Department of Homeland Security

Immigration and Customs Enforcement: Office of Enforcement and Removal Operations

Condition of Confinement Inspection Worksheet

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

This Form is to be used for Inspections of Facilities used over 72 Hours



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

REVIEW TEAM USE: (Edits Permitted, ALL FIELDS REQUIRED)								
Facilty Information	on							
Facility Name: El	Paso Servi	ce Proce	ssing Center					Pre-Occupancy:
Facility Type: SPO Intergovernmental Serv		nt (IGSA),	ICE Service Proce	essing Cen	ter (SPC), ICE Co	ntract De	etentio	on Facility (CDF)
Address:	8915 Mo	ntana A	venue					
City: El Paso					State: TX			Zip Code: 79925
County:	El Paso							
CEO Name (b)(6), (b)(7)(c) CEO Title: AFOD				O Title: AFOD				
Review Informat	ion (Use fol	owing for	mat for dates: m	m/dd/yyy	y)			
Start Date: 9/18/	2012	End	Date: 9/20/2	012		Rev	view	Type: Headquarters
Lead Name (b)(6), (b)(7)(c)			ad Title: LCI					
Review Documer	nt Issue Su	ımmary	(See Document	Check Se	ction to Review/	(Update))	
Error(s) Found: 0 Items Not Rated: 0			0					
ICE HQ USE ONLY: (DO NOT EDIT*)								
Form Name: G324A_PBNDS Form Key: 3 Form Date: 6/19/2012			/19/2012					
Form Type: PBNDS			Form Review 1	Type: Annı	ual		Form (Over/Under 72 Status: 072

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

Introduction to the G324A Over 72hour Facility Detention Inspection Worksheets

What is "Performance-Based"?

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

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

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

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

Worksheet Overview

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

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

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

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

Worksheet Completion

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

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

Outcome Measures Completion

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

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

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Section I: SAFETY

Emergency Plans
Environmental Health and Safety
Transportation (By Land)

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.

qui	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 includes the statement that no detainee or detainee groups can exercise control or authority over other detainees.	
2.	 Detainees are protected from: Personal abuse Corporal punishment Personal injury Disease Property damage Harassment from other detainees 	Meets Standard		
3.	Staff are trained to identify signs of detainee unrest. What type of training and how often?	Meets Standard	A review of training records confirmed that staff members are trained to identify signs of detainee unrest during annual refresher training.	
4.	Staff effectively disseminate information on facility climate, detainee attitudes, and moods to the Facility Administrator.	Meets Standard	Staff members routinely pass information up the chain of command to the facility administrator. At this Service Processing Center (SPC), the administrator is an Assistant Field Office Director (AFOD).	
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 the designated person responsible for emergency plans and their implementation. He is allotted sufficient time 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	Each emergency plan is numbered 1 through 7 and strictly accounted for. The chief of security maintains a list of the emergency plans that identifies their locations.	
7.	All staff receive training in the emergency plans during their orientation training as well as during their annual training.	Meets Standard	A review of training files confirmed that staff receive the required training.	
8.	The General Section of the emergency plans discusses alternate routes to the facility for staff to use in the event the primary route is impassable.	Meets Standard		

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: Confidentiality Accountability (copies and storage locations) Annual review procedures and schedule Revisions 	Meets Standard	Each of the requirements of this component is included in the plans.
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	
 12. The facility has cooperative contingency plans with applicable: Local law enforcement agencies State agencies Federal agencies 	Meets Standard	The facility has cooperative contingency plans with each type of agency listed in this component.
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	During annual refresher training, every staff member is provided with a copy of the facility hostage policy.
15 (b)(7)e Within 24 hours after release, hostages are screened for medical and psychological effects.	Meets Standard	The requirements of this component are included in the facility's hostage policy.
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	Written procedures require emergency medical treatment for staff and detainees during and after an incident.
18. The Food Service Department maintains at least 3- days' worth of emergency meals for staff and detainees.	Meets Standard	The food service department maintains the required emergency meals for staff and detainees.
19. Written plans illustrate locations of shut-off valves and switches for utilities (water, gas, electric).	Meets Standard	
20. Written plans include a Staff Work Stoppage procedure. This procedure is available for limited supervisory review.	Meets Standard	

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)
21. (MANDATORY) Written procedures cover: Work/Food Strike Fire Environmental Hazard Detainee Transportation System Emergency ICE-wide Lockdown Staff Work Stoppage Disturbances Escapes Bomb Threats Adverse Weather Internal Searches Facility Evacuation Detainee Transportation System Plan Hostages (Internal) Civil Disturbances	Meets Standard	The facility has written procedures for each of the emergency incidents listed in this component.
22. The Emergency Plans specify a procedure for post- emergency debriefings and discussions.	Meets Standard	The requirements of this component are included in the emergency plans.

PART 1 – 1. EMERGENCY PLANS – Reviewer Summary

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

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

A review of documentation, staff member interviews and on-site observations confirmed that the facility ensures a safe environment for detainees and staff by having contingency plans in place to effectively respond to any emergency. Staff members interviewed were knowledgeable of the emergency plans and their personal responsibilities.

Overall Rating: Meets Standard		
Reviewer Name (Printed) (b)(6), (b)	b)(7)(c)	Completion Date: 09/20

Reviewer Signature (for printed form submission):

/2012

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

100	Components	Rating	Remarks (1000 Char Max)
1.		nating	· · ·
	issuing, and maintaining inventories of hazardous materials.	Meets Standard	Facility policy addresses these requirements.
2.	Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each area of the facility.	Meets Standard	Constant inventories are maintained in all storage locations.
3.	The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used.		Material Safety Data Sheets (MSDSs) are maintained in all
	 The files list all storage areas, and include a plant diagram and legend. 	Meets Standard	areas where hazardous materials are stored. A master MSDS file is
	 The MSDSs and other information in the files are available to personnel managing the facility's safety program. 		maintained in the safety office and in the medical area.
4.	All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures:		Personal protective equipment was observed in the areas of the
•	Wear personal protective equipment. Report hazards and spills to the designated official.	Meets Standard	facility where hazardous materials are stored. Spills of hazardous materials are reported to the safety officer.
5.	The MSDS are readily accessible to staff and detainees in the work areas.	Meets Standard	
6.	Hazardous materials are always issued under proper supervision.		
	 Quantities are limited. Detainees are trained.	Meets Standard	
	 Staff always supervise detainees using these substances. 		
7.	All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	Meets Standard	
8.	Lighting fixtures and electrical equipment are installed in storage rooms and other hazardous areas and meet the National Electrical Code requirements.	Meets Standard	
9.	All toxic and caustic materials stored in their original containers in a secure area.	Meets Standard	Hazardous materials are stored in their original containers in locked cabinets.
10.	Excess flammables, combustibles, and toxic liquids are disposed of properly in accordance with MSDS.	Meets Standard	

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

facility standards of cleanliness and sanitation, safe work practices, and control of hazardous substances and equipment.			
Components	Rating	Remarks (1000 Char Max)	
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.	Meets Standard	No products containing methyl alcohol were observed during this inspection. Policy and procedures are in place to control and account for these types of products should they be utilized.	
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		
14. A technically qualified staff member conducts fire and safety inspections.	Meets Standard	The safety officer has received training to conduct fire and safety inspections.	
15. The Safety Office (or officer) maintains files of inspection reports, including corrective actions taken.	Meets Standard	The files of inspection reports and the corrective action plans created as a result of the inspections were reviewed during the inspection.	
16. (MANDATORY) The facility has an approved fire prevention, control, and evacuation plan.	Meets Standard	The facility has a Fire Prevention, Control and Evacuation Plan approved by the City of El Paso Fire Marshal. The facility has a Fire License issued by the City of El Paso Engineering and Construction Management Division.	
 The plan requires: 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 required elements of this component are addressed in the Fire Prevention, Control and Evacuation Plan. Exit signs and directional arrows on areaspecific diagrams are posted throughout the facility.	

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

facility standards of cleanliness and sanitation, safe work practi-		
Components	Rating	Remarks (1000 Char Max)
18. Fire drills are conducted and documented quarterly in all facility locations including the administrative area.	Meets Standard	Documentation of quarterly fire drills conducted in the facility was reviewed during the inspection. The quarterly fire drills are conducted in all areas of the facility and documented by the fire safety officer.
19. A sanitation program covers barbering operations.	Meets Standard	
20. The barbershop has the facilities and equipment necessary to meet sanitation requirements.	Meets Standard	
21. The sanitation standards are conspicuously posted in the barbershop.	Meets Standard	
22. Written procedures regulate the handling and disposal of used needles and other sharp objects.	Meets Standard	
23. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	Meets Standard	
 24. Standard cleaning practices include: Using specified equipment; cleansers; disinfectants and detergents. An established schedule of cleaning and follow-up inspections. 	Meets Standard	Written policies and procedures establish standard cleaning practices and equipment on a schedule for all areas of the facility. Officers supervise cleaning details made up of trained volunteer detainee workers.
25. Spill kits are readily available.	Meets Standard	Spill kits are readily available throughout the facility. The spill kits were observed in the storage areas where hazardous materials are stored.
26. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	Meets Standard	Stericycle is the licensed waste disposal contractor for infectious/bio-hazardous waste.
27. Staff are trained to prevent contact with blood and other body fluids and written procedures are followed.	Meets Standard	Basic and annual refresher training covers techniques for the prevention of contact with blood and other body fluids.
28. Do the methods for handling/disposing of refuse meet all regulatory requirements?	Meets Standard	
 29. A Licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. At least monthly. The pest-control program includes preventive spraying for indigenous insects. 	Meets Standard	Ecolab provides professional pest control services on a monthly and as needed basis.

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

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	The water and wastewater treatment for the facility is provided by the City of El Paso. The 2011 drinking water test indicated there were no water quality violations and the water was rated superior.	
 31. Emergency power generators are tested at least every two weeks. Other emergency systems and equipment receive testing at least quarterly. Testing is followed-up with timely corrective actions (repairs and replacements). 	Meets Standard	Emergency power generators are inspected every two weeks as required. Other emergency systems are tested quarterly and repaired as indicated.	
32. The Facility appears clean and well maintained.	Meets Standard	The facility is very clean and well maintained.	
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	Environmental sanitation inspections are conducted weekly by medical staff.	
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	Environmental sanitation inspections are conducted weekly by medical staff. Medical facility inspections are conducted (b)(7)e The medical facility was observed to be very clean and sanitary.	
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		
37. The assigned staff member is responsible for developing and implementing policies, procedures, and guidelines for the environmental health program. These guidelines are intended to evaluate and eliminate or control as necessary, sources of injuries and modes of transmission of agents or vectors of communicable diseases.	Meets Standard		

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

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

Components	Rating	Remarks (1000 Char Max)
 38. Environmental health and safety conditions shall be maintained at a level that meets recognized standards of safety and hygiene, including those from the: American Correctional Association, Occupational Safety and Health Administration, Environmental Protection Agency, Food and Drug Administration, National Fire Protection Association's Life Safety Code, and National Center for Disease Control and Prevention. 	Meets Standard	The facility maintains multiple accreditations, including the American Correctional Association, the National Commission on Correctional Health Care and The Joint Commission. The facility maintains a high level of safety and hygiene.

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

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

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

The facility maintains high standards of cleanliness and sanitation. Caustic, toxic and flammable materials are stored in locked storage areas and running inventories of the materials are maintained. Observations of the facility as well as interviews with the safety officer were used to evaluate compliance with this standard.

Overall Rating: Meets Standard

Reviewer Name (Printed)

Reviewer Signature (for printed form submission):

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

Completion Date: 9/20/2012

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

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

Standard N/A

Click the above button if all ICE Transportation is handled 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	Policy requires that transporting officers comply with applicable local, state and federal motor vehicle laws and regulations. A check of documentation confirmed compliance.
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	A review of documentation confirmed that every transporting officer required to drive a commercial size vehicle has a valid commercial driver's license issued by the State of Texas.
3.	Supervisors maintain records for each vehicle operated.	Meets Standard	
4.	Documentation indicating annual inspection of vehicles and annual inspection in accordance with state statutes is available for review.	Meets Standard	A review of documentation confirmed that vehicles receive an annual inspection in accordance with state statutes.
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	
6.	 Officers use a checklist during every vehicle inspection. Officers report deficiencies affecting operability. Deficiencies are corrected before the vehicle goes back into service. 	Meets Standard	A review of documentation confirmed that officers use a checklist during every vehicle inspection. Officers report deficiencies affecting operability of the vehicle. Deficiencies are corrected before the vehicle goes into service.

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")

case. (All Line Items and standard will be rated "N/A")	D-v'	D
Components	Rating	Remarks (1000 Char Max)
 7. Transporting officers: Limit driving time to 10 hours in any 15 hour period when transporting detainees. Drive only after eight consecutive off-duty hours. Do not receive transportation assignments 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	Supervisory staff interviews and a review of documentation confirmed that transporting officers adhere to the requirements of this component.
8. (b)(7)(e) officers with valid Commercial Drivers Licenses, (CDL's) required in any vehicle transporting detainees. • When buses travel in tandem with detainees, there are (b)(7) qualified officers per vehicle. • An unaccompanied driver transports an empty vehicle. 9. The transporting officer inspects the vehicle before the	Meets Standard	A review of documentation and staff member interviews confirmed that b)(7)(e) fficers with valid commercial driver's licenses are required for any vehicle transporting detainees. Documentation confirms that a
start of each detail.	Meets Standard	transporting officer inspects the vehicle before the start of each detail.
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	Policy requires that all detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.
12. The facility ensures that the number of detainees transported does not exceed the vehicle manufacturer's occupancy level.	Meets Standard	
(b)(7)e	Meets Standard	(b)(7)e
 14. The vehicle crew conducts a visual count once all passengers are on board and seated. Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop. 	Meets Standard	

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

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

Standard N/A

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

case. (All Line items and standard will be rated 19/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	Policy and procedures are in place that address the use of restraining equipment on transportation vehicles.	
Officers ensure that no one contacts the detainees. (b)(7)e emains in the vehicle at all times when detainees are present.	Meets Standard		
 17. Meals are provided during long distance transfers. The meals meet the minimum dietary standards, as identified by dieticians utilized by ICE. 	Meets Standard	Meals prepared by the facility's food service department are provided during long distance transfers.	
 18. The vehicle crew inspects all Food Service meals before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative. Basins, latrines, and drinking-water, containers, dispensers are cleaned and sanitized on a fixed schedule. 	Meets Standard		
19. Vehicles have: (b)(7)e	Meets Standard	On-site inspection of available vehicles and a review of documentation confirmed that transport vehicles have the items listed in this component.	
20. The vehicles are clean and sanitary at all times.	Meets Standard		
 21. Personal property of a detainee transferring to another facility: Is inventoried. Is inspected. Accompanies the detainee. 	Meets Standard		

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

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
Components 22. The following contingencies are included in the written procedures for vehicle crews: • Attack • Escape • Hostage-taking • Detainee sickness • Detainee death • Vehicle fire • Riot	Rating Meets Standard	Written procedures for each of the contingencies required by this component are included in the facility transportation policy
 Traffic accident Mechanical problems Natural disasters Severe weather Passenger list is not exclusively men or women or minors 		and post orders.

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)

Staff member interviews, a review of documentation and on-site observations confirmed that vehicles used for transporting detainees are properly equipped, maintained and operated. Documentation confirmed that detainees are transported in a secure, safe and humane manner under the supervision of trained staff members with the required qualifications.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6), (b)(7)(c) Completion Date: 9/20/2012

Reviewer Signature (for printed form submission):

Section II SECURITY

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

PART 2 – 4. 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.

