

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



U.S. Immigration
and Customs
Enforcement

MEMORANDUM FOR: John Longshore
Field Office Director
Denver Field Office

WAV -2

FROM:

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

Assistant Director for Custody Management

SUBJECT: Denver Contract Detention Facility Annual Review 2012

The annual review of the Denver Contract Detention Facility conducted on October 10-12 2012, in Aurora, Colorado has been received. A final rating of **Meets Standards** 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- (b)(6), (b)(7)(c)

cc: Official File

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

www.ice.gov

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: Denver Contract Detention Facility			Pre-Occupancy: <input type="checkbox"/>
Facility Type: CDF Intergovernmental Service Agreement (IGSA), ICE Service Processing Center (SPC), ICE Contract Detention Facility (CDF)			
Address:	3130 North Oakland Street		
City: Aurora	State: Colorado	Zip Code: 80010	
County: Adams			
CEO Name: (b)(6), (b)(7)(c)	CEO Title: Warden		
Review Information (Use following format for dates: mm/dd/yyyy)			
Start Date: 10/10/2012	End Date: 10/12/2012	Review Type: Headquarters	
Lead Name: (b)(6), (b)(7)(c)	Lead Title: LCI		
Review Document Issue Summary (See Document Check Section to Review/Update)			
Error(s) Found:	0	Items Not Rated:	0

ICE HQ USE ONLY: (DO NOT EDIT*)

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

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

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

Introduction to the G324A Over 72hour Facility Detention Inspection Worksheets

What is “Performance-Based”?

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

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

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

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

Worksheet Overview

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

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

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

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

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

Worksheet Completion

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

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

Outcome Measures Completion

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

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

Table of Contents

INTRODUCTION TO THE G324A OVER 72HOUR FACILITY DETENTION INSPECTION WORKSHEETS	2
WHAT IS “PERFORMANCE-BASED”?	2
WORKSHEET OVERVIEW	2
WORKSHEET COMPLETION	3
OUTCOME MEASURES COMPLETION	3
SECTION I: SAFETY	6
PART 1 – 1. EMERGENCY PLANS (KEY: A)	7
PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY (KEY: B)	10
PART 1 – 3. TRANSPORTATION (BY LAND) (KEY: C)	15
SECTION II SECURITY.....	19
PART 2 – 4. ADMISSION AND RELEASE (KEY: D)	20
PART 2 – 5. CLASSIFICATION SYSTEM (KEY: E)	22
PART 2 – 6. CONTRABAND (KEY: F)	24
PART 2 – 7. FACILITY SECURITY AND CONTROL (KEY: G)	26
PART 2 – 8. FUNDS AND PERSONAL PROPERTY (KEY: H)	30
PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES (KEY: I)	34
PART 2 – 10. KEY AND LOCK CONTROL (KEY: J)	37
PART 2 – 11. POPULATION COUNTS (KEY: K)	40
PART 2 – 12. POST ORDERS (KEY: L)	41
PART 2 – 13. SEARCHES OF DETAINEES (KEY: M)	43
PART 2 – 14. SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (KEY: N)	45
PART 2 – 15. SPECIAL MANAGEMENT UNITS (KEY: O)	48
PART 2 – 16. STAFF-DETAINEE COMMUNICATION (KEY: P)	58
PART 2 – 17. TOOL CONTROL (KEY: Q)	60
PART 2 – 18. USE OF FORCE AND RESTRAINTS (KEY: R)	64
SECTION III ORDER.....	68
PART 3 – 19. DISCIPLINARY SYSTEM (KEY: S)	69

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

SECTION IV CARE	72
PART 4 – 20. FOOD SERVICE (KEY: T).....	73
PART 4 – 21. HUNGER STRIKES (KEY: U)	79
PART 4 – 22. MEDICAL CARE (KEY: V).....	82
PART 4 – 23. PERSONAL HYGIENE (KEY: W)	96
PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION (KEY: X)	98
PART 4 – 25. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH (KEY: Y)	102
SECTION V ACTIVITIES	105
PART 5 – 26. CORRESPONDENCE AND OTHER MAIL (KEY: Z)	106
PART 5 – 27. ESCORTED TRIPS FOR NON-MEDICAL EMERGENCIES (KEY: AA)	109
PART 5 – 28. MARRIAGE REQUESTS (KEY: AB)	111
PART 5 – 29. RECREATION (KEY: AC).....	112
PART 5 – 30. RELIGIOUS PRACTICES (KEY: AD)	115
PART 5 – 31. TELEPHONE ACCESS (KEY: AE)	117
PART 5 – 32. VISITATION (KEY: AF)	120
PART 5 – 33. VOLUNTARY WORK PROGRAM (KEY: AG)	123
SECTION VI JUSTICE	126
PART 6 – 34. DETAINEE HANDBOOK (KEY: AH)	127
PART 6 – 35. GRIEVANCE SYSTEM (KEY: AI)	131
PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL (KEY: AJ)	135
PART 6 – 37. LEGAL RIGHTS GROUP PRESENTATIONS (KEY: AK)	138
SECTION VII ADMINISTRATION & MANAGEMENT	141
PART 7 – 38. DETENTION FILES (KEY: AL)	142
PART 7 – 39. NEWS MEDIA INTERVIEWS AND TOURS (KEY: AM)	144
PART 7 – 40. STAFF TRAINING (KEY: AN).....	145
PART 7 - 41. TRANSFER OF DETAINEES (KEY: AO)	155
DOCUMENT CHECK.....	157

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	Facility policy prohibits detainees or detainee groups from exercising control over other detainees. This is reinforced in employee training.
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	Facility procedures protect detainees from all of the abuses listed in this component.
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	Employee pre-service and annual training courses provide training in recognizing and preventing signs of detainee unrest.
4. Staff effectively disseminate information on facility climate, detainee attitudes, and moods to the Facility Administrator.	Meets Standard	The facility uses pre-shift meetings to disseminate information on the climate and mood of the detainee population.
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 is responsible for emergency plans and their implementation. Sufficient time is allotted for the development and implementation of the plans.
6. Each emergency plan is assigned a number and is strictly accounted for. A list identifying the location of each emergency plan is maintained by the Chief of Security or equivalent.	Meets Standard	All emergency plans are assigned a number, and a list with the location of each plan is maintained in the Chief of Security's office.
7. All staff receive training in the emergency plans during their orientation training as well as during their annual training.	Meets Standard	All staff receive pre-service and annual training in emergency plans.
8. The General Section of the emergency plans discusses alternate routes to the facility for staff to use in the event the primary route is impassable.	Meets Standard	

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)
9. The plans address the following issues: <ul style="list-style-type: none"> Confidentiality Accountability (copies and storage locations) Annual review procedures and schedule Revisions 	Meets Standard	The facility emergency procedures address each of the requirements listed in this component.
10. Contingency plans include a comprehensive general section with procedures applicable to most emergency situations, including procedures for handling detainees with special needs.	Meets Standard	
11. Contingency plans include a procedure for notification of neighbors residing in close proximity to the facility.	Meets Standard	If neighbors residing in close proximity to the facility must be notified, the facility uses the local police department's reverse 911 system.
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 local and federal 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	
14. All staff receive copies of the Facility Hostage policy and procedures.	Meets Standard	All staff receive, and must sign an acknowledgement form that they have received 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	
16. The facility maintains a list of translator services in the event one is needed during a hostage crisis.	Meets Standard	
17. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	Meets Standard	
18. The Food Service Department maintains at least 3- days' worth of emergency meals for staff and detainees.	Meets Standard	
19. Written plans illustrate locations of shut-off valves and switches for utilities (water, gas, electric).	Meets Standard	(b)(7)e

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

PART 1 – 1. EMERGENCY PLANS (Key: A)

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

Components	Rating	Remarks (1000 Char Max)
20. Written plans include a Staff Work Stoppage procedure. This procedure is available for limited supervisory review.	Meets Standard	
21. (MANDATORY) Written procedures cover: <ul style="list-style-type: none"> • Work/Food Strike • Fire • Environmental Hazard • Detainee Transportation System Emergency • ICE-wide Lockdown • Staff Work Stoppage • Disturbances • Escapes • Bomb Threats • Adverse Weather • Internal Searches • Facility Evacuation • Detainee Transportation System Plan • Hostages (Internal) • Civil Disturbances 	Meets Standard	The facility has written procedures dealing with each of the contingencies listed in this component.
22. The Emergency Plans specify a procedure for post-emergency debriefings and discussions.	Meets Standard	All emergency plans contain a procedure for post-emergency debriefings and discussions.

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)

Review of the facility emergency procedures and staff interviews confirmed that the facility has plans in place for emergencies which are likely to occur. Staff is well versed in monitoring the detainee climate within the facility. Facility management does not allow mistreatment of detainees by either staff or other detainees. Staff training and daily supervision of detainees is conducted in such a manner that detainees are protected from abuse. Security staff receive pre-service and annual training in the facility emergency plans. The plans are considered confidential and handled accordingly.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 10/12/2012

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	The facility utilizes a detailed system for storing, issuing and maintaining inventories of hazardous materials.
2. Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each area of the facility.	Meets Standard	Constant inventories for all flammable, toxic and caustic substances are maintained in each area of the facility where the substances are stored. These inventories were reviewed during the inspection.
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	The safety officer maintains the master Material Safety Data Sheet (MSDS) file in the safety office and ensures up-to-date MSDSs are available throughout the facility.
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	
5. The MSDS are readily accessible to staff and detainees in the work areas.	Meets Standard	MSDSs are readily available to all staff and are maintained in each area of the facility where the caustic, toxic or flammable substances are 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	
7. All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	Meets Standard	Flammable and combustible materials are stored in locked cabinets in the facility and used according to label recommendations.
8. Lighting fixtures and electrical equipment are installed in storage rooms and other hazardous areas and meet the National Electrical Code requirements.	Meets Standard	

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)
9. All toxic and caustic materials stored in their original containers in a secure area.	Meets Standard	Caustic and toxic materials were observed stored in their original containers in secure areas of the facility.
10. Excess flammables, combustibles, and toxic liquids are disposed of properly in accordance with MSDS.	Meets Standard	
11. Staff directly supervise and account for products with methyl alcohol. Staff receive a list of products containing diluted methyl alcohol, for example, shoe dye. All such products are clearly labeled as such. "Accountability" includes issuing such products to detainees in the smallest workable quantities.	N/A	The facility safety officer reported that products containing methyl alcohol are not used in the facility.
12. Every employee and detainee using flammable, toxic, or caustic materials receives advanced training, in accordance with OSHA standards, in their use, storage, and disposal.	Meets Standard	
13. (MANDATORY) The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association (NFPA) and the Occupational Safety and Health Administration (OSHA).	Meets Standard	The facility was constructed in 2009 and was built in compliance with applicable codes, standards and regulations.
14. A technically qualified staff member conducts fire and safety inspections.	Meets Standard	The safety officer conducts fire and safety inspections.
15. The Safety Office (or officer) maintains files of inspection reports, including corrective actions taken.	Meets Standard	Files of inspection reports are maintained in the Safety Office and were reviewed during the inspection. The inspection reports indicated when required corrective action was taken.
16. (MANDATORY) The facility has an approved fire prevention, control, and evacuation plan.	Meets Standard	The fire prevention, control and evacuation plan for the facility has been approved by the Aurora Fire Department. The review and approval by the local fire authority is completed annually.
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 adheres to the requirements listed in this component. Monthly fire inspections are conducted and documented, fire protection equipment was observed strategically located throughout the facility, exit signs and directional arrows are present throughout the facility and area-specific exit diagrams are conspicuously posted.

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

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY (Key: B)		
This Detention Standard protects detainees, staff, volunteers, and contractors from injury and illness by maintaining high facility standards of cleanliness and sanitation, safe work practices, and control of hazardous substances and equipment.		
Components	Rating	Remarks (1000 Char Max)
18. Fire drills are conducted and documented quarterly in all facility locations including the administrative area.	Meets Standard	Fire drills are conducted and documented quarterly on each shift in all areas of the facility.
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 a barbershop which contains the necessary equipment to meet sanitation requirements.
21. The sanitation standards are conspicuously posted in the barbershop.	Meets Standard	The sanitation standards are posted in the barbershop.
22. Written procedures regulate the handling and disposal of used needles and other sharp objects.	Meets Standard	
23. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	Meets Standard	
24. Standard cleaning practices include: <ul style="list-style-type: none"> Using specified equipment; cleansers; disinfectants and detergents. An established schedule of cleaning and follow-up inspections. 	Meets Standard	Standard cleaning procedures utilizing specified equipment, cleansers and detergents are utilized in the facility. The facility is cleaned in accordance with a schedule, and multiple inspections are conducted and documented daily.
25. Spill kits are readily available.	Meets Standard	Spill kits are maintained in the medical unit and are readily available for use in any area of the facility.
26. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	Meets Standard	Stericycle is contracted by the facility for the disposal of infectious/bio-hazardous waste.
27. Staff are trained to prevent contact with blood and other body fluids and written procedures are followed.	Meets Standard	
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	Pest control services are provided to the facility by a licensed pest control company. Services are provided on a monthly basis and on-call as needed.

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)
30. Drinking water and wastewater is routinely tested according to a fixed schedule.	Meets Standard	Drinking water and wastewater management is provided by the City of Aurora. The water is routinely tested in compliance with applicable local, state and federal requirements.
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 generators are tested every two weeks for one hour under load. Preventive maintenance is provided every six months by a service contractor.
32. The Facility appears clean and well maintained.	Meets Standard	
33. Hazardous material storage rooms meet the security and structural requirements of the standard. Storage cabinets meet the physical requirements specified in the standard.	Meets Standard	
34. The Health Services Administrator has implemented a program supporting a high level of environmental sanitation.	Meets Standard	
35. The Health Services Administrator conducts medical-facility inspections daily. Each inspection includes noting the condition of floors, walls, windows, horizontal surfaces, and equipment.	Meets Standard	Medical facility inspections are conducted and documented daily. The inspections include the areas noted in this component. The inspection documents were reviewed.
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 safety officer conducts special investigations and surveys of environmental health conditions. The safety officer also investigates all accidents involving staff and detainees.
37. The assigned staff member is responsible for developing and implementing policies, procedures, and guidelines for the environmental health program. These guidelines are intended to evaluate and eliminate or control as necessary, sources of injuries and modes of transmission of agents or vectors of communicable diseases.	Meets Standard	The safety officer is responsible for ensuring the facility is environmentally safe. The facility has policies, procedures and operating guidelines to evaluate, eliminate and control the sources of injuries and communicable diseases.

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

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

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

Components	Rating	Remarks (1000 Char Max)
<p>38. Environmental health and safety conditions shall be maintained at a level that meets recognized standards of safety and hygiene, including those from the:</p> <ul style="list-style-type: none"> American Correctional Association, Occupational Safety and Health Administration, Environmental Protection Agency, Food and Drug Administration, National Fire Protection Association's Life Safety Code, and National Center for Disease Control and Prevention. 	Meets Standard	

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

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

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

The rating for this standard was based upon a review of facility policies, interviews with the safety officer and a review of the documentation produced for each inspection. Storage areas for caustic, toxic and flammable substances were examined. Constant inventories are maintained and were found to be accurate. The facility is clean and well maintained.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 10/12/2012

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.	Meets Standard	
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.	Meets Standard	Every transportation officer is required to have a commercial driver's license, a copy of which is on file in the transportation lieutenant's office.
3. Supervisors maintain records for each vehicle operated.	Meets Standard	The maintenance supervisor for the transportation unit maintains records for each vehicle in the transportation fleet.
4. Documentation indicating annual inspection of vehicles and annual inspection in accordance with state statutes is available for review.	Meets Standard	Documentation regarding all annual inspections and all other maintenance work performed on transportation vehicles is maintained in the transportation maintenance supervisor's office.
5. Documentation indicating safety repairs are completed immediately and vehicles are not used until they have been repaired and inspected is available for review.	Meets Standard	Documentation concerning all safety repairs to all transportation vehicles is maintained in the transportation maintenance supervisor's office. Repairs are completed immediately and vehicles are not used until repairs have been made and inspected.
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. 	Meets Standard	

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>7. Transporting officers:</p> <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. 	Meets Standard	Facility policy addresses all of the requirements listed in this component.
<p>8. (b)(7)(e) officers with valid Commercial Drivers Licenses, (CDL's) required in any vehicle transporting detainees.</p> <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. 	Meets Standard	
9. The transporting officer inspects the vehicle before the start of each detail.	Meets Standard	The transporting officers inspect the vehicles before the start of each detail using a standardized checklist.
10. Positive identification of all detainees being transported is confirmed.	Meets Standard	
11. All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.	Meets Standard	All detainees are searched immediately before boarding the vehicle by the transportation officers assigned to that vehicle.
12. The facility ensures that the number of detainees transported does not exceed the vehicle manufacturer's occupancy level.	Meets Standard	
13. (b)(7)e	Meets Standard	(b)(7)e
<p>14. The vehicle crew conducts a visual count once all passengers are on board and seated.</p> <ul style="list-style-type: none"> Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop. 	Meets Standard	

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)
15. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	Meets Standard	Transportation procedures and the transportation officer post orders cover the use of restraining equipment on transportation vehicles.
16. Officers ensure that no one contacts the detainees. <ul style="list-style-type: none"> (b)(7)e officer remains in the vehicle at all times when detainees are present. 	Meets Standard	
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. 	Meets Standard	The longest transportation run currently conducted by facility transportation crews is five hours in duration. If longer runs are conducted, facility procedures require that meals meeting minimum dietary standards are provided.
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. 	Meets Standard	
19. Vehicles have: <ul style="list-style-type: none"> (b)(7)e 	Meets Standard	(b)(7)e
20. The vehicles are clean and sanitary at all times.	Meets Standard	Multiple vehicles were inspected and found to be clean and sanitary.

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)
21. Personal property of a detainee transferring to another facility: <ul style="list-style-type: none"> Is inventoried. Is inspected. Accompanies the detainee. 	Meets Standard	
22. The following contingencies are included in the written procedures for vehicle crews: <ul style="list-style-type: none"> Attack Escape Hostage-taking Detainee sickness Detainee death Vehicle fire Riot Traffic accident Mechanical problems Natural disasters Severe weather Passenger list is not exclusively men or women or minors 	Meets Standard	Written procedures cover each of the contingencies listed in this component.

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)

Review of the driver, vehicle and vehicle maintenance records confirmed that appropriate driver and vehicle information is being maintained. Annual inspections of all vehicles are being conducted. Multiple vehicles were inspected and found to be clean and well maintained. Vehicles contained the required logs and emergency and safety equipment.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 10/12/2012

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	During the admission process, detainees view the facility orientation video, which includes all of the information listed in this component, and the ICE "Know Your Rights" video. The facility handbook and the National Detainee Handbook are also provided to detainees.
2. Medical screenings are performed by medical staff <u>or</u> persons who have received specialized training for the purpose of conducting an initial health screening.	Meets Standard	Medical screenings are performed by medical staff.
3. When available, accompanying documentation is used to identify and classify each new arrival. In SPCs and CDFs, new detainees shall remain segregated from the general population during the orientation and classification period.	Meets Standard	Information is provided by ICE on Forms I-213 and I-203 for use in the identification and classification process. Detainees are provided an orientation and are classified prior to being placed in general population.
4. All new arrivals are searched in accordance with the "Detainee Search" standard. An officer of the same sex as the detainee conducts the search and the search is conducted in an area that affords as much privacy as possible.	Meets Standard	Detainees are pat searched upon arrival at the facility.
5. Detainees are subjected to a strip search only when reasonable suspicion has been established and not as routine policy. Non-criminal detainees are never subjected to a strip search but are patted down unless cause or reasonable suspicion has been established. All strip searches are documented on G-1025, or equivalent, with proper supervisory approval.	Meets Standard	Reasonable suspicion and approval from the Warden is required for a strip search. A facility incident report and Form G-1025 must be completed and forwarded to ICE. Staff report that there have been no strip searches in the past twelve months.
6. The "Contraband" standard governs all personal property searches. IGSAs and CDFs use or have a similar contraband standard. Staff prepare a complete inventory of each detainee's possessions. The detainee receives a copy. All identity documents are inventoried and given to ICE staff for placement in the A-file. All funds and valuables are safeguarded in accordance with ICE Policy.	Meets Standard	All detainee property is inventoried, and the original copy of the receipt is provided to the detainee. Two officers are present when funds and valuables are inventoried. Identity documents are given to ICE staff. Funds and valuables are safeguarded.

