexisNexis system. The 09/17/2012 update has been installed on the law library computers.
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	
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	The IEA has the responsibility for keeping law library equipment in good working order and the LexisNexis software current.

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

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL (Key: AJ)		
This Detention Standard protects detainees' rights by ensuring their access to courts, counsel, and legal materials.		
Components	Rating	Remarks (1000 Char Max)
10. Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.	Meets Standard	Detainees are offered law library access more than five hours a day. Access does not interfere with recreation time. Law library use is infrequent. If use demands were to increase, detainees with pressing court deadlines would be given priority access.
11. Detainees may request material not currently in the law library. Each request is reviewed and where appropriate an acquisition request is initiated and timely pursued. Request for copies of court decisions are accommodated within 3 – 5 business days.	Meets Standard	Requests for outside legal materials not currently in the law library system are honored, with ICE approval. Requested materials will be provided as soon as the source allows.
12. The facility permits detainees to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	Meets Standard	
13. Staff ensure that illiterate or non-English-speaking detainees without legal representation receive more than access to English-language law books after indicating their need for help.	Meets Standard	Language lines and/or other community resources will be provided, as warranted, to assist in the preparation of detainee legal materials.
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	Detainees keep legal materials in paper and/or electronic format in their possession.
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.	Meets Standard	Detainees in administrative and disciplinary segregation have access to a portable LexisNexis computer system to assist them in the preparation of legal materials. There have been no denials of access to legal materials since the last inspection.
16. All denials of access to the law library fully documented.	Meets Standard	In the event access to the law library is denied, it would be documented. There have been no law library access denials since the last inspection.
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	In the event a detainee or group of detainees is denied access to the law library, ICE would be notified. There have been no such denials since the last inspection.

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

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

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

Components	Rating	Remarks (1000 Char Max)
18. Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	Meets Standard	
19. Indigent detainees are provided with free envelopes and stamps to mail related to legal matters.	Meets Standard	The facility does not place limitations on indigent detainees' outgoing mail/correspondence volume.

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

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

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

Review of policy, an interview with the IEA, inspection of the LexisNexis software update history and of the detainee law library room, and interviews with detainee housing unit line staff and supervisors and with the quality assurance manager revealed that detainee rights are protected by access to courts, counsel and legal materials through an established, accessible and current law library.

Overall Rating: Meets Standard

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

Completion Date: 09/27/2012

Reviewer Signature (for printed form submission):

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

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

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
1. The Field Office is responsive to requests by attorneys and accredited representatives for group presentations.	N/A	
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.	N/A	
3. The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.	N/A	
4. Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	N/A	
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.	N/A	
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.	N/A	
7. Detainees in segregation, unable to attend for security reasons may request separate sessions with presenters. Such requests are documented.	N/A	
8. Interpreters are admitted when necessary to assist attorneys and other legal representatives.	N/A	
9. Presenters are afforded a minimum of one hour to make the presentation and additional time to conduct a question-and-answer session.	N/A	
10. Staff permit presenters to distribute ICE/DRO-approved materials.	N/A	
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.	N/A	

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

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

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
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.	N/A	
13. The facility plays ICE/DRO-approved videotaped presentations on legal rights, at regular opportunities at the request of outside organizations.	N/A	
14. A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request	N/A	
15. The facility maintains equipment for viewing approved electronically formatted presentations.	N/A	

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)*

There have been no group legal rights presentations conducted at this facility since the last inspection.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