ор	operations when detainees are admitted to or released from a facility.			
	Components	Rating	Remarks (1000 Char Max)	
1.	Admission processing includes an orientation of the facility. The orientation includes; unacceptable activities and behavior, and corresponding sanctions. How to contact ICE. The availability of pro-bono legal services and how to pursue such services. Schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.	Meets Standard	Each detainee receives a facility video orientation, a facility detainee handbook and the ICE National Detainee Handbook. The facility admission and orientation process includes all of the topics listed in this component.	
2.	Medical screenings are performed by medical staff <u>or</u> persons who have received specialized training for the purpose of conducting an initial health screening.	Meets Standard	Medical screenings are performed by an Immigration Health Service Corps (IHSC) staff member in the medical unit.	
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	Each new arrival is classified by a facility staff member. Detainees remain segregated from the general population during the orientation and classification process.	
4.	All new arrivals are searched in accordance with the "Detainee Search" standard. An officer of the same sex as the detainee conducts the search and the search is conducted in an area that affords as much privacy as possible.	Meets Standard		
5.	Detainees are subjected to a strip search only when reasonable suspicion has been established and not as routine policy. Non-criminal detainees are never subjected to a strip search but are patted down unless cause or reasonable suspicion has been established. All strip searches are documented on G-1025, or equivalent, with proper supervisory approval.	Meets Standard	Policy states that a strip search is conducted only when there is reasonable belief that the detainee may be in possession of an item of contraband. The facts supporting the conclusion must be documented and a supervisor must approve the search before it is conducted. There have been no strip searches during the past year.	
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		

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 IGSAs for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	Meets Standard	For every lost or missing property claim, a staff member completes a Form 1-387. The form is forwarded to the Assistant Field Office Director (AFOD) and to other ICE staff.
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	An Immigration Enforcement Agent (IEA) is assigned to oversee, coordinate and approve all releases.
10.	Staff complete paperwork/forms for release as required.	Meets Standard	
11.	Each detainee receives a receipt for personal property secured by the facility.	Meets Standard	Each detainee is given a receipt for personal property secured by the facility.
12.	The facility has a system to maintain accurate records and documentation for admission, orientation, and release.	Meets Standard	The ICE Enforcement Alien Detention Module (EADM) system is used. Additionally, copies of all admission, orientation and release documents are placed in the detainee's detention file.
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	Detainees are provided with orientation material in English, Spanish or Portuguese.

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)

On-site observations, a review of documentation and interviews with ICE and facility staff members confirmed that the facility protects the detainees, staff and the community by requiring staff to follow established procedures to ensure secure and orderly operations when detainees are admitted or released.

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

Completion Date: 9/20/2012

Reviewer Signature (for printed form submission):

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. IGSAs use an objective classification system or similar system for classifying detainees.	Meets Standard	A review of documentation confirmed that the required Objective Classification System is used by the facility to classify all detainees. Only trained staff members use the system.
2.	 The facility classification system includes: 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	The facility classification system includes each requirement included in this component.
3.	The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	Meets Standard	
4.	Staff use only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/ unconfirmed reports may be filed but are not used to score detainee classification.	Meets Standard	
5.	Housing assignments are based on classification-level.	Meets Standard	Policy states that all housing assignments will be based on classification level. Staff member interviews and a review of documentation confirmed that this is done.
6.	A detainee's classification-level does not affect his or her recreation opportunities. Detainees recreate with persons of similar classification designations.	Meets Standard	Detainees are assigned to housing units based on classification level. All housing units have similar recreation opportunities.
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	The facility classification system includes each requirement listed in this component. Special reassessments are completed within 24 hours.
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	

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)
10.	Classification appeals are resolved w/in 5 business days. Detainees are notified of the outcome within 10 business days.	Meets Standard	
11.	Classification designations may be appealed to a higher authority such as the Facility Administrator or equivalent.	Meets Standard	Facility policy and procedures are in place for detainees to appeal their classification designations to the Assistant Field Office Director.
12.	The Detainee Handbook or equivalent for IGSAs explains the classification levels, with the conditions and restrictions applicable to each.	Meets Standard	Classification levels, with the conditions and restrictions applicable to each, are 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	Detainees wear color-coded uniforms. Each detainee also wears an ID wrist band with his/her picture and a color stripe that reflects the detainee's classification level.

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)

On-site observations, a review of documentation and interviews with ICE and facility staff members confirmed that the facility has a formal classification system that is based on verifiable documented data for managing and separating detainees. The facility's classification system protects the detainees, staff and the community from harm and contributes to orderly facility operations.

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

Completion Date: 9/20/2012

Reviewer Signature (for printed form submission):

PART 2 – 6. CONTRABAND (Key: F)

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

	Components	Rating	Remarks (1000 Char Max)
1.	The facility follows a written procedure for handling contraband. Staff inventories, holds, and reports it when necessary to the proper authority for action/possible seizure.	Meets Standard	The facility has written procedures that include each of the requirements of this component.
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	Written policy includes procedures for the return of property not needed as evidence to the proper authority.
4.	Altered property is destroyed following documentation and using established procedures.	Meets Standard	
5.	Before confiscating religious items, the Facility Administrator or designated investigator contacts a religious authority.	Meets Standard	Policy requires that the Assistant Field Office Director contact the chaplain before confiscating any religious item.
6.	Staff follow written procedures when destroying hard contraband that is illegal.	Meets Standard	
7.	 Hard contraband that is illegal (under criminal statutes) is retained and used for official use, e.g. training purposes. If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use. Soft Contraband is mailed to a third party or stored in accordance with the Detention Standard on Funds and Personal Property. 	Meets Standard	Hard contraband is not retained for training purposes. Soft contraband is mailed/handled in accordance with the Detention Standard on Funds and Personal Property.
8.	Detainees receive notification of contraband rules and procedures in the Detainee Handbook and notified when property is identified and seized as contraband.	Meets Standard	The detainee handbook includes the notification required by this component.
9.	Facilities with Canine Units only use them for contraband detection.	Meets Standard	

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)

A review of documentation and staff member interviews confirmed that the facility protects detainees and staff and enhances facility security by identifying, detecting, controlling and properly disposing of contraband.

Overall Rating: Meets Standard

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

Completion Date: 9/20/2012

PART 2 – 6. CONTRABAND – Reviewer Summary
(Use following format for dates: mm/dd/yyyy)
Reviewer Signature (for printed form submission):

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.

360	security is maintained and that events that pose a risk of harm are prevented.			
	Components	Rating	Remarks (1000 Char Max)	
	The facility administrator or assistant administrator and department heads visit detainee living quarters and activity areas weekly.	Meets Standard	A review of logbooks confirmed that the visits listed in this component do take place.	
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	The Assistant Field Office Director confirmed that an annual staffing analysis is conducted to determine staffing needs.	
4.	Essential posts and positions are filled with qualified personnel.	Meets Standard		
5.	Every Control Center officer receives specialized training.	Meets Standard		
6.	Policy restricts staff access to the Control Center.	Meets Standard	Facility policy restricts access to 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		
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		
11.	Recall lists include the current home telephone number of each employee. Phone numbers are updated as needed.	Meets Standard	A review of documentation confirmed that recall lists are kept in the control center and include the required information.	
12	(b)(7)e	Meets Standard	(b)(7)e	
13.	Information about routine procedures, emergency situations, and unusual incidents will be continually recorded in permanent post logs and shift reports.	Meets Standard		
14.	The front-entrance officer checks the ID of everyone entering or exiting the facility.	Meets Standard	Observation confirmed that IDs are consistently checked.	
15.	All visits officially recorded in a visitor logbook or electronically recorded.	Meets Standard	A visitor logbook is maintained to officially record all visits.	
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	Officers monitor all vehicular traffic entering and leaving the facility by both direct visual observation and video cameras.	

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)
 18. The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: The driver's name Company represented Vehicle contents Delivery date and time Date and time out Vehicle license number Name of employee responsible for the vehicle during the facility visit 	Meets Standard	A review of logbooks confirmed that the facility maintains a log of all incoming and departing vehicles. The entry for each vehicle included all of the bulletpointed information listed this component.
19. Officers thoroughly search each vehicle entering and leaving the facility.	Meets Standard	
20. The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	Meets Standard	The facility has policy and procedures to prevent the introduction of contraband.
21. The front entrance has a sally-port type entrance, with interlocking electronic doors or grilles.	Meets Standard	
22. The facility's perimeter will ensure that detainees remain within and that public access is denied without proper authorization.	Meets Standard	
23. Written procedures govern searches of detainee housing units and personal areas.	Meets Standard	The facility has policy that addresses searches of detainee housing units and personal areas.
24. Housing area searches occur at irregular times.	Meets Standard	
25. Security officer posts located in or immediately adjacent to detainee living areas to permit officers to see or hear and respond promptly to emergency situations. Personal contact and interaction between staff and detainees is required and facilitated.	Meets Standard	
26. There are post orders for every security officer post.	Meets Standard	Post orders are available for every officer post.
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	

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)
29. Every search of the SMU and other housing units is documented.	Meets Standard	A review of logbooks confirmed that every search of the Special Management Units (SMUs) and other housing units is documented. The facility operates two SMUs.
30. The SMU entrance has a sallyport.	Meets Standard	The facility uses two SMUs, one for disciplinary segregation and the other administrative segregation or protective custody. Each unit has a sally port entrance.
31. All tools entering SMU will be inspected and inventoried by the SMU officer prior to entering the housing unit.	Meets Standard	All tools entering the SMUs are inspected and inventoried prior to entering the unit and upon departure.
 32. The facility has a comprehensive security inspection policy. The policy specifies: Posts to be inspected Required inspection forms Frequency of inspections Guidelines for checking security features Procedures for reporting weak spots, in-consistencies, and other areas needing improvement 	Meets Standard	Facility policy addresses all of the bulleted items listed in this component.
33. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	Meets Standard	Facility policy requires the documented inspections listed in this component.
34. Documentation of security inspections is kept on file.	Meets Standard	Documentation of inspections was reviewed.
35. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	Meets Standard	
36. Tools being taken into the secure area of the facility are inspected and inventoried before entering and prior to departure.	Meets Standard	Facility policy requires that tools being taken into the secure area of the facility are inspected and inventoried before entering and prior to departure.
37. Storage and supply rooms; walls, light and plumbing fixtures, accesses, and drains, etc. undergo frequent, irregular searches. These searches are documented.	Meets Standard	
38. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	Meets Standard	Policy requires the inspections listed in this component.

PART 2 - 7. FACILITY SECURITY AND CONTROL (Key: G)

This Detention Standard protects the community, staff, contractors, volunteers, and detainees from harm by ensuring that facility security is maintained and that events that pose a risk of harm are prevented.

Components	Rating	Remarks (1000 Char Max)
 39. Daily procedures include: Perimeter alarm system tests. Physical checks of the perimeter fence. Documenting the results. 	Meets Standard	
40. Visitation areas receive frequent, irregular inspections.	Meets Standard	
41. An officer is assigned responsibility for ensuring the security inspection process covers all areas of the facility.	Meets Standard	
42. The Maintenance Supervisor and Chief of Security or equivalent make monthly fence checks.	Meets Standard	A review of documentation confirmed that the maintenance supervisor and the chief of security make monthly fence checks.

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

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

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

Staff member interviews, a review of documentation and on-site observations confirmed that the facility protects the community, staff, contractors, volunteers and detainees from harm by having the policy, operating procedures and trained staff necessary to ensure security is maintained at all times.

Overall Rating: Meets Standard

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

Reviewer Signature (for printed form submission):

Completion Date: 9/20/2012

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	The area of the facility where detainee funds, valuables and property are stored allows for proper separation of the items. The area is accessible to only 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	Baggage and personal property of detainees are inventoried in the presence of the detainee. Two officers are present during the processing of detainee funds and valuables.
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.
5.	For IGSAs and CDFs, Is the facility using a personal property inventory form that meets the ICE standard?	Meets Standard	
6.	Staff give the detainee the original inventory form, filing copies in the detainee's detention file and the personal property container.	Meets Standard	The detainee receives a copy of the original inventory form. Copies of the form are also attached to the property bin and placed in the detainee's detention file.
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	Any discrepancies in the reconciliation of valuables and property are immediately reported to the supervisor on duty.

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)
10.	Staff follow written procedures when returning property to detainees.	Meets Standard	The process of returning property to detainees was observed during the inspection. Staff followed written procedures and completed required documentation.
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.		
	 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	
13.	Staff obtain a forwarding address from each detainee.	Meets Standard	A forwarding address for each detainee is obtained during admission.
14.	It is standard procedure for (b)(7)(e) fficers to be present when removing/documenting the removal of funds from a detainee's possession.	Meets Standard	(b)(7)(e)fficers are present when funds are removed from a detainee's possession(b)(7)(e) officers verify the amount of funds present or removed.
15.	Staff issue and maintain property receipts (G-589s) in numerical order.	Meets Standard	Property receipts are filed in numerical order.
16.	Staff complete and distribute the G-589 in accordance with the ICE standard.	Meets Standard	The G-589 form is used in accordance with the 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	The G-589 logbook was reviewed. The logbook includes the required identification of the officer.
18.	Staff tag large valuables with both a G-589 and an I-77.	Meets Standard	Large valuables are properly tagged and maintained in a secure area. Each large valuable is also taped with numbered identification tape. The identifying numbers on the tape are logged.
19.	The supervisor verifies the accuracy of every G-589.	Meets Standard	A supervisor verifies the accuracy of each G-589.

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

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

Standard N/A

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

	Components	Rating	Remarks (1000 Char Max)
20.	 The supervisor ensures that: 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	All detainee's funds and valuables are inventoried by two officers. The small valuables are placed in sealed bags and deposited in a safe. Large valuable property is kept in a secure area, only accessible to the on-duty property room officer.
21.	Staff tag every baggage/facility container with an I-77, completed in accordance with the ICE standard.	Meets Standard	Every bag/container is tagged with an I-77.
22.	Staff secure every container used to store property with a tamper-proof numbered strap.	Meets Standard	Property storage bins were observed secured 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	A logbook is maintained in the property room. The information required by this component was observed in the logbook during the inspection.
24.	In SPCs, the Supervisory Immigration Enforcement Agent, accompanied by a detention staff member conducts a comprehensive weekly audit.	Meets Standard	Weekly audits are conducted by the Detention Operations Supervisor and a Supervisory Immigration Enforcement Agent.
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	Quarterly audits of detainee property are conducted.
26.	The facility positively identifies every detainee being released or transferred.	Meets Standard	The facility positively identifies all detainees prior to transfer or release.
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	Shift supervisors are immediately notified of lost or damaged property claims. Investigations are conducted as needed.
28.	Every lost/damaged property report completed in accordance with the ICE standard on an I-387 (or equivalent). The Facility Administrator receives a copy and staff place the original in the detainee's A-file, retaining a copy in the detainee's detention file.	Meets Standard	The Assistant Field Office Director receives a copy of the report and a copy is placed in the detainee's A-file.

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)

Detainee funds, valuables and personal property are inventoried, safeguarded and stored in compliance with facility policy. Property storage areas are manned 24 hours per day and access to these areas is strictly controlled. Valuables and funds are verified at the end of each shift. Discrepancies in detainee property, funds or valuables are immediately reported to a supervisor. Quarterly audits of baggage and non-valuable property are conducted, with the results entered into the property logbook as required.

Overall Rating: Meets Standard

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

Completion Date: 9/20/2012

Reviewer Signature (for printed form submission):

PART 2 - 9. HOLD ROOMS IN DETENTION FACILITIES (Key: 1)

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

	Components	Rating	Remarks (1000 Char Max)
1.	The hold room is situated in a location within the secure perimeter.	Meets Standard	All hold rooms are within the secure perimeter.
2.	The hold rooms are clean, in good repair, well ventilated, well lit, and all activating switches located outside the room.	Meets Standard	On-site observations confirmed that the hold rooms are clean, in good repair, well ventilated and well lighted, and all activating switches are located outside 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	On-site observations and staff member interviews confirmed that bunks/cots/beds or other related make shift sleeping apparatuses are not permitted inside hold rooms.
5.	Hold room walls and ceilings are escape and tamper resistant.	Meets Standard	
6.	Detainees are not held in hold rooms for more than 12 hours.	Meets Standard	Staff member interviews and a review of documentation confirmed that detainees are not held in hold rooms for more than 12 hours.
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 hold rooms are equipped with toilet facilities.
10	. All detainees are given a pat down search for weapons or contraband before being placed in the hold room.	Meets Standard	
11	 When the last detainee has been removed, the hold room is inspected for the following: Cleaning. Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair. 	Meets Standard	

PART 2 - 9. HOLD ROOMS IN DETENTION FACILITIES (Key: I)

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

Components	Rating	Remarks (1000 Char Max)
 12. (MANDATORY) There is a written evacuation plan. 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 that includes the designation of an officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency.
13. An appropriate emergency service is called immediately upon a determination that a medical emergency exists.	Meets Standard	
 14. Single occupant hold rooms contain a minimum of 37 square feet (7 unencumbered square feet for the detainee, 5 square feet for a combination lavatory/toilet fixture, and 25 square feet for a wheelchair turn-around area). If multiple-occupant hold rooms are used, there is an additional 7 unencumbered square feet for each additional detainee. 	Meets Standard	
 15. In SPCs designed after 1998 the hold rooms are equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They are: Compliant with the American Disabilities Act. Small hold rooms (1 to 14 detainees) have at least one combi-unit. Large hold rooms (15 to 49 detainees) are provided with at least two combi-units. 	Meets Standard	The facility was built in 1996. However, the lavatory/toilet fixtures are consistent with the bulleted points listed this component.
16. <u>In SPCs designed after 1998</u> the hold rooms have floor drain(s).	N/A	The facility was built in 1996. The hold rooms do not have floor drains.
17. In SPCs designed after 1998, the door to the hold room swings outward and the door complies with the specifications outlined in the standard.	Meets Standard	The facility was built in 1996. However, the doors to the hold rooms swing outward.
18. Family units, persons of advanced age (over 70), females with children, and unaccompanied juvenile detainees (under the age of 18) are not placed in hold rooms.	Meets Standard	Family units or anyone under the age of 18 are not accepted by the facility. Detainees of advanced age (over 70) are not placed in hold rooms.
19. Minors (under 18) are confined apart from adults, except for immediate relatives or guardians.	Meets Standard	The facility normally does not accept minors. However, if a minor was brought to the facility, he/she would be confined apart from adults except for immediate family members.