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)
7. Staff complete Form I-387 or similar form for CDFs and IGSA's for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	Meets Standard	Staff complete a GEO/ICE Property Claim Form for every lost or missing property claim. The form is 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	Releases are coordinated with ICE using Form I-203.
10. Staff complete paperwork/forms for release as required.	Meets Standard	Completed paperwork and forms were noted in the files reviewed by this inspector.
11. Each detainee receives a receipt for personal property secured by the facility.	Meets Standard	Each detainee receives the original copy of the property receipt.
12. The facility has a system to maintain accurate records and documentation for admission, orientation, and release.	Meets Standard	All documents pertaining to admission, orientation and release are placed in the detention file. Information is also entered into the GEO Track electronic 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	
14. All orientation material shall be provided in English, Spanish, and other language(s) as determined by the Field Office Director.	Meets Standard	All orientation material is provided in English and Spanish.

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)

The rating for this standard was based on observation of the admission and release processes, interviews of facility staff and ICE staff and reviews of facility policy and intake/release logs and forms.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 10/12/2012

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	This CDF facility uses the required Objective Classification System.
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	Detainees are classified upon arrival. If a detainee cannot be classified upon arrival, he/she will be separated from the general population. All classification decisions are reviewed by the Lead Classification Specialist and the Programs Coordinator.
3. The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	Meets Standard	ICE provides information for identification and classification on Form I-213. This information is used by the facility Classification Specialist to classify the detainee.
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	Detainees are housed with other detainees with the same classification designation.
6. A detainee's classification-level does not affect his or her recreation opportunities. Detainees recreate with persons of similar classification designations.	Meets Standard	
7. Detainee work assignments are based upon classification designations.	Meets Standard	
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	When applicable, the first reassessment is completed 60 days after the initial assessment. Subsequent reassessments are completed at 90-day intervals. Special reassessments are completed within 24 hours. The average length of stay for a detainee is 22 days.

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	The Lead Classification Specialist and the Programs Coordinator who oversees the Classification Section may reduce a classification level on appeal.
10. Classification appeals are resolved w/in 5 business days. Detainees are notified of the outcome within 10 business days.	Meets Standard	Classification appeals are resolved within 5 business days or less. Detainees are notified of the outcome immediately.
11. Classification designations may be appealed to a higher authority such as the Facility Administrator or equivalent.	Meets Standard	Classification designations may be appealed to the Warden.
12. The Detainee Handbook or equivalent for IGSA's explains the classification levels, with the conditions and restrictions applicable to each.	Meets Standard	Classification levels, conditions and restrictions are fully explained in the detainee handbook.
13. In SPCs and CDFs detainees are assigned color-coded uniforms and IDs to reflect classification levels. In IGSA's a similar system is utilized for each level of classification.	Meets Standard	This CDF facility issues color-coded uniforms and wristbands to detainees to reflect their classification levels.

PART 2 – 5. CLASSIFICATION SYSTEM – Reviewer Summary

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

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

The facility utilizes the Objective Classification System. Detainees are classified using information provided by ICE. The rating for this standard was based on interviews of the Lead Classification Specialist, the Programs Coordinator and the ICE Assistant Field Office Director and on a review of facility policy and detention files.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

Reviewer Signature (for printed form submission):

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

PART 2 – 6. CONTRABAND (Key: F)

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

Components	Rating	Remarks (1000 Char Max)
1. The facility follows a written procedure for handling contraband. Staff inventories, holds, and reports it when necessary to the proper authority for action/possible seizure.	Meets Standard	The facility has a written procedure for the handling and disposition of contraband. Staff is required to inventory, hold and report to the proper authority for action/possible seizure of all contraband.
2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	Meets Standard	
3. Staff return property not needed as evidence to the proper authority. Written procedures cover the return of such property.	Meets Standard	
4. Altered property is destroyed following documentation and using established procedures.	Meets Standard	The facility contraband procedure contains direction for the destruction and documentation of altered property.
5. Before confiscating religious items, the Facility Administrator or designated investigator contacts a religious authority.	Meets Standard	
6. Staff follow written procedures when destroying hard contraband that is illegal.	Meets Standard	The facility contraband procedure contains specific instructions for the destruction of illegal contraband.
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	Facility policy allows the Training Manager to maintain a small amount of hard contraband for training purposes. The contraband must be secured in the Training Manager's office. Soft contraband is mailed to a third party or stored in accordance with Detention Standard policy.
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	All detainees receive a copy of the facility handbook which contains the rules pertaining to contraband.
9. Facilities with Canine Units only use them for contraband detection.	N/A	The facility does not have or use canine units.

PART 2 – 6. CONTRABAND – Reviewer Summary

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

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)*

The facility has procedures in place for the seizure, accountability and disposition of contraband. The facility does retain a small amount of hard contraband for training purposes. The facility does not have or use a canine unit.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

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	
2. At least one male and one female staff are on duty where both males and females are housed.	Meets Standard	
3. Comprehensive annual staffing analysis determines staffing needs and plans.	Meets Standard	
4. Essential posts and positions are filled with qualified personnel.	Meets Standard	All employees are carefully screened and trained prior to being assigned to positions within the facility.
5. Every Control Center officer receives specialized training.	Meets Standard	
6. Policy restricts staff access to the Control Center.	Meets Standard	Policy restricts access to Master Control to only those staff that have business in the control center.
7. Detainees do not have access to the Control Center.	Meets Standard	
8. Communications are centralized in the Control Center.	Meets Standard	All facility communications are centralized in Master Control.
9. Facility security and safety will be monitored and coordinated by a secure, well-equipped, and continuously staffed control center.	Meets Standard	
10. The Control Center maintain employee Personal Data Cards (Form G-74 or contract equivalent).	Meets Standard	Employee Personal Data Cards (Form G-74) are also maintained by the main entrance officer post.
11. Recall lists include the current home telephone number of each employee. Phone numbers are updated as needed.	Meets Standard	The facility recall list, with current telephone contact numbers, is maintained in Master Control.
12. <div style="border: 1px solid black; background-color: #d3d3d3; padding: 5px; width: 100%;">(b)(7)e</div>	Meets Standard	<div style="border: 1px solid black; background-color: #d3d3d3; width: 100%; height: 80px; display: flex; align-items: center; justify-content: center;">(b)(7)e</div>
13. Information about routine procedures, emergency situations, and unusual incidents will be continually recorded in permanent post logs and shift reports.	Meets Standard	
14. The front-entrance officer checks the ID of everyone entering or exiting the facility.	Meets Standard	

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)
15. All visits officially recorded in a visitor logbook or electronically recorded.	Meets Standard	All visits to the facility are manually recorded in a log by the main entrance officer.
16. The facility has a secure, color-coded visitor pass system.	Meets Standard	
17. Officers monitor all vehicular traffic entering and leaving the facility.	Meets Standard	Master Control staff visually 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	Security officers maintain a log of all vehicles entering and leaving the facility. All of the information listed in this component is entered into the log. Inspection of the log confirmed that it was current and contained all of the required information.
19. Officers thoroughly search each vehicle entering and leaving the facility.	Meets Standard	All vehicles entering and leaving the facility are thoroughly searched by the officers assigned to perimeter security patrol.
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	
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
23. Written procedures govern searches of detainee housing units and personal areas.	Meets Standard	
24. Housing area searches occur at irregular times.	Meets Standard	All searches of housing units occur at irregular times.

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)
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	Officer posts are located inside the housing units, allowing the officers to respond promptly to emergency situations. Personal contact between officers and detainees is required and facilitated.
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	Officer posts are located inside the housing units which facilitates continuous staff observation.
29. Every search of the SMU and other housing units is documented.	Meets Standard	All searches of the Special Management Unit (SMU) and other housing units are documented in the applicable SMU or housing unit logbook.
30. The SMU entrance has a sallyport.	Meets Standard	
31. All tools entering SMU will be inspected and inventoried by the SMU officer prior to entering the housing unit.	Meets Standard	
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	Facility search procedures address the posts to be inspected, the forms to be used, the frequency of the inspections, guidelines for checking security features and procedures for reporting weak spots and areas needing improvement.
33. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	Meets Standard	Every officer is required to conduct a security check of his/her assigned area (b)(7)e. The results are documented in the appropriate log.
34. Documentation of security inspections is kept on file.	Meets Standard	
35. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	Meets Standard	

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)
36. Tools being taken into the secure area of the facility are inspected and inventoried before entering and prior to departure.	Meets Standard	All tools taken into the secure portions of the facility must be inspected and inventoried prior to entering and leaving the facility.
37. Storage and supply rooms; walls, light and plumbing fixtures, accesses, and drains, etc. undergo frequent, irregular searches. These searches are documented.	Meets Standard	Storage and supply rooms and other common areas are inspected once each shift. The results are documented in the shift supervisor's log.
38. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	Meets Standard	Walls, fences and exits, including windows, are inspected once each shift.
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	<div style="background-color: #d3d3d3; padding: 2px; text-align: center;">(b)(7)e</div> The officers also conduct a physical check of the perimeter fence and document the results in the appropriate log.
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 the security inspection process covers 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	
(Use following format for dates: mm/dd/yyyy)	
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 and other necessary controls in place to control the introduction of contraband into the facility, to ensure facility safety, to prevent escapes and to maintain the facility in a sanitary condition for staff and detainees. Staff interviewed throughout the facility were familiar with their responsibility to conduct and document security inspections. Documentation of security inspections was found in security logs throughout the facility.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 10/12/2012
Reviewer Signature (for printed form submission):	

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

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

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
1. Detainee funds and valuables are properly separated and stored. Detainee funds and valuables are accessible to designated supervisor(s) only.	Meets Standard	Detainee funds and valuables are securely separated and stored. Access to the storage area is limited to designated staff.
2. Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	Meets Standard	
3. Staff search and itemize the baggage and personal property of arriving detainees, including funds and valuables, using a personal property inventory form that meets the ICE standard, in the presence of the detainee unless otherwise instructed by the facility administrator.	Meets Standard	Detainee personal property is searched upon arrival at the facility. The property and valuables are inventoried on a form that meets the ICE standard.
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.	Meets Standard	(b)(7)(e) officers are present during the processing of detainee funds and valuables. (b)(7)(e) officers verify the inventoried funds and valuables.
5. For IGSA's and CDFs, Is the facility using a personal property inventory form that meets the ICE standard?	Meets Standard	The facility uses a personal property inventory form that meets the ICE standard.
6. Staff give the detainee the original inventory form, filing copies in the detainee's detention file and the personal property container.	Meets Standard	
7. Staff forward an arriving detainee's medicine to the medical staff.	Meets Standard	
8. Staff search arriving detainees and their personal property for contraband.	Meets Standard	
9. Property discrepancies are immediately reported to the Chief of Security or equivalent.	Meets Standard	
10. Staff follow written procedures when returning property to detainees.	Meets Standard	The facility has written procedures for the return of property to detainees. The last known address or a phone number is used to try to make contact with a detainee for the purpose of returning property. Property that cannot be returned to the detainee is turned over to ICE for disposition.

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)
11. CDF/IGSA facility procedures for handling detainee property claims are similar to the ICE standard.	Meets Standard	
12. The facility attempts to notify an out-processed detainee that he/she left property in the facility. <ul style="list-style-type: none"> By sending written notice to the detainee's last known address; via certified mail; The notice states that the detainee has 30 days in which to claim the property, after which it will be considered abandoned. 	Meets Standard	Written notices are sent if the detainee provided an address while at the facility. If the facility does not have an address, staff try to contact the detainee by telephone. Property is turned over to ICE if not claimed within 30 days of the attempted notification.
13. Staff obtain a forwarding address from each detainee.	Meets Standard	Staff attempts to obtain a forwarding address from detainees upon admission; however, most detainees will not provide a physical address.
14. It is standard procedure for two officers to be present when removing/documenting the removal of funds from a detainee's possession.	Meets Standard	
15. Staff issue and maintain property receipts (G-589s) in numerical order.	Meets Standard	
16. Staff complete and distribute the G-589 in accordance with the ICE standard.	Meets Standard	
17. The processing officer records each G-589 issuance in a G-589 logbook. The record includes the initials and star numbers of receipting officers.	Meets Standard	
18. Staff tag large valuables with both a G-589 and an I-77.	Meets Standard	
19. The supervisor verifies the accuracy of every G-589.	Meets Standard	
20. The supervisor ensures that: <ul style="list-style-type: none"> Detainee funds are, without exception, deposited into the cash box; Every property envelope is sealed. All sealed property envelopes are placed in the safe. Large, valuable property is kept in the secured locked area. 	Meets Standard	Detainee funds are deposited in the safe in sealed envelopes. Large valuables are maintained in sealed bags in a locked cabinet in a locked room with limited access. Large valuables are inventoried weekly.
21. Staff tag every baggage/facility container with an I-77, completed in accordance with the ICE standard.	Meets Standard	

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

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

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
22. Staff secure every container used to store property with a tamper-proof numbered strap.	Meets Standard	Facility property containers are sealed with tamper-proof numbered straps.
23. A logbook records detainee name, A- number/detainee-number, baggage-check/ I-77 number, security tie-strap number, property description, date issued and date returned.	Meets Standard	
24. In SPCs, the Supervisory Immigration Enforcement Agent, accompanied by a detention staff member conducts a comprehensive weekly audit.	Meets Standard	At this CDF, the Program Manager conducts weekly comprehensive audits of detainee valuables. The audits are documented and logged.
25. The Facility Administrator has established quarterly audits of baggage and non-valuable property as facility policy, the audits occur each quarter and audits are verified and entered in the log.	Meets Standard	An audit of baggage and non-valuable property is conducted weekly and documented in the intake area logbook. A follow-up memorandum is sent to the Warden regarding the results of the audit.
26. The facility positively identifies every detainee being released or transferred.	Meets Standard	
27. Staff routinely inform supervisors of lost/damaged property claims. Claims are properly investigated and missing or damaged property claim reports are filed.	Meets Standard	Supervisors are notified when property is reported lost or damaged. Claims are investigated by the Programs Coordinator and reports are made to the Warden.
28. Every lost/damaged property report completed in accordance with the ICE standard on an I-387 (or equivalent). The Facility Administrator receives a copy and staff place the original in the detainee's A-file, retaining a copy in the detainee's detention file.	Meets Standard	Lost and damaged property reports are documented on a form that is acceptable to ICE. Copies of the report are distributed and filed as required.

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

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

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

The rating for this standard was based upon a review of facility policies, inspection of logbooks, inspection of the valuable items storage locker, an interview with the Programs Coordinator and an inspection of the baggage and non-valuable storage room. Access to all detainee property storage areas is limited to specific personnel. Audits of valuables and non-valuables are conducted and logged. The processes for inventorying and protecting detainee property also protect the facility from the introduction of contraband into the housing units.

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

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

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

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

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 hold rooms 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	Multiple tours of the facility hold rooms found them to be clean, in good repair and well ventilated and lit. All activating switches are located outside of the rooms.
3. The hold rooms contain sufficient seating for the number of detainees held.	Meets Standard	
4. No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside hold rooms.	Meets Standard	No sleeping material was noted or permitted inside the hold rooms.
5. Hold room walls and ceilings are escape and tamper resistant.	Meets Standard	The hold rooms were observed to be escape and tamper resistant.
6. Detainees are not held in hold rooms for more than 12 hours.	Meets Standard	
7. Male and females detainees are segregated from each other at all times.	Meets Standard	
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	All of the hold rooms included toilet facilities.
10. All detainees are given a pat down search for weapons or contraband before being placed in the hold room.	Meets Standard	All detainees are given a pat down search prior to being placed inside a hold room.
11. When the last detainee has been removed, the hold room is inspected for the following: <ul style="list-style-type: none"> ▪ Cleaning. ▪ Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair. 	Meets Standard	
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	The facility has a written evacuation plan which specifies that the Intake Officer is responsible for removing detainees from the hold rooms in case of fire or building evacuation.

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)
13. An appropriate emergency service is called immediately upon a determination that a medical emergency exists.	Meets Standard	
14. Single occupant hold rooms contain a minimum of 37 square feet (7 unencumbered square feet for the detainee, 5 square feet for a combination lavatory/toilet fixture, and 25 square feet for a wheelchair turn-around area). <ul style="list-style-type: none">▪ If multiple-occupant hold rooms are used, there is an additional 7 unencumbered square feet for each additional detainee.	Meets Standard	The hold rooms contained the minimum square footage required by the standard for the number of detainees allowed in each hold room.
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 contain stainless steel combination toilet/lavatory fixtures (combi-units) with modesty panels that are compliant with the Americans with Disabilities Act. The small hold room contain one combi-unit and the two larger hold rooms each contain two combi-units.
16. <u>In SPCs designed after 1998</u> the hold rooms have floor drain(s).	Meets Standard	Each of the hold rooms has a floor drain.
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	
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.	Meets Standard	The facility does not hold juvenile detainees. Detainees age 70 or older are not held in hold rooms, but instead are seated in the open area of the intake unit while they are processed.
19. Minors (under 18) are confined apart from adults, except for immediate relatives or guardians.	N/A	The facility does not house juvenile detainees.
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	Intake staff maintain a log for each detainee placed in a hold room. The log includes the information specified in the standard.
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	A meal is provided to any detainee in a hold room for more than six hours. Pregnant women have access to snacks, milk or juice. Juveniles are not housed at this facility.

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)
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	Detainees with disabilities are seated in the open area of the intake unit while they are processed.
23. The maximum occupancy for the hold room will be posted.	Meets Standard	
24. Before placing a detainee in a room, an officer shall observe each individual to screen for obvious mental or physical problems.	Meets Standard	
25. Staff does not permit detainees to smoke in a hold room.	Meets Standard	This is a no-smoking 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	Officers supervise the hold rooms through direct supervision. All hold rooms are in the officers' direct line of sight. Logs are used to record any unusual behavior or complaints. Detainees exhibiting any unusual behavior are kept under constant surveillance.

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES – 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 policy, observation of practice and staff interviews showed that the facility is using the hold rooms in the intake unit for the temporary detention of detainees being processed into/out of the facility. Detainees being processed into the facility are not held in excess of 12 hours. The intake hold rooms were observed to be clean and well maintained.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

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 Lieutenant and Assistant Security Officer have attended approved locksmith training programs.
2. The security officer, or equivalent, has responsibility for all administrative duties and responsibilities relating to keys, locks etc.	Meets Standard	The Security Lieutenant is responsible for all administrative duties and responsibilities relating to keys and locks.
3. The security officer, or equivalent, provides training to all employees in key and lock control.	Meets Standard	The Security Lieutenant provides training to all employees on 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 Security Lieutenant follows a preventive maintenance program and maintains all documentation relating to this program.
6. Facility policies and procedures address the issue of compromised keys and locks.	Meets Standard	
7. The security officer, or equivalent, develops policy and procedures to ensure safe combinations integrity.	Meets Standard	
8. Only dead bolt or dead lock functions are used in detainee accessible areas.	Meets Standard	
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	Facility policy forbids the use of a grand master keying system.
11. All worn or discarded keys and locks cut up and properly disposed of.	Meets Standard	The Security Lieutenant disposes of all worn or discarded keys and locks.
12. Padlocks and/or chains are not used on cell doors.	Meets Standard	The use of padlocks and chains on cell doors is prohibited, and none were observed in multiple tours of the housing units.
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 keyboard sufficient to accommodate all the facility key rings including keys in use is located in a secure area.	Meets Standard	The facility uses the Key Watcher system for holding and dispensing keys. The system is sufficient to accommodate all facility key rings.
15. Procedures in place to ensure that key rings are: <ul style="list-style-type: none"> • Identifiable • Numbers of keys on the ring are cited? • Keys cannot be removed from issued key rings 	Meets Standard	All facility key rings are identifiable with a key chit and number. The number of keys is noted on the chit, and keys cannot be removed from the individual key rings.
16. Emergency keys are available for all areas of the facility.	Meets Standard	Emergency keys for all areas of the facility are stored in Master Control.
17. The facility uses a key accountability system.	Meets Standard	
18. Authorization is necessary to issue any restricted key.	Meets Standard	
19. Individual gun lockers are provided. <ul style="list-style-type: none"> • They are located in an area that permits constant officer observation. • In an area that does not allow detainee or public access. 	Meets Standard	Gun lockers are located at the (b)(7)(e). ICE staff store weapons in a locked room in the (b)(7)(e) facility. Neither location is accessible to detainees or the public. Both locations are under staff observation.
20. The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	Meets Standard	The facility accounts for all key rings each shift. Individual keys are counted by the Security Lieutenant on a daily basis.
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	Facility policy addresses all aspects of this component.
22. Locks and locking devices are continually inspected, maintained, and inventoried.	Meets Standard	
23. Each facility has the position of Security Officer. If not, a staff member appointed the collateral duties of security officer.	Meets Standard	A lieutenant and an officer are assigned to the function of security officer.