Section VII ADMINISTRATION & MANAGEMENT

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

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

PART 7 – 38. DETENTION FILES (Key: AL)		
This Detention Standard contributes to efficient and responsible facility management by maintaining for each detainee booked into a facility for more than 24 hours a file of all significant information about that person.		
Components	Rating	Remarks (1000 Char Max)
1. A Detention File is created for every new arrival whose stay will exceed 24 hours.	Meets Standard	
2. The detainee Detention File contains either originals or copies of documentation and forms generated during the admissions process.	Meets Standard	
3. The detainee's Detention File also contains documents generated during the detainee's custody. <ul style="list-style-type: none"> Special requests Any G-589s and/or I-77s or IGSA equivalent, closed-out during the detainee's stay Disciplinary forms/Segregation forms Grievances, complaints, and the disposition(s) of same 	Meets Standard	Detention files include all of the bulleted items listed in this component as well as other documentation generated during a detainee's stay.
4. The Detention Files are located and maintained in a secured area. If not the cabinets are lockable and distribution of the keys is limited to supervisors.	Meets Standard	Detention files are located in locked cabinets in a locked room inside a building accessible by a restricted key.
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 facility has a release procedure that assigns responsibility to staff for gathering release documentation.
6. The officer closing the Detention File makes a notation that the file is complete and ready to be archived.	Meets Standard	Closed files are initialed by record office staff to denote their readiness for archiving.
7. Staff make copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.	Meets Standard	
8. Appropriate staff have access to the Detention Files and other departmental requests are accommodated by making a request for the file. Each file is properly logged out and in by a representative of the responsible department.	Meets Standard	The record office has a list of staff authorized to access detention files. Those not on the list require shift supervisor or above approval prior to access. File access is logged out/in even if the file remains in the record office.
9. Electronic record-keeping systems and data are protected from unauthorized access.	Meets Standard	Electronic record-keeping systems are password-protected.
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	

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

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

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

Components	Rating	Remarks (1000 Char Max)
11. Electronic data on individual detainees is subject to the same Privacy Act regulations as the contents of traditional paper Detention Files and A-files.	Meets Standard	
12. The Facility Administrator or staff designate ensures that necessary equipment and supplies, including copier and copier supplies are available; all equipment is maintained in good working order and that equipment has the capacity to handle the volume of work.	Meets Standard	The record office supervisor is the designee assigned responsibility for maintaining copy equipment and sufficient supplies to address the demands made of the office.
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.	Meets Standard	Archived files are maintained on site for six years, and then destroyed by an independent shredding service.
15. Field Offices maintains detention files on detainees housed in IGSA Facilities as needed. These files are maintained for a minimum of 18 months.	Meets Standard	

PART 7 – 38. DETENTION FILES – Reviewer Summary

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

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

Review of detention files, inspection of the record office and file storage sites, an interview with the record office supervisor and review of detainee detention files revealed the files are created at intake, contain required documentation and are maintained in a controlled, secure area of the programs building.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

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

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

Components	Rating	Remarks (1000 Char Max)
1. The ICE/DRO Field Office Director approved all interviews by reporters, other news media representatives, academics and others not covered by the Detention Standard on Visitation.	Meets Standard	The Immigration Enforcement Agent (IEA) and the facility quality assurance manager reported that the ICE Field Office Director (FOD) addresses all media concerns regarding this facility's detainees.
2. All personal interviews are documented with the News Interview Authorization form (or equivalent) and filed in the detainee's A-file with a copy in the facility's Detention File.	Meets Standard	
3. The Field Office Director consulted with Headquarters before deciding to allow an interview with a detainee who was the center of a controversy, or special interest, or high profile case.	Meets Standard	The IEA stated the FOD follows ICE headquarters protocol for approving media interviews.
4. Signed released forms are obtained and retained in the detainee's a-file from any media representatives who photographed or recorded any detainee in any way that would individually identify him or her.	Meets Standard	
5. All press pools are organized according to the procedures in the Detention Standard. <ul style="list-style-type: none"> A press pool may be established when the Field Office Director and facility administrator determine that the volume of interview requests warrants such action. All media representatives with pending or requested, tours, or visits were notified that, effective immediately and until further notice, all media representatives must comply with the press pool guidelines established by the Field Office Director. All material generated from such a press pool is made available to all news media, without right of first publication or broadcast. 	Meets Standard	The IEA stated the FOD follows ICE headquarters protocol on press pool procedures.

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

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

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

An interview with the IEA and the quality assurance manager revealed facility staff are not involved in addressing the requirements of this standard. Corrections Corporation of America (facility operator) corporate staff and ICE are responsible for addressing/handling facility news media interviews, tours and press pool procedures.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

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

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

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

Reviewer Signature (for printed form submission):

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

PART 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 conducts an initial pre-service orientation training consisting of 80 hours for non-security staff and 160 hours for officers. Annual in-service training is conducted for all staff and is a minimum of 40 hours.
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 learning development manager has completed approximately 90 hours of training for trainer's courses.
4. Training is governed and guided by a training plan that is reviewed and approved annually by the facility administrator.	Meets Standard	The training plan is developed by the learning development manager and is reviewed and approved by December 15th of each year.
5. An accurate and complete record is maintained of all formal training activities in: <ul style="list-style-type: none"> Individual training folders, Other training records systems, and/or Electronic systems. 	Meets Standard	Training records are maintained by the training coordinator and are established for each employee. The training files are maintained in individual folders as well as in the electronic learning management system.