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES (Key: 1)

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)
 20. Each detention facility maintains a detention log (manually or by computer) for each detainee placed in a hold cell. The log includes the required information specified in the standard. 	Meets Standard	
 21. Officers provide a meal to any detainee detained in a hold room for more than six hours. Juveniles, babies and pregnant women have access to snacks, milk or juice. Meal are served to juveniles regardless of time in custody 	Meets Standard	Officers provide a meal to any detainee held in a hold room for more than six hours. The facility normally does not accept juveniles.
22. Any detainee with disabilities, including temporary disabilities, will be housed in a manner that provides for his or her safety and security.	Meets Standard	
23. The maximum occupancy for the hold room will be posted.	Meets Standard	On-site observations confirmed that the maximum occupancy is posted for each hold room.
24. Before placing a detainee in a room, an officer shall observe each individual to screen for obvious mental or physical problems.	Meets Standard	
25. Staff does not permit detainees to smoke in a hold room.	Meets Standard	Smoking is not permitted in hold rooms.
 26. Officers closely supervise hold rooms through direct supervision, to ensure: Continuous auditory monitoring, even when the hold room is not in the officer's direct line of sight, and 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	A review of documentation confirmed that supervision of the hold rooms includes the bulleted items listed in this component.

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)

On-site observations, staff member interviews and a review of documentation confirmed that the facility has policy and procedures in place to address the use of hold rooms. Detainees temporarily held in hold rooms are provided with a safe, secure and comfortable environment.

Overal	l Rating: I	Meets Stan	dard	
D:	N	/Duinted)	(1.) (2)	<i>(</i> ,)

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

Completion Date: 9/20/2012

PART 2 - 9. HOLD ROOMS IN DETENTION FACILITIES - Reviewer Summary

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

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.

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	Components	Rating	Remarks (1000 Char Max)
1.	The security officer[s], or equivalent, has attended an approved locksmith training program.	Meets Standard	The key control officer has successfully completed the Arizona School of Locksmiths training program.
2.	The security officer, or equivalent, has responsibility for all administrative duties and responsibilities relating to keys, locks etc.	Meets Standard	
3.	The security officer, or equivalent, provides training to all employees in key and lock control.	Meets Standard	The key control officer provides all employees training in key and lock control during annual refresher training.
4.	The security officer, or equivalent, maintains inventories of all keys, locks and locking devices.	Meets Standard	
5.	The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	Meets Standard	The key control officer follows a (b)(7)e
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	The procedures to ensure safe combination integrity are included in facility policy.
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 prohibits the use of grand master keying systems. There are no grand master keying systems in the facility.
11.	All worn or discarded keys and locks cut up and properly disposed of.	Meets Standard	
12.	Padlocks and/or chains are not used on cell doors.	Meets Standard	Facility policy prohibits the use of padlocks and/or chains on cell doors.

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

mai	maintained.			
	Components	Rating	Remarks (1000 Char Max)	
13.	 The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to Occupational Safety and Environmental Health Manual, Chapter 3 National Fire Protection Association Life Safety Code 101. 	Meets Standard		
14.	The operational keyboard sufficient to accommodate all the facility key rings including keys in use is located in a secure area.	Meets Standard	On-site observations confirmed compliance with all requirements of this component.	
15.	Procedures in place to ensure that key rings are: Identifiable Numbers of keys on the ring are cited? Keys cannot be removed from issued key rings	Meets Standard	Facility policy addresses each of the bulleted items listed in this component. Inspection of various key rings confirmed compliance with policy.	
16.	Emergency keys are available for all areas of the facility.	Meets Standard		
17.	The facility uses a key accountability system.	Meets Standard	Policy requires that keys be inventoried and accounted for on a daily basis.	
18.	Authorization is necessary to issue any restricted key.	Meets Standard	The Assistant Field Office Director must authorize issuance of any restricted key.	
19.	 Individual gun lockers are provided. They are located in an area that permits constant officer observation. In an area that does not allow detainee or public access. 	Meets Standard		
20.	The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	Meets Standard	Facility policy includes procedures to ensure key accountability. The keys are physically counted daily.	
21.	 All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. Detainees are not permitted to handle keys assigned to staff. 	Meets Standard	Facility policy includes all of the bulleted items listed in this component.	
22.	Locks and locking devices are continually inspected, maintained, and inventoried.	Meets Standard		

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

	Components	Rating	Remarks (1000 Char Max)
23.	Each facility has the position of Security Officer. If not, a staff member appointed the collateral duties of security officer.	Meets Standard	The facility has a key control officer who is also the security officer. He answers directly to the chief of security.
24.	The designated key control officer is the only employee who is authorized to add or remove a key from a ring.	Meets Standard	Policy states that only the key control officer is authorized to add or remove a key from a 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)

On-site observations, staff member interviews and review of documentation confirmed that the facility has policy and procedures in place to maintain and ensure an efficient system for the use, accountability and maintenance of all keys and locks.

Overall Rating: Meets Standard

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

Reviewer Signature (for printed form submission):

Completion Date: 09/20/2012

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	Facility policy requires six formal counts in a 24-hour period. One of these six counts is a face-to-photo count.
2.	Activities cease or are strictly controlled while a formal count is being conducted.	Meets Standard	
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	Formal counts take place simultaneously in all units.
5.	Officers do not allow detainee participation in the count.	Meets Standard	
6.	A face-to-photo count follows each unsuccessful recount.	Meets Standard	Facility policy requires a face-to- photo count following each unsuccessful recount.
7.	Officers positively identify each detainee before counting him/her as present.	Meets Standard	
8.	Written procedures cover informal and emergency counts.	Meets Standard	Facility policy includes procedures for informal and emergency counts.
9.	The control officer (or other designated position) maintains an "out-count" record of all detainees temporarily out of the facility.	Meets Standard	Policy designates the control center officer to maintain an "out-count" record of all 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	A review of training records confirmed staff responsible for conducting counts are provided the training described in the component.

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)

On-site observations, staff member interviews and review of documentation confirmed that policy and procedures are in place to ensure the facility's security, safety and good order by maintaining an effective system of population counts and accountability for detainees. The 10:00 a.m. count on the second day of the inspection was observed by inspection team members in four different areas of the facility.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 9/20/2012

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.

ass	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	Policy requires that every fixed post has a set of post orders. Various security posts checked at random all had up to date post orders.	
2.	In SPCs and CDFs, Post Orders are arranged in the required six-part folder format.	Meets Standard		
3.	Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	Meets Standard		
4.	One individual or department is responsible for keeping all Post Orders current with revisions that take place between reviews.	Meets Standard	The chief of security is responsible for keeping post orders current at all times.	
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	Only the Assistant Field Office Director can authorize post order changes.	
7.	The facility administrator has signed and dated the last page of every section.	Meets Standard	A review of post orders confirmed all were signed and dated.	
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	On-site observations confirmed that detainees have no access to post orders.	
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	A review of documentation at various security posts confirmed officers sign and date post orders to indicate they have been read and understood.	
13.	Anyone assigned to an armed post qualifies with the post weapons before assuming post duty.	Meets Standard		
14.	Post Orders for armed posts, and for posts that control access to the institution perimeter, clearly state that:			
	(b)(7)e	Meets Standard		

PART 2 – 12. POST ORDERS (Key: L)

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

Components	Rating	Remarks (1000 Char Max)
15. Post Orders for armed posts provide instructions for escape attempts.	Meets Standard	A review of post orders for armed posts confirmed the inclusion of instructions for escape attempts.
16. The Post Orders for housing units track the daily event schedule.	Meets Standard	
17. Housing unit post officers record all detainee activity in a log. The Post Orders include instructions on maintaining the logbook.	Meets Standard	

PART 2 - 12. POST ORDERS - Reviewer Summary

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

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

A review of documentation and staff member interviews confirmed that officers are provided all necessary guidance for carrying out their duties. Post orders have been established for every post and are available at each fixed post. Various security posts checked at random had current and up to date post orders. Staff members interviewed were knowledgeable of their duties and responsibilities.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6), (b)(7)(c) Completion Date: 9/20/2012

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.

pro	properly disposing of contraband.			
	Components	Rating	Remarks (1000 Char Max)	
	There are written policy and procedures governing searches of housing areas, work areas and of detainees.	Meets Standard	Written policy and post orders govern searches of housing areas, work areas and detainees.	
2.	Written policy and procedures require staff to employ the least intrusive method of body search practicable, as indicated by the type of contraband and the method of suspected introduction or concealment.	Meets Standard	Policy includes the requirement that staff members employ the least intrusive method of body search practicable for all detainee searches.	
3.	Written policy and procedures require staff to avoid unnecessary force during searches and to preserve the dignity of the detainee being searched, to the extent practicable.	Meets Standard		
4.	Written policy and procedures require staff to leave a searched housing area, work area and detainee property in its original order, to the extent practicable.	Meets Standard		
5.	Detainees are pat searched and screened by metal detectors routinely to control contraband.	Meets Standard	Observation of facility operations showed that detainees are routinely pat searched and screened by hand-held metal detectors throughout the facility.	
6.	Strip Searches are conducted only when there is reasonable belief or suspicion that contraband may be concealed on the person, or a good opportunity for concealment has occurred, and when properly authorized by a supervisor.	Meets Standard	Any strip search must be approved by the Assistant Field Office Director (AFOD), and a Form G-1025 must be completed. Post orders preclude detention officers from unilaterally deciding to conduct a strip search. There have been no strip searches in the past year.	
7.	Body cavity searches are conducted by designated health personnel only when authorized by the facility administrator (or acting administrator) on the basis of reasonable belief or suspicion that contraband may be concealed in or on the detainee's person.	Meets Standard	The AFOD must approve a body cavity search. If approved, only health care personnel may conduct the search. There have been no body cavity searches in the past year.	
8.	"Dry cells" are used for contraband detection only when there is reasonable belief of concealment, with proper authorization, and in accordance with required procedures	Meets Standard	Written policy and procedures provide guidance on the use of "dry cells". The AFOD must approve placement of a detainee in a "dry cell".	
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		

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)			
10. Canines are not used in the presence of detainees	Meets Standard	Canines are used for drug detection only and not in the presence of detainees.	

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 facility has a comprehensive policy on the various types of searches that may be employed. Staff members must always use the least intrusive method for searches. Detainees are normally pat searched. A review of documentation and staff member interviews verified that written procedures are in place to enhance facility security by detecting, controlling and properly disposing of contraband. Staff members have been trained to ensure compliance with facility policy. Canines were used once in the past twelve months for drug detection; however, detainees were not present during the search.

Overall Rating: Meets Standard

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

Completion Date: 9/20/2012

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

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

	Components	Rating	Remarks (1000 Char Max)
1.	The facility has a Sexual Abuse and Assault Prevention and Intervention Program.	Meets Standard	The facility has a Sexual Abuse and Assault Prevention and Intervention Program which references the Prison Rape Elimination Act. The Assistant Field Office Director (AFOD) is the program director.
2.	For SPCs and CDFs, the written policy and procedure has been approved by the Field Office Director.	Meets Standard	The written policy has been approved and signed by the Field Office Director.
3.	Tracking statistics and reports are readily available for review by the inspectors.	Meets Standard	Statistics and reports were readily available for review by the inspector.
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	Review of training records and the training syllabus confirmed that all staff members are trained during initial orientation and annually thereafter.
5.	Detainees are informed about the program in facility orientation and the detainee handbook (or equivalent).	Meets Standard	Detainees are informed about the program in the detainee handbook and during the facility orientation video.
6.	The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	Meets Standard	Sexual Assault Awareness Notices were observed on all housing unit bulletin boards.
7.	The Sexual Assault Awareness Information brochure is available for detainees. (Required in SPCs and CDFs.)	Meets Standard	The brochure was reproduced and included in the detainee handbook.
8.	Detainees are screened upon arrival for "high risk" sexual assaultive and sexual victimization potential and housed and counseled accordingly.	Meets Standard	Review of 25 detainee medical records revealed that all detainees are screened for high risk sexual assaultive and sexual victimization potential upon arrival.
9.	All incidents of sexual abuse or assault by a detainee on a detainee have been documented in the past year.	Meets Standard	There were three complaints of inappropriate touching of a detainee by a detainee reported in the past year. Documentation was available for review.

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 was one allegation of inappropriate touching of a detainee by an officer. This case is currently under investigation by the Department of Homeland Security Inspector General.
11.	There is prompt and effective intervention when any detainee is sexually abused or assaulted and policy and procedures for required chain-of-command reporting.	Meets Standard	Policy requires prompt and effective intervention and chain-of-command reporting when a detainee reports sexual abuse or assault.
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	Investigative files and referrals were reviewed and found to be in compliance with the plan.
13.	When there is an alleged or proven sexual assault, the required notifications are promptly made.	Meets Standard	Notifications were promptly made for all alleged sexual assaults.
14.	Victims of sexual abuse or assault are referred to specialized community resources for treatment and gathering of evidence.	Meets Standard	The facility utilizes Sierra Medical Center for treatment and gathering of evidence from sexual assault victims.
15.	All records associated with claims of sexual abuse or assault is maintained, and such incidents are specifically logged and tracked by a designated staff coordinator.	Meets Standard	The AFOD is the designated staff coordinator and had all records associated with claims of sexual abuse or assault.

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

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

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

The facility has a comprehensive Sexual Abuse and Assault Prevention and Intervention program. All staff members receive related training during their pre-service orientation and during annual training. Procedures are in place to prevent sexual assault and abuse of detainees and to provide prompt and effective intervention and treatment of victims. Detainees receive information regarding the Prison Rape Elimination Act during their intake and in the detainee handbook. There were three unsubstantiated allegations of sexual abuse or assaults by detainees on detainees over the past year and one allegation of sexual assault by staff on a detainee. All allegations concerned inappropriate touching. None have been substantiated. The allegation of sexual assault on a detainee by an officer is still under review by the Department of Homeland Security Inspector General. Investigation and tracking documentation is thorough and complete. The standard's rating was based on a review of policies and investigation reports and staff member interviews.