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)
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 Security Lieutenant and the Security Officer are the only employees authorized to add or remove keys from a key ring.
25. The splitting of key rings into separate rings is not authorized.	Meets Standard	

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

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

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

The facility uses the Key Watcher system for the storage and dispensing of keys. Review of facility procedures, observation of actual practice and staff interviews confirmed that procedures for the use, accountability and maintenance of keys and locks are being practiced by facility staff. All keys are accounted for at the end of each shift. Individual keys are counted once each day.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

Reviewer Signature (for printed form submission):

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

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

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

Components	Rating	Remarks (1000 Char Max)
1. Staff conduct a formal count at least once each 8 hours (no less than three counts per day). At least one of these counts shall be a face to photo count.	Meets Standard	Formal counts take place at 6:30 a.m., 2:00 p.m., 10:00 p.m. and 1:00 a.m. The 2:00 p.m. count is a face-to-photo count.
2. Activities cease or are strictly controlled while a formal count is being conducted.	Meets Standard	All activity ceases or is strictly controlled during the count process.
3. There is a system for counting each detainee, including those who are outside the housing unit.	Meets Standard	
4. Formal counts in all units take place simultaneously.	Meets Standard	
5. Officers do not allow detainee participation in the count.	Meets Standard	Facility policy and practice do not allow detainee participation in the count process.
6. A face-to-photo count follows each unsuccessful recount.	Meets Standard	
7. Officers positively identify each detainee before counting him/her as present.	Meets Standard	Officers are trained to positively identify each detainee prior to counting him/her present.
8. Written procedures cover informal and emergency counts.	Meets Standard	
9. The control officer (or other designated position) maintains an "out-count" record of all detainees temporarily out of the facility.	Meets Standard	Master Control maintains a record of all "out count" detainees temporarily out of the facility.
10. Security officers and any other staff with responsibilities for conducting counts are provided adequate initial and periodic training in count procedures, and that training is documented in each person's training folder.	Meets Standard	

PART 2 – 11. POPULATION COUNTS – Reviewer Summary

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

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

Inspection team members observed the 2:00 p.m. facility count. Facility staff followed established procedures in conducting the count.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

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	The facility has a set of post orders for every fixed post.
2. In SPCs and CDFs, Post Orders are arranged in the required six-part folder format.	Meets Standard	Post orders are arranged in the required six-part folder format.
3. Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	Meets Standard	The Chief of Security is responsible for all updates and revisions.
4. One individual or department is responsible for keeping all Post Orders current with revisions that take place between reviews.	Meets Standard	The Chief of Security is responsible for keeping all post orders current with revisions that take place between reviews.
5. Review, updating, and reissuing of Post Orders occurs regularly and at least annually.	Meets Standard	
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 Warden signs the first page of all post orders. The Chief of Security initials each page.
8. A Post Orders master file is available to all staff.	Meets Standard	
9. Procedures keep Post Orders and logbooks secure from detainees at all times.	Meets Standard	
10. Copies of the applicable Post Orders are retained at the post only if secure from detainee access.	Meets Standard	Post orders were observed to be kept secure from detainee access.
11. Supervisors ensure that officers understand the Post Orders, regardless of whether the assignment is temporary, permanent, or due to an emergency.	Meets Standard	
12. In SPCs and CDFs, each time an officer receives a different post assignment, he or she is required to read, sign, and date those Post Orders to indicate he or she has read and understands them.	Meets Standard	
13. Anyone assigned to an armed post qualifies with the post weapons before assuming post duty.	Meets Standard	<div style="background-color: #f2f2f2; padding: 2px;">(b)(7)e</div> <div style="background-color: #f2f2f2; padding: 2px;">(b)(7)e</div> The officers must qualify with the assigned weapons.
14. Post Orders for armed posts, and for posts that control access to the institution perimeter, clearly state that: <div style="margin-left: 20px;"> <div style="background-color: #f2f2f2; width: 150px; height: 40px; margin-bottom: 5px;"></div> <div style="background-color: #f2f2f2; width: 150px; height: 40px;"></div> </div>	Meets Standard	

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	The post orders for the transportation officers provide specific instructions for the officers in the event of an escape or attempted escape.
16. The Post Orders for housing units track the daily event schedule.	Meets Standard	The housing unit post orders track the daily event schedule.
17. Housing unit post officers record all detainee activity in a log. The Post Orders include instructions on maintaining the logbook.	Meets Standard	

PART 2 – 12. POST ORDERS – Reviewer Summary

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

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

Facility post orders were reviewed at multiple locations throughout the facility and were found to be current, signed by the facility administrator and containing the required updates. Staff interviews confirmed that the officers are familiar with their post orders. The post order binders were all located in secure locations, and detainee access was not allowed.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 10/12/2012

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 requires that detainees be pat searched and checked with a hand-held metal detector unless reasonable suspicion exists for a strip search.
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	Policy requires that searches be conducted in a respectful and dignified manner by trained staff of the same sex as the detainee.
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	Policy requires that the area be left as close as possible to the way it was found. Linens are to be left folded on the beds.
5. Detainees are pat searched and screened by metal detectors routinely to control contraband.	Meets Standard	
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	Reasonable suspicion and authorization from the Warden is required for a strip search.
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	Body cavity searches must be conducted by medical personnel at an off-site medical facility.
8. "Dry cells" are used for contraband detection only when there is reasonable belief of concealment, with proper authorization, and in accordance with required procedures	N/A	The facility does not use dry cells.
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	Contraband that may be evidence is inventoried and documented on a chain of custody report and is turned over to law enforcement authorities for possible criminal prosecution.
10. Canines are not used in the presence of detainees	N/A	The facility does not use canines.

PART 2 – 13. SEARCHES OF DETAINEES – Reviewer Summary

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

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

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)*

The rating for this standard was based on observation, a review of facility policy and interviews of facility staff. Detainees are pat searched and scanned with a hand-held metal detector during the admission process. They are also pat searched routinely as they move in/out of different areas of the facility. Strip searches require reasonable suspicion and must be approved by the Warden. The facility does not use canines.

Overall Rating: Meets Standard

Reviewer Name (Printed):

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

Completion Date: 10/12/2012

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)		
<p>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.</p>		
Components	Rating	Remarks (1000 Char Max)
1. The facility has a Sexual Abuse and Assault Prevention and Intervention Program.	Meets Standard	The facility has a Sexual Abuse and Assault Prevention and Intervention Program which incorporates the requirements of the Prison Rape Elimination Act (PREA).
2. For SPCs and CDFs, the written policy and procedure has been approved by the Field Office Director.	Meets Standard	The policy for sexual abuse and assault prevention and intervention has been approved by the Field Officer Director.
3. Tracking statistics and reports are readily available for review by the inspectors.	Meets Standard	There have been no allegations of sexual abuse or assault in this facility for over three years. The Health Services Administrator has a blank spreadsheet available for tracking statistics.
4. All staff are trained, during orientation and in annual refresher training, in the prevention and intervention areas required by the Detention Standard.	Meets Standard	Sexual Abuse and Assault Prevention and Intervention training is part of the new employee pre-service training and annual refresher training. All staff also receive quarterly training on this subject.
5. Detainees are informed about the program in facility orientation and the detainee handbook (or equivalent).	Meets Standard	
6. The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	Meets Standard	
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 for detainees.
8. Detainees are screened upon arrival for “high risk” sexual assaultive and sexual victimization potential and housed and counseled accordingly.	Meets Standard	A nurse screens all arriving detainees for high risk sexual assaultive and sexual victimization potential as part of the in-processing procedures and prior to the detainee's assignment to a housing unit.
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 allegations of detainee on detainee sexual abuse or assault in this facility for over three years.

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)
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 allegations of staff on detainee sexual abuse or assault in this facility for over three years.
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 allegations of sexual abuse or assault in this facility for over three years. Facility policy, however, requires chain-of-command reporting. Staff interviews confirmed their knowledge of the procedure.
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	When sexual assault or abuse is alleged, all cases are referred to the local law enforcement authorities for investigation and possible prosecution.
13. When there is an alleged or proven sexual assault, the required notifications are promptly made.	Meets Standard	
14. Victims of sexual abuse or assault are referred to specialized community resources for treatment and gathering of evidence.	Meets Standard	Facility policy requires medical staff to transport victims of sexual assault or abuse to one of two community emergency departments for evaluation, treatment and forensic evidence gathering.
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 Health Services Administrator is designated as the program coordinator and is responsible for logging and tracking statistics.

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

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

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

The facility has a comprehensive Sexual Abuse and Assault Prevention and Intervention Program. All staff receive related training during their pre-service training and again annually during refresher training. Additional information is provided on a quarterly basis. All arriving detainees are screened for "high risk" sexual assaultive and sexual victimization potential as part of the in-processing procedures. Procedures are in place to provide prompt and effective intervention and treatment of victims and control, discipline and prosecution of perpetrators. There have been no allegations of sexual abuse or assault in the facility since the prior inspection. The standard's rating was based on a review of policies and staff interviews.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

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

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

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

Reviewer Signature (for printed form submission):

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

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

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

Components	Rating	Remarks (1000 Char Max)
1. Written policy and procedures are in place for special management units.	Meets Standard	The facility has comprehensive policies and procedures for the Special Management Units (SMUs).
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	
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 every detainee placed in the SMU must be cleared by health care personnel. Review of the SMU files and interviews of SMU staff verified that every SMU detainee is cleared by a health care professional prior to admission to the unit and is visited by health care staff on a daily basis.
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	Facility procedures do not allow the occupancy of SMU cells to exceed the design capacity. All detainees in the SMU were found to be housed alone.
7. Cells and rooms are well ventilated, adequately lit, appropriately heated and maintained in a sanitary condition at all times.	Meets Standard	The cells in the SMU are well ventilated, lit and heated and were found to be in a sanitary condition.

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)		
This Detention Standard protects detainees, staff, contractors, volunteers, and the community from harm by segregating certain detainees from the general population in Special Management Units (SMUs) with an Administrative Segregation section for detainees segregated for administrative reasons and a Disciplinary Segregation section for detainees segregated for disciplinary reasons.		
Components	Rating	Remarks (1000 Char Max)
8. Permanent housing logs are maintained in SMUs to record pertinent information on detainees upon admission to and release from the unit, and in which supervisory staff and other officials record their visits to the unit.	Meets Standard	SMU staff maintain a log to record all pertinent information on detainees upon admission to and release from the unit. A separate log is maintained of all staff and other visitors to the unit.
9. A permanent log is maintained in each SMU to record all activities concerning SMU detainees (meals served, recreation, visitors, etc.). In SPCs and CDFs, the SMU log records the detainee's name, A-number, housing location, date admitted, reasons for admission, tentative release date for detainees in Disciplinary Segregation, the authorizing official, and date released.	Meets Standard	SMU staff maintain a permanent log on each detainee in the SMU, recording all daily detainee activities. Review of the individual logs found they contained all of the required information.
10. In SPCs and CDFs, a separate log is maintained in the SMU that all persons visiting the unit must sign and record: <ul style="list-style-type: none"> ▪ The time and date of the visit, and ▪ Any unusual activity or behavior of an individual detainee, with a follow-up memorandum sent through the facility administrator to the detainee's file. 	Meets Standard	The SMU maintains a separate log of all persons visiting the SMU. The time and date of each visit is recorded. Documentation of any unusual activity of an individual detainee is forwarded for placement in the detainee's file.
11. A Special Management Housing Unit Record is maintained on each detainee in an SMU: <ul style="list-style-type: none"> ▪ In SPCs form I-888 (Special Management Housing Unit Record) is prepared immediately upon the detainee's placement in the SMU. ▪ In CDFs and IGSA facilities form I-888 or a comparable form is used. In SPCs and CDFs: <ul style="list-style-type: none"> ▪ By the end of each shift, the special housing unit officer records: <ul style="list-style-type: none"> ○ Whether the detainee ate, showered, exercised, and took any medication, and ○ Any additional information, for example, if the detainee has a medical condition, has exhibited suicidal or assaultive behavior, etc. ▪ When a health care provider visits an SMU detainee, he or she signs that individual's record, and the housing officer initials the record after all medical visits are completed and no later than the end of the shift. 	Meets Standard	A review of the files of detainees housed in the SMU confirmed the inclusion of the forms and information required by this component.

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

PART 2 – 15. SPECIAL MANAGEMENT UNITS (Key: O)		
This Detention Standard protects detainees, staff, contractors, volunteers, and the community from harm by segregating certain detainees from the general population in Special Management Units (SMUs) with an Administrative Segregation section for detainees segregated for administrative reasons and a Disciplinary Segregation section for detainees segregated for disciplinary reasons.		
Components	Rating	Remarks (1000 Char Max)
12. Upon a detainee's release from the SMU, the releasing officer attaches the entire housing unit record to the Administrative Segregation Order or Disciplinary Segregation Order and forwards it to the Supervisor for inclusion in the detainee's detention file.	Meets Standard	
13. There are written policy and procedures concerning the property detainees may retain in each type of segregation.	Meets Standard	The SMU procedure details the type of property detainees may retain while in the SMU.
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	The SMU procedure details the privileges detainees may have in each type of segregation. Administrative segregation detainees receive the same general privileges as detainees in the general population.
15. Detainees in Administrative Segregation are provided opportunities to spend time outside their cells (over and above the required recreation periods), for such activities as socializing, watching TV, and playing board games and may be assigned to work details (for example, as orderlies in the SMU).	Meets Standard	
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	All detainees in the SMU are personally observed each half hour or more frequently if their behavior requires it.
17. The shift supervisor sees each segregated detainee daily, including weekends and holidays.	Meets Standard	
18. The facility administrator (or designee) visits each SMU daily.	Meets Standard	
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	A health care professional visits every detainee in the SMU each day, seven days a week. Each detainee is interviewed, and action is taken if required. The medical visit is recorded in the housing unit record/log.
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)		
<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)
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	
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	
23. Detainees in an SMU may write and receive letters the same as the general population.	Meets Standard	
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	
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	
27. Under no circumstances is a detainee permitted to participate in general visitation while in restraints.	Meets Standard	Facility procedures specify that detainees will not participate in visitation while in restraints.
28. In SPCs and CDFs, detainees in protective custody and violent and disruptive detainees are not permitted to use the visitation room during normal visitation hours.	Meets Standard	At this CDF facility, a block of time is reserved on each visiting day during which SMU detainees may have visits.
29. In SPCs and CDFs, violent and disruptive detainees are limited to non-contact visits and, in extreme cases, not permitted to visit.	Meets Standard	At this CDF facility, all visiting for SMU detainees is non-contact.
30. Ordinarily, detainees in SMUs are not denied legal visitation.	Meets Standard	

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

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

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

Components	Rating	Remarks (1000 Char Max)
31. There are policy and procedures for a situation where special security precautions for legal visitation have to be implemented and for advising legal service providers and assistants prior to their visits.	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	Detainees in the SMU are allowed visits by 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	
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	Detainees in the SMU are escorted to the law library. Detainees are allowed to retain a reasonable amount of personal legal material in the SMU. Detainee requests for additional legal material from their personal property are accommodated within 24 hours.
35. Detainees in Administrative Segregation or Disciplinary Segregation have the same law library access as the general population, unless compelling and documented security concerns require limitations.	Meets Standard	
36. Policy and procedures provide for legal material to be brought to individuals in Disciplinary Segregation under certain circumstances.	Meets Standard	
37. Any denial of access to the law library is always: <ul style="list-style-type: none"> Supported by compelling security concerns, For the shortest period required for security, and Fully documented in the SMU housing logbook. ICE/DRO is notified every time law library access is denied. 	Meets Standard	

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)
38. Recreation for detainees in the SMU is separate from the general population.	Meets Standard	The SMU housing male detainees has a dedicated recreation yard adjacent to the unit, allowing all SMU detainees to have recreation separate from the general population. Female detainees housed in the SMU use the recreation yard dedicated for females.
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.)	Meets Standard	
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.	Meets Standard	
41. The recreation privilege is denied or suspended only if it would unreasonably endanger safety or security. Ordinarily, a detainee is denied recreation privileges only with the facility administrator's written authorization that documents why the detainee poses an unreasonable risk even when recreating alone. For an immediate safety or security situation, the shift supervisor may verbally authorize denial of an instance of recreation. When a detainee in an SMU is deprived of recreation (or any usual authorized items or activity), a report of the action is forwarded to the facility administrator.	Meets Standard	
42. The case of a detainee denied recreation privileges is reviewed at least once each week, as part of the reviews required for all detainees in SMU status. The reviewer documents whether the detainee continues to pose a threat to self, others, or facility security and, if so, why.	Meets Standard	The Special Management Unit Committee reviews all denials of recreation privileges for SMU detainees.
43. Denial of recreation privileges for more than 15 days requires the concurrence of the facility administrator and the health authority. It is expected that such denials shall rarely occur, and only in extreme circumstances. The facility notifies ICE/DRO when a detainee is denied recreation privileges for more than 15 days.	Meets Standard	Denial of recreation privileges for more than seven days requires the approval of the facility administrator. The facility notifies ICE when a detainee is denied recreation for more than fifteen days.

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>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	Detainees in administrative segregation have telephone access similar to detainees in the general population. Detainees in disciplinary segregation may have restricted phone privileges; however, normally they retain normal phone privileges. The SMU is equipped with portable telephones which allow detainees to use the phones consistent with the requirements of this component.
<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	Facility procedures require that written orders be prepared for all detainees placed in administrative segregation prior to placement. If unable to comply, the order is prepared as soon as possible and a copy is given to the detainee within 24 hours. The order specifies whether the detainee requested the placement and whether the detainee requests a hearing. The order remains on file in the SMU and is placed in the detainee's detention file upon release.

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	<p>Facility policy requires a supervisor to conduct a review of the detainee's placement within 72 hours of his/her placement in administrative segregation. The review requires in-person interviews with the detainee, and a written record is made of the decision and justification. This facility uses the Form I-885. If placement is not at the detainee's request, the facility administrator must authorize the placement. All detainees are reviewed every seven days for the first 60 days and at least every 30 days thereafter. If a reviewer determines a detainee should be released, the facility administrator must approve the decision.</p>
<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	<p>All detainees are provided a copy of the decision and justification for each review. The detainee may appeal the review decision.</p>
<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>Any detainee in administrative segregation may appeal his/her placement to the facility administrator using any standard form of written communication.</p>
<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	

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	
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	
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 after a hearing in which the detainee is found guilty of a prohibited act. The maximum sanction for a single incident is 60 days. The Warden 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	
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	

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	The Program Manager performs regular reviews of all detainees in disciplinary segregation. The reviews include the actions listed in this component.

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 operates two separate Special Management Units (SMUs), one for male detainees and one for female detainees. The two SMUs are separate. The female SMU consists of two cells located adjacent to the female detainee housing unit. Female detainees in this SMU utilize the dedicated female recreation yard during periods when no general population female detainees are on the yard. At the time of this inspection, no female detainees were housed in the SMU. All of the facility procedures concerning SMU operation apply equally to the male and female units.