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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

Components	Rating	Remarks (1000 Char Max)
<p>6. Each new employee, contractor, and volunteer is provided an orientation prior to assuming duties. While tailored specifically for staff, contractors, and volunteers, the orientation programs include, at a minimum:</p> <ul style="list-style-type: none"> • Working conditions • Cultural diversity/understanding staff & detainees • Code of ethics • Personnel policy manual • Employees' rights and responsibilities • Drug-free Workplace • Health-related emergencies • Signs of Suicide risk and precautions • Suicide prevention and intervention • Hunger strikes • Use of Force • Keys and Locks • Overview of the criminal justice system • Tour of the facility • Facility goals and objectives • Facility organization • Staff rules and regulations • Sexual harassment/sexual misconduct awareness • Personnel policies • Program overview • Orientation and training on detainee handbook and detainee rights. • Requirement of special-needs detainees. • National Detention Standards 	Meets Standard	<p>All new employees, contractors and volunteers are provided an orientation course prior to assuming their duties. The orientation course covers all 23 course requirements listed in this component.</p>

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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

Components	Rating	Remarks (1000 Char Max)
<p>7. Clerical/support employees who have minimal detainee contact receive a minimum of:</p> <ul style="list-style-type: none"> • Working conditions • Cultural diversity/understanding staff & detainees • Code of ethics • Personnel policy manual • Employees' rights and responsibilities • Overview of the criminal justice system • Tour of the facility • Facility goals and objectives • Facility organization • Staff rules and regulations • Sexual harassment/sexual misconduct awareness • Personnel policies • Program overview • National Detention Standards. • Key and Lock Control. • Suicide risk and prevention. 	Meets Standard	All clerical and/or support staff receive training that covers all topics listed in this component.

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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

Components	Rating	Remarks (1000 Char Max)
<p>8. Professional and support employees (including contractors) who have regular or daily detainee contact will receive training on the following subjects, at a minimum:</p> <ul style="list-style-type: none"> • Security procedures and regulations • Code of Ethics • Health-related emergencies • Drug-free workplace • Supervision of detainees • Signs of suicide risk and hunger strike • Suicide precautions • Use-of-force regulations and tactics • Report writing • Detainee rules and regulations • Key control • Rights and responsibilities of detainees • Safety procedures • Emergency plan and procedures • Interpersonal relations • Social/cultural lifestyles of the detainee population • Cultural diversity/understanding staff & detainees • Communication skills • Cardiopulmonary resuscitation (CPR)/First aid • Counseling techniques • Sexual harassment/sexual misconduct awareness. • National Detention Standards. 	Meets Standard	Professional and support employees and contractors receive training that covers all topics listed in this component.

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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

Components	Rating	Remarks (1000 Char Max)
<p>9. Full-time health care employees receive at least 40 hours of formal orientation before undertaking their assignments. At a minimum, the orientation program includes:</p> <ul style="list-style-type: none"> • The purpose, goals, policies and procedures for the facility and parent agency security and contraband regulations • Key control; appropriate conduct with detainees • Responsibilities and rights of employees • Standard precautions • Occupational exposure • Personal protective equipment • Bio-hazardous waste disposal • Overview of the detention operations. • National Detention Standards. • Medical grievance procedures and protocol. • Requirement for special needs detainees. • Code of Ethics • Drug free workplace • Hostage situations and staff conduct if taken hostage. 	Meets Standard	<p>Full time health care employees receive a minimum of 40 hours of formal orientation before undertaking their assignments. The orientation training covers all topics listed in this component.</p>

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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