Overall Rating: Meets Standard

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

Completion Date: 9/20/2012

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

	Components	Rating	Remarks (1000 Char Max)
1.	Written policy and procedures are in place for special management units.	Meets Standard	The facility has written policy and procedures for Special Management Units (SMUs). The facility uses two SMUs, one for disciplinary segregation and one for administrative segregation and protective custody.
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	Facility policy states that a detainee may only be placed in disciplinary segregation by order of the disciplinary hearing officer or the institutional disciplinary panel, and after a hearing in which the detainee has been found guilty of a prohibited act.
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	When a detainee is placed in administrative or disciplinary segregation, a written clearance, signed by the medical supervisor, is required prior to the detainee's placement in the SMU.
5.	There are written policy and procedures to control and secure SMU entrances, contraband, tools, and food carts, in accordance with the Detention Standard on Facility Security and Control.	Meets Standard	
6.	The number of detainees confined to each cell or room does not exceed the capacity for which it was designed.	Meets Standard	
7.	Cells and rooms are well ventilated, adequately lit, appropriately heated and maintained in a sanitary condition at all times.	Meets Standard	On-site observations confirmed that the cells are well ventilated, adequately lighted, appropriately heated and maintained in a sanitary condition at all times.
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	

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

Components	Rating	Remarks (1000 Char Max)
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	A review of logbooks in each of the SMUs confirmed that officers record all of the information listed in this component.
 In SPCs and CDFs, a separate log is maintained in the SMU that all persons visiting the unit must sign and record: The time and date of the visit, and Any unusual activity or behavior of an individual detainee, with a follow-up memorandum sent through the facility administrator to the detainee's file. 	Meets Standard	A review of logbooks confirmed that a separate logbook is maintained in each of SMUs that all visitors must sign. The information listed in this component is also entered in the logbook.
 11. A Special Management Housing Unit Record is maintained on each detainee in an SMU: In SPCs form I-888 (Special Management Housing Unit Record) is prepared immediately upon the detainee's placement in the SMU. In CDFs and IGSA facilities form I-888 or a comparable form is used. In SPCs and CDFs: By the end of each shift, the special housing unit officer records: Whether the detainee ate, showered, exercised, and took any medication, and Any additional information, for example, if the detainee has a medical condition, has exhibited suicidal or assaultive behavior, etc. When a health care provider visits an SMU detainee, he or she signs that individual's record, and the housing officer initials the record after all medical visits are completed and no later than the end of the shift. 	Meets Standard	Facility policy requires that a Form I-888 (Special Management Housing Unit Record) be prepared immediately upon the detainee's placement in the SMU. A review of logbooks confirmed that by the end of each shift, the special housing unit officer has recorded all of the information listed in this component.
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	

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

	Components	Rating	Remarks (1000 Char Max)
13.	There are written policy and procedures concerning the property detainees may retain in each type of segregation.	Meets Standard	Facility policy specifically states what property detainees may retain in each type of segregation.
14.	There are written policy and procedures concerning privileges detainees may have in each type of segregation. (In Administrative Segregation, detainees generally receive the same general privileges as detainees in the general population, as is consistent with available resources and safety and security considerations.)	Meets Standard	Facility policy specifically states what privileges detainees may have in each type of segregation.
15.	Detainees in Administrative Segregation are provided opportunities to spend time outside their cells (over and above the required recreation periods), for such activities as socializing, watching TV, and playing board games and may be assigned to work details (for example, as orderlies in the SMU).	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	
17.	The shift supervisor sees each segregated detainee daily, including weekends and holidays.	Meets Standard	Facility policy requires the shift supervisor to see each detainee daily. A review of documentation confirmed compliance with policy.
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 each detainee in the SMUs daily. 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).
20.	Detainees in SMUs are provided three nutritionally adequate meals per day, ordinarily from the general population menu.	Meets Standard	Detainees in the SMUs are provided with the same meals as the general population.

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

101 (Components	Dating	Pomorke (1999 Charthan)
	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	Detainees in the SMUs have the same correspondence privileges as the general population.
24.	Detainees in an SMU ordinarily retain visiting privileges.	Meets Standard	
25.	Adequate documentation was generated for any restricted or disallowed general visits for a detainee in an SMU who violated visiting rules or whose behavior indicated the detainee would be a threat to the security or good order of the visiting room in the past year.	Meets Standard	In the past 12 months, no detainee in an SMU has been sanctioned with restricted or disallowed general visits.
26.	Adequate documentation was generated, for any restricted or disallowed general visitation for a detainee in Administrative Segregation status because the detainee was charged with, or committed, a prohibited act having to do with visiting guidelines or otherwise acted in a way that indicated the detainee would be a threat to the orderly operation or security of the visiting room in the past year.	Meets Standard	In the past 12 months, no detainee in administrative segregation has been sanctioned with restricted or disallowed general visits.
27.	Under no circumstances is a detainee permitted to participate in general visitation while in restraints.	Meets Standard	Detainees are escorted to the visiting room in restraints. Before the detainee enters the visiting room, however, the restraints are always removed.
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	
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	
30.	Ordinarily, detainees in SMUs are not denied legal visitation.	Meets Standard	Detainees in the two SMUs are not denied legal visitation.

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

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	
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	Detainee requests for access to legal material in their personal property are accommodated within 24 hours of the request.
35. Detainees in Administrative Segregation or Disciplinary Segregation have the same law library access as the general population, unless compelling and documented security concerns require limitations.	Meets Standard	
36. Policy and procedures provide for legal material to be brought to individuals in Disciplinary Segregation under certain circumstances.	Meets Standard	
 37. Any denial of access to the law library is always: Supported by compelling security concerns, For the shortest period required for security, and Fully documented in the SMU housing logbook. ICE/DRO is notified every time law library access is denied. 	Meets Standard	In the past 12 months, no detainee in an SMU has been denied access to the law library.
38. Recreation for detainees in the SMU is separate from the general population.	Meets Standard	Each of the two SMUs has its own recreation area separate from the general population.

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

	Components	Rating	Remarks (1000 Char Max)
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	Staff member interviews and a review of logbooks confirmed detainees in the SMUs are offered at least one hour of recreation per day.
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	In the past twelve months, no detainee in an SMU has been sanctioned with denial or suspension of recreation privileges.
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	In the past twelve months, no detainee in an SMU has been sanctioned with denial or suspension of recreation privileges.
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	In the past twelve months, no detainee in an SMU has been sanctioned with denial or suspension of recreation privileges. If this sanction would be imposed, established procedures would ensure the required authorization and notification occurs.

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

Components	Rating	Remarks (1000 Char Max)
44. Ordinarily, detainees in Administrative Segregation have telephone access similar to detainees in the general population, in a manner consistent with the special security and safety requirements of an SMU. Detainees in Disciplinary Segregation may be restricted 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.	Meets Standard	Detainees in administrative segregation have telephone access similar to detainees in the general population. Except for compelling and documented reasons of safety, security and good order, detainees in disciplinary segregation have access to telephones at least one hour per day.
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. A copy of the order is given to the detainee within 24 hours, unless delivery would jeopardize the safety, security, or orderly operation of the facility. If the segregation is for protective custody, the order states whether the detainee requested the segregation and whether the detainee requests a hearing.	Meets Standard	
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. (An Administrative Segregation Order is not required for a		
the detainee's detention file.		

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

101	disciplinary reasons.		
	Components	Rating	Remarks (1000 Char Max)
46.	There are implemented written procedures for the regular review of all detainees in Administrative Segregation. A supervisor conducts a review within 72 hours of the detainee's placement in Administrative Segregation to determine whether segregation is still warranted. The review includes an interview with the detainee, and a written record is made of the decision and the justification. In SPCs and CDFs, the Administrative Segregation Review Form (I-885) is used. If a detainee is segregated for the detainee's protection, but not at the detainee's request, continued detention requires the authorizing signature of the facility administrator or assistant facility administrator on the I-885. When a detainee has spent seven days in Administrative Segregation, and every week thereafter for the first 60 days and at least every 30 days thereafter, a supervisor conducts a similar review, including an interview with the detainee, and documents the decision and justification. A reviewing authority who concludes a detainee should be removed from Administrative Segregation, submits that recommendation to the facility administrator (or designee) for approval.	Meets Standard	Facility policy includes all of the requirements listed in this component.
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.	Meets Standard	
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.	Meets Standard	Facility policy states that after seven consecutive days in administrative segregation, the detainee may exercise the right to appeal to the Assistant Field Office Director by using any form of written communication.
49.	If a detainee has been in Administrative Segregation for more than 30 days and objects to this status, the facility administrator reviews the case to determine whether that status should continue, taking into account the views of the detainee. A written record is made of the decision and the justification. A similar review is done every 30 days thereafter.	Meets Standard	

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

	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	Facility policy addresses the notifications listed in this component.
51.	When a detainee is held in Administrative Segregation for more than 60 days, the Field Office Director notifies, in writing, the Deputy Assistant Director, Detention Management Division, for consideration of whether it would be appropriate to transfer the detainee to a facility where he or she may be placed in the general population.	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	Facility policy states that a detainee can only be placed in disciplinary segregation by order of the disciplinary hearing officer or the institutional disciplinary panel and after a hearing in which the detainee has been found guilty of a prohibited act. By policy, a maximum of 60 days in disciplinary segregation can be imposed for each violation.
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	All of the requirements listed in this component are included the facility's policy for special management units.

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)
55.	The facility has implemented written procedures for the regular review of all Disciplinary Segregation cases.		
	A supervisor interviews and reviews the status of each detainee in Disciplinary Segregation every seven days and documents his or her findings on a Disciplinary Segregation Review Form (I-887).		
	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.	Meets Standard	All of the requirements listed in this component are included the facility's policy for special management units.
	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.		management ames.
	All review documents are placed in the detainee's detention file.		

PART 2 - 15. SPECIAL MANAGEMENT UNITS - Reviewer Summary

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

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

On-site observations, staff member interviews and a review of documentation confirmed that, to isolate certain detainees from the general population, the facility has a disciplinary segregation housing unit for detainees segregated for disciplinary reasons and an administrative segregation housing unit for detainees segregated for administrative reasons/protection. The facility has the policy and procedures in place to ensure the security and safety of detainees placed in the SMU.

Overall Rating: Meets Standard

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

Reviewer Signature (for printed form submission):

Completion Date: 9/20/2012

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

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

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

	Components	Rating	Remarks (1000 Char Max)
1.	The ICE/DRO Field Office Director ensures that weekly announced and unannounced visits occur.	Meets Standard	A review of detainee housing unit logbooks and interviews with both ICE staff members and detainees confirmed that weekly announced and unannounced visits occur.
2.	Detention Staff and Deportation Staff conduct scheduled weekly visits with detainees.	Meets Standard	Unit logbooks confirmed that ICE staff members visit the housing units at least weekly.
3.	Scheduled visits are posted in ICE/DRO detainee housing areas.	Meets Standard	Postings in the housing units show the scheduled days and times for visits of detention and deportation staff members.
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 readily available and used by detainees.
6.	The facility treats detainee correspondence to ICE/DRO staff as Special Correspondence.	Meets Standard	Facility policy requires that correspondence to ICE staff members be treated as Special Correspondence.
7.	A secure box is located in an accessible location for detainee's to place their Detainee Request Forms.	Meets Standard	
8.	Only ICE staff are able to retrieve the contents of the secure box containing Detainee Request Forms,	Meets Standard	Only ICE staff members have a key to the secure box where detainees place their Detainee Request Forms.
9.	ICE/DRO staff respond to a detainee request from a facility within 72 hours and document the response in a log.	Meets Standard	
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	
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	On-site observations confirmed that Office of Inspector General (OIG) Hotline Informational Posters are posted in the housing units and other common areas.

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

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

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

Components	Rating	Remarks (1000 Char Max)
12. Daily telephone serviceability checks are documented in the housing unit logbook.	Meets Standard	Housing unit officers check the phones at least daily and record the results in the unit logbooks.

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 presence of ICE staff members on a daily basis greatly reduces the concerns of detainees. Detainees indicated that ICE staff are very approachable and are in the units numerous times each week to discuss their cases. On-site observations, a review of documentation and interviews with ICE/facility staff members and detainees confirmed that the facility enhances the security, safety and orderly facility operations by encouraging and requiring informal direct and written contact between staff members and detainees.

Completion Date: 9/20/2012

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

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.

ope	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	Facility policy designates the maintenance supervisor as the tool control officer.	
2.	If the warehouse is located outside the secure perimeter, the warehouse receives all tool deliveries. If the warehouse is located inside the secure perimeter the facility administrator shall develop site-specific procedures, for example; storing tools at the rear sallyport until picked up and receipted by the tool control officer. The tool control officer immediately places certain tools (band saw blades, files and all restricted tools) in secure storage.	Meets Standard	All tool deliveries are made directly to the maintenance supervisor's office, which is located outside the secure perimeter.	
3.	(MANDATORY) The use of tools, keys, medical equipment, and culinary equipment is controlled.	Meets Standard	A review of policy, staff interviews and on-site observations confirmed that tools, keys, medical equipment and culinary equipment are accounted for and controlled.	
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	Policy includes the requirements of this component. On-site inspection confirmed adherence to the policy.	
5.	 Tool inventories are required for: Facility Maintenance Department Medical Department Food Service Department Electronics Shop Recreation Department Armory 	Meets Standard		
6.	Tool Inventories are conspicuously posted on all tool boards, tool boxes and tool kits.	Meets Standard		
7.	 The facility has a policy for the regular inventory of all tools. The policy sets minimum time lines for physical inventory and all necessary documentation. ICE facilities use AMIS bar code labels when required. 	Meets Standard	Regular inventory of all tools is established by facility policy. Policy sets minimum time lines for physical inventory and all necessary documentation. AMIS bar code labels are not required.	
8.	The facility has a tool classification system. Tools are classified according to: Restricted (dangerous/hazardous) Non Restricted (non-hazardous).	Meets Standard	The facility has a tool classification system. All tools are classified as either restricted or non-restricted.	

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)
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	Facility policy includes specific procedures to ensure that all tools are properly marked and readily identifiable.
	 The facility has an approved tool storage system. The system ensures that all stored tools are accountable. Tools are stored on shadow boards in which the shadows resemble the tool. Shadow boards have a white background. Restricted tools are shadowed in red. Non-restricted tools are shadowed in black. Commonly used tools (tools that can be mounted) are stored in such a way that missing tools are readily noticed. 	Meets Standard	The facility tool room is located outside the secure perimeter and was not inspected. The tool control officer confirmed that the tools maintained in the tool room are accounted for on a daily basis. The system used for the storage of tools in the recreation, medical and food service departments included the elements listed in this component.
12.	Tools removed from service have their shadows removed from shadow boards.	Meets Standard	
13.	Tools not adaptable to a shadow board are stored in a locked drawer or cabinet.	Meets Standard	
14.	Sterile packs are stored under lock and key.	Meets Standard	Sterile packs are stored under lock and key in the medical department.
15.	Each facility has procedures for the issuance of tools to staff and detainees.	Meets Standard	
16.	 There are policies and procedures to address the issue of lost tools. The policy and procedures include: Verbal and written notification. Procedures for detainee access. Necessary documentation/review for all incidents of lost tools. 	Meets Standard	Facility policy and procedures address the issue of lost tools and include the elements listed in this component.
17.	Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	Meets Standard	
18.	All private or contract repairs and maintenance workers under contract with ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility. The inventory is reviewed and verified prior to the contractor entering/departing the facility.	Meets Standard	

PART 2 - 17. TOOL CONTROL (Key: Q)

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

Components	Rating	Remarks (1000 Char Max)
19. Hoses longer than three feet in length are classified as restricted tool.	a Meets Standard	Hoses longer than three feet in length are classified as restricted tools.
20. Scissors used for in-processing detainees are tethered the furniture (e.g. table, counter, etc.) where they a used.		

PART 2-17. TOOL CONTROL – Reviewer Summary

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

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

A review of documentation, staff member interviews and an inspection of tools maintained within the secure perimeter of the facility confirmed that the facility has procedures in place to protect detainees and staff and to contribute to the orderly facility operation by maintaining control of all tools. Documentation is available to confirm that tools are inventoried and accounted for on a daily basis. The facility tool room is located outside the secure perimeter and was not inspected.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6), (l)

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

Completion Date: 9/20/2012

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 an extensive policy on the use of force.
2.	Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	Meets Standard	Facility policy authorizes the action listed in this component.
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	Facility policy includes the requirements of this component.
5.	The facility subscribes to the prescribed Confrontation Avoidance Procedures.	Meets Standard	
•	Ranking detention official, health professional, and others confer before every calculated use of force.	Weets 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.	Meets Standard	
	• Under staff supervision.		
7.	Staff members are trained in the performance of the Use-of-Force Team Technique.	Meets Standard	A review of training records confirmed staff members are trained in the use-of-force team technique.
8.	All use-of-force incidents are documented and reviewed.	Meets Standard	A review of documentation confirmed that use-of-force incidents 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	

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)
 Staff: Does not use force as punishment. Attempts to gain the detainee's voluntary cooperation before resorting to force Uses only as much force as necessary to control the detainee. Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical. 	Meets Standard	Policy includes each of the directives listed in this component.
11. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	Meets Standard	Medication is only used for restraint purposes under court order.
12. (MANDATORY) Use-of-Force Teams follow written procedures that attempt to prevent injury and exposure to communicable disease(s).	Meets Standard	Facility policy includes the written procedures that must be followed by the use-of-force teams.
 13. Standard procedures associated with using four/five point restraints include: Soft (nylon/leather) restraints. Dressing the detainee appropriately for the temperature. A bed, mattress, and blanket/sheet. Checking the detainee at least every 15 minutes. 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	
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	
15. All detainee checks are logged.	Meets Standard	Policy requires that all detainee checks are documented in a logbook.