Review of the facility procedures, staff interviews and multiple tours of the Special Management Unit revealed that the unit operates in a manner which provides a safe housing environment for detainees who cannot live in the general population. Per a review of the logs maintained by the SMU officers, the logs were found to contain the required information and were current. Observations confirmed the units and cells were clean, well maintained, adequately furnished and contained only one detainee per cell. All detainees housed in segregated housing receive a copy of the documentation placing them in segregation status.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

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	Deportation staff conduct weekly announced visits. Weekly unannounced visits are conducted by the Supervisory Detention and Deportation Officer (SDDO) and the Assistant Field Office Director (AFOD).
2. Detention Staff and Deportation Staff conduct scheduled weekly visits with detainees.	Meets Standard	A review of the Facility Liaison Visit Checklists indicated that the weekly visits occur as scheduled.
3. Scheduled visits are posted in ICE/DRO detainee housing areas.	Meets Standard	The schedules were noted on the housing unit bulletin boards.
4. Visiting ICE staff observe and note current climate and conditions of confinement.	Meets Standard	
5. ICE/DRO Detainee Request Forms are available for use by ICE/DRO detainees.	Meets Standard	Detainee Request Forms are available in the housing units.
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	Secure boxes are located in the housing units for the placement of Detainee Request Forms.
8. Only ICE staff are able to retrieve the contents of the secure box containing Detainee Request Forms,	Meets Standard	Only ICE staff have the keys to the secure boxes.
9. ICE/DRO staff respond to a detainee request from a facility within 72 hours and document the response in a log.	Meets Standard	A review of the logs indicated that ICE staff respond to detainee requests within 72 hours or less.
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	Detainees are issued the National Detainee Handbook, which contains this information.
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	The Office of Inspector General (OIG) Hotline Information Posters were observed on the housing unit bulletin boards.
12. Daily telephone serviceability checks are documented in the housing unit logbook.	Meets Standard	Daily telephone checks are performed by facility staff and noted on the housing unit log.

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

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

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

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

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

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

The rating for this standard was based on observations in the housing units, interviews with ICE staff and a review of several logs provided by ICE staff. Facility policy governing the handling of detainee communication with ICE staff was also reviewed.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 10/12/2012

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 tool control procedures and an inspection system. The Security Lieutenant is operationally responsible for carrying out the tool control procedures.
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	The Security Lieutenant receives all deliveries of tools. The tools are delivered directly to his secure work area or are placed in the secure tool room in the maintenance department. The Security Lieutenant is responsible for immediately marking and adding new tools to the appropriate department tool inventory.
3. (MANDATORY) The use of tools, keys, medical equipment, and culinary equipment is controlled.	Meets Standard	The use of all tools, keys, medical equipment and culinary equipment is closely controlled by department staff and closely monitored by the Security Lieutenant.
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	
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 armory is located outside the secure portion of the facility and was not inspected. The recreation department does not have tools. The maintenance department and electric shop have comprehensive tool inventories which were inspected and found to be current. The inventories for tools used in the food service department were reviewed and found to be current. Inventories for all medical and dental tools were also reviewed and found to be current.

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)
6. Tool Inventories are conspicuously posted on all tool boards, tool boxes and tool kits.	Meets Standard	Tool inventories were observed to be conspicuously posted at work locations throughout the facility.
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	Facility procedures specify the regular inventory of all tools and set the minimum timelines for the physical inventory of those tools. Staff interviews and review of inventory logs showed the required inventories are being conducted in accordance with policy. All tools are etched by the Security Lieutenant prior to being placed into use. The Security Lieutenant maintains copies of all inventory forms and the results of all physical inventories.
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	The facility has a tool classification system and classifies tools as restricted and non-restricted.
9. Department heads are responsible for implementing proper tool control procedures as described in the standard.	Meets Standard	
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. Tools were inspected throughout the facility and were all found to be appropriately marked and readily identifiable.
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. Tools were stored on shadow boards with a white back ground; restricted tools were shadowed in red and non-restricted were shadowed in black. Tools were stored in such a manner that missing tools would be readily noticed.

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)
12. Tools removed from service have their shadows removed from shadow boards.	Meets Standard	Tools removed from service have their shadows removed from the shadow boards.
13. Tools not adaptable to a shadow board are stored in a locked drawer or cabinet.	Meets Standard	Tools not adaptable to a shadow board were found to be stored in a locked drawer, cabinet or room and were appropriately marked.
14. Sterile packs are stored under lock and key.	Meets Standard	
15. Each facility has procedures for the issuance of tools to staff and detainees.	Meets Standard	
16. There are policies and procedures to address the issue of lost tools. The policy and procedures include: <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 procedures in place to address lost tools. The policy requires verbal and written notification, procedures for detainee access and documentation and review of all incidents of lost tools.
17. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	Meets Standard	The Security Lieutenant and/or the Maintenance Supervisor are responsible for the disposal of all worn out or broken 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 or contract repair vendors must submit an inventory of all tools prior to admittance into or departure out of the facility. The tool inventories are reviewed prior to the contractor entering/leaving the facility.
19. Hoses longer than three feet in length are classified as a restricted tool.	Meets Standard	
20. Scissors used for in-processing detainees are tethered to the furniture (e.g. table, counter, etc.) where they are used.	Meets Standard	

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 Security Lieutenant is the dedicated tool control officer. Review of tool control practices, inventories and tool accountability throughout the facility confirmed that staff are following established procedures. 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/electrical, food service and medical departments were reviewed. Inventories were correct and current and the tools were stored in a secure manner.

Overall Rating: Meets Standard

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

PART 2-17. TOOL CONTROL – Reviewer Summary

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

Reviewer Name (Printed):

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

Completion Date: 10/12/2012

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	Policy and procedures authorize staff to respond in an immediate use of force situation without a supervisor's presence.
3. When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, policy requires that staff must try to resolve the situation without resorting to force.	Meets Standard	
4. Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	Meets Standard	Written 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	
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 officers are trained in the use-of-force team technique in pre-service and annual training.
8. All use-of-force incidents are documented and reviewed.	Meets Standard	Facility policy requires that all uses of force are documented and reviewed.
9. All use of force incidents are properly documented and forwarded for review use of force documentation at a minimum, shall include the medical examination through the conclusion of the incident. All calculated uses of force incidents must be audio visually recorded in its entirety from the beginning of the incident to its conclusion. Any breaks in recording, e.g., dead batteries, tape exhausted, are fully explained on the video.	Meets Standard	

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

PART 2 – 18. USE OF FORCE AND RESTRAINTS (Key: R)		
This Detention Standard authorizes staff to use necessary physical force, after all reasonable efforts to otherwise resolve a situation have failed, and only for protection of self, detainees, or others, for prevention of escape or serious property damage, or to maintain the security and orderly operation of the facility.		
Components	Rating	Remarks (1000 Char Max)
10. Staff: <ul style="list-style-type: none"> Does not use force as punishment. Attempts to gain the detainee's voluntary cooperation before resorting to force Uses only as much force as necessary to control the detainee. Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical. 	Meets Standard	Written policy forbids the use of force as punishment and requires that staff attempt to gain voluntary cooperation before force is used, that only the force necessary to control the detainee is used and that restraints are used only when other non-confrontational means have failed or are impractical.
11. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	N/A	This facility does not use medication as a form of restraint.
12. (MANDATORY) Use-of-Force Teams follow written procedures that attempt to prevent injury and exposure to communicable disease(s).	Meets Standard	The facility use-of-force teams follow comprehensive written procedures to prevent injury and exposure to communicable diseases.
13. Standard procedures associated with using four/five point restraints include: <ul style="list-style-type: none"> Soft (nylon/leather) restraints. Dressing the detainee appropriately for the temperature. A bed, mattress, and blanket/sheet. Checking the detainee at least every 15 minutes. Logging each check. Repositioning detainee often enough to prevent soreness or stiffness. Medical evaluation of the restrained detainee twice per eight-hour shift. When qualified medical staff are not immediately available, staff position the detainee "face-up." 	Meets Standard	The use of force procedure addresses each of the bulleted items listed in this component. <div style="border: 1px solid black; background-color: #f0f0f0; padding: 10px; text-align: center; margin: 10px auto; width: 80%;">(b)(7)e</div>
14. The shift supervisor monitors the detainee's position/condition every two hours. He/she allows the detainee to use the restroom at these times under safeguards.	Meets Standard	Facility procedures require the shift supervisor to monitor the detainee's position/condition every two hours and to allow the detainee to use the restroom when needed.
15. All detainee checks are logged.	Meets Standard	

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

PART 2 – 18. USE OF FORCE AND RESTRAINTS (Key: R)		
This Detention Standard authorizes staff to use necessary physical force, after all reasonable efforts to otherwise resolve a situation have failed, and only for protection of self, detainees, or others, for prevention of escape or serious property damage, or to maintain the security and orderly operation of the facility.		
Components	Rating	Remarks (1000 Char Max)
16. In immediate-use-of-force situations, officers contact medical staff once the detainee is under control.	Meets Standard	Facility procedures require that medical staff are contacted in immediate use of force situations once the detainee is under control.
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	<div style="background-color: #f2f2f2; padding: 5px; text-align: center;">(b)(7)e</div> <div style="background-color: #f2f2f2; padding: 5px; text-align: center;">(b)(7)e</div> <div>medical staff is consulted and reviews the detainee's medical file prior to their use.</div>
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	<div style="background-color: #f2f2f2; padding: 5px; text-align: center;">(b)(7)e</div>
19. If Intermediate Force Weapons are stored in the Special Management Unit (SMU), they are stored and maintained the same as Class R tools.	N/A	<div style="background-color: #f2f2f2; padding: 5px; text-align: center;">(b)(7)e</div>
20. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> Medical personnel are consulted 	Meets Standard	Medical policies and procedures require that medical staff be consulted and that special precautions be taken when pregnant detainees must be restrained.
21. Protective gear is worn when restraining detainees with open cuts or wounds.	Meets Standard	Facility procedures require that protective gear be worn when restraining detainees with open cuts/wounds.
22. Staff document every use of force, including what type of restraints was used during the incident.	Meets Standard	
23. It is standard practice to review any use of force and the non-routine application of restraints.	Meets Standard	
24. All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. <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 security officers receive pre-service and annual training in self-defense, confrontation avoidance techniques and the use of force to control detainees. Staff receive specialized training on devices approved for use.

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)
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 (b)(7)e The training is documented in staff training records.
26. The use of canines is restricted to contraband detection purposes only.	N/A	The facility does not use canines for any purpose.
27. The officers are thoroughly trained in the use of soft and hard restraints.	Meets Standard	
28. In SPCs, the Use of Force form is used. In other facilities (IGSAs / CDFs) this form or its equivalent is used.	Meets Standard	The facility is a CDF. A local Incident Report Form is used for reporting 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)

During the past year, the facility has had one calculated use of force which consisted of a forced cell move. The video of the incident was reviewed and revealed that the actions of the use-of-force team followed facility policy. The team wore the prescribed protective gear and equipment, and force was used only after all verbal attempts to gain compliance failed. The

(b)(7)e

(b)(7)e

All uses of force are reviewed.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

Reviewer Signature (for printed form submission):

Section III ORDER

Disciplinary System

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

PART 3 – 19. DISCIPLINARY SYSTEM (Key: S)		
This Detention Standard promotes a safe and orderly living environment for detainees by expecting detainees to comply with facility rules and regulations and imposing disciplinary sanctions to control the behavior of those who do not.		
Components	Rating	Remarks (1000 Char Max)
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	Meets Standard	The facility has a written disciplinary system which uses progressive levels of reviews and appeals.
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	Meets Standard	The facility disciplinary procedure states the process will not be arbitrary, 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	Facility procedure prohibits all of the sanctions listed in this component.
4. The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	Meets Standard	The rules of conduct, sanctions and procedures for violations are contained in the facility handbook, a copy of which is given to all detainees. These items are also explained in the orientation video viewed by all detainees upon arrival.
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	Rights and responsibilities, prohibited acts, the disciplinary severity scale and sanctions are posted, in English and Spanish, on bulletin boards located in all of the detainee housing units.
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	Meets Standard	Facility procedures allow and encourage informal resolution of minor rule violations and prohibited acts.

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)
7. Incident Reports and Notice of Charges are promptly forwarded to the designated supervisor.	Meets Standard	
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	
9. An intermediate disciplinary process is used to adjudicate minor infractions.	Meets Standard	The Unit Disciplinary Committee serves as an intermediate disciplinary process to resolve moderate and minor infractions.
10. A disciplinary panel (or equivalent in IGSA's) adjudicates infractions. The panel: <ul style="list-style-type: none"> Conducts hearings on all charges and allegations referred by the UDC Considers written reports, statements, physical evidence, and oral testimony Hears pleadings by detainee and staff representative Bases its findings on the preponderance of evidence Imposes only authorized sanctions 	Meets Standard	The Unit Disciplinary Committee and Institution Disciplinary Panels are responsible for adjudicating infractions. The panels conduct hearings on all charges, consider written reports, statements, physical evidence and oral testimony, hear pleadings, base findings on the preponderance of evidence and impose only authorized sanctions.
11. A staff representative is available if requested for a detainee facing a disciplinary hearing	Meets Standard	A staff representative is assigned if requested or staff determines such assistance is necessary.
12. The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	Meets Standard	
13. The duration of punishment set by the Facility Administrator, as recommended by the disciplinary panel does not exceed established sanctions. The maximum time in disciplinary segregation does not exceed 60 days for a single offense.	Meets Standard	
14. Written procedures govern the handling of confidential-source information. Procedures include criteria for recognizing "substantial evidence".	Meets Standard	Facility procedures permit the use of confidential-source information in the disciplinary process. The procedures include the criteria for recognizing "substantial evidence".
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	Meets Standard	

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)

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

Review of facility procedures and staff interviews confirmed that the facility is managing the disciplinary process in a manner which affords detainees their due process rights. Review of completed Rule Violation Reports confirmed that facility procedures and policy regarding disciplinary hearings are being followed. The facility uses Unit Disciplinary Committees and Institution Disciplinary Panels to adjudicate the rule violation reports. The Unit Disciplinary Committee hears minor infractions while the Institution Disciplinary Panel adjudicates the more serious infractions.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 10/12/2012

Reviewer Signature (for printed form submission):

Section IV CARE

Food Service

Hunger Strikes

Medical Care

Personal Hygiene

Suicide Prevention and Intervention

Terminal Illness, Advance Directives, and Death

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

PART 4 – 20. FOOD SERVICE (Key: T)

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

Components	Rating	Remarks (1000 Char Max)
1. The food service program is under the direct supervision of a professionally trained and certified Food Service Administrator (FSA). The Responsibilities of cooks and cook foremen are in writing. The FSA determines the responsibilities of the Food Service Staff.	Meets Standard	The Food Service Administrator (FSA) has 15 years of experience in food service and holds a Colorado Food Handlers Certificate. The FSA has also completed The GEO Group, Inc. Food Service Management Training course.
2. The Cook Foreman is on duty on days when the FSA is off duty and vice versa.	Meets Standard	A supervisory level cook is on duty when the FSA is off duty and vice versa.
3. The FSA provides food service employees with training that specifically addresses detainee-related issues. In ICE Facilities this includes a review of the "Food Service" standard	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	The food service operation only uses one tool which is classified as a knife. That tool is used in a chipper and shredding appliance. It is maintained in a locked storage cabinet and signed out and in for use. All other utensils are maintained in a locked storage cabinet on shadow boards and checked in and out using a chit system.
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	Dough cutters are tethered to a work station when in use in the food service preparation area.
6. Special procedures (when necessary) govern the handling of food items that pose a security threat.	Meets Standard	
7. Operating procedures include daily searches (shakedowns) of detainee work areas.	Meets Standard	The detainee work areas of the food service program are inspected (b)(7)e by security staff assigned to the food service operation.
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	

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

PART 4 – 20. FOOD SERVICE (Key: T)

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

Components	Rating	Remarks (1000 Char Max)
9. (MANDATORY) There is adequate health protection for all detainees and staff in the facility, and for all persons working in food service. Detainees and other persons working in food service are monitored each day for health and cleanliness by the food service supervisor or designee. Detainee clothing and grooming comply with the "Food Service" standard.	Meets Standard	Detainees are monitored daily upon arrival for work to ensure they are fit for duty. Detainee workers were observed to be clean and neat in appearance and were wearing gloves and hair netting.
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	Newly assigned detainee workers are instructed in the rules and procedures of the food service department. The orientation and training of detainee workers are documented in the detainee's work file.
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 orientation and training program for food service workers covers the elements listed in this component. The training documents were reviewed during the inspection.
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's are subject to local and State rules and regulations regarding detainee pay.	Meets Standard	Detainee voluntary workers are paid one dollar per day for their 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	
16. For cafeteria-style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	N/A	This facility does not use cafeteria-style serving lines.
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 42-day menu cycle.

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

PART 4 – 20. FOOD SERVICE (Key: T)

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

Components	Rating	Remarks (1000 Char Max)
18. (MANDATORY) A registered dietitian shall conduct a complete nutritional analysis that meets U.S. Recommended Daily Allowances (RDA), at least annually, of every master-cycle menu planned by the FSA. The dietitian must certify menus before they are incorporated into the food service program. If necessary, the FSA shall modify the menu in light of the nutritional analysis to ensure nutritional adequacy. The menu will need to be revised and re-certified by the registered dietitian in that event.	Meets Standard	The facility has five menus. A complete nutritional analysis has been conducted on each of the menus by a registered dietitian.
19. The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	Meets Standard	
20. The Cook Foreman has the authority to change menu items if necessary. <ul style="list-style-type: none"> If yes, documenting each substitution, along with its justification, with copy to the FSA 	Meets Standard	The FSA or the supervisory level cook has the authority to substitute menu items if necessary.
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 basic menu at the facility is considered common fare as no pork is served. Additional menus are used when necessary and include a Vegan menu, medical menus, a gluten-free menu and a Kosher menu. All menus have been certified by a registered dietitian. Pre-packaged frozen Kosher meals are used for the Kosher menu.
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	Meets Standard	The FSA works in conjunction with the program manager to accommodate particular religious dietary laws.
24. A supervisor at the command level must approve a detainee's removal from the Common Fare Program.	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)
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	The FSA is provided a schedule of ceremonial meals for the following calendar year. The schedule was reviewed during the inspection.
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 facility accommodates detainees abstaining from foods or fasting for religious purposes. The FSA works in conjunction with the Programs Coordinator to ensure accommodations are available as required.
27. The food service program addresses medical diets.	Meets Standard	
28. Satellite-feeding programs follow guidelines for proper sanitation.	Meets Standard	The satellite feeding program was observed during the inspection. Proper guidelines are followed and sanitation standards are in place.
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	Hot and cold temperatures of menu items are maintained within acceptable ranges. Temperatures are taken and recorded at each meal serving.
30. All meals provided in nutritionally adequate portions.	Meets Standard	
31. Food is not used to punish or reward detainees based upon behavior.	Meets Standard	
32. The food service staff instruct detainee volunteers on: <ul style="list-style-type: none"> Personal cleanliness and hygiene; Sanitary techniques for preparing, storing, and serving food, and; The sanitary operation, care, and maintenance of equipment. 	Meets Standard	Detainee volunteer workers are well trained in the sanitary and hygienic operation of the food service department. The workers were observed to be clean and neat in appearance. The work areas are clean and sanitary.
33. Everyone working in the food service department complies with food safety and sanitation requirements.	Meets Standard	
34. (MANDATORY) The facility implements written procedures for the administrative, medical, and/or dietary personnel conducting the weekly inspections of all food service areas, including dining, storage, equipment, and food-preparation areas.	Meets Standard	All food service areas, including dining, storage, equipment and food-preparation areas are inspected (b)(7)e y food service personnel.