Components	Rating	Remarks (1000 Char Max)
<p>10. Security personnel (including contractors) will receive training on the following subjects, at a minimum:</p> <ul style="list-style-type: none"> • Security procedures and regulations • Supervision of detainees • Searches of detainees, housing units, and work areas • Signs of suicide risk, precaution, prevention and intervention. • Code of Ethics • Health-related emergencies • Drug-free workplace • Suicide precautions • Self-defense techniques • Use-of-force regulations and tactics • Report writing • Detainee rules and regulations • Key control • Rights and responsibilities of detainees • Safety procedures • Emergency plans and procedures • Interpersonal relations • Social/cultural lifestyles of the detainee population • Cultural diversity/understanding staff & detainees • Communication skills • Cardiopulmonary resuscitation (CPR)/first aid • Counseling techniques • Sexual abuse/assault awareness • National Detention Standards. 	Meets Standard	Security personnel, including contractors, receive training on all topics listed in this component.
<p>11. Situation Response Teams (SRTs) receive:</p> <ul style="list-style-type: none"> • Specialized training before undertaking their assignments. 	Meets Standard	The special on-site response team (SORT) members receive specialized training prior to being accepted as a team member. SORT also receives an additional eight hours of specialized training each month.
<p>12. Facility management and supervisory staff receive:</p> <ul style="list-style-type: none"> • Management and Supervisory training 	Meets Standard	All management and supervisory staff must complete the Corrections Corporation of America's Samburg Frontline Leadership Program.

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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

Components	Rating	Remarks (1000 Char Max)
13. (MANDATORY) Personnel authorized to use firearms receive training that covers their use, safety, and care and constraints on their use -- before being assigned to a post involving their possible use.	Meets Standard	Facility policy requires that all personnel authorized to use firearms receive training that covers their use before being assigned to the post. All officers receive 24 hours of pre-service and 16 hours of in-service firearms training.
14. (MANDATORY) All personnel authorized to use firearms demonstrate competency in their use at least annually.	Meets Standard	All officers receive training to verify firearms competency annually. (b)(7)e
15. (MANDATORY) Personnel authorized to use chemical agents receive training in the use of chemical agents and in the treatment of individuals exposed to a chemical agent before being assigned to a post involving their possible use.	Meets Standard	(b)(7)e
16. All staff receives orientation and annual training on the facility's drug-free workplace program. Typical contents are: <ul style="list-style-type: none"> 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	All staff receive pre-service and in-service training on the facility's drug free workplace program. The training covers all the bulleted topics listed 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	

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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

Components	Rating	Remarks (1000 Char Max)
<p>18. All staff are trained during orientation and annually thereafter, regarding the facility's code of ethics.</p> <p>Typical contents are:</p> <ul style="list-style-type: none"> • Staff, contractors, and volunteers prohibited from: • Using their official positions to secure privileges for themselves or others. • Engaging in activities that constitute a conflict of interest. • Accepting any gift or gratuity from, or engaging in personal business transactions with a detainee or a detainee's immediate family. • Acceptable behavior in the areas of campaigning, lobbying or political activities. 	Meets Standard	All staff receive pre-service and in-service training on the facility's code of ethics. Staff receive the training during their initial Human Resources course prior to the orientation course. In-service training is conducted annually. The training covers all the bulleted requirements listed in this component.
<p>19. New staff are required to acknowledge in writing that they have reviewed and understand facility work rules, ethics, regulations, conditions of employment, and related documents, and a copy of the signed acknowledgement is maintained in that person's personnel file.</p>	Meets Standard	
<p>20. (MANDATORY) All staff in frequent contact with detainees is trained at least annually to respond to health-related emergencies within four minutes. The training is provided by a responsible medical authority in cooperation with the facility administrator and includes:</p> <ul style="list-style-type: none"> • Recognizing of signs of potential health emergencies and the required responses. • Administering first aid and cardiopulmonary resuscitation (CPR). • Obtaining emergency medical assistance through the facility plan and its required procedures. • Recognizing signs and symptoms of mental illness, suicide risk, retardation, and chemical dependency. • The facility's established plan and procedures for providing emergency medical care including, when required, the safe and secure transfer of detainees for appropriate hospital or other medical services, including by ambulance when indicated. 	Meets Standard	Training on health-related emergencies is conducted by health services staff. The training is provided in pre-service and annual in-service training. The training covers all topics listed in this component.