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.

to maintain the security and orderly operation of the facility.			
Components	Rating	Remarks (1000 Char Max)	
16. In immediate-use-of-force situations, officers contact medical staff once the detainee is under control.	Meets Standard	Policy requires that officers contact medical staff once the detainee is under control. A review of documentation confirmed that policy is followed.	
 17. When the Facility Administrator authorizes use of non-lethal weapons: 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	Facility policy includes each of the requirements listed in this component.	
18. Intermediate Force Weapons, when not in use are stored in areas where access is limited to authorized personnel and to which detainees have no access.	Meets Standard		
19. If Intermediate Force Weapons are stored in the Special Management Unit (SMU), they are stored and maintained the same as Class R tools.	N/A	The SMUs do not store weapons of any type.	
 20. Special precautions are taken when restraining pregnant detainees. Medical personnel are consulted 	Meets Standard	Facility policy requires that medical personnel be consulted prior to restraining pregnant detainees.	
21. Protective gear is worn when restraining detainees with open cuts or wounds.	Meets Standard		
22. Staff document every use of force, including what type of restraints was used during the incident.	Meets Standard	A review of documentation confirmed that staff members document every use of force, including what types of restraints were used during the incident.	
23. It is standard practice to review any use of force and the non-routine application of restraints.	Meets Standard		
 24. All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. Specialized training is given to officers ensuring they are certified in all devices approved for use. 	Meets Standard	A review of training records confirmed that officers receive the training listed in this component.	
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		
26. The use of canines is restricted to contraband detection purposes only.	Meets Standard		

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

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

	Components	Rating	Remarks (1000 Char Max)
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	

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)

A review of documentation and staff member interviews confirmed that policy and procedures are in place to authorize staff to use necessary force after all reasonable efforts to otherwise resolve a situation have failed. Policy requires that only the amount of force necessary to gain control of the detainee may be used.

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

Completion Date: 9/20/2012

Section III ORDER

Disciplinary System

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)
The facility has a written disciplinary system using progressive levels of reviews and appeals.	Meets Standard	The facility has a written disciplinary policy using progressive levels of review and appeal.
The facility rules state that disciplinary action shall not be capricious or retaliatory.	Meets Standard	
 Written rules prohibit staff from imposing or permitting the following sanctions: 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	Written policy prohibits each of the sanctions listed in this component.
 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 requirements of this component are included in the detainee handbook and are also communicated to all detainees verbally in the video orientation.
 The following items are conspicuously posted in Spanish and English or other dominate languages used in the facility: Rights and Responsibilities Prohibited Acts Disciplinary Severity Scale Sanctions 	Meets Standard	
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	Meets Standard	Facility policy encourages informal resolutions when minor rule violations or prohibited acts occur.
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	Facility policy requires each of the elements listed in this component.

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

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

Components	Rating	Remarks (1000 Char Max)
An intermediate disciplinary process is used to adjudicate minor infractions.	Meets Standard	
 10. A disciplinary panel (or equivalent in IGSAs) adjudicates infractions. The panel: 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 	Meets Standard	Each of the bulleted items listed in this component are included in facility policy.
 Bases its findings on the preponderance of evidence Imposes only authorized sanctions 		
11. A staff representative is available if requested for a detainee facing a disciplinary hearing	Meets Standard	Policy states that the Assistant Field Office Director will make a staff representative available if one is requested by a detainee facing a disciplinary hearing.
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	The requirements of this component are included in policy.
14. Written procedures govern the handling of confidential-source information. Procedures include criteria for recognizing "substantial evidence".	Meets Standard	Policy includes written procedures for handling confidential-source information. Policy also includes 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	

PART 3 - 19. DISCIPLINARY SYSTEM - Reviewer Summary

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

PART 3 – 19. DISCIPLINARY SYSTEM – Reviewer Summary				
(Use following format for dates: mm/dd/yyyy)				
Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)				
A review of documentation and staff member interviews confirmed that the facility has established an equitable disciplinary system requiring detainees to comply with facility rules and regulations and imposing disciplinary sanctions on those who do not comply.				
Overall Rating: Meets Standard				
Reviewer Name (Printed (b)(6), (b)(7)(c) Completion Date: 9/20/2012				
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

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.

sar	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 Manager (FSM) and Assistant Food Service Manager (AFSM) are both professionally trained. Both have twenty-two years of experience in food service operations in the military, as well as prior experience in food service operations in the Texas Department of Criminal Justice. Both hold Food Handlers Certifications from the City of El Paso, valid through 2013.		
2.	The Cook Foreman is on duty on days when the FSA is off duty and vice versa.	Meets Standard			
3.	The FSA provides food service employees with training that specifically addresses detainee-related issues. In ICE Facilities this includes a review of the "Food Service" standard	Meets Standard			
4.	(MANDATORY) Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device. Knives and keys are inventoried and stored in accordance with the Detention Standard on Tool Control	Meets Standard	Knives are locked in a secure cabinet behind a locked door. The key to the knife storage cabinet is controlled by a food service supervisor on duty. (b)(7)(e)		
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	Knives are only used in the secure cutting room. The condition of each knife is monitored when it is used.		
6.	Special procedures (when necessary) govern the handling of food items that pose a security threat.	Meets Standard	Food items posing a security threat are maintained in locked storage areas accessible to food service personnel only.		
7.	Operating procedures include daily searches (shakedowns) of detainee work areas.	Meets Standard	Officers conduct (b)(7)e earches of the food service area. Food service personnel conduct random searches of the food service area.		

PART 4 – 20. FOOD SERVICE (Key: T)

san	sanitary and hygienic food service operation.				
	Components	Rating	Remarks (1000 Char Max)		
8.	The FSA monitors staff implementation of the facility population count procedures. These procedures are in writing. Staff are trained in count procedures.	Meets Standard			
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	Detainee workers in the food service program are monitored daily when they report to work by food service personnel. Detainee workers are screened by medical staff prior to working in the food service program to ensure they do not have health issues which would compromise the food service program. Detainee workers were observed to be clean and appropriately dressed while at their work assignments in the food service department.		
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			
12.	 During orientation and training session(s), the Cook Supervisor (CS) explains and demonstrates: Safe work practices and methods. Safety features of individual products/ pieces of equipment. Training covers the safe handling of hazardous material[s] the detainee are likely to encounter in their work. 	Meets Standard	Detainee food service workers are trained prior to working in the program. The training includes individual instruction by food service personnel as well as training videos which address avoiding burns, safe handling of kitchen tools/machinery and avoiding falls.		
13.	The Cook Foreman documents all training in individual detainee detention files.	Meets Standard	Training documentation for detainee food service workers was reviewed during the inspection.		
14.	Detainees at SPCs and CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSAs are subject to local and State rules and regulations regarding detainee pay.	Meets Standard	Detainees are paid in accordance with the "Voluntary Work Program" standard.		
15.	Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.	Meets Standard			

PART 4 – 20. FOOD SERVICE (Key: T)

san	sanitary and hygienic food service operation.			
	Components	Rating	Remarks (1000 Char Max)	
16.	For cafeteria-style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	Meets Standard	Sneeze guards are used to protect serving lines in this facility.	
17.	The facility has a standard 35-day menu cycle. IGSAs use a 35 day or similar system for rotating meals.	Meets Standard	The facility's main menu utilizes a standard 35-day menu cycle. The facility's diabetic menu also utilizes a 35-day menu cycle. The facility's vegetarian, Halal and Kosher menus utilize a two-week menu cycle.	
18.	(MANDATORY) A registered dietitian shall conduct a complete nutritional analysis that meets U.S. Recommended Daily Allowances (RDA), at least annually, of every master-cycle menu planned by the FSA. The dietitian must certify menus before they are incorporated into the food service program. If necessary, the FSA shall modify the menu in light of the nutritional analysis to ensure nutritional adequacy. The menu will need to be revised and re-certified by the registered dietician in that event.	Meets Standard	A registered dietitian conducted a complete nutritional analysis of all five of the facility's menus. The analysis and approval of the menus by the dietitian were examined during the inspection.	
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	All master-cycle menu items are prepared and presented in compliance with Military Recipe Card standards.	
20.	 The Cook Foreman has the authority to change menu items if necessary. If yes, documenting each substitution, along with its justification, with copy to the FSA 	Meets Standard		
21.	All staff and volunteers know and adhere to written "food preparation" procedures.	Meets Standard	The facility uses the Military Recipe Cards in food preparation.	

PART 4 – 20. FOOD SERVICE (Key: T)

Components	Rating	Remarks (1000 Char Max)
 22. A Common Fare menu available to detainees, at no charge, whose dietary requirements cannot be met on the main. Changes to the planned Common Fare menu can be made at the facility level. Hot entrees are offered three times a week. The Common Fare menus satisfy nutritional recommended daily allowances (RDAs). Staff routinely provide hot water for instant beverages and foods. Common Fare meals are served with: Disposable plates and utensils. Reusable plates and utensils. Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the Common Fare diet items. 	Meets Standard	Five different menus are available to detainees in the facility. Changes to a menu may be made at the facility level. Hot entrees are available at each meal. All five of the facility's menus meet the nutritional recommended daily allowances. Hot water is available to detainees as needed. Prepackaged Kosher meals are served on disposable plates and with disposable utensils.
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	Meets Standard	
24. A supervisor at the command level must approve a detainee's removal from the Common Fare Program.	Meets Standard	
25. The Facility Administrator, in conjunction with the chaplain and/or local religious leaders provides the FSA a schedule of the ceremonial meals for the following calendar year.	Meets Standard	
 26. The Common Fare Program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. Muslims fasting during Ramadan receive their meals after sundown. Jews who observe Passover but do not participate in the Common Fare Program receive the same Kosherfor- Passover meals as those who do participate. Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. 	Meets Standard	The facility accommodates detainees abstaining from particular foods as well as detainees fasting for religious purposes.
27. The food service program addresses medical diets.	Meets Standard	Medical diets are available as ordered by medical staff.
28. Satellite-feeding programs follow guidelines for proper sanitation.	Meets Standard	The vast majority of meals are served cafeteria style. Satellite meals are served to detainees in special housing and the medical unit. Meals served in those areas were observed to follow guidelines for proper sanitation.

PART 4 – 20. FOOD SERVICE (Key: T)

sanitary and hygienic food service operation.			
Components	Rating	Remarks (1000 Char Max)	
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	Temperature checks of food items are made three times at each meal serving and logged in the food temperature logbooks. These logbooks were examined during the inspection.	
30. All meals provided in nutritionally adequate portions.	Meets Standard	A registered dietitian conducts a complete nutritional analysis of all five of the facility's menus. Meals are provided in nutritionally adequate portions.	
31. Food is not used to punish or reward detainees based upon behavior.	Meets Standard		
 The food service staff instruct detainee volunteers on: Personal cleanliness and hygiene; Sanitary techniques for preparing, storing, and serving food, and; The sanitary operation, care, and maintenance of equipment. 	Meets Standard	Detainee workers are trained by food service staff in sanitary techniques for preparing, storing and serving food, as well as the sanitary operation, care and maintenance of food service equipment. The documentation of this training is maintained in the Food Service Manager's office.	
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	Written facility policy requires the weekly inspection of the food service area by both medical and food service staff to ensure that sanitary conditions are maintained.	
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	Temperatures of dishwashing machines are checked and logged after every meal. The logbooks were reviewed during the inspection and found to be current.	

PART 4 - 20. FOOD SERVICE (Key: T)

Sali	sanitary and hygienic food service operation.				
	Components	Rating	Remarks (1000 Char Max)		
37.	(MANDATORY) Staff document the results of every refrigerator/ freezer temperature check, in accordance with the Detention Standard on Food Service.	Meets Standard	Freezer and refrigerator temperature checks are made and logged daily. Manual thermometers are used inside the freezer and refrigerator to determine correct temperatures.		
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			
41.	Food service personnel conduct shakedowns along with detention staff.	Meets Standard			
42.	In SPCs only: The ICE supervisor on duty ensures that ICE officers participate in dining room supervision.	Meets Standard	ICE officers were observed in the dining room during meal service.		
43.	Menus are certified by a registered dietitian prior to being incorporated into the Food Service Program.	Meets Standard	A registered dietitian conducts a complete nutritional analysis of all five of the facility's menus. The analysis and approval of the menus by the dietitian was examined during the inspection.		
44.	In SPCs only: the FSA prepares quarterly cost estimates for the Common Fare Program. This quarterly estimate is factored into the quarterly budget.	Meets Standard	The FSM prepares a quarterly cost estimate for the Common Fare Program.		
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.	Does Not Meet Standard	The roll-up door into the dry storage area of the warehouse does not have an air curtain.		
47.	Staff comply with the ICE requirements for "food receipt and storage.	Meets Standard	One staff member in the food service program receives all food shipments to ensure all requirements for food receipt and storage are met. Refrigerators, freezers and dry storage areas were in good order during the inspection.		
48.	Stock inventory levels are monitored and adjusted to correct overage and shortage problems.	Meets Standard			
49.	Staff comply with all ICE Housekeeping, Storeroom/Refrigerator requirements. Identify and explain any shortcomings.	Meets Standard	Refrigerators, freezers and dry storage areas were in good order during the inspection.		

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.	Meets Standard	
 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	Personnel from William Beaumont Army Medical Center, Preventive Medicine and Environmental Health conduct monthly inspections of the food service program to ensure the food service facility and equipment meet governmental health and safety codes. Copies of these monthly reports were reviewed and indicated corrective action was taken when necessary.
52. Personnel inspecting the food service department shall note needed corrective action(s), if any, in a written report to the Facility Administrator.	Meets Standard	
53. Only those toxic and caustic materials required for sanitary maintenance of the facility, equipment, and utensils shall be used in the food service department. Material Safety Data Sheets (MSDSs) will be maintained on all flammable, toxic, and caustic substances used.	Meets Standard	Limited amounts of caustic and toxic materials are maintained in the food service area, and those items are locked in a cabinet in the FSM's office. MSDS sheets are available for the substances used in food service.
54. (MANDATORY) The FSA is responsible for pest control in the food service department, including contracting the services of an outside exterminator.	Meets Standard	Monthly and on-call pest control services for the food service program are provided by ECOLAB.

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)

Food service is contracted at this facility. The food service program was reviewed during the inspection. The area is clean and sanitary. Five menus, certified by a registered dietitian, are used. Medical diets and special diets are available to detainees as needed upon orders from medical staff or to meet special religious dietary needs. Detainee workers in food service are trained in areas specific to the safe and sanitary operation of the food service program. Detainee food service workers were observed to be clean, in clean uniforms and using hair and facial hair coverings.

Overall Rating: Meets Standard

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

Completion Date: 9/20/2012

Reviewer Signature (for printed form submission):

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.

any	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	Policies require that detainees who declare a hunger strike or refuse food for 72 hours be referred to medical staff for management.	
2.	Facility immediately reports via the chain of command a hunger strike to ICE/DRO.	Meets Standard	Policy requires that the health services administrator contact ICE personnel daily on the status of any detainee on a hunger strike.	
3.	The facility has established procedures to ensure staff respond immediately to a hunger strike.	Meets Standard	The facility uses the ICE Performance-Based National Detention Standards (PBNDS) and Immigration Health Service Corps (IHSC) policy to train staff to respond to hunger strikes. Both policies require immediate staff response.	
4.	Policy and procedure require that staff isolate a hunger- striking detainee from other detainees.	Meets Standard	Policy requires staff to isolate hunger-striking detainees from other detainees.	
5.	Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	Meets Standard	Medical personnel are authorized to house hunger-striking detainees in the medical short-stay unit.	
6.	Medical staff record the weight and vital signs of a hunger- striking detainee at least once every 24 hours.	Meets Standard	Policy requires medical staff to record the weight and vital signs of hunger strikers at least once every 24 hours on the Hunger Strike Monitoring Form.	
7.	The facility medical authority obtains a hunger striker's consent before medical treatment.	Meets Standard	A Consent for Treatment form is signed by each detainee during the intake process. Medical personnel obtain a signed consent form prior to administering any invasive medical evaluations or treatments.	
8.	A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment, or two staff/provider signatures indicating detainee refusal to sign form.	Meets Standard	Policy requires that a Refusal of Treatment form be completed if a detainee rejects medical evaluation or treatment.	