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

PART 4 – 20. FOOD SERVICE (Key: T)

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

Components	Rating	Remarks (1000 Char Max)
35. Reports of discrepancies are forwarded to the Facility Administrator or designated department head and corrective action is scheduled and completed.	Meets Standard	
36. (MANDATORY) Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal, in accordance with the Detention Standard on Food Service.	Meets Standard	All dishwashing machine temperatures are checked and recorded after each meal. The documentation for the temperature checks was reviewed during the inspection.
37. (MANDATORY) Staff document the results of every refrigerator/ freezer temperature check, in accordance with the Detention Standard on Food Service.	Meets Standard	Temperatures of freezers and refrigerators are checked and recorded twice daily.
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	
40. Storage areas are locked when not in use.	Meets Standard	Storage areas were found to be locked when not in use during the inspection.
41. Food service personnel conduct shakedowns along with detention staff.	Meets Standard	
42. <u>In SPCs only:</u> The ICE supervisor on duty ensures that ICE officers participate in dining room supervision.	N/A	There are no detainee dining rooms in this CDF facility.
43. Menus are certified by a registered dietitian prior to being incorporated into the Food Service Program.	Meets Standard	All menus used in the facility are certified by a registered dietitian prior to use.
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.	Meets Standard	The facility is a CDF. The FSA prepares weekly cost estimates which are factored into the budget.
45. When required, only food service staff prepare the sack lunches for detainee transportation.	Meets Standard	
46. Air curtains or comparable devices are used on outside doors where food is prepared, stored, or served to protect against insects and other rodents.	Meets Standard	
47. Staff comply with the ICE requirements for "food receipt and storage.	Meets Standard	
48. Stock inventory levels are monitored and adjusted to correct overage and shortage problems.	Meets Standard	First in/first out processes are used in the food service storage areas.
49. Staff comply with all ICE Housekeeping, Storeroom/Refrigerator requirements. Identify and explain any shortcomings.	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)
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>	All meals are served in the dayrooms of the housing areas. Detainees are allowed ample time to eat their meals, and the space is adequate.
51. (MANDATORY) An independent, external source shall conduct annual inspections to ensure that the food service facilities and equipment meet governmental health and safety codes. Corrective action is taken on deficiencies, if any.	Meets Standard	The Tri-County Health Department conducts annual inspections of the food service program, food service areas and equipment. The last inspection was conducted in December 2011.
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 Tri-County Health Department files a report of the inspection findings with the FSA and the facility administrator.
53. Only those toxic and caustic materials required for sanitary maintenance of the facility, equipment, and utensils shall be used in the food service department. Material Safety Data Sheets (MSDSs) will be maintained on all flammable, toxic, and caustic substances used.	Meets Standard	Toxic and caustic materials stored in the food service department are only those needed for sanitary operation of the area. Material Safety Data Sheets for those items are available in the storage area, and inventories are maintained.
54. (MANDATORY) The FSA is responsible for pest control in the food service department, including contracting the services of an outside exterminator.	Meets Standard	A private certified pest control company provides monthly pest control services. Additional services are available as needed on an on-call basis.

PART 4 – 20. FOOD SERVICE – Reviewer Summary

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

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

The rating for this standard was based on observation of the food service process, including meal preparation, serving and clean-up. The area is maintained in a sanitary and hygienic manner. The documentation of daily cleaning, meal temperatures checks, refrigerator/freezer temperatures checks and dishwasher temperature checks was reviewed. Detainee volunteer workers all appeared clean and were wearing appropriate hair netting. Each worker is medically screened prior to being allowed to work in the kitchen, and all are inspected daily by food service personnel to ensure they are fit for work. Meals are served on a 42-day menu cycle. Medical and religious diets are provided as required. All menus have been certified by a registered dietitian.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

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 that medical staff be notified in the event a detainee declares a hunger strike. They are also to be notified if a detainee refuses nine consecutive meals. In practice, the food service department notifies medical staff if a detainee fails to appear for meals for a period of 24 hours.
2. Facility immediately reports via the chain of command a hunger strike to ICE/DRO.	Meets Standard	Policy requires staff to notify ICE when an ICE detainee is on a hunger strike.
3. The facility has established procedures to ensure staff respond immediately to a hunger strike.	Meets Standard	Policy requires staff to refer all hunger striking detainees to medical staff.
4. Policy and procedure require that staff isolate a hunger-striking detainee from other detainees.	Meets Standard	Policy requires isolation of a hunger striker in a single occupancy medical observation room.
5. Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	Meets Standard	Policy establishes procedures authorizing medical staff to place a hunger striker in a medical observation room.
6. Medical staff record the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	Meets Standard	Medical policy requires staff to record a hunger striker's vital signs and weight at least once every 24 hours. Additional tests and monitoring are individualized. A urinalysis for ketones and other laboratory testing as clinically indicated are also to be conducted. The results of these assessments and diagnostic tests would be documented on the Hunger Strike Protocol form.
7. The facility medical authority obtains a hunger striker's consent before medical treatment.	Meets Standard	Detainees sign a general consent for medical treatment during the in-processing. A procedure-specific consent would be signed if a medically invasive procedure was considered.

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)
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	Detainees refusing medical evaluation or treatment are required to sign a Refusal of Treatment form and are counseled about the potential medical risks of such a refusal. English and Spanish versions of the refusal form are available. If the detainee refuses to sign the form, the refusal is witnessed and documented by two staff signatures.
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 requires staff to deliver three meals per day to hunger striking detainees.
10. Staff maintain the hunger striker's supply of drinking water/other beverages.	Meets Standard	Staff would provide an adequate supply of drinking water and other beverages to a hunger striking detainee. The hunger striker would not maintain independent access to these fluids.
11. During a hunger strike, staff remove all food items from the hunger striker's living area.	Meets Standard	All food items are removed from the observation room when a detainee is on hunger strike.
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 records a hunger striker's food and fluid consumption on the Hunger Strike Monitoring Form I-839.
13. The medical staff have written procedures for treating hunger strikers.	Meets Standard	Basic hunger strike medical monitoring and management are included in the facility hunger strike policy. Management is individualized, based on the detainee's past medical history and current physical findings.
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	Policy requires medical staff to document all detainee encounters and treatment attempts. The facility issues a Clinical Consequences of a Hunger Strike memo to each hunger striking detainee.

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

PART 4 – 21. HUNGER STRIKES (Key: U)

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

Components	Rating	Remarks (1000 Char Max)
15. All staff receive orientation and annual training on recognizing the signs of a hunger striker and on the procedures for referral for medical assessment. Medical staff receive training in hunger-strike evaluation and treatment and remain up-to-date on these techniques.	Meets Standard	All staff receive training in the recognition, referral and management of hunger strikes as part of their pre-service training and annual refresher training.

PART 4 – 21. HUNGER STRIKES – Reviewer Summary

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

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

The facility has policies and procedures addressing hunger strikes. All staff receive training on the recognition, referral and management of hunger strikes during their pre-service training and again annually. Management of hunger strikers is individualized, based on the detainee's past medical history and current physical findings. Hunger striking detainees are monitored closely by medical staff, and procedures are in place to protect the health and well-being of the hunger striker. There have been no ICE detainee hunger strikes since the previous inspection. The standard's rating was based on a review of training records, medical protocols and facility policies and on staff interviews.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 10/12/2012

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 medical department holds a valid waived category Clinical Laboratory Improvement Amendment (CLIA) certificate, and the pharmacy has a current controlled substance certificate from the State of Colorado. Credential files for health care professionals were reviewed and all had current and verified licenses.
2. The facility's in-processing procedures of arriving detainees include medical screening.	Meets Standard	All arriving detainees receive medical and mental health screening by a nurse.
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 was reviewed. The essential positions needed to perform the required scope of services were listed in the plan. The plan was reviewed by the Health Services Administrator (HSA).
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	During in-processing procedures, nurses inform detainees on how to access health care services. If language difficulties are encountered, a telephonic translation service is used to relay the information. Detainees are also given a handbook that provides similar information.
5. Detainees will have access to and receive specified 24-hour emergency medical, dental, and mental health services.	Meets Standard	Facility and medical policies describe access to emergent and urgent medical, dental and mental health care 24 hours a day, seven days a week. Health care staff is on site at all times. A review of medical records confirmed emergency care is provided.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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

Components	Rating	Remarks (1000 Char Max)
6. New direct care staff will receive tuberculosis tests prior to their job assignment and periodically thereafter and will be offered the hepatitis B vaccine series.	Meets Standard	A review of medical personnel files confirmed all direct care staff are tested for tuberculosis (TB) upon initial employment and retested annually. Medical staff are also offered the hepatitis B vaccine series.
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	The credential files for health care professionals were reviewed. The files contained job descriptions as well as current and verified licenses or certificates.
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	The ICE National Detainee Handbook and a local supplement are issued to each newly admitted detainee. The handbooks are available in English and Spanish and include information on how to access health care services.
9. In SPCs and CDFs, medical personnel credentialing and verification complies with the standards established by the NCCHC and Joint Commission.	Meets Standard	The facility is a CDF. The credentialing and verification process for medical personnel complies with National Commission on Correctional Health Care (NCCHC) standards.
10. Within 12 hours of arrival, all newly admitted detainees receive initial medical, dental and mental health screening by a health care provider or a detention officer specially trained to perform this function. <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	Medical, dental and mental health screening is performed by a nurse during in-processing. Detention officers do not perform the screenings.
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	Facility staff uses Language Line, a telephonic translation service, when language difficulties inhibit communication with a detainee.
12. The facility has sufficient space and equipment to afford each detainee privacy when receiving health care.	Meets Standard	The health services unit has sufficient equipment, office space and examination rooms to provide detainees privacy when receiving health care.

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)
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 health services unit has its own area that is restricted to authorized personnel. The area is within the confines of the secure perimeter.
14. The medical facility entrance includes a holding/waiting room.	Meets Standard	The health services unit entrance includes a waiting area.
15. The medical facility's holding/waiting room under the direct supervision of custodial staff.	Meets Standard	The waiting area is under the direct supervision of detention staff and under video surveillance.
16. Detainees in the holding/waiting room have access to a toilet and a drinking fountain.	Meets Standard	The waiting area contains a toilet, sink and drinking fountain.
17. Medical records are kept apart from other files. They are: <ul style="list-style-type: none"> Secured in a locked area within the medical unit. With physical access restricted to authorized medical staff. Procedurally, no copies made and placed in detainee files. 	Meets Standard	Detainee medical records are stored in a locked room within the health services unit. Access is limited to authorized medical staff. Copies of medical records are not made and placed in detention files.
18. (MANDATORY) A signed and dated consent form is obtained from a detainee before medical treatment is administered.	Meets Standard	The health records of 20 ICE detainees were reviewed, and all included signed and dated consent for treatment forms. The consents are signed during in-processing. Additional consents are obtained when invasive procedures are considered.
19. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	Meets Standard	Detainees are required to sign a release of medical information form when confidential medical information is provided to outside sources.
20. The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	Meets Standard	Health care staff is routinely provided 24 hours' notice before detainees are transferred or removed from the facility. The notice is adequate to permit preparation of transfer summaries and medications.

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)
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	A medical summary accompanies each ICE detainee when they are transferred. The summary includes the detainee's TB status, active and chronic care problems and current medications. A complete medical record is not sent to the receiving facility unless requested or required for continuity of care.
22. Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL."	Meets Standard	Medical records of transferring detainees are placed in a sealed envelope that is labeled with the detainee's name and A-number. It is also marked "Medical Confidential".
23. Medical screening includes a Tuberculosis (TB) test.	Meets Standard	Detainees receive symptomatic screening for TB during intake. The primary form of screening for TB in this facility is by chest x-ray. The x-ray is taken during in-processing and the detainee is not placed in a housing unit until the results of the x-ray have been received.
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	A nurse conducts a mental health screening for all detainees during the intake process. The screening is completed prior to the 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	As nurses complete the medical and mental health intake screenings, they are immediately reviewed.
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	The health records of 20 ICE detainees housed for more than 14 days were reviewed. All had documentation of comprehensive physical assessments completed by qualified health care providers.
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 in the Special Management Unit have the same access to health care services as the general population.

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>28. Staff provide detainees with health- services (sick call) request slips daily, upon request.</p> <ul style="list-style-type: none"> Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population. Service-request slips are delivered in a timely fashion to the health care provider. 	Meets Standard	Medical Request Forms are available in each housing unit. They are printed in English and Spanish. The detainees place completed forms in a locked box, and the forms are collected at least daily by health care providers.
<p>29. (MANDATORY) The facility has a written plan for the delivery of 24-hour emergency health care when no medical personnel are on duty at the facility, or when immediate outside medical attention is required.</p>	Meets Standard	Medical staff is on site at all times. The facility medical emergency plan addresses delivery of emergency health care when immediate outside medical attention is needed.
<p>30. The plan includes an on-call provider.</p>	Meets Standard	The on-call provider list is posted in the medical records room, the nurses' station and central control.
<p>31. The plan includes a list of telephone numbers for local ambulances and hospital services.</p>	Meets Standard	The telephone numbers of local hospitals and the ambulance service are posted in the medical records room, the nurses' station and central control.
<p>32. The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.</p>	Meets Standard	Facility policies outline security and safety procedures to be used when providing emergency health care.
<p>33. (MANDATORY) Detention and health care personnel will be trained, at least annually, to respond to health-related situations within four minutes and to properly use first aid kits, available in designated areas.</p>	Meets Standard	Detention and health care staffs are trained annually in cardiopulmonary resuscitation (CPR), first aid and the required four-minute response to medical emergencies. Facility emergency plans require a four-minute response time to health-related situations. There is no place within the facility that cannot be accessed by trained staff in less than four minutes.
<p>34. Where staff are used to distribute medication, a health care provider properly trains these officers.</p>	N/A	Only health care staff distribute medications.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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

Components	Rating	Remarks (1000 Char Max)
35. Pharmaceuticals and nonprescription medicines will be stored, inventoried, dispensed, and administered in accordance with sound standards and facility needs for safety and security.	Meets Standard	All pharmaceuticals are inventoried, dispensed, administered and stored with consideration for facility safety and security needs. Locked medication carts are stored in the locked medication storage room when not in use.
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	Medical policy describes procedures for use of the formulary, requests for non-formulary medications, prescription practices, ordering, distribution and storage, dispensing and disposal of medications and managing controlled medications.
37. All pharmaceuticals are stored in a secure area with the following features: <ul style="list-style-type: none"> • A secure perimeter; • Access limited to authorized medical staff (never detainees); • Solid walls from floor to ceiling and a solid ceiling; • A solid core entrance door with a high security lock (with no other access); and • A secure medication storage area. 	Meets Standard	Pharmaceuticals are stored in a room that is restricted to authorized medical personnel. The room has concrete walls from the floor to a solid ceiling and is secured with an electronic locking device. The medication storage area is within the secure perimeter. Controlled substances are stored behind additional locked cabinets.

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	The pharmacy has a locking pass-through window. Administration and management is in accordance with state and federal laws. The pharmacy is supervised by a contract pharmacy vendor who conducts quarterly inspections. A review of medication administration records confirmed medications are distributed according to written orders by licensed practitioners.
<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	Medications are administered according to orders written by licensed health care providers. Nurses use a standard Medication Administration Record to document the administration of medications.
<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	Medication is never distributed or delivered by detainees. The facility is medically-staffed 24 hours a day, and health care staff administer all medications.
<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	Detention officers do not distribute medication. All medications are distributed by medical staff.
<p>42. The Warden/Facility receives notification that a detainee that has special medical needs.</p>	Meets Standard	Medical providers notify the facility administrator and/or other facility staff when a detainee has special medical needs by completing a Special Needs Notice and/or a Health Summary for Classification form.

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	Requests for examination by independent medical providers or experts are communicated to and approved only by ICE. The facility provides a room for the examination or interview or transports the detainee to the outside provider. Facility medical staff does not participate in the process.
44. (MANDATORY) Each facility has a written plan (or plans) that address the management of infectious and communicable diseases, including prevention, education, identification, surveillance, immunization (when applicable), treatment, follow-up, isolation (when indicated), and reporting to local, state, and federal agencies. Plans include: <ul style="list-style-type: none"> • Coordination with public health authorities; • Ongoing education for staff and detainees; • Control, treatment, and prevention strategies; • Protection of individual confidentiality; • Media relations; • Management of tuberculosis, hepatitis A, B, and C, HIV infection, avian influenza, and • Reporting communicable diseases to local and/or state health departments in accordance with local and state regulations. 	Meets Standard	Health care policy outlines procedures for the management of TB, hepatitis, HIV, sexually transmitted diseases and other communicable diseases. The facility provides information on reportable communicable diseases to the state public health department and to Immigration Health Service Corps (IHSC). Media inquiries are referred to the facility administrator or the ICE Field Office. Detention and medical staffs receive training on infectious diseases during their initial orientation and annual refresher training. Facility medical policy provides guidance on infectious and communicable disease prevention, identification, surveillance, immunization, treatment, follow up, observation and reporting.
45. Detainees diagnosed with a communicable disease are isolated according to local medical operating procedures.	Meets Standard	Detainees diagnosed or suspected of having serious communicable diseases are isolated in one of five negative pressure isolation rooms.

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	A digital chest x-ray is the primary screening method for TB at this facility. Chest x-rays are interpreted within four hours and always prior to the detainee's placement in the general population. Detainees that are not screened are housed separately.
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-rays suggesting active TB are housed in one of five negative pressure isolation rooms until cleared by medical staff to enter the general population.
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	The facility has access to routine and emergency transportation to health care services outside the facility.
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	The facility uses a short stay unit within the health services area to monitor detainees who require close, chronic or convalescent medical or mental health supervision. The detainees are managed in accordance with orders issued by a licensed physician, physician assistant, nurse practitioner or mental health professional.
50. (MANDATORY) Female detainees have access to pregnancy testing and pregnancy management services that include routine high-risk prenatal care, addiction management, comprehensive counseling and assistance, nutrition, and postpartum follow-up.	Meets Standard	Female detainees receive pregnancy testing during the intake process. Facility policy addresses routine and high-risk prenatal care, addiction management, counseling and assistance, nutrition and post-partum follow-up.

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)
51. (MANDATORY) Detainees with chronic conditions (such as hypertension and diabetes) will receive periodic care and treatment that includes monitoring of medications, laboratory testing, and chronic care clinics, and others will be scheduled for periodic routine medical examinations, as determined by the health authority	Meets Standard	The health records of 15 ICE detainees with chronic care conditions were reviewed. The records confirmed timely and regular monitoring, testing and treatment as determined by the medical director.
52. The Facility Administrator, or other designated staff will be notified in writing of any detainees whose special medical or mental health needs requiring special consideration in such matters as housing, transfer, or transportation.	Meets Standard	The facility administrator or other designated staff is notified regarding a detainee's need for special medical or mental health accommodation for matters such as housing, transfer or transportation. Notification is given by medical staff completing a Special Needs Notice and/or a Health Summary for Classification form. Information on detainees requiring special consideration during transfer transportation is noted on the medical transfer summary.
53. Detainees will have access to emergency and specified routine dental care provided under direction and supervision of a licensed dentist.	Meets Standard	The health services unit includes a two-chair dental clinic. Detainees have access to emergency and specified routine dental care. A licensed dentist and dental assistant provide on-site services two days per week.
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	The health records of 10 detainees with mental health referrals were reviewed. Documentation confirmed timely evaluation and regular follow up by a mental health professional.
55. Crisis intervention services are available for detainees who experience acute mental health episodes.	Meets Standard	When detainees experience acute mental health episodes, they are referred to one of two emergency departments in the local community.