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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

Components	Rating	Remarks (1000 Char Max)
<p>21. All staff in frequent contact with detainees are trained at least annually on the facility's Sexual Abuse and Assault Prevention and Intervention Program, to include:</p> <ul style="list-style-type: none"> Understanding that sexual abuse or assault is never an acceptable consequence of detention. Recognizing housing or other situations where sexual abuse or assault may occur. Recognizing the physical, behavioral, and emotional signs of sexual abuse or assault and ways to prevent such occurrences. Knowing how to report knowledge or suspicion of sexual abuse or assault and make intervention referrals in the facility's program. 	Meets Standard	All staff receive Prison Rape Elimination Act (PREA) training annually. The two-hour course covers all of the bulleted requirements listed in this component.
<p>22. (MANDATORY) All staff in frequent contact with detainees are trained at least annually on the facility's Suicide Prevention and Intervention Program, to include:</p> <ul style="list-style-type: none"> Identifying the warning signs and symptoms of impending suicidal behavior, Demographic, cultural, and precipitating factors of suicidal behavior, Responding to suicidal and depressed detainees, Communication between correctional and health care personnel, Referral procedures, Housing observation and suicide-watch level procedures, and Follow-up monitoring of detainees who have attempted suicide. 	Meets Standard	All staff are trained in pre-service and in-service training on the facility's suicide prevention and intervention program. The training covers all of the bulleted requirements listed in this component.
<p>23. All staff are trained during orientation and annually to recognize the signs of a hunger strike and on the procedures for referral for medical assessment.</p>	Meets Standard	
<p>24. All staff are trained in proper procedures for the care and handling of keys. Orientation training shall be accomplished before staff are issued keys, and key control shall be among the topics covered in annual training. Ordinarily, such training is done by the Security Officer or Key Control Officer.</p>	Meets Standard	Key control training is conducted by the facility's tool and key officer and the fire safety manager. The training is conducted in pre-service training, before staff are required to handle keys, and annually during in-service training.

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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

Components	Rating	Remarks (1000 Char Max)
<p>25. Through ongoing (at least annual) training, all detention facility staff are made aware of their responsibilities to control situations involving aggressive detainees. At a minimum, training shall include:</p> <ul style="list-style-type: none"> • The requirements of this Detention Standard • The use of force continuum • Communication techniques • Cultural diversity • Dealing with the mentally ill • Confrontation-avoidance techniques • Approved methods of self-defense • Force cell-move techniques • Communicable diseases, particularly precautions to be taken for use of force • Application of restraints (progressive and hard) • Reporting procedures. 	Meets Standard	All staff receive training on handling aggressive detainees. The training covers all of the bulleted requirements listed in this component.
<p>26. Employees are encouraged to continue their education and professional development through incentives such as salary enhancement, reimbursement of costs, and administrative leave.</p>	Meets Standard	Staff are reimbursed for the cost of obtaining ACA certification. Approximately 25 facility staff have been certified through this 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)

A review of policy, interviews with the facility staff and a review of individual training records indicated that the facility is training employees in their assigned duties by requiring that they receive initial and ongoing refresher training.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

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

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

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

Components	Rating	Remarks (1000 Char Max)
1. When a detainee is represented by legal counsel or a legal representative, and a G-28 has been filed, the representative of record is notified by the detainee's Deportation Officer within 24 hours of transfer. <ul style="list-style-type: none"> The notification is recorded in the detainee's file When the A-File is not available, notification is noted within ENFORCE. 	Meets Standard	
2. Notification includes the reason for the transfer and the location of the new facility,	Meets Standard	
3. The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	Meets Standard	
4. The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	Meets Standard	A Deportation Officer informs the attorney of record and the detainee of their responsibility to inform family of transfer details.
5. Facility policy mandates that: <ul style="list-style-type: none"> Times and transfer plans are never discussed with the detainee prior to transfer. The detainee is not notified of the transfer until immediately prior to departing the facility. The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 	Meets Standard	The facility adheres to ICE policy as ICE handles all detainee transfers. The facility prohibits advance notification of an impending transfer and denies telephone access and contact with the general population on the day of the transfer.
6. The detainee is provided with a completed Detainee Transfer Notification Form.	Meets Standard	
7. Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	Meets Standard	The facility uses ICE Form I-203 as its authorization to release detainees.
8. For medical transfers: <ul style="list-style-type: none"> The Division of Immigration Health Services (DIHS) Medical Director or designee approves the transfer. Medical transfers are coordinated through the local ICE/DRO office. A medical transfer summary is completed and accompanies the detainee. Detainee is issued a minimum of 7 days worth of prescription medications. 	Meets Standard	Procedure requires completion of the bulleted points listed in this component when a medical transfer occurs. There have been no medical transfers since the last inspection.
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	