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.

any detainee who is on a hunger strike.				
Components	Rating	Remarks (1000 Char Max)		
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 that staff deliver three meals per day to the detainee.		
10. Staff maintain the hunger striker's supply of drinking water/other beverages.	Does Not Meet Standard	Hunger strikers are housed in an observation room in the short-stay unit of the medical department. There is a sink with running water available to the detainee in the observation room. The standard states that staff will provide drinking water to the detainee, as opposed to the language of the component, which indicates that staff maintains the drinking water for the detainee. The facility adheres to the standard. One-on-one constant observation is maintained for the duration of a hunger strike.		
11. During a hunger strike, staff remove all food items from the hunger striker's living area.	Meets Standard	Policy states that the detainee will be housed in a medical isolation room so that no food items other than those provided by the staff are in the hunger striker's living area.		
12. Staff are directed to record the hunger striker's fluid intake and food consumption on the Hunger Strike Monitoring Form I-839 or equivalent.	Meets Standard	Policy requires medical staff to document a hunger striker's food and fluid intake on the Hunger Strike Monitoring Form. There have been no hunger strikes since the previous inspection.		
13. The medical staff have written procedures for treating hunger strikers.	Meets Standard	Policy provides written procedures for the monitoring and treatment of hunger strikers.		
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 the documentation of all treatment attempts including attempts to persuade the hunger striker by counseling him/her on the medical risks of a hunger strike.		

PART 4 - 21. HUNGER STRIKES (Key: U)

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

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

PART 4 - 21. HUNGER STRIKES - Reviewer Summary

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

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

The Immigration Health Service Corps has comprehensive hunger strike policies that conform to the detention standards. Medical and detention staff members use the ICE PBNDS and IHSC policy to train their staff on hunger strike management. Procedures are in place to protect the health and well-being of hunger strikers. There have been no detainee hunger strikes since the previous inspection. The standard's rating was based on a review of policies, medical protocols, training records and staff member interviews.

Completion Date: 9/20/2012

Overall Rating: Meets Standard

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

Reviewer Signature (for printed form submission):

PART 4 – 22. MEDICAL CARE (Key: V)

nea	health education, so that their health care needs are met in a timely and efficient manner.				
	Components	Rating	Remarks (1000 Char Max)		
1.	The facility operates a health care facility in compliance with state and local laws and guidelines.	Meets Standard	The facility is accredited by the American Correctional Association, The Joint Commission and the National Commission on Correctional Health Care. The inspector reviewed the current Drug Enforcement Administration (DEA) pharmacy license and the Clinical Laboratory Improvement Amendment of 1988 waiver certificate.		
2.	The facility's in-processing procedures of arriving detainees include medical screening.	Meets Standard	A review of 25 detainee medical records revealed that all detainees receive a medical screening, performed by a nurse, during in-processing.		
3.	(MANDATORY) The essential positions needed to perform the health services mission and provide the required scope of services are described in a staffing plan that is reviewed at least annually by the health authority.	Meets Standard	Essential positions needed to provide necessary medical, mental health and dental services are described in a staffing plan. The staffing plan has been reviewed by the health authority. Staffing includes b)(7)(e) administrative positions b)(7)e clinical director (b)(7)e aff physician, (b)(7)e ntis(b)(7)e dental assistant, (b)(7)e sychiatrist, (p)(7)(e)social workers, (b)(7)e pharmaci (b)(7)e harmacy technician(b)(7)(e)mid-level practitioner (b)(7)e nurse managero)(7)(e) registered nurses and(b)(7)(e) medical records technicians. Vacancies currently exist for a health services administrator, one social worker, one mid-level practitioner and (b)(7)(e) egistered nurses.		
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	All newly admitted detainees are informed on how to access health services through an orientation video, the detainee handbook and verbally during the medical screening.		

PART 4 – 22. MEDICAL CARE (Key: V)

ilea	Ith education, so that their health care needs are met in a t	•	
	Components	Rating	Remarks (1000 Char Max)
5.	Detainees will have access to and receive specified 24-hour emergency medical, dental, and mental health services.	Meets Standard	A medical staff member is on site 24 hours per day, seven days a week to provide emergency medical care and access to emergency dental and mental health services.
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 personnel files revealed that all new direct care staff members received initial and annual tuberculosis testing and are offered the Hepatitis B vaccine.
7.	Health care services will be provided by trained and qualified personnel, whose duties are governed by job descriptions and who are properly licensed, certified, credentialed, and/or registered in compliance with applicable state and federal requirements.	Meets Standard	Review of credential files revealed that all professional staff members are licensed, certified, credentialed, and/or registered in compliance with applicable state and federal requirements. Duties are governed by job descriptions.
8.	The facility provides each detainee, upon admittance, a copy of the detainee handbook or equivalent, in which procedures for access to health care services are explained (in a language they can understand).	Meets Standard	All detainees are given a copy of the detainee handbook which clearly explains the process for accessing health care. The handbooks are available in English, Spanish, and Portuguese. InterpreTalk is used for other languages.
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 currently accredited by The Joint Commission and by the National Commission on Correctional Health Care. Credential files were reviewed and found to be current and in compliance with these organizations' standards.
10.	 Within 12 hours of arrival, all newly admitted detainees receive initial medical, dental and mental health screening by a health care provider or a detention officer specially trained to perform this function. When screening is performed by a detention officer, the facility maintains documentation of the officer's special training. 	Meets Standard	Nursing staff provide initial medical, dental and mental health screening for all newly admitted detainees within 12 hours of arrival.

PART 4 – 22. MEDICAL CARE (Key: V)

	Components	Rating	Remarks (1000 Char Max)
11.	(MANDATORY) If language difficulties prevent the health care provider/officer from sufficiently communicating with the detainee for purposes of completing the medical screening, the officer obtains translation assistance.	Meets Standard	The facility uses InterpreTalk for translation services if language difficulties prevent the nurse from sufficiently communicating with the detainee for purposes of completing the medical screening.
12.	The facility has sufficient space and equipment to afford each detainee privacy when receiving health care.	Meets Standard	Although somewhat cramped, the medical facility is well-equipped and includes several examining rooms that provide detainees privacy during encounters with medical personnel.
13.	The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	Meets Standard	The medical facility is located within the secure perimeter and is a restricted-access area.
14.	The medical facility entrance includes a holding/waiting room.	Meets Standard	The medical facility has a small waiting room with seating for 18 detainees.
15.	The medical facility's holding/waiting room under the direct supervision of custodial staff.	Meets Standard	The waiting room is under direct detention staff supervision.
16.	Detainees in the holding/waiting room have access to a toilet and a drinking fountain.	Meets Standard	A bathroom and a drinking fountain are readily accessible to detainees in the waiting room.
17.	 Medical records are kept apart from other files. They are: Secured in a locked area within the medical unit. With physical access restricted to authorized medical staff. Procedurally, no copies made and placed in detainee files. 	Meets Standard	All medical records are maintained electronically. Access to the electronic medical records is restricted to authorized medical personnel. Copies of medical records are not placed in non-medical detainee files.
18.	(MANDATORY) A signed and dated consent form is obtained from a detainee before medical treatment is administered.	Meets Standard	Observation of intake screening and review of 25 detainee medical records revealed that all detainees sign a Consent for Treatment form as part of the intake process.
19.	Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	Meets Standard	Observation revealed that the I-813 is used to authorize the release of confidential medical records to outside sources.

PART 4 – 22. MEDICAL CARE (Key: V)

nea	health education, so that their health care needs are met in a timely and efficient manner.				
	Components	Rating	Remarks (1000 Char Max)		
20.	The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	Meets Standard	The acting health services administrator (HSA) stated that normally at least 24 hours notice is given prior to the movement of a detainee from the facility.		
21.	A detainee's medical records will be transferred as appropriate. All detainees will be transferred with a copy of their transfer summary.	Meets Standard	Observation revealed that the medical summary is prepared and sent with the detainee. The electronic medical record is maintained by the facility.		
22.	Medical records are placed in a sealed envelope or other container labeled with the detainee's name and Anumber and marked "MEDICAL CONFIDENTIAL."	Meets Standard	Observation revealed that medical summaries are placed in a sealed envelope labeled with the detainee's name and Anumber and marked "Medical Confidential."		
23.	Medical screening includes a Tuberculosis (TB) test.	Meets Standard	Medical screening includes a digital chest x-ray to screen for tuberculosis (TB) unless documentation is received that the detainee had a negative chest x-ray within the past 90 days. This was confirmed by a review of 25 detainee medical records.		
24.	All detainees receive a mental-health screening upon arrival. It is conducted: By a health care provider or specially trained officer; Before a detainee's assignment to a housing unit.	Meets Standard	Observation and review of 25 medical records revealed that all detainees receive a mental health screening from a nurse upon arrival and prior to assignment to a housing unit.		
25.	The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.	Meets Standard	A nurse reviews all arriving medical documents to identify detainees needing medical attention during the intake screening.		
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	A review of 25 detainee medical records revealed that all had a health appraisal and physical examination completed within 14 days of arrival. The physical examinations are conducted by the mid-level providers.		

PART 4 – 22. MEDICAL CARE (Key: V)

	Components	Rating	Remarks (1000 Char Max)
27.	Detainees in the Special Management Unit have access to the same level of health care as detainees in the general population.	Meets Standard	Detainees in the Special Management Units (SMUs) have access to the same level of health care as detainees in general population. Additionally, a nurse makes rounds daily in the SMUs.
28.	 Staff provide detainees with health- services (sick call) request slips daily, upon request. Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population. Service-request slips are delivered in a timely fashion to the health care provider. 	Meets Standard	Detainees can request sick call request slips from the housing unit officers at any time. Request slips are available in English and Spanish. Detainees deposit the completed request slips in locked boxes in the dining facility where nursing staff collect them daily.
29.	(MANDATORY) The facility has a written plan for the delivery of 24-hour emergency health care when no medical personnel are on duty at the facility, or when immediate outside medical attention is required.	Meets Standard	Medical personnel are on duty 24 hours per day, seven days a week. Policy provides procedures to follow in obtaining immediate outside medical help.
30.	The plan includes an on-call provider.	Meets Standard	The physician and mid-level practitioners rotate on-call assignments.
31.	The plan includes a list of telephone numbers for local ambulances and hospital services.	Meets Standard	The plan includes the telephone numbers for local ambulances and hospital services.
32.	The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.	Meets Standard	The plan includes procedures for maintaining security and safety during medical emergencies.
33.	(MANDATORY) Detention and health care personnel will be trained, at least annually, to respond to health-related situations within four minutes and to properly use first aid kits, available in designated areas.	Meets Standard	Review of training records and training outlines revealed that all detention and health care personnel are trained in cardiopulmonary resuscitation (CPR) and first aid annually.
34.	Where staff are used to distribute medication, a health care provider properly trains these officers.	N/A	A medical staff member distributes all medication at this facility.

PART 4 – 22. MEDICAL CARE (Key: V)

	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 medications are stored, inventoried and distributed with safety and security concerns in mind. Medications that are not "Keep on Person" are administered by health care staff. Controlled substances or medications that are subject to abuse are monitored closely and their administration is documented thoroughly.
36.	 (MANDATORY) Each facility has written policy and procedures for the management of pharmaceuticals that include: A formulary of all prescription and nonprescription medicines stocked or routinely procured from outside sources. A method for obtaining medicines not on the formulary. Prescription practices, including requirements that medications are prescribed only when clinically indicated and that prescription are reviewed before being renewed. Procurement, receipt, distribution, storage, dispensing, administration, and disposal of medications. Secure storage and perpetual inventory of all controlled substances (DEA Schedule II-V), syringes, and needles. 	Meets Standard	Policy provides guidance to medical staff on obtaining formulary and non-formulary medication; on prescription practices, medication procurement, receipt, distribution storage and disposal; and on the storage, security and inventory of controlled items.
37.	 All pharmaceuticals are stored in a secure area with the following features: 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	Bulk pharmaceuticals are stored in the pharmacy which meets all the required security standards. Locked medication carts with dispensed medication are kept in locked rooms under supervision of the nurses.

PART 4 – 22. MEDICAL CARE (Key: V)

- Treat	Components	Rating	Remarks (1000 Char Max)
38.	 In SPCs and CDFs, the pharmacy has a locking pass-through window. 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 current DEA registration and is properly managed under the direct supervision of a licensed registered pharmacist. The pharmacy does have a locking pass-through window.
39.	Distribution of medication is in accordance with specific instructions and procedures established by the health care provider. Written records of all medication given to detainees are maintained.	Meets Standard	Observation revealed that distribution of medication is in accordance with specific instructions and procedures established by the prescriber. Standard Medication Administration Records are used and scanned into the electronic medical record when completed.
40.	 Medication may not be delivered or administered by detainees. In facilities that are medically staffed 24 hours a day, the health care provider distributes medication. In facilities that are not medically staffed 24 hours a day, medication may be distributed by detention officers, who have received proper training by the health care provider, only when medication must be delivered at a specific time when medical staff are not on duty. 	Meets Standard	All medication is delivered or administered by nurses at this facility.
41.	The facility maintains documentation of the training given any officer required to distribute medication, and the officer has available for reference the training syllabus or other guide or protocol provided by the health authority.	N/A	Officers do not distribute medication at this facility.
42.	The Warden/Facility receives notification that a detainee that has special medical needs.	Meets Standard	A detainee special needs form, DIHS 819, is used to notify the Assistant Field Office Director (AFOD) that a detainee has special medical needs.
43.	Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	Meets Standard	Policy provides guidance for examinations by independent medical service providers and experts.

PART 4 – 22. MEDICAL CARE (Key: V)

	Components	Rating	Remarks (1000 Char Max)
44.	 (MANDATORY) Each facility has a written plan (or plans) that address the management of infectious and communicable diseases, including prevention, education, identification, surveillance, immunization (when applicable), treatment, follow-up, isolation (when indicated), and reporting to local, state, and federal agencies. Plans include: Coordination with public health authorities; Ongoing education for staff and detainees; Control, treatment, and prevention strategies; Protection of individual confidentiality; Media relations; Management of tuberculosis, hepatitis A, B, and C, HIV infection, avian influenza, and Reporting communicable diseases to local and/or state health departments in accordance with local and state regulations. 	Meets Standard	The facility's infection control plan addresses the management of infectious and communicable diseases. The plan addresses coordination with public health authorities, education, media relations and reporting to local and state authorities. Clinical practice guidelines are also available for tuberculosis, hepatitis, HIV infection and avian influenza.
45.	Detainees diagnosed with a communicable disease are isolated according to local medical operating procedures.	Meets Standard	A detainee diagnosed with a communicable disease is isolated in a negative pressure room or the short-stay unit depending on need.
46.	All new arrivals receive TB screening in accordance with guidelines of the Centers for Disease Control (CDC). Unless a chest x-ray is the primary screening method, the PPD (mantoux method) is the primary screening method. (For a detainee on whom the PPD is contraindicated; a chest x-ray will be needed. Detainees not screened are housed separate from the general population.	Meets Standard	All new arrivals are screened for TB using digital chest x-rays unless the detainee arrives with documentation of a negative chest x-ray within the past 90 days. Chest x-rays are interpreted prior to detainees being placed in the general population.
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	The facility has three negative pressure rooms that are used to isolate detainees with symptoms suggestive of TB while evaluation for active disease is conducted.
48.	A transportation system will be available that ensures timely access to health care services that are only available outside the facility, including: prioritization of medical need, urgency (ambulance versus standard), and transfer of medical information.	Meets Standard	Policy provides guidance for timely access to outside health care based on medical urgency and the transfer of medical information.