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)
56. Medical and mental health interviews, examinations, and procedures will be conducted in settings that respect detainees' privacy, and female detainees will be provided female escorts for health care by male health care providers.	Meets Standard	Medical and mental health interviews, examinations and treatment services are conducted in offices or rooms that ensure privacy. Female chaperones are provided when examinations are performed on female detainees by male health care providers.
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	The health records of 10 detainees with mental health referrals were reviewed. All 10 included a comprehensive evaluation by a psychiatrist or clinical psychologist within seven days of the referral.
58. (MANDATORY) Restraints for medical or mental health purposes may be authorized only by a qualified medical or mental health provider, after reaching the conclusion that less restrictive measures are not successful. The facility has written procedures that specify: <ul style="list-style-type: none"> • The conditions under which restraints may be applied; • The types of restraints to be used; • How a detainee in restraints is to be monitored; • The length of time restraints are to be applied; • Requirements for documentation, including efforts to use less restrictive alternatives; and • After-incident review. • The medical authority or mental health provider completes a Post-Restraints Observation Report form DIHS-867 or similar form. 	Meets Standard	Facility and medical policies provide guidance for the application of restraints. The medical policy requires authorization for therapeutic restraints by a licensed independent medical provider and documentation that less restrictive measures have not been successful. Additionally, the policies outline the conditions under which the restraints may be used, the types of restraints to be used, restraint monitoring, the length of time the restraints may be applied and the requirement for an after-incident and post-restraint application review.

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

PART 4 – 22. MEDICAL CARE (Key: V)

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

Components	Rating	Remarks (1000 Char Max)
<p>59. (MANDATORY) Involuntary administration of psychotropic medications to detainees complies with applicable laws and regulations and the authorizing physician or psychiatrist will:</p> <ul style="list-style-type: none"> • Specify the duration of therapy; • Obtain an order authorizing the administration of the drug from a Federal District Court. • Document that less restrictive intervention options have been exercised without success; • Detail how the medication is to be administered; • Monitor the detainee for adverse reactions and side effects; and • Prepare treatment plans for less restrictive alternatives as soon as possible. 	Meets Standard	<p>Per the HSA, no detainees in this facility have been considered for involuntary psychotropic medication. Facility policy requires a physician's order for the administration of involuntary psychotropic medication. Policy requires the order to comply with established regulations, guidelines and laws, to specify the reason and duration of therapy, to document that less restrictive intervention options have been exercised without success and to specify how the medication is to be administered. The order must also include monitoring of the detainee for adverse reactions and side effects. The treatment plan must include less restrictive alternatives as soon as possible. Prior to the implementation of involuntary psychotropic medication, the facility would notify ICE officials who would in turn contact the ICE Chief Counsel to petition for legal authorization.</p>
<p>60. An initial dental screening exam should be performed within 14 days of the detainee's arrival. If no on-site dentist is available, the initial dental screening may be performed by a physician, physician's assistant, nurse practitioner or trained RN.</p>	Meets Standard	<p>A brief screening for dental concerns is completed by nursing staff during the medical intake screening process. The health records of 20 ICE detainees were reviewed and confirmed that all also had dental screening performed by a physician, physician assistant or nurse practitioner.</p>

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)
61. In each detention facility, the designated health authority and Facility Administrator determines the contents, number, location(s), use protocols, and procedures for monthly inspections of first aid kits.	Meets Standard	First aid kits are located in locations throughout the facility. The locations and contents of the first aid kits are specified by the facility administrator and the health authority. The kits are closed with a numbered seal and are inspected monthly by a registered nurse. If a kit is opened, the medical unit is notified of the need to restock and reseal the kit. Staff receive annual training on the provision of first aid treatment.
62. An automatic external defibrillator should be available for use at the facility.	Meets Standard	A minimum of three automated external defibrillators (AEDs) are available for use in the facility.
63. If a detainee refuses treatment, ICE/DRO will be consulted in determining whether forced treatment will be administered, except in emergency circumstances, in which case, ICE/DRO will be notified as soon as possible.	Meets Standard	ICE is consulted prior to the provision of any forced essential 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 HSA and Medical Director meet at least weekly with the facility administrator.
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 collected in appropriately labeled, puncture-resistant, leak-proof containers and is stored in a locked storage area outside the health services unit. The waste is collected by a vendor certified as compliant with Occupational Safety and Health Administration (OSHA) rules. An autoclave is used in the dental clinic for sterilization of non-disposable dental tools.
66. (MANDATORY) The health authority will implement a system of internal review and quality assurance.	Meets Standard	The health authority holds quarterly Continuous Quality Improvement and Performance Improvement meetings. The minutes of the last four quarterly meetings were reviewed.

PART 4 – 22. MEDICAL CARE – Reviewer Summary

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

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

PART 4 – 22. MEDICAL CARE – Reviewer Summary

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

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

Medical, mental health and dental care in the facility are provided by GEO Care and their contractors. Health care is provided in a setting that is clean, properly equipped and adequately staffed. Detainees who present with health care problems beyond the scope of practice for the facility are referred to providers in the local community. The in-processing procedures and physical assessment process identifies detainees with acute and chronic health care needs. Detainees with chronic medical or mental health conditions receive timely and regular follow-up. The health services unit has a short stay unit for monitoring detainees who require close observation. The facility is accredited by the National Commission on Correctional Health Care. Detainees are not charged a co-pay fee for medical, dental, mental health or pharmaceutical services. The standard's rating was based on a review of policies, procedures, the detainee handbook and medical records, on staff interviews and on observations.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 10/12/2012

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	
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	Newly arriving detainees are issued two uniforms, three pairs of socks and undergarments, one gym shirt, one pair of shorts, one pair of shower shoes and one pair of tennis shoes.
3. Additional clothing is available for changing weather conditions and as is seasonally appropriate.	Meets Standard	Long sleeve shirts are issued from September through April. Detainees who work outside the facility are issued a jacket.
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	Detainees are issued one mattress, one pillow, two sheets, one pillow case, one blanket and one towel. The facility is climate controlled. Additional blankets are available, if required.
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	
6. Toilet facilities are: <ul style="list-style-type: none"> Clean Adequate in number and can be used without staff assistance 24 hours per day when detainees are confined in their cells or sleeping areas. ACA Expected Practice 4-ALDF-4B-08 requires that toilets be provided at a minimum ratio of one for every 12 male detainees or one for every 8 female detainees. For males, urinals may be substituted for up to one-half of the toilets.	Meets Standard	Toilet facilities in the housing units were clean. The ratio of toilets to detainees is 1:1.4 for males and 1:8 for females.

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>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	Bathing facilities in the housing units were clean. The temperature logs for the showers were reviewed and showed operable temperatures averaging 105 degrees Fahrenheit. The ratio of wash basins and showers is within accepted standards.
<p>8. Detainees with disabilities are provided adequate facilities, support, and assistance needed for self-care and personal hygiene.</p>	Meets Standard	One cell in each housing unit is designated for detainees with physical disabilities. There is also one shower in each housing unit that can be used by detainees using a wheelchair.
<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	
<p>10. Food service detainee volunteer workers are permitted to exchange outer garments daily.</p>	Meets Standard	Food service workers are issued five uniforms and are permitted to exchange their outer garments daily.
<p>11. Volunteer detainee workers are permitted to exchanges of outer garments more frequently.</p>	Meets Standard	Volunteer detainee workers are permitted to exchange their outer garments more frequently than detainees who do not work.

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)

Each detainee is able to maintain acceptable personal hygiene practices. Detainees have access to adequate bathing facilities and personal hygiene products. The housing environment is clean and sanitary. Detainees are issued an adequate supply of clothing, linens, bedding and towels. The standard's rating was based on a review of policy and procedures, staff interviews and observations.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

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 facility has a suicide prevention and intervention policy that has been approved and signed by the health authority and the Warden.
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	All staff receive training on suicide prevention and intervention during pre-service and annual refresher training.
4. Training prepares staff to: <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	The PowerPoint presentation for suicide prevention and intervention training was reviewed. The training addresses the warning signs of suicidal behavior, appropriate responses, demographic, cultural and precipitating factors, referral procedures, housing, monitoring and documentation requirements and follow-up monitoring of detainees who have already attempted suicide.

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>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	The health records of 20 ICE detainees were reviewed. The records confirmed that screening for suicide potential is completed by a nurse during the in-processing mental health screening. The screening is conducted within 12 hours of a detainee's arrival and before his/her assignment to a housing unit. Detention officers do not conduct the mental health or suicide potential screening.
6. Written procedures contain when and how to refer at-risk detainees to medical staff and procedures are followed.	Meets Standard	Facility policy requires all staff to immediately refer a detainee to healthcare staff when he/she is identified as being at risk for suicide through intake screenings, staff observations or detainee self-referrals.
7. Written procedures include returning a previously suicidal detainee to the general population, upon written authorization of the clinical director or appropriate health care professional.	Meets Standard	Facility policy requires an order initiated by the clinical director or mental health provider before returning a previously suicidal detainee to the general population.
8. The facility has a designated isolation room for evaluation and treatment.	Meets Standard	The facility has a designated isolation room for monitoring detainees with suicide potential.
9. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	Meets Standard	The suicide watch cell does not have sharp or small items that could be used in a suicide attempt.
10. Medical staff have approved the room for this purpose.	Meets Standard	The suicide watch cell is within the health services unit and has been approved for this purpose by medical staff.
11. Staff observe and document the status of a suicide-watch detainee at least once every 15 minutes/constant observation.	Meets Standard	Four medical records of ICE detainees on suicide watch were reviewed and confirmed that detention staff document their observations at least every 15 minutes, at irregular intervals.

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

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

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

Components	Rating	Remarks (1000 Char Max)
12. At facilities with twenty-four-hour medical staff, observation of imminently suicidal detainees by medical or detention staff shall occur no less than every 15 minutes. The Clinical Director (CD) may recommend constant direct supervision. If a detainee is clinically evaluated and determined to be at risk for suicide, medical staff shall document the status of the detainee in the medical record at least every two hours, unless otherwise directed by the CD.	Does Not Meet Standard	For all ICE detainee suicide watches, a correctional officer constantly observes the detainee. The officer's observations are documented at least every 15 minutes. When detainees are on direct observation status, a nurse documents his/her observations in the medical record. Nursing staff do not document the status of the detainee every two hours. The standard requires nursing staff to document their observations daily, instead of every two hours as required by the component. The facility adheres to the standard.
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	The facility is a CDF and has 24-hour medical staffing. ICE personnel are notified when an ICE detainee is placed on suicide watch. ICE personnel receive frequent updates from the health authority or Clinical Director regarding the detainee's status and need for further evaluation.
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	Facility policy requires a mortality review in the event of a completed suicide or serious suicide attempt. Critical incident debriefings would be provided to all affected staff and detainees.

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 facility has a comprehensive suicide prevention and intervention program. All staff are trained in the recognition, referral and management of potentially suicidal detainees during pre-service and annual refresher training. Facility policy and practices protect the health and well-being of potentially suicidal detainees. Suicidal detainees are monitored appropriately and treated with sensitivity. There have been no ICE detainee suicides or serious suicide attempts since the previous inspection. The standard's rating was based on a review of training documents, detainee health records, policies and procedures, on observations and on staff interviews.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

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)

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	Detainees who have serious or terminal illnesses and need care beyond the scope of services provided at this facility are transferred to a more appropriate detention or off-site medical facility.
2. The facility or appropriate ICE office promptly notifies the next-of-kin of the detainee's: medical condition. <ul style="list-style-type: none"> The detainee's location. The visiting hours and rules at that location. 	Meets Standard	Policy requires staff to notify ICE when a detainee is transferred to an offsite medical facility. ICE notifies the next of kin regarding the detainee's location and visiting restrictions.
3. There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives. <ul style="list-style-type: none"> These guidelines include instructions for detainees who wish to have a living will. These guidelines provide the detainee the opportunity to have a private attorney prepare the documents, at the detainee's expense. 	Meets Standard	Policy addresses living wills and advanced directives. Detainees are permitted to employ a private attorney to aid in preparation of these documents, but at their expense.
4. There is a policy addressing "Do Not Resuscitate Orders"	Meets Standard	Policy addresses Do Not Resuscitate (DNR) orders. Detainees are permitted to execute a "Colorado Directive" for advance directives and living wills.
5. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation.	Meets Standard	Policy states that detainees with a DNR order will 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	Policy requires staff to notify ICE when a detainee has a DNR order in his/her medical record. ICE then notifies the ICE Medical Director and Headquarters Legal Counsel.

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)
7. The facility has written procedures to address the issues of organ donation by detainees.	Meets Standard	Policy requires staff to notify ICE when a detainee requests to participate in an organ donation program.
8. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in custody.	Meets Standard	Policy requires staff to notify ICE when a detainee dies in custody. ICE notifies the family members and consulates.
9. The facility has a policy and procedure to address the death of a detainee while in transport.	Meets Standard	Facility transportation policy addresses the death of a detainee while in transit.
10. At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	Meets Standard	The remains of the one ICE detainee who died in this facility since the last inspection were disposed of in accordance with the provisions of this standard
11. In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. <ul style="list-style-type: none"> If the detainee is a U.S. military veteran, the Department of Veterans Affairs notified. 	Meets Standard	Per the Assistant Field Office Director (AFOD), ICE will provide an indigent's burial if neither the family nor consulate claims the remains. He also confirmed that ICE would notify the Department of Veterans Affairs if the detainee was a U.S. military veteran. Since the last inspection, there was one ICE detainee death at this facility. Neither the family nor consulate claimed the body and an indigent's burial was provided.
12. An original or certified copy of a detainee's death certificate is placed in the subject's A-File.	Meets Standard	Since the last inspection, there was one death of an ICE detainee at this facility. The detainee's A-file contained a copy of his death certificate.

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)
<p>13. The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as;</p> <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	Since the last inspection, there was one death of an ICE detainee at this facility. Interviews with ICE and facility staffs, as well as review of the A-file and medical record, confirmed the facility and ICE followed established policies regarding performance of an autopsy, obtaining state-approved death certificates and local transportation of the body.
14. ICE staff follow established procedures to properly close the case of a deceased detainee.	Meets Standard	ICE followed established procedures for closing the case of the one ICE detainee who died in this facility since the last inspection.

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

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

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

The facility does not routinely house detainees who are seriously or terminally ill. However, the facility has policies and procedures to address the preparation of advance directive, living wills and do not resuscitate orders. Procedures are in place for the notification of families and consulates in the event of a detainee's death or serious illness. The standard's rating was based on a review of policies, a review of a deceased detainee's medical record, death certificate and A-file, and staff interviews.

There was one death of an ICE detainee since the prior inspection. The death involved a 46 year old male from Ghana. He received a timely and comprehensive medical and mental health screening and physical assessment, reported no significant past medical history and denied any significant risk factors for heart disease. In the early morning of 04/12/2012, medical staff responded to a call from the housing unit officer stating that a detainee had chest pain. The detainee was escorted to the health services unit where an electrocardiogram was obtained. The detainee was transported to the local emergency department by ambulance, a cardiac catheterization was performed and an angioplasty was attempted. The detainee experienced a fatal arrhythmia during the procedure and could not be resuscitated. The death certificate listed the cause of death as an anterior myocardial infarction and severe left main coronary artery stenosis. The county coroner declined to perform an autopsy.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

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	The rules for correspondence are provided to detainees in the handbook and are posted in the housing units.
2. The facility provides key information in English, Spanish, and other languages spoken by a significant number of detainees.	Meets Standard	Key information is provided in English and Spanish.
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 to detainees the day it is received by the facility.
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	
5. Staff maintain a logbook-recording acceptance of priority, priority overnight, and certified mail delivered to the facility for a detainee.	Meets Standard	The logbook was reviewed by this inspector and found to be up to date.
6. Staff do not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized in writing by the Facility Administrator or equivalent for prevailing security reasons.	Meets Standard	Incoming general correspondence is opened in the presence of the detainee.
7. Staff do not read incoming general correspondence without the Facility Administrator's prior approval.	Meets Standard	Incoming correspondence is checked for contraband, but not read.
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	Incoming Special Correspondence is opened in the presence of the detainee.
9. Staff are prohibited from reading or copying incoming and outgoing Special Correspondence without the detainee present.	Meets Standard	
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	Outgoing correspondence is sealed by the detainee prior to being put in the mailbox.
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	Written notice is sent to the sender and the addressee when incoming mail is rejected.

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)
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	A receipt is issued to the detainee for any confiscated or withheld items, per policy.
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 Programs Coordinator monitors staff handling of discovered contraband and its disposition. The records were up to date.
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 a detainee is deposited in the detainee's account and a receipt is issued. Any claims of discrepancies are documented and 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	Original identity documents are logged and turned over to ICE staff.
18. Staff provide the detainee a copy of his or her identity document(s) upon request.	Meets Standard	
19. Staff dispose of prohibited items found in detainee mail in accordance with the Detention Standard on "Contraband".	Meets Standard	Soft contraband is either returned to the sender or placed in the detainee's property.
20. Every indigent detainee has the opportunity to mail, at government expense: At least five pieces of special correspondence per week; Three one ounce letters per week; Packages deemed necessary by ICE.	Meets Standard	
21. The facility has a system for detainees to purchase stamps and for mailing all Special Correspondence and a minimum of 5 pieces of general correspondence per week.	Meets Standard	Stamps may be purchased from the commissary.
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	Newspapers are delivered to the housing units. Several magazines are available in the general library.

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

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

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

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)*

The rating for this standard was based on a review of facility policy, interviews with mailroom staff and observation of the processing of incoming mail. The logs maintained by staff handling the mail were found to be up to date. All incoming mail is opened in the presence of the detainee.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 10/12/2012

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 ICE detainee escorted trips for non-medical emergencies are conducted by ICE staff.

Overall Rating: N/A

Reviewer Name (Printed)

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

Completion Date: 10/12/2012

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	Marriage requests are considered on a case-by-case basis by ICE staff.
2. The Field Office Director reviews every marriage request rejected by a Facility Administrator or IGSA. Rejections are documented.	Meets Standard	All marriage requests go directly to ICE for review and processing.
3. It is standard practice to require a written request for permission to marry.	Meets Standard	All marriage requests must be submitted to ICE in writing.
4. The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	Meets Standard	All marriage requests must be submitted to ICE in writing and include a statement from the intended spouse confirming that individual's intent to marry the requesting detainee.
5. The Facility Administrator provides a written copy of his or her decision to the detainee and his or her legal representative.	Meets Standard	
6. When permission is denied, the Facility Administrator states the basis for his or her decision along with instructions on how the detainee can file an appeal.	Meets Standard	
7. The Facility Administrator provides the detainee with a place and time to make wedding arrangements.	Meets Standard	The facility will provide the detainee with a place and time to make wedding arrangements, as well as a place for the ceremony to be conducted.
8. The detainee handbook explains the marriage request process.	Meets Standard	
9. In SPCs the Facility Administrator or highest ranking ICE official on-site is the only officer authorized to approve a request to marry.	Meets Standard	At this CDF, marriage requests go directly to ICE for review and processing.