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

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

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

Components	Rating	Remarks (1000 Char Max)
10. For medical transfers, transporting officers receive instructions regarding medical issues.	Meets Standard	Medical information is provided on a need-to-know basis.
11. Detainee's funds, valuables and property are returned and transferred with the detainee to his or her new location.	Meets Standard	Detainee funds and property are transferred with the detainee on the day of transfer.
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 protocol allows indigent detainees to make a free 3-minute telephone call to announce arrival at a new facility.
14. Meals are provided when transfers occur during normally schedule meal times.	Meets Standard	Sack meals are provided when transfer times conflict with scheduled meal times.
15. An A-File or work folder accompanies the detainee when transferred to a different Field Office or sub-office.	Meets Standard	A-files/work folders accompany the detainee on the day of transfer.
16. A-Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.	Meets Standard	In the event an A-file does not accompany the detainee on the day of transfer, it will be shipped overnight to the detainee's new jurisdiction.

PART 7 - 41. TRANSFER OF DETAINEES – Reviewer Summary

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

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

Review of facility practices and interviews with the quality assurance manager, the Immigration Enforcement Agent and the food service director revealed detainee transfers occur under supervision, with ICE authorization and within an established transportation network that protects the safety and security of person and property.

Overall Rating: Meets Standard

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

Completion Date: 9/27/2012

Reviewer Signature (for printed form submission):

DOCUMENT CHECK

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

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

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

A. Type of Facility Reviewed

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

B. Current Inspection

Type of Inspection
☐ Field Office ☒ HQ Inspection

Date[s] of Facility Review
09/25/2012 - 09/27/2012

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
Not Available

Previous Rating
☐ Meets Standards ☐ Does Not Meet Standards

D. Name and Location of Facility

Name
Central Arizona Detention Center
Address (Street and Name)
1155 North Pinal Parkway
City, State and Zip Code
Florence, Arizona 85132
County
Pinal
Name and Title of Facility Administrator
(Warden/OIC/Superintendent)
(b)(6), (b)(7)(c) Warden
Telephone # (Include Area Code)
520-868-6886 (b)(6), (b)(7)(c)
Field Office / Sub-Office (List Office with oversight responsibilities)
Phoenix, Arizona / Florence, Arizona
Distance from Field Office
50 miles / local

E. ICE Information

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

F. CDF/IGSA Information Only

Contract Number ODT-9-C-0001	Date of Contract or IGSA 10/01/2008
Basic Rates per Man-Day \$90.00	
Other Charges: (If None, Indicate N/A) N/A; ;	

Estimated Man-days Per Year
27,000

G. Accreditation Certificates

List all State or National Accreditation[s] received:
ACA, NCCHC
☐ 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 1994
Date Last Remodeled or Upgraded June, 2012
Date New Construction / Bedspace Added June, 2012
Future Construction Planned <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date: N/A
Current Bedspace 3555
Future Bedspace (# New Beds only) Number: N/A Date: N/A

J. Total Facility Population

Total Facility Intake for previous 12 months
19,333
Total ICE Mandays for Previous 12 months
26,480

K. Classification Level (ICE SPCs and CDFs Only)

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

L. Facility Capacity

	Rated	Operational	Emergency
Adult Male	2304	3555	3555
Adult Female	N/A	N/A	N/A
<input type="checkbox"/> Facility holds Juveniles Offenders 16 and older as Adults			

M. Average Daily Population

	ICE	USMS	Other
Adult Male	73	3038	0
Adult Female	0	0	0

N. Facility Staffing Level

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

Significant Incident Summary Worksheet

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

<i>Incidents</i>	<i>Description</i>	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault: Offenders on Offenders ¹	Types (Sexual ² , Physical, etc.)	5/P	11/P	7/P	6/P
	With Weapon	1	2	0	0
	Without Weapon	4	9	7	6
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	8/P	10/P	9/P	6/P
	With Weapon	1	4	2	0
	Without Weapon	7	6	7	6
Number of Forced Moves, incl. Forced Cell moves ³		8	9	5	4
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		11	18	15	12
Number of Times Special Reaction Team Deployed/Used		2	1	5	2
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
	Type (C=Chair, B=Bed, BB=Board, O=Other)	N/A	N/A	N/A	N/A
Number of Times Canines Used in Facility		8	12	9	10
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	3	0	0
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	4	6	3	3
	# Resolved in favor of Offender/Detainee	2	2	0	1
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	N/A	N/A	N/A	S
	Number	0	0	0	1
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	0	0	0	0
	# Psychiatric Cases referred for Outside Care	0	0	0	0