PART 4 – 22. MEDICAL CARE (Key: V)

hea	health education, so that their health care needs are met in a timely and efficient manner.			
	Components	Rating	Remarks (1000 Char Max)	
49.	Detainee who requires close, chronic, or convalescent medical supervision will be treated in accordance with a plan approved by licensed physician, physician assist, nurse practitioner, dentist, or mental health practitioner that includes directions to health care and other involved personnel.	Meets Standard	Detainees who require close or frequent supervision are managed according to written orders issued by a licensed practitioner. The facility uses a medical short-stay unit to observe and manage detainees who require close, chronic or convalescent care.	
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	Pregnancy testing is performed on all females of child bearing age during the intake process. Uncomplicated pregnancy management is provided by inhouse medical staff. Prenatal care, counseling, nutrition assistance and post-partum follow up for high-risk pregnancies is obtained through community obstetrics providers	
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 medical records of 18 detainees with chronic care conditions were reviewed. All had timely and regular monitoring of their chronic care conditions.	
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	Facility health care staff members complete a Detainee Special Needs form when a detainee requires special consideration for housing, transfer or transportation. A copy of the form is provided to the detainee and concerned detention staff.	
53.	Detainees will have access to emergency and specified routine dental care provided under direction and supervision of a licensed dentist.	Meets Standard	Detainees can access emergency and routine dental care through the services of a full-time dentist.	
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 medical records of 25 ICE detainees were reviewed, and 15 records confirmed referrals to mental health staff from the intake screening process, physical assessments, sick call requests or findings during provider evaluations.	

PART 4 – 22. MEDICAL CARE (Key: V)

	Components	Rating	Remarks (1000 Char Max)
55.		Meets Standard	The facility employs one psychiatrist, who is on site twice a week, and one social worker. Most mental health crisis intervention services are available in-house. However, community resources are available if needed mental health services are outside the scope of practice of the facility.
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 are conducted in examination rooms that provide privacy.
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 medical records of 15 ICE detainees referred for mental health evaluation or treatment were reviewed, and all were evaluated by a licensed mental health provider within two 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: The conditions under which restraints may be applied; The types of restraints to be used; How a detainee in restraints is to be monitored; The length of time restraints are to be applied; Requirements for documentation, including efforts to use less restrictive alternatives; and After-incident review. The medical authority or mental health provider completes a Post-Restraints Observation Report form DIHS-867 or similar form. 	Meets Standard	Policy provides guidance to staff when mechanical or chemical restraints are considered. Procedures describe the types of restraints that may be used, the conditions under which the restraints may be applied, the length of time the restraints are to be applied and how they are to be monitored. An afterincident review and a postrestraint observation report are required. Policy states that chemical restraints may only be used after a court order is obtained.

PART 4 – 22. MEDICAL CARE (Key: V)

	Components	Rating	Remarks (1000 Char Max)
59.	 (MANDATORY) Involuntary administration of psychotropic medications to detainees complies with applicable laws and regulations and the authorizing physician or psychiatrist will: Specify the duration of therapy; Obtain an order authorizing the administration of the drug from a Federal District Court. Document that less restrictive intervention options have been exercised without success; Detail how the medication is to be administered; Monitor the detainee for adverse reactions and side effects; and Prepare treatment plans for less restrictive alternatives as soon as possible. 	Meets Standard	Policy provides guidance to staff when involuntary administration of psychotropic medications is considered. The policy requires obtaining a federal court order and an order from an authorizing physician that specifies the duration of therapy, documentation that less restrictive interventions have been exercised without success, the route of administration, instructions for monitoring and for adverse reactions and a treatment plan for less restrictive alternatives.
60.	An initial dental screening exam should be performed within 14 days of the detainee's arrival. If no on-site dentist is available, the initial dental screening may be performed by a physician, physician's assistant, nurse practitioner or trained RN.	Meets Standard	Initial dental screening examinations are performed by medical providers that have been trained by the contract dentist. A review of training records confirmed the training is performed on an annual basis. A review of 20 detainee health records confirmed dental screening is performed within 14 days of the detainee's arrival.
61.	In each detention facility, the designated health authority and Facility Administrator determines the contents, number, location(s), use protocols, and procedures for monthly inspections of first aid kits.	Meets Standard	The HSA and AFOD are members of the Safety Committee. The committee determines the content, numbers and location of first aid kits. The kits are inspected and maintained by the safety officer.
62.	An automatic external defibrillator should be available for use at the facility.	Meets Standard	The facility has automated external defibrillators (AEDs) available for use.
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	This is an ICE facility; therefore, ICE staff members are always on site and are notified immediately if forced treatment is considered.
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 AFOD holds weekly department head meetings that include the HSA.

PART 4 – 22. MEDICAL CARE (Key: V)

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

	Components	Rating	Remarks (1000 Char Max)
65.	(MANDATORY) Biohazardous waste will be managed and medical and dental equipment decontaminated in accordance with sound medical standards and compliance with applicable local, state, and federal regulations.	Meets Standard	Bio-hazardous waste is managed by medical staff, placed in appropriate containers and stored in a bio-hazardous waste storage room. The waste is collected periodically by Stericycle. Medical and dental instruments are decontaminated and sterilized by the dental assistant. Spore testing logs are maintained on the sterilizer.
66.	(MANDATORY) The health authority will implement a system of internal review and quality assurance.	Meets Standard	The health services unit has a comprehensive Performance Improvement Program.

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)

Health care in the facility is provided by uniformed Public Health Service officers of the Immigration Health Service Corps (IHSC) and their contractors. Required services that are beyond the scope of practice for the health service unit are referred to community providers. The health services unit is currently accredited by The Joint Commission under the ambulatory care standard, the American Correctional Association and the National Commission on Correctional Health Care. Health care services are provided in a clean environment, which is adequately staffed with (7) positions and is properly equipped. Detainees with acute and chronic needs are identified during the intake screening and physical assessment processes. Timely and regular follow-up is conducted for detainees with chronic care medical and mental health conditions. Routine medical, dental and mental health care services are also provided in a timely manner. Detainees requiring close observation for medical conditions are housed in one of three negative airflow/respiratory isolation rooms or in a six-bed ward in the medical short-stay unit. A review of 25 detainee medical records confirmed timely medical and mental health intake screenings and appropriate physical assessments. Detainees are not charged a co-pay for medical, dental or mental health services.

The standard's rating was based on a review of established policies and procedures, on a review of 25 detainee medical records, other medical documentation, staff training documentation and the facility detainee handbook, on observations in the medical and detainee housing units and during health care encounters, and on interviews with the medical staff, the HSA, detainees and detention officers and supervisors.

 Overall Rating: Meets Standard

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

 Completion Date: 9/20/2012

Reviewer Signature (for printed form submission):

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

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

	Components	Rating	Remarks (1000 Char Max)
1.	There is a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items. The supply of these items exceeds the minimum required for the number of detainees.	Meets Standard	Policy addresses the issuance and exchange of clothing, bedding, linens, towels and personal hygiene items.
2.	 All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive, at a minimum: One uniform shirt and one pair of uniform pants or one jumpsuit. One pair of socks. One pair of underwear (daily change). One pair of facility-issued footwear. 	Meets Standard	All detainees are issued clean, temperature appropriate, presentable clothing to include: two uniform shirts, two pants, two pairs of underwear, two tshirts, two pairs of socks, and one pair of footwear and shower shoes.
3.	Additional clothing is available for changing weather conditions and as is seasonally appropriate.	Meets Standard	Jackets and sweater tops are issued seasonally.
4.	New detainees are issued clean bedding, linens and towels, at a minimum: One mattress One blanket Two sheets One pillow One pillowcase Additional blankets, based on local weather conditions.	Meets Standard	New detainees are issued clean bedding, linens and towels to include: one mattress, one blanket, two sheets, one pillow, one pillowcase and one towel. Additional blankets are issued based on local weather conditions.
5.	The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE detainees are not charged for these items.	Meets Standard	Policy states and the practice is to issue person hygiene items appropriate to the detainee's gender. At a minimum, this includes one bar of soap, one comb, one tube of toothpaste, one toothbrush, one bottle of shampoo, one container of skin lotion and one container of petroleum jelly. These items are replenished as needed.

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

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

	Components	Rating	Remarks (1000 Char Max)
6.	 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 are clean and adequate in number.
7.	 Bathing facilities are: Clean Operable with temperatures between 100 and 120 degrees Fahrenheit. ACA Expected Practice 4-ALDF-4B-08 requires one washbasin for every 12 detainees. ACA Expected Practice 4-ALDF-4B-09 requires a minimum ratio of one shower for every 12 detainees. 	Meets Standard	Bathing facilities are clean and adequate in number. Temperature logs were reviewed and temperatures were maintained between 105 and 120 degrees Fahrenheit.
8.	Detainees with disabilities are provided adequate facilities, support, and assistance needed for self-care and personal hygiene.	Meets Standard	Facilities compliant with the Americans with Disabilities Act are available, and support and assistance is provided as needed.
9.	 Detainees are provided clean clothing, linen and towels. Socks and undergarments - daily. Outer garments - twice weekly. Sheets - weekly. Towels - weekly. Pillowcases - weekly. 	Meets Standard	Detainees may launder socks and undergarments daily in the housing units. Uniforms can be exchanged three times a week. Linens and towels can be exchanged once a week.
10.	Food service detainee volunteer workers are permitted to exchange outer garments daily.	Meets Standard	Food service workers may exchange their white shirts and pants each day.
11.	Volunteer detainee workers are permitted to exchanges of outer garments more frequently.	Meets Standard	Volunteer workers can exchange clothes as needed.

PART 4 – 23. PERSONAL HYGIENE – Reviewer Summary

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

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

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

PART 4 – 23. PERSONAL HYGIENE – Reviewer Summary		
(Use following format for dates: mm/dd/yyyy)		
Overall Rating: Meets Standard		
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 9/20/2012	
Reviewer Signature (for printed form submission):		

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	Policy has been approved and signed by the health authority and Assistant Field Office Director (AFOD).
2	At a minimum, the Program shall include procedures to address: Intake screening and referral requirements; The identification and supervision of suicide-prone detainees; Staff training requirements; The management and reporting of suicidal incidents, suicide watches, and deaths; Provision of safe housing for suicidal detainees; Debriefing of any suicides and suicide attempts by administrative, security, and health services staff; Guidelines for returning a previously suicidal detainee to a facility's general population, upon written authorization of the clinical director.; Reporting guidelines for facility personnel when suspected suicidal behavior is observed; and Written procedures for the proper handling of detainees who exhibit suicidal behavior.	Meets Standard	The Suicide Prevention Program includes written procedures addressing all required elements of this component.
3.	Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation and annual training.	Meets Standard	Review of training curriculum, interviews with staff members and review of training files indicated that every staff member receives suicide prevention training during the employee orientation and annually thereafter.

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)
4. Training prepares staff to:		
 Effective methods for identifying the warning signs and symptoms of impending suicidal behavior, 		
 Demographic, cultural, and precipitating factors of suicidal behavior, 		Review of the suicide prevention training lesson plans found all required elements included in the syllabus, and staff member attendance was properly
 Responding to suicidal and depressed detainees, 		
 Effective communication between correctional and health care personnel, 	Meets Standard	
 Necessary referral procedures, 		recorded. The lesson plans fully explain reporting and written
 Housing observation and suicide-watch level procedures, 		documentation procedures.
 Follow-up monitoring of detainees who have already attempted suicide, and 		
Reporting and written documentation procedures.		
 5. A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process. Screening does not occur later than one working day after the detainee's arrival. Documentation exists that "specially trained officers" have completed training in accordance with a syllabus 	Meets Standard	A nurse screens all arriving detainees for suicide potential during in-processing and before the detainee is assigned to a housing unit. Detention officers do not conduct screening for suicide potential during the admission process.
approved by the medical authority.		·
Written procedures contain when and how to refer at-risk detainees to medical staff and procedures are followed.	Meets Standard	Policy provides procedures for referring at-risk detainees to medical staff.
7. Written procedures include returning a previously suicidal detainee to the general population, upon written authorization of the clinical director or appropriate health care professional.	Meets Standard	Policy states that the mental health professional or physician can authorize the return of a previously suicidal detainee to the general population.
8. The facility has a designated isolation room for evaluation and treatment.	Meets Standard	The facility uses one of the negative airflow observation rooms for suicide watches. The bed is removed and only a mattress is provided.
9. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	Meets Standard	The designated room does not contain any structures or smaller items that could be used in a suicide attempt. All suicide watches are one-on-one direct observation. Detainees on suicide watch are issued a safety gown and safety blanket.

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

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

Components	Rating	Remarks (1000 Char Max)
10. Medical staff have approved the room for this purpose.	Meets Standard	Medical staff has approved the room for this purpose.
11. Staff observe and document the status of a suicide-watch detainee at least once every 15 minutes/constant observation.	Meets Standard	All suicide watches are conducted by means of constant observation by a detention officer. The officer's observations are documented at least every 15 minutes. There were no detainees on suicide watch during this inspection. Review of the medical records of two detainees that had been on suicide watch revealed that officers documented each detainee's status at least every 15 minutes.
12. At facilities with twenty-four-hour medical staff, observation of imminently suicidal detainees by medical or detention staff shall occur no less than every 15 minutes. The Clinical Director (CD) may recommend constant direct supervision. If a detainee is clinically evaluated and determined to be at risk for suicide, medical staff shall document the status of the detainee in the medical record at least every two hours, unless otherwise directed by the CD.	Meets Standard	The facility has 24-hour medical staffing. All suicide watches are provided by constant observation by a detention officer. The officer's observations are documented at least every 15 minutes. The clinical director has ordered medical staff to document the detainee's status at least once every four hours. A review of ICE detainee records confirmed this practice.
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	N/A	This facility is a Service Processing Center (SPC) with 24- hour medical coverage.
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	This is required by policy. Practice cannot be confirmed since no suicides or serious suicide attempts have occurred in the past year.

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

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

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

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

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

No suicides or suicide attempts have been reported at this facility in the past 12 months. The facility's suicide prevention program is detailed and comprehensive. Review of the medical records of two detainees who were placed on suicide watch revealed the facility adheres to its policies and procedures. The standard was evaluated based on a review of established policies and training documentation, on interviews with medical and detention staff members, on a review of detainee medical records and on an inspection of the designated observation cells.

Overall Rating: Meets Standard

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

(b)(6), (b)(7)(c) Completion Date: 9/20/2012

Reviewer Signature (for printed form submission):

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 are chronically or terminally ill and need care beyond the scope of services provided by the facility's medical staff are transferred to a more appropriate medical or detention facility.
2.	The facility or appropriate ICE office promptly notifies the next-of-kin of the detainee's: medical condition. The detainee's location. The visiting hours and rules at that location.	Meets Standard	ICE staff members are located at this facility and would make all notifications.
3.	 There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives. 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	Review of policy revealed that there are guidelines addressing all of the bulleted items in this component.
4.	There is a policy addressing "Do Not Resuscitate Orders"	Meets Standard	Policy addresses Do Not Resuscitate orders.
5.	Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation.	Meets Standard	This is stipulated in the policy.
6.	The facility notifies ICE/DRO Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSAs, this notification is made through the local ICE representative.	Meets Standard	The facility notifies the on-site ICE staff, and ICE makes all other notifications.
7.	The facility has written procedures to address the issues of organ donation by detainees.	Meets Standard	The facility has written procedures that address organ donation by detainees.
8.	The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in custody.	Meets Standard	Policy states that the facility would notify the on-site ICE staff and they would make all other notifications.
9.	The facility has a policy and procedure to address the death of a detainee while in transport.	Meets Standard	Policy addresses the death of a detainee while in transport.

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)
10. At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	Meets Standard	The compliance team leader confirmed that a detainee's remains would be disposed of in accordance with this standard.
 11. In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. If the detainee is a U.S. military veteran, the Department of Veterans Affairs notified. 	Meets Standard	Procedures require that if the remains go unclaimed, the Field Office would schedule the burial. The body of the detainee who died during the past twelve months was claimed by his brother and was shipped to his home country.
12. An original or certified copy of a detainee's death certificate is placed in the subject's A-File.	Meets Standard	An original death certificate was observed in the deceased detainee's file.
 13. The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as; Performance of an autopsy. Person(s) to perform the autopsy. Obtaining State approved death certificates. Local transportation of the body. 	Meets Standard	Review of the deceased detainee's file revealed that established policies and procedures were followed regarding the autopsy, death certificate and transportation of the body.
14. ICE staff follow established procedures to properly close the case of a deceased detainee.	Meets Standard	ICE staff followed established procedures to close the case of the deceased detainee.