PART 5 – 28. MARRIAGE REQUESTS – Reviewer Summary

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

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

The rating of this standard was based upon a review of policy, a review of pertinent documentation and interviews with the Programs Coordinator. All marriage requests are reviewed on a case-by-case basis by ICE. Facility staff collects the required documentation from the detainee and forwards it to ICE for a decision. If the marriage is approved, the facility provides the detainee with a place for the ceremony. Facility personnel, however, do not participate in any manner in the marriage ceremony.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

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	
2. A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.	Meets Standard	The recreation specialist provides diversified recreational opportunities for the 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.	Meets Standard	The recreation program utilizes one volunteer detainee worker and provides supervision to that worker.
5. The recreational specialist or trainee equivalent oversees recreation programs for Special Management Unit and special-needs detainees.	Meets Standard	The recreation specialist ensures recreation opportunities are available to detainees housed in the Special Management Unit (SMU).
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	Meets Standard	
7. Outside activities are restricted to limited-contact sports.	Meets Standard	
8. Each detainee has the opportunity to participate in daily recreation.	Meets Standard	Indoor and outdoor recreation opportunities are provided to all detainees a minimum of one hour per day, 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	
11. Staff conduct searches of recreation areas before and after use.	Meets Standard	Detention staff conduct searches of the recreation areas prior to and after use by detainees.
12. Recreation areas are under constant staff supervision.	Meets Standard	
13. Supervising staff are equipped with radios.	Meets Standard	

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)
14. The facility provides detainees in the SMU at least one hour of outdoor recreation time daily, five times per week.	Meets Standard	Indoor and outdoor recreation opportunities are provided to detainees housed in the SMU a minimum of one hour per day, seven days a week.
15. Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his or her recreation privileges.	Meets Standard	
16. Special programs or religious activities are available to detainees.	Meets Standard	Religious programming is available to detainees.
17. All volunteers have completed an orientation program with documentation required before entering a secure portion of the facility where detainees are present.	Meets Standard	
18. Visitors, relatives or friends of detainees are not allowed to serve as volunteers.	Meets Standard	
19. If the facility has no outside recreation, are detainees considered for transfer after six months?	N/A	Outdoor Recreation is offered.
20. If yes, written procedures ensure timely review of all eligible detainees.	N/A	Outdoor Recreation is offered.
21. Case officers make written transfer recommendations about every six-month detainee to the Facility Administrator.	N/A	Outdoor Recreation is offered.
22. The Facility Administrator documents all detainee-transfer decisions, whether yes or no.	N/A	Outdoor Recreation is offered.
23. The detainee's written decision for or against an offered transfer documented in his or her A-file.	N/A	Outdoor Recreation is offered.
24. Staff notify the detainee's legal representative of his or her decision to accept/decline a transfer.	N/A	Outdoor Recreation is offered.
25. If no recreation is available, the ICE Field Office routinely review transfer eligibility for all detainees after 60 days.	N/A	Outdoor Recreation is offered.
26. Does the A-file of every detainee held more than 60 days without access to recreation contains either a transfer-waiver signed by the detainee or the Facility Administrator's written determination of the detainee's ineligibility for transfer.	N/A	Outdoor Recreation is offered.
27. The detainee's legal representative is notified of the detainee's/Facility Administrator's decision.	N/A	Outdoor Recreation is offered.

PART 5 - 29. RECREATION – Reviewer Summary

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

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

PART 5 - 29. RECREATION – Reviewer Summary

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

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

The rating for this standard was based upon a review of facility policy, interviews with the Programs Coordinator and Recreation Specialist and personal observations.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

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	The facility encourages detainee participation in religious services. Services are provided in the major languages spoken in the facility.
2. Space is available for detainees to participate in religious services.	Meets Standard	
3. The facility allows detainees to observe the major “holy days” of their religious faith. • List any exceptions.	Meets Standard	Detainees are allowed to participate in the major holy days of their religious faith. No exceptions were noted.
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	Recognized holy day observances are not limited in the facility unless they would interfere with the safe and orderly operation of the facility. Facility accommodations for holy day observances include the bulleted items listed in this component.
5. Each detainee is allowed religious items in his/her immediate possession; refer to the Funds and Personal Property Standard.	Meets Standard	
6. Volunteer’s credentials are checked and verified before allowing participation in detainee programs.	Meets Standard	Volunteers are subject to background checks and credential verifications before being allowed to participate in detainee programming.
7. Members of faiths not represented by clergy may request to present their own services within security allowances.	Meets Standard	The facility allows detainees whose religious beliefs are not represented by clergy to present their own services as long as those services do not disrupt the safe and secure operation of the facility.
8. Detainees in the Special Management Unit may participate in religious practices unless otherwise documented for the safety and security of the facility.	Meets Standard	

PART 5 – 30. RELIGIOUS PRACTICES – Reviewer Summary

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

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

The rating for this standard was based upon a review of the facility policy, interviews with the Programs Coordinator and a review of documents and schedules.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

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 located in the housing units. TTY devices are available upon request.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	Meets Standard	The telephone access policy is explained to detainees during orientation.
3. Notification explaining the facilities telephone policy is in the Detainee Handbook.	Meets Standard	The telephone policy is explained in the facility handbook.
4. Access rules, including updated telephone and consulate number, are posted in housing units.	Meets Standard	Telephone access rules and the consulate numbers are posted on the bulletin boards in the housing units.
5. The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	Meets Standard	Key information is provided in English and Spanish.
6. Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	Meets Standard	Telephones are provided at a ratio of 1 telephone per 20 detainees in the male housing units and 1 telephone per 16 detainees in the female housing unit.
7. Telephones are inspected daily by facility staff to ensure that they are in good working order.	Meets Standard	
8. Telephones are located a reasonable distance from televisions.	Meets Standard	Telephones are located away from the televisions. Also, detainees use headphones to listen to the televisions.
9. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	Meets Standard	
10. The facility administration monitors repair progress and takes appropriate measures to ensure that the required repairs are begun and completed timely.	Meets Standard	The Business Manager monitors the repair progress, which is normally completed within hours of notification.
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	Staff allow detainees to use a cordless, unmonitored phone to place confidential calls.
13. The facility provides the detainees with the ability to make non-collect (special access) calls.	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)
14. Special Access calls are at no charge to the detainees.	Meets Standard	The Special Access numbers are programmed into the detainee telephone system and are free of charge.
15. In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.	N/A	The facility meets this requirement.
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	Detainees submit a request and staff arrange these calls, allowing the detainee to use a cordless telephone in the housing unit.
18. All telephone restrictions are documented.	Meets Standard	Staff advised that if there were any phone restrictions, they would be documented. There have been no restrictions in the past twelve months.
19. The facility has a system for taking and delivering emergency detainee telephone messages.	Meets Standard	Once the emergency has been verified, the message is delivered to the detainee.
20. Phone call messages are given to detainees as soon as possible.	Meets Standard	Policy states that messages are to be delivered to detainees no less than three times per day.
21. Detainees are allowed to return emergency phone calls as soon as possible.	Meets Standard	Detainees are allowed to use a cordless telephone in the housing unit to return emergency calls.
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	Portable phones are provided to the detainee upon request.

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)
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	Notice is posted on each telephone and on the wall above the phones. This notice is also in the facility handbook.
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	This inspector was able to access the Office of Inspector General (OIG) number using a telephone in the female housing unit.
28. The Field Office Director has assigned ICE staff to check and report on the serviceability of facility phones. This is documented on a weekly basis	Meets Standard	A review of the Facility Liaison Visit Checklists indicated that ICE staff check the phones weekly.

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)*

The rating for this standard was based on a review of facility policy, interviews with facility and ICE staff and observation of the housing unit postings and telephones. A review of logs provided by ICE staff indicated that they are performing weekly telephone serviceability checks. Facility staff check the phones daily. Notice of monitoring is clearly posted near the telephones, and detainees interviewed voiced no complaints regarding the telephone system. This inspector was able to make contact with the OIG messaging system using a telephone in a housing unit.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 10/12/2012

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 normally allowed 30 minutes per visit. If the visitor has traveled over 60 miles, they are allowed one hour for the visit.
3. The visitation schedule and rules are available to the public.	Meets Standard	The visitation schedule is posted in the lobby and is available on the facility web site. The schedule is also noted in the facility handbook.
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	A written copy is available upon request.
6. A general visitation log is maintained.	Meets Standard	A written log and an electronic log are maintained. A separate log is maintained for legal visitation.
7. Detainees are permitted to retain authorized personal property items specified in the standard.	Meets Standard	
8. A visitor dress code is available to the public.	Meets Standard	The dress code is posted in the lobby.
9. Visitors are searched and identified according to standard requirements.	Meets Standard	Visitors must present a valid photo ID and must pass through a metal detector.
10. The requirement on visitation by minors is complied with.	Meets Standard	Minors are allowed to visit if accompanied by an adult.
11. At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, within the first 30 days.	N/A	Minors are allowed to visit.
12. After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.	N/A	Minors are allowed to visit.
13. Anytime a visit is denied, to either a general population detainee or SMU detainee, the denial is documented.	Meets Standard	Staff advised that any denials would be documented. There have been no denials in the past twelve months.

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)
14. Detainees in special housing are afforded visitation.	Meets Standard	Detainees in the Special Management Unit are allowed visitation separate from the general population visitation.
15. Legal visitation is available seven (7) days a week, including holidays.	Meets Standard	
16. On regular business days legal visitation hours provide for a minimum of eight (8) hours per day and a minimum of four hours per day on weekends and holidays.	Meets Standard	Legal visitation is allowed from 8:00 a.m. to 9:00 p.m. seven days a week.
17. On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	Meets Standard	A tray or sack lunch will be brought to the detainee.
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	There are three rooms available for contact attorney visits, allowing for the exchange of documents.
19. There are written procedures governing detainee searches.	Meets Standard	
20. Legal representatives and assistants are subject to a non-intrusive search – such as a pat-down search of the person or a search of the person's belongings - at any time for the purpose of ascertaining the presence of contraband.	Meets Standard	Legal representatives must pass through the metal detector and are subject to a pat search. Belongings must be run through the x-ray scanner.
21. Per the Standard, prior to each visit, legal service providers and assistants are identified.	Meets Standard	Attorneys must present a current Bar Card. Legal assistants must present proof of employment as such.
22. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	Meets Standard	This list was observed on the housing unit bulletin boards.
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	All requests for tours are referred to ICE.
24. Provisions for NGO visitation as stated in the Detention Standards are complied with.	Meets Standard	All non-governmental organization (NGO) visitation must be approved by ICE.
25. Law enforcement officials, requesting to visit with a detainee, are referred to the ICE Facility Administrator for approval.	Meets Standard	Law enforcement officials are referred to ICE for approval.
26. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the Facility Administrator or ICE Field Office.	Meets Standard	The Warden will weigh the nature and extent of the individual's conduct to determine visitation rights.

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)*

The rating for this standard was based on review of facility policy, interviews of facility and ICE staff and observation of the visitation areas. General visitation is non-contact. The facility does have an area for contact visitation that is currently only used when a special visit has been authorized by the Warden or ICE.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

Reviewer Signature (for printed form submission):

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

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

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
1. The facility has a voluntary work program.	Meets Standard	
2. Detainee housekeeping meets acceptable levels of neatness, cleanliness and sanitation standards.	Meets Standard	The housing areas and other areas of the facility are clean and sanitary. The facility is well-maintained.
3. At IGSA's detainees are never allowed to work outside the secure perimeter. SPCs and CDFs detainees classified as level 1 have the opportunity to participate in special details outside the secure perimeter under direct supervision.	Meets Standard	At this CDF, level 1 detainees have the opportunity to participate in special outside details under direct supervision.
4. Written procedures govern selection of detainees for the Voluntary Work Program. <ul style="list-style-type: none"> The same procedures apply for replacement workers as for "new" workers. Staff follow written procedures. 	Meets Standard	Written procedures are utilized in the selection process for detainees who will participate in the voluntary work program.
5. Where possible, physically and mentally challenged detainees participate in the program.	Meets Standard	Physically and mentally challenged detainees are not excluded from participation in the voluntary work program. Detainees with less severe disabilities have the opportunity to participate in the voluntary work program in appropriate work projects.
6. The facility complies with work-hour requirements for detainees, not exceeding: <ul style="list-style-type: none"> Eight hours a day. Forty hours a week. 	Meets Standard	The detainee workday approximates the workday in the community. Detainees participating in the voluntary work program are required to work according to a fixed schedule. The normal scheduled workday for a detainee employed full-time is a maximum of 8 hours. Detainees who wish to participate in the work program will not be permitted to work in excess of 8 hours daily, or 40 hours weekly.

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)
7. Detainee volunteers ordinarily work according to a fixed schedule.	Meets Standard	Detainee work schedules are maintained in the facility Program Office.
8. If a detainee is removed from a work detail, staff place the written justification for the action in the detainee's detention file.	Meets Standard	Written notification of a detainee's removal from a voluntary work detail is placed in the detainee's detention file.
9. Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	Meets Standard	Voluntary workers are trained in the responsibilities of their work assignments. Documentation of the training is maintained and was reviewed during the inspection.
10. The voluntary work program meets: <ul style="list-style-type: none"> • OSHA standards • NFPA standards • ACA standards 	Meets Standard	Detainee working conditions meet all applicable federal, state and local work safety laws and regulations.
11. Medical staff screen and formally certifies detainee food service volunteers; <ul style="list-style-type: none"> • Before the assignment begins • As a matter of written procedure 	Meets Standard	Medical staff screen all detainees used as voluntary workers in the food service program. This screening is required by facility policy.
12. Detainees receive safety equipment/ training sufficient for the assignment	Meets Standard	
13. Proper procedure is followed when an ICE detainee is injured on the job.	Meets Standard	An injury to a detainee voluntary worker is immediately reported to the work supervisor. The work supervisor will immediately notify facility medical staff.

PART 5 – 33. VOLUNTARY WORK PROGRAM – Reviewer Summary

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

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

The rating for this standard was based upon a review of facility policy, interviews with the Program Coordinator and personal observation. The facility averages 75 detainee workers per day, and pays each worker one dollar per day.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6), (b)(7)(c) **Completion Date:** 10/12/2012

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

PART 5 – 33. VOLUNTARY WORK PROGRAM – Reviewer Summary

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

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	
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 facility-specific detainee handbook is available to detainees in English and Spanish.
3. A procedure for requesting interpretive services for essential communication has been developed.	Meets Standard	
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 orientation video is used to supplement the information provided in the handbook.
6. The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.	Meets Standard	Revisions are communicated to staff members and detainees by posting copies of the changes on bulletin boards in housing units and other prominent areas, informing new arrivals during the orientation process and distributing a memorandum to staff.
7. There is an annual review of the handbook by a designated committee or staff member.	Meets Standard	The handbook is reviewed annually and revised as needed.
8. The detainee handbook address the following issues: <ul style="list-style-type: none"> Personal Items permitted to be retained by the detainee. Initial issue of clothes, bedding and personal hygiene items. How to access care. 	Meets Standard	The handbook addresses all listed topics.
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	Medical examinations are conducted within 14 days of arrival at the facility.

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)
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	
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	
17. The handbook addresses religious programming.	Meets Standard	
18. The handbook states times and procedures for commissary or vending machine usage. (where available)	N/A	There are no vending machines for detainee use.
19. The handbook describes the detainee voluntary work program.	Meets Standard	
20. The handbook describes the library location and hours of operation and law library procedures and schedules.	Meets Standard	
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	
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	

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)
<p>26. The handbook describes the detainee disciplinary policy and procedures, including:</p> <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 listed topics are addressed in the handbook.
<p>27. The grievance section of the handbook explains all steps in the grievance process – Including:</p> <ul style="list-style-type: none"> Informal (if used) and formal grievance procedures; The appeals process; In CDFs procedures for filing an appeal of a grievance with ICE. Staff/detainee availability to help during the grievance process. Guarantee against staff retaliation for filing/pursuing a grievance. How to file a complaint about officer misconduct with the Department of Homeland Security. 	Meets Standard	The handbook addresses all listed topics.
28. The handbook describes the medical sick call procedures for general population and segregation.	Meets Standard	
<p>29. The handbook describes the facility recreation policy including:</p> <ul style="list-style-type: none"> Outdoor recreation hours. Indoor recreation hours. In dorm leisure activities. Rules for television viewing. 	Meets Standard	
30. The handbook describes the detainee dress code for daily living; and work assignments and the meaning of color-coded uniforms.	Meets Standard	
31. The handbook specifies the rights and responsibilities of all detainees.	Meets Standard	
32. Detainees are required to sign for the handbook to ensure accountability.	Meets Standard	
33. Orientation materials are provided to illiterate detainees either orally or via audio/video tapes in a language they can understand.	Meets Standard	Translation assistance will be provided to detainees exhibiting literacy or language problems and to those who request it. This may involve translators from the private sector or from the detainee population.

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

PART 6 - 34. DETAINEE HANDBOOK – Reviewer Summary

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

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

The rating for this standard was based upon a review of the facility handbook. The local detainee handbook is provided, in English or Spanish, to each detainee upon admission and is supplemented by an orientation video presented during admission in the intake holding room. Special arrangements are made by the facility to ensure illiterate detainees are provided the information in the handbook in ways they can comprehend. The handbook is detailed and covers the information required by the standard.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

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	The detainee handbook and the supplemental orientation video provide notification and information to detainees about the facility's informal and formal grievance system.
2. The admissions process includes providing each new arrival with a copy of the detainee handbook (or equivalent).	Meets Standard	Each detainee is provided a copy of the facility handbook as well as the ICE National Detainee Handbook.
3. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> • Informal and formal grievance procedures; • The appeals process and step-by-step procedures; • Staff/detainee availability to help during the grievance process • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Justice. • How to file an emergency grievance. 	Meets Standard	The required steps in the grievance process are described in detail in the facility detainee handbook.
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	Detainees have up to five days to make their concerns known to a member of the staff.
5. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. <ul style="list-style-type: none"> • Detainees may seek help from other detainees or facility staff when preparing a grievance. • Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary. 	Meets Standard	Detainees have access to the grievance committee via formal procedures and may seek the assistance of facility staff or another detainee in preparing a grievance. Assistance is provided to special needs detainees filing grievances.

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	The facility defines an emergency grievance as one that involves an immediate threat to the detainee's health, safety or general welfare. A grievance identified as an emergency is immediately forwarded to the shift supervisor. During regular working hours, if the emergency grievance is not resolved by the shift supervisor, it is forwarded to the Program Coordinator. The Chief of Security is contacted when an emergency grievance is filed after hours and not resolved by the shift supervisor.
7. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	Meets Standard	
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 a grievance log. The log is automated and used to track all detainee grievances. All grievances, including nuisance complaints, are processed in the same manner.

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)
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	In the event the Grievance Coordinator determines a detainee has established a pattern of filing nuisance complaints or otherwise is abusing the system, the grievance will be forwarded to the Warden for review. If the Warden determines the grievance is to be rejected, it will be logged with "Rejected" as the disposition. A copy of the rejected grievance will be provided to the detainee, and a copy will be placed in the detainee's detention file. The determination to reject a grievance cannot be delegated to a level below the Warden.
11. Staff are required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	Meets Standard	The facility is operated by The GEO Group, Inc. All detainee grievances alleging GEO staff misconduct must be reported to the ICE COTR.
12. Informal resolution of a written grievance is documented in the detainee's Detention File.	Meets Standard	
13. Staff comply with the requirement to report allegations of officer misconduct to a supervisor or higher-level official in his or her chain of command, and/or to ICE/DRO Office of Professional Responsibility and/or the DHS Inspector General.	Meets Standard	
14. In SPCs and CDFs, when a Detainee does not accept the grievance committee's decision, he/she files an appeal with the ICE Facility Administrator. <ul style="list-style-type: none"> In all facilities written procedures cover detainee appeals and are included in the detainee handbook 	Meets Standard	
15. In SPCs/CDFs, the detainee has a reasonable timeframe after the incident or informal-grievance outcome to file a formal grievance.	Meets Standard	The detainee has five days after the incident or the proposed resolution of an informal grievance to file a formal grievance.

PART 6 – 35. GRIEVANCE SYSTEM – Reviewer Summary

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

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

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 rating for this standard was based upon a review of the facility grievance policy, interviews with the Programs Coordinator, a review of the grievance log and personal observations.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 10/12/2012

Reviewer Signature (for printed form submission):

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

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

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

Components	Rating	Remarks (1000 Char Max)
1. The facility provides a designated law library for detainee use.	Meets Standard	
2. The law library contains all materials listed in the "Access to Legal Materials" Standard, Attachment A. The listing of materials is posted in the law library. <ul style="list-style-type: none"> In lieu of/or in addition to the physical law library, ICE detainees have access to the Lexus Nexus electronic law library. 	Meets Standard	All materials listed in Attachment A are provided in the LexisNexis electronic law library. The listing of materials is posted. There is also a selection of law books in the library.
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	There are eleven computers equipped with LexisNexis and a photocopier/printer in the library. Sufficient supplies are available.
4. The library contains a sufficient number of chairs, is well lit and is reasonably isolated from noisy areas.	Meets Standard	The library is equipped with chairs for each computer station, is well lit and is quiet.
5. The law library is adequately equipped with typewriters, computers or both and has sufficient supplies for daily use by the detainees.	Meets Standard	In addition to the computers, which have word processing capabilities, there is a typewriter for detainee use. Sufficient supplies are available.
6. Detainees are provided with the means to save legal work in a private electronic format for future use.	Meets Standard	Detainees wishing to save legal work are provided with a flash drive.
7. The facility subscribes to updating services where applicable and legal materials requiring updates are current.	Meets Standard	Quarterly updates to LexisNexis are provided by ICE. The last update was installed 07/12/2012.
8. Outside persons and organizations are permitted to submit published legal material for inclusion in the legal library. Outside published material is forwarded and reviewed by the ICE prior to inclusion.	Meets Standard	Outside published material is allowed once it is approved by ICE.
9. There is a designated ICE or facility employee who inspects, updates, and maintain/replace legal material and equipment on a routine basis. The designee properly disposes outdated supplements and replaces damaged or missing material promptly.	Meets Standard	The facility IT Manager is responsible for maintaining the equipment and updates in the library.