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

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

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

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

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

LCI Review Assurance Statement

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

Lead Compliance Inspector: (Print Name)	Signature
(b)(6), (b)(7)(c)	(b)(6), (b)(7)(c)
Title & Duty Location	Date
Lead Compliance Inspector, The Nakamoto Group, Inc.	09/27/2012

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

Recommended Rating:

☒ Meets Standards
☐ Does Not Meet Standards

Comments: The facility is operated by Corrections Corporation of America, a private contractor. It was built in 1994 and is located one hour southeast of Phoenix, Arizona on a 73 acre plot. The facility has a rated capacity of 2304 and houses U.S. Marshals Service and ICE detainees exclusively. The compound is connected by long linear hallways that intersect with nine housing units, two production kitchens, nine satellite food serving lines, nine laundry areas, nine recreation yards, nine multi-purpose rooms, two visiting areas, three medical units (one of which has a 12-bed infirmary), four segregation units, two master control rooms, a programs building, a commissary and various administrative and support offices.

The average length of stay for ICE detainees is 16 days. Interviews with detainees revealed no substantive concerns regarding food, medical care, ICE staff availability, staff treatment, living conditions, law library/telephone access, recreation or religious programs. The facility does have a canine unit; however, in accordance with policy, it is not used in the presence of detainees. (b)(7)e

(b)(7)e There is no medical co-pay system for detainees.

A copy of the last annual inspection report, and the dates and results of that inspection, were not available to the inspection team. On the Significant Incident Summary Worksheet, the data on assaults reflects those committed by non-ICE detainees. The seven non-ICE detainee on staff assaults with a weapon all involved use of either homemade knives (shanks) or the throwing of bodily fluids. There were no serious injuries resulting from any of these assault incidents.

There were no ICE detainee suicides or other deaths and no ICE detainee serious suicide attempts since the last inspection. One suicide and three suicide attempts involving non-ICE detainees were reported. Information on these incidents was obtained from incident reports and interviews with mental health staff.

A 41 year old male non-ICE detainee admitted to the facility 07/21/2011 was found lying on his bunk covered in blood on 10/02/2011. A medical emergency was called and a 911 call was placed at 07:00 a.m. Medical staff responded and provided cardiopulmonary resuscitation (CPR) until the ambulance arrived at 07:08 a.m. The Florence Fire Department EMS staff assessed the detainee and declared the detainee deceased. The Florence Police Department, Florence Crime Scene Investigators and Pinal County Coroner were notified. A razor was found near his upper torso and a one to two inch wound was found on his right neck. The cause of death was determined to be suicide. Previous to this event, there were no indicators of suicidal behavior. The intake mental health screen and a comprehensive mental health exam performed by a licensed mental health provider several days after his admission were both negative.

A 48 year old male non-ICE detainee attempted suicide by jumping off the upper tier in the housing unit on 04/15/2012. He sustained injuries requiring emergency services and hospitalization, and he was placed on constant suicide watch and followed by mental health staff when he returned. Intake mental health and medical screening was negative, as was the 14 day comprehensive mental health exam.

A 19 year old male non-ICE detainee attempted suicide on 02/01/2012. He was discovered hanging in his cell by an officer. The detainee was cut down and immediately began breathing. Medical staff provided on-site treatment and the detainee was transported by ambulance to the local emergency room for evaluation of possible injuries. A suicide note was found in his cell. He was placed on constant suicide watch upon return and followed by mental health staff. Intake mental health and medical screening and the 14-day comprehensive mental health exam were negative.

A 29 year old male non-ICE detainee attempted suicide by cutting his neck with a razor. He was making noise in his cell and was found to have some blood on his mouth and a three inch wound on his right neck. He was sent by ambulance to the local emergency room for wound repair, placed on constant suicide watch upon his return and followed by mental health staff. Intake mental health and medical screening and the 14-day comprehensive mental health exam were negative.