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

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

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

Components	Rating	Remarks (1000 Char Max)
10. Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.	Meets Standard	The law library is available from 7:30 a.m. to 10:00 p.m. Monday through Friday, affording detainees a minimum of 5 hours per week in the library. Additional time will be allowed upon request. The facility handbook specifically advises detainees that they will not be required to forego recreation time in lieu of library usage.
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	Any request that cannot be fulfilled by the facility will be forwarded to ICE.
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	Requests for materials in other languages are forwarded to ICE.
14. Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.	Meets Standard	
15. Detainees housed in Administrative Segregation and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.	Meets Standard	Detainees in the Special Management Unit (SMU) are allowed the same law library access as the general population unless there are security concerns. Legal materials will be taken to the SMU if the detainee cannot go to the library.
16. All denials of access to the law library fully documented.	Meets Standard	Any denial will be documented. Staff reported that there have been no denials in the past twelve months.
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	Staff advised that ICE would be notified if there were any denials of access to the law library or law materials. There have been no denials in the past twelve months.

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

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

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

Components	Rating	Remarks (1000 Char Max)
18. Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	Meets Standard	This is clearly stated in facility policy and in the facility handbook.
19. Indigent detainees are provided with free envelopes and stamps to mail related to legal matters.	Meets Standard	Any detainee who has less than \$15.00 in his/her account will receive free envelopes and stamps.

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)*

The rating for this standard was based on a review of facility policy, interviews of facility and ICE staff and observation of the Law Library. The facility provides a comfortable library equipped with 11 computers with LexisNexis software for detainee use. This inspector was able to access LexisNexis and found it to be up to date.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

Reviewer Signature (for printed form submission):

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

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

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
1. The Field Office is responsive to requests by attorneys and accredited representatives for group presentations.	Meets Standard	The Rocky Mountain Immigrant Advocacy Network (RMIAN) has been conducting group presentations in the facility for several years. There have been no requests from other groups.
2. Upon receipt of concurrence by the Field Office Director, the facility or authorized ICE/DRO Field Office ensures proper notification to attorneys or accredited representatives in a timely manner.	Meets Standard	Facility policy addresses this component.
3. The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.	Meets Standard	Per facility policy, all material must be approved by ICE.
4. Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	Meets Standard	Detainees are shown a video provided by the American Immigration Lawyers Association during the facility orientation process. Information on the RMIAN presentations is in the facility handbook and instructs detainees to submit a request to attend a presentation or to obtain an immigration laws information packet. Facility policy addresses the posting of announcements and sign-up sheets for other groups that might be approved to make presentations.
5. Detainees have access to group presentations on immigration law, procedures and detainee options. Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.	Meets Standard	Group presentations by RMIAN are held in the facility three to five times each week. If a detainee were denied permission to attend a presentation, it would be documented. There have been no denials in the past twelve months.

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)
6. When the number of detainees allowed to attend a presentation is limited, the facility allows a sufficient number of presentations so that all detainees signed up may attend.	Meets Standard	
7. Detainees in segregation, unable to attend for security reasons may request separate sessions with presenters. Such requests are documented.	Meets Standard	
8. Interpreters are admitted when necessary to assist attorneys and other legal representatives.	Meets Standard	
9. Presenters are afforded a minimum of one hour to make the presentation and additional time to conduct a question-and-answer session.	Meets Standard	
10. Staff permit presenters to distribute ICE/DRO-approved materials.	Meets Standard	ICE-approved materials may be distributed during the RMIAN presentations and are also available to detainees in the Law Library.
11. The facility permits presenters to meet with small groups of detainees to discuss their cases after the group presentation. ICE/DRO or authorized detention staff are present but do not monitor conversations with legal providers.	Meets Standard	
12. Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee, and the reasons for suspension are documented. The Headquarters Office for Detention and Removal, Field Operations and Detention management Division is notified when a group or individual is suspended from making presentations.	Meets Standard	Written notification would be made if any presenters were suspended. There have been no suspensions in the past twelve months.
13. The facility plays ICE/DRO-approved videotaped presentations on legal rights, at regular opportunities at the request of outside organizations.	Meets Standard	
14. A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request	Meets Standard	A copy of the policy will be provided upon written request.
15. The facility maintains equipment for viewing approved electronically formatted presentations.	Meets Standard	

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

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

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

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)*

The Rocky Mountain Immigrant Advocacy Network provides legal rights presentations in the facility three to five times per week. The rating for this standard was based on a review of facility policy and interviews of facility staff and the ICE Assistant Field Office Director.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 10/12/2012

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	A detention file is created for every detainee upon admission to the facility.
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	The files reviewed by this inspector contained all pertinent documents.
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	The detention files are maintained in a secure room with limited access.
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 closed detention files reviewed by this inspector contained completed release documents and closed out receipts.
6. The officer closing the Detention File makes a notation that the file is complete and ready to be archived.	Meets Standard	Once complete, the file is dated and archived by the Programs Coordinator.
7. Staff make copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.	Meets Standard	Copies will be sent upon written request.
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	Any file removed from the cabinets is logged out/in.
9. Electronic record-keeping systems and data are protected from unauthorized access.	Meets Standard	Electronic data is 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	Copies of release of information consent forms were noted in some of the files reviewed by this inspector.
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	

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)
12. The Facility Administrator or staff designate ensures that necessary equipment and supplies, including copier and copier supplies are available; all equipment is maintained in good working order and that equipment has the capacity to handle the volume of work.	Meets Standard	Staff interviewed stated that they have the necessary equipment and supplies.
13. The Detention Operations Supervisor or equivalent can direct certain documents be added to a detainee's detention File.	Meets Standard	
14. Archived files are purged after six years by shredding or burning.	Does Not Meet Standard	Archived files are placed in storage and maintained indefinitely. They are not purged after six years. The component requires the purging of archived files after six years by shredding or burning, while the standard allows for, but does not require such purging. The facility is maintaining the files as directed by ICE and adheres to the standard.
15. Field Offices maintains detention files on detainees housed in IGSA Facilities as needed. These files are maintained for a minimum of 18 months.	Meets Standard	

PART 7 – 38. DETENTION FILES – Reviewer Summary

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

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

Detention files are complete and are maintained in a secure manner. The files are only accessed by authorized staff. The rating for this standard was based on a review of facility policy, interviews of facility and ICE staff and a review of active and inactive detention files.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 10/12/2012

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	All requests for interviews are referred to ICE for approval.
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	Facility policy and ICE policy address this component.
3. The Field Office Director consulted with Headquarters before deciding to allow an interview with a detainee who was the center of a controversy, or special interest, or high profile case.	Meets Standard	
4. Signed released forms are obtained and retained in the detainee's a-file from any media representatives who photographed or recorded any detainee in any way that would individually identify him or her.	Meets Standard	Policy addresses this component. There have been no requests in the past twelve months.
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	All requests from the media are handled by the Public Information Office of the Denver Field Office.

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)*

The rating for this standard was based on interviews of facility and ICE staff and a review of facility policy. All requests from the media are referred to ICE and are handled according to ICE policy and procedures.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

Reviewer Signature (for printed form submission):

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

PART 7 – 40. STAFF TRAINING (Key: AN)		
This Detention Standard ensures that staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing refresher training.		
Components	Rating	Remarks (1000 Char Max)
1. The facility conducts appropriate orientation, initial training, and annual training for all staff, contractors, and volunteers.	Meets Standard	
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	The facility offers training for each employee consistent with the employee's work assignment.
3. At least one qualified individual with specialized training for the position coordinates and oversees the staff development and training program. At a minimum, full-time training personnel complete a 40-hour training-for-trainers course.	Meets Standard	The training program for the facility is managed by an individual who is a Master Trainer of Trainers, has completed the GEO Advanced Trainer of Trainers program and is a certified firearms instructor, having completed the National Rifle Association's Law Enforcement Firearms Instructors school.
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 reviewed and approved annually by the Warden.
5. An accurate and complete record is maintained of all formal training activities in: <ul style="list-style-type: none"> Individual training folders, Other training records systems, and/or Electronic systems. 	Meets Standard	Training records of all facility employees are maintained in an automated system, with a copy of each employee's individual training record filed in his/her individual training file.

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	The orientation program for all new employees, contractors and volunteers covers all required topics.

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	<p>Clerical/support staff who have minimal contact with detainees receive 40 hours of pre-service training and 20 hours of annual training. The training addresses the 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>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 staff who have regular or daily contact with detainees receive 108 hours of pre-service training and 40 hours of annual training. The training addresses all of the 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 medical staff receives 111 hours of pre-service training and 40 hours of annual training. The training addresses 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 receive 40 hours of orientation training followed by 80 hours of pre-service training, which is followed by an additional 40 hours of training under a Field Training Officer (FTO). Security personnel also receive 40 hours of refresher training annually. The training addresses the 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	In addition to the regular training security officers receive during orientation, pre-service, FTO and annual refresher training, Situation Response Team members receive an additional 40 hours of specialized training annually.

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)
12. Facility management and supervisory staff receive: <ul style="list-style-type: none"> Management and Supervisory training 	Meets Standard	Management and supervisory staff are allowed to obtain annual management and supervisory training in areas of their choice. Some of this training is provided at company meetings attended by these employees, and additional training may be taken outside the facility.
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	Employees authorized to use firearms receive 40 hours of basic handgun training annually.
14. (MANDATORY) All personnel authorized to use firearms demonstrate competency in their use at least annually.	Meets Standard	Employees authorized to use firearms are required to demonstrate competency in the use of the firearm quarterly.
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	Situation Response Team members and transportation officers are the only security personnel allowed to use chemical agents. These officers receive 4 hours of training in the use of chemical agents annually.
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 new employees receive drug-free workplace orientation during their in-processing with the personnel officer. The 40 hour orientation training program also covers the drug-free workplace program, which includes the typical contents 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	<p>All new employees receive training on the facility's code of ethics during their in-processing with the personnel officer. The 40 hour orientation training program also covers the facility's code of ethics.</p>
<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	<p>All staff in frequent contact with detainees are trained in cardiopulmonary resuscitation (CPR) and first aid and all other topics listed in this component during initial training and in annual refresher programs.</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>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	Staff in frequent contact with detainees are trained quarterly on the Sexual Abuse and Assault Prevention and Intervention Program. The training addresses the topics 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	Staff in frequent contact with detainees are trained annually on the Suicide Prevention and Intervention Program. The training addresses all topics listed in this component.
<p>23. All staff are trained during orientation and annually to recognize the signs of a hunger strike and on the procedures for referral for medical assessment.</p>	Meets Standard	This topic is covered in the Emergency Plan section of new employee training and during annual refresher training.
<p>24. All staff are trained in proper procedures for the care and handling of keys. Orientation training shall be accomplished before staff are issued keys, and key control shall be among the topics covered in annual training. Ordinarily, such training is done by the Security Officer or Key Control Officer.</p>	Meets Standard	

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

PART 7 – 40. STAFF TRAINING (Key: AN)

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

Components	Rating	Remarks (1000 Char Max)
<p>25. Through ongoing (at least annual) training, all detention facility staff are made aware of their responsibilities to control situations involving aggressive detainees. At a minimum, training shall include:</p> <ul style="list-style-type: none"> • The requirements of this Detention Standard • The use of force continuum • Communication techniques • Cultural diversity • Dealing with the mentally ill • Confrontation-avoidance techniques • Approved methods of self-defense • Force cell-move techniques • Communicable diseases, particularly precautions to be taken for use of force • Application of restraints (progressive and hard) • Reporting procedures. 	Meets Standard	Security personnel receive 40 hours of orientation training followed by 80 hours of pre-service training, which is followed by an additional 40 hours of training under a Field Training Officer. Security personnel also receive 40 hours of refresher training annually. The training addresses all listed topics.
<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	Employees are offered tuition reimbursement for continuing education.

PART 7 – 40. STAFF TRAINING – Reviewer Summary

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

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

The rating for this standard was based upon a review of the facility training policy, interviews with the training officer, a review of training records and observation of a training class. The training program at the facility provides adequate training for staff, contractors and volunteers to be proficient and competent in their duties.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

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	All transfer notifications are handled by ICE staff.
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	The Deportation Officer is allowed discretion regarding the timing of the notification when security concerns exist.
4. The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	Meets Standard	
5. Facility policy mandates that: <ul style="list-style-type: none"> Times and transfer plans are never discussed with the detainee prior to transfer. The detainee is not notified of the transfer until immediately prior to departing the facility. The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 	Meets Standard	Written facility policy addresses all aspects of this component.
6. The detainee is provided with a completed Detainee Transfer Notification Form.	Meets Standard	
7. Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	Meets Standard	Per the Assistant Field Office Director (AFOD), Forms I-216 and I-203 are used to authorize the removal of a detainee from the facility.
8. For medical transfers: <ul style="list-style-type: none"> The Division of Immigration Health Services (DIHS) Medical Director or designee approves the transfer. Medical transfers are coordinated through the local ICE/DRO office. A medical transfer summary is completed and accompanies the detainee. Detainee is issued a minimum of 7 days worth of prescription medications. 	Meets Standard	Medical transfers are coordinated through ICE and approved by Immigration Health Service Corps (IHSC). Facility medical staff complete a medical transfer summary and provide 14 days' worth of prescription medication.

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

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

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

Components	Rating	Remarks (1000 Char Max)
9. Detainees are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number and the envelope is marked Medical Confidential.	Meets Standard	A transfer summary sheet is completed and sealed in a properly marked envelope.
10. For medical transfers, transporting officers receive instructions regarding medical issues.	Meets Standard	Transporting officers receive medical information 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	
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	Detainees are allowed to make a telephone call upon arrival at their new location.
14. Meals are provided when transfers occur during normally schedule meal times.	Meets Standard	Sack lunches are provided by the facility when requested.
15. An A-File or work folder accompanies the detainee when transferred to a different Field Office or sub-office.	Meets Standard	
16. A-Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.	Meets Standard	A-files are forwarded via FedEx if they do not accompany the detainee.

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)*

The rating for this standard was based on a review of facility policy and interviews with facility staff and the AFOD.

Overall Rating: Meets Standard

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

Completion Date: 10/12/2012

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

Estimated Man-days Per Year
158,544

B. Current Inspection

Type of Inspection
☐ Field Office ☒ HQ Inspection

Date[s] of Facility Review
10/10/2012 - 10/12/2012

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
09/27/2011 - 09/29/2011

Previous Rating
☒ Meets Standards ☐ Does Not Meet Standards

D. Name and Location of Facility

Name
Denver Contract Detention Facility
Address (Street and Name)
3130 North Oakland St.
City, State and Zip Code
Aurora, CO 80010
County
Adams
Name and Title of Facility Administrator
(Warden/OIC/Superintendent)
(b)(6), (b)(7)(c) Warden
Telephone # (Include Area Code)
303-739 (b)(7)(e)
Field Office / Sub-Office (List Office with oversight responsibilities)
Denver
Distance from Field Office
22 miles

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
HSCEOP-06-D-00010
Date of Contract or IGSA
9/24/06
Basic Rates per Man-Day
130.34 for first 300; 11.08 for all over 300
Other Charges: (If None, Indicate N/A)
\$33.78 Remote custody; \$10.82 per detainee/per day health care; \$81.54 Transportation;

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
2010
Date Last Remodeled or Upgraded
N/A
Date New Construction / Bedspace Added
N/A
Future Construction Planned
☐ Yes ☒ No Date: N/A
Current Bedspace
1116
Future Bedspace (# New Beds only)
Number: N/A Date: N/A

J. Total Facility Population

Total Facility Intake for previous 12 months
5641
Total ICE Mandays for Previous 12 months
146,292

K. Classification Level (ICE SPCs and CDFs Only)

	L-1	L-2	L-3
Adult Male	237	116	22
Adult Female	28	1	0

L. Facility Capacity

	Rated	Operational	Emergency
Adult Male	960	960	1056
Adult Female	48	48	50
<input type="checkbox"/> Facility holds Juveniles Offenders 16 and older as Adults			

M. Average Daily Population

	ICE	USMS	Other
Adult Male	371	N/A	N/A
Adult Female	29	N/A	N/A

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.)	P	P	P	P
	With Weapon	0	0	0	0
	Without Weapon	16	16	11	10
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	N/A	N/A	N/A	N/A
	With Weapon	0	0	0	0
	Without Weapon	0	0	0	0
Number of Forced Moves, incl. Forced Cell moves ³		0	3	2	0
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		0	0	0	0
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	0
Number of Times Canines Used in Facility		0	0	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.					
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	120	114	101	160
	# Resolved in favor of Offender/Detainee	14	17	10	12
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	N/A	I	N/A	N/A
	Number	0	1	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care				
	# Psychiatric Cases referred for Outside Care				

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>				
PART 2 SECURITY											
4	Admission and Release	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
5	Classification System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
6	Contraband	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
7	Facility Security and Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
8	Funds and Personal Property	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>				
9	Hold Rooms in Detention Facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
10	Key and Lock Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
11	Population Counts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
12	Post Orders	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
13	Searches of Detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
14	Sexual Abuse and Assault Prevention and Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
15	Special Management Units	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
16	Staff-Detainee Communication	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
17	Tool Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
18	Use of Force and Restraints	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
PART 3 ORDER											
19	Disciplinary System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
PART 4 CARE											
20	Food Service	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
21	Hunger Strikes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
22	Medical Care	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
23	Personal Hygiene	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
24	Suicide Prevention and Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
25	Terminal Illness, Advance Directives, and Death	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
PART 5 ACTIVITIES											
26	Correspondence and Other Mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
27	Escorted Trips for Non-Medical Emergencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>				
28	Marriage Requests	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>				
29	Recreation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
30	Religious Practices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
31	Telephone Access	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
32	Visitation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
33	Voluntary Work Program	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>				
PART 6 JUSTICE											
34	Detainee Handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
35	Grievance System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
36	Law Libraries and Legal Material	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
37	Legal Rights Group Presentations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
PART 7 ADMINISTRATION & MANAGEMENT											
38	Detention Files	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
39	News Media Interviews and Tours	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
40	Staff Training	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
41	Transfer of Detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							

LCI Review Assurance Statement

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

Lead Compliance Inspector: (Print Name)	Signature
(b)(6), (b)(7)(c) Title & Duty Location	(b)(6), (b)(7)(c) Date
Lead Compliance Inspector, The Nakamoto Group, Inc.	10/12/2012

Team Members

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

Recommended Rating:

☒ Meets Standards
☐ Does Not Meet Standards

Comments: The Denver Contract Detention Facility is operated by The GEO Group, Inc. The facility houses male and female detainees of all classification levels. At the time of this inspection, all detainees housed in the facility were ICE detainees. The average length of stay for the ICE detainees is 22 days. The total population count on 10/10/2012 was 414. The facility does not utilize Tasers or canines. Detainees are not charged medical co-pay fees.

The dates and rating of the last annual inspection were provided by the facility. A copy of the last annual inspection report was not available to the inspection team.

There was one death of an ICE detainee since the prior inspection. On 04/12/2012, a 46 year old male from Ghana died after transport to a community hospital. Upon intake and medical assessment, the detainee reported no significant past medical history and denied any significant risk factors for heart disease. On the morning of 04/12/2012, the detainee complained of chest pain, was evaluated by medical staff and was transported to the local emergency room by ambulance. The detainee died at the hospital while receiving treatment for a cardiac emergency. The death certificate listed the cause of death as an anterior myocardial infarction.