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

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

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

As confirmed per a review of facility policies and the records of a deceased ICE detainee, and per interviews with the Assistant Field Office Director and facility medical, administration and supervisory staff members, procedures for appropriately responding to the death of an ICE detainee are in place.

One ICE detainee death was reported	(b)(6), (b)(7)(c)

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

PART 4 – 25. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH – Reviewer Summary			
(Use following format for dates: mm/dd/yyyy)			
Overall Rating: Meets Standard			
Reviewer Name (Printed): (b)(6), (b)(7)(c)	Completion Date: 9/20/2012		
Reviewer Signature (for printed form submission):			

Section V ACTIVITIES

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.

16	presentatives, government offices, and consular officials consular		
	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 posted in each housing unit and are included in the detainee handbook.
2.	The facility provides key information in English, Spanish, and other languages spoken by a significant number of detainees.	Meets Standard	The facility provides key information in English, Spanish and Portuguese.
3.	Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	Meets Standard	Mail is delivered Monday through Friday within one business day of when it is received.
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	Front gate security staff members maintain a log of all priority, overnight and certified mail delivered to the facility.
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	Mail is only opened in the detainee's presence. Mail that appears to contain contraband may be opened without the detainee present if approved in writing by the Assistant Field Office Director (AFOD).
7.	Staff do not read incoming general correspondence without the Facility Administrator's prior approval.	Meets Standard	Incoming general correspondence is not read unless per approval by the AFOD.
8.	Staff do not inspect incoming Special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.	Meets Standard	Policy requires that all Special Correspondence be 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	Policy and post orders state that Special Correspondence is not read or copied by staff without the presence of the detainee.
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	

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

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

Components	Rating	Remarks (1000 Char Max)
11. Correspondence to a politician or to the media is processed as Special Correspondence and is not read or copied.	Meets Standard	Facility policy requires that correspondence to the media or a politician be processed as Special Correspondence.
12. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	Meets Standard	
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 review of mailroom logs confirmed that a written record of every item removed from detainee mail is maintained.
15. The Facility Administrator or designee monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	Meets Standard	Contraband is handled in accordance with written facility policy. Records were checked and found to be current.
16. The procedure for safeguarding cash removed from a detainee protects the detainee from loss of funds and theft. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.	Meets Standard	
17. Original identity documents (for example, passports, and birth certificates) are immediately removed and forwarded to ICE staff for placement in the A-files.	Meets Standard	Identity documents removed from detainee mail are secured until picked up by ICE staff for placement in the detainee's Afile.
18. Staff provide the detainee a copy of his or her identity document(s) upon request.	Meets Standard	Detainee identity documents are kept in the detainee's A-file. The detainee must submit a written request if a copy is needed.
19. Staff dispose of prohibited items found in detainee mail in accordance with the Detention Standard on "Contraband".	Meets Standard	Written procedures for disposing of prohibited items found in detainee mail are consistent with the Detention Standard on "Contraband".

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

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

Components	Rating	Remarks (1000 Char Max)
20. Every indigent detainee has the opportunity to mail, at government expense: At least five pieces of special correspondence per week; Three one ounce letters per week: Packages deemed necessary by ICE.	Meets Standard	Postage is provided free of charge to indigent detainees for three pieces of general correspondence and five pieces of Special Correspondence per week. Postage for a package deemed necessary by ICE is also provided. Writing paper, pencils and envelopes are provided at no cost.
21. The facility has a system for detainees to purchase stamps and for mailing all Special Correspondence and a minimum of 5 pieces of general correspondence per week.	Meets Standard	
22. The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	Meets Standard	Writing paper is available in the housing units, while pencils and envelopes are available in the library.
23. SMU detainees have the same correspondence privileges as general population.	Meets Standard	Mailroom staff members provide detainees in the Special Management Units with the same correspondence privileges as those in general population.
24. Detainees have access to outside publications.	Meets Standard	

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

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

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

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

Overall Rating: Meets Standard

Reviewer Name (Printed (b)(6), (b)(7)(c) Completion Date: 9/20/2012

Reviewer Signature (for printed form submission):

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: • Funeral • Deathbed	Meets Standard	A written request for approval is submitted to the Field Office Director by the Assistant Field Office Director (AFOD) for any funeral or deathbed trip requested by a detainee.
2.	The facility recognizes as "immediate family member" a parent (including stepparent or foster parent), brother, sister, child, and spouse (including common-law spouse).	Meets Standard	
3.	The CDF/IGSA facility notifies ICE of all detainee requests for non-medical escorts.	Meets Standard	ICE staff are notified of all detainee requests for a non-medical escorted trip.
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.	Meets Standard	
5.	Detainees who require overnight housing are placed in approved IGSA facilities.	Meets Standard	The AFOD confirmed that if overnight housing is required, arrangements are made in advance with an approved detention facility.
6.	Each escort detail includes at leastb)(7)(e)fficers.	Meets Standard	
7.	The detainee remains under constant, direct visual supervision of escorting staff.	Meets Standard	Policy requires that escorting staff maintain constant, direct visual supervision of the detainee.
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.	Meets Standard	
9.	Escorting officers have the discretion to increase or decrease minimum restraints in accordance with written instruction, procedures and classification level of the detainee.	Meets Standard	The AFOD confirmed that escorting officers have the discretion to increase or decrease minimum restraints in accordance with written instruction, procedures and the classification level of the detainee.

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)
10. Escort officers do not accept gifts/gratuities from a detainee, detainee's relative or friend for any reason.	Meets Standard	
11. Escort officers ensure that detainees:		
 Conduct themselves in a manner that does not bring discredit to ICE/DRO. 		
 Do not violate federal, state, or local laws. 		
 Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants. 	Meets Standard	
 Do not arrange to visit family or friends unless approved before the trip. 	Weeks Standard	
Make no unauthorized phone calls.		
 Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return to the facility. 		
12. The facility routinely subjects a detainee returning from an escorted trip to a search, urinalysis, breathalyzer, etc.	Meets Standard	The AFOD confirmed that the facility routinely subjects a detainee returning from an escorted trip to a pat search, urinalysis and breathalyzer.
13. Standard procedure requires the immediate return to the facility of any detainee who violates trip rules.	Meets Standard	
14. The Field Office Director is the approving official for all non-medical escorted trips.	Meets Standard	The AFOD confirmed that the Field Office Director is the approving official for all nonmedical escorted trips.
15. Facility procedures comply with the following ICE Standards:		
Transportation (Land Transportation	Meets Standard	
 Restraints applied strictly in accordance with the Use of Force Standard. 		

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)

A review of documentation and interviews with staff members confirmed that policy and procedures are in place to approve emergency staff-escorted trips into the community so that a detainee can visit critically ill members of his/her immediate family or attend their funerals.

PART 5 – 27. ESCORTED TRIPS FOR NON-MEDICAL EMERGENCIES – Reviewer Summary				
(Use following format for dates: mm/dd/yyyy)				
Overall Rating: Meets Standard				
Reviewer Name (Printed): (b)(6), (b)(7)(c)	Completion Date: 9/20/2012			
Reviewer Signature (for printed form submission):				

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 the Assistant Field Office Director (AFOD). Requests are submitted to the chaplain of the facility.
2.	The Field Office Director reviews every marriage request rejected by a Facility Administrator or IGSA. Rejections are documented.	Meets Standard	
3.	It is standard practice to require a written request for permission to marry.	Meets Standard	Written requests to marry are submitted to the chaplain of the facility.
4.	The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	Meets Standard	A signed acknowledgement by the intended spouse must be submitted with the request to marry.
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 detainee, upon approval to marry, is allowed a place and time to make wedding arrangements. ICE personnel are not allowed to assist a detainee with his/her wedding arrangements.
8.	The detainee handbook explains the marriage request process.	Meets Standard	The marriage request process is explained in detail in the detainee handbook.
9.	<u>In SPCs</u> the Facility Administrator or highest ranking ICE official on-site is the only officer authorized to approve a request to marry.	Meets Standard	All marriage requests must be approved by the AFOD. If a marriage request is denied by the AFOD, the Field Office Director and Deputy Field Office Director must be notified.

PART 5 – 28. MARRIAGE REQUESTS – Reviewer Summary

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

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)

Marriage requests are reviewed on a case-by-case basis at this facility. All requests go to the chaplain who ensures the information is complete. The information is forwarded to the AFOD for final approval of the request. If the request is approved, the facility provides the detainee with time and a place to make the wedding arrangements. If the request is denied, the detainee is notified in writing of the reason for the denial. The facility averages two or three marriages a month.

Overall Rating: Meets Standard				
Reviewer Name (Printed) (b)(6), (b)(7)(c	Completion Date: 9/20/2012			
(=/(=/, (=/(-/(=				
Reviewer Signature (for printed form submission):				

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)
 The Facility provides: An indoor recreation program. An outdoor recreation program. 	Meets Standard	Indoor and outdoor recreation are provided to detainees. Table games, foosball and ping pong are some of the recreation activities available to detainees in the housing units, while basketball and soccer are available to detainees participating in outdoor recreation.
A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.	•	The facility has an assigned recreation specialist.
Regular maintenance keeps recreational facilities and equipment in good condition.	Meets Standard	
 The recreational specialist or trained equivalent supervises detainee recreation workers. 	Meets Standard	Workers are supervised by the recreation specialist.
 The recreational specialist or trainee equivalent oversees recreation programs for Special Management Unit and special-needs detainees. 		The recreation specialist provides oversight to both Special Management Unit detainees and special-needs detainees.
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	Meets Standard	Board games, dominos, ping pong and foosball were observed in the dayrooms of the living areas.
7. Outside activities are restricted to limited-contact sports.	Meets Standard	
8. Each detainee has the opportunity to participate in daily recreation.	Meets Standard	
Detainees have access to recreation activities outside the housing units for at least one hour daily.	Meets Standard	Detainees have access to outdoor recreation at least one hour per day.
 Staff check all items for damage and condition when equipment is returned. 	Meets Standard	
11. Staff conduct searches of recreation areas before and after use.	Meets Standard	
12. Recreation areas are under constant staff supervision.	Meets Standard	All recreational activities are
		supervised by officers.

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		
15. Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his or her recreation privileges.	Meets Standard	The detainee will receive written notification if his/her recreation privilege is revoked.	
16. Special programs or religious activities are available to detainees.	Meets Standard	Detainees are afforded opportunities to participate in special programs and/or religious activities.	
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	Criminal checks are conducted on volunteers every 120 days.	
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	This component is not applicable as the facility offers outdoor recreational activities.	
20. If yes, written procedures ensure timely review of all eligible detainees.	N/A	This component is not applicable as the facility offers outdoor recreational activities.	
21. Case officers make written transfer recommendations about every six-month detainee to the Facility Administrator.	N/A	This component is not applicable as the facility offers outdoor recreational activities.	
22. The Facility Administrator documents all detainee-transfer decisions, whether yes or no.	N/A	This component is not applicable as the facility offers outdoor recreational activities.	
23. The detainee's written decision for or against an offered transfer documented in his or her A-file.	N/A	This component is not applicable as the facility offers outdoor recreational activities.	
24. Staff notify the detainee's legal representative of his or her decision to accept/decline a transfer.	N/A	This component is not applicable as the facility offers outdoor recreational activities.	
25. If no recreation is available, the ICE Field Office routinely review transfer eligibility for all detainees after 60 days.	N/A	This component is not applicable as the facility offers outdoor recreational activities.	

PART 5 - 29. RECREATION (Key: AC)

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
26. Does the A-file of every detainee held more than 60 days without access to recreation contains either a transferwaiver signed by the detainee or the Facility Administrator's written determination of the detainee's ineligibility for transfer.	N/A	This component is not applicable as the facility offers outdoor recreational activities.
27. The detainee's legal representative is notified of the detainee's/Facility Administrator's decision.	N/A	This component is not applicable as the facility offers outdoor recreational activities.

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)

Indoor and outdoor recreation programs are provided to detainees. Table games, foosball and ping pong are some of the available recreational activities available to detainees in the housing units. Basketball and soccer are available to detainees while participating in outdoor recreation. Contact sports are not permitted in outdoor recreation. Detainees were observed participating in both indoor and outdoor recreation during the inspection. Detainees in the Special Management Units are allowed a minimum of one hour of outdoor recreation daily.

Overall Rating: Meets Standard				
Reviewer Name (Printed):	(b)(6), (b)(7)(c)		Completion Date: 9/20/2012	

Reviewer Signature (for printed form submission):

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	All religious services are coordinated through the chaplain. 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	A comprehensive list of religious holy days is maintained by the chaplain. No exceptions are recognized.
4.	 The facility accommodates recognized holy-day observances by: Providing special meals, consistent with dietary restrictions. Honoring fasting requirements. Facilitating religious services. Allowing activity restrictions. 	Meets Standard	The facility accommodates recognized holy-day observances with special meals, special meal service times, honoring fasting requirements, facilitating religious services and allowing activity restrictions.
5.	Each detainee is allowed religious items in his/her immediate possession; refer to the Funds and Personal Property Standard.	Meets Standard	Detainees are allowed religious items in their possession which do not constitute a threat to the safe, secure and orderly operation of the facility. The chaplain of the facility reviews questionable religious items.
6.	Volunteer's credentials are checked and verified before allowing participation in detainee programs.	Meets Standard	A volunteer's credentials are checked and verified prior to allowing the volunteer to participate in the program. Criminal checks are conducted on volunteers every 120 days by the facility.
7.	Members of faiths not represented by clergy may request to present their own services within security allowances.	Meets Standard	

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)
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	Detainees housed in Special Management Units are allowed to participate in religious activities. If the detainee's individual situation does not allow the detainee to participate in group religious activities, religious programming is provided to the detainee in the Special Management Unit.

PART 5 – 30. RELIGIOUS PRACTICES – Reviewer Summary

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

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

Detainees of all faiths are provided with reasonable opportunities to practice the faith of their choice. The facility employs a full-time chaplain who is involved in the provision of religious programming. The chaplain also consults with the food service contractor regarding the provision of acceptable religious diets.

Overall Rating: Meets Standard

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

Reviewer Signature (for printed form submission):

Completion Date: 9/20/2012

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.

titel	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	There are four telephones in each housing unit day room and two telephones in the adjacent recreation yard. Telephones are available for detainee use from 5:00 a.m. until 10:00 p.m. Detainees with physical impairments may use a TTY device in the medical unit.	
2.	Upon admittance, detainees are made aware of the facility's telephone access policy.	Meets Standard	Information concerning the facility telephone policy is included in the detainee handbook issued to every detainee. Additionally, this information is included in the orientation video.	
3.	Notification explaining the facilities telephone policy is in the Detainee Handbook.	Meets Standard		
4.	Access rules, including updated telephone and consulate number, are posted in housing units.	Meets Standard		
5.	The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	Meets Standard	Key information is provided to the population in English, Spanish and Portuguese.	
6.	Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	Meets Standard	Telephones in the housing units are provided at a ratio of approximately one telephone to every 16 detainees.	
7.	Telephones are inspected daily by facility staff to ensure that they are in good working order.	Meets Standard	Staff members on the third shift check all telephones daily. ICE staff members check telephones during their weekly visit to each housing unit. If a problem is discovered, a work order is submitted.	
8.	Telephones are located a reasonable distance from televisions.	Meets Standard		
9.	The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	Meets Standard		
10.	The facility administration monitors repair progress and takes appropriate measures to ensure that the required repairs are begun and completed timely.	Meets Standard		

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.

the	them reasonable and equitable access to telephone services.			
	Components	Rating	Remarks (1000 Char Max)	
11.	Detainees are afforded a reasonable degree of privacy for legal phone calls.	Meets Standard	A plastic shield separates all telephones. Should additional privacy be required, the detainee may make a request for same to an ICE staff member.	
12.	A procedure exists to assist a detainee who is having trouble placing a confidential call.	Meets Standard	If requested by a detainee, an ICE staff member will make arrangements to provide the needed confidential telephone call.	
13.	The facility provides the detainees with the ability to make non-collect (special access) calls.	Meets Standard	Detainees may make a request to an ICE staff member to make this type of call.	
14.	Special Access calls are at no charge to the detainees.	Meets Standard		
15.	In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.	Meets Standard	The facility provides Special Access calls at no charge to the detainee.	
16.	No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".	Meets Standard		
17.	Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.	Meets Standard	When requested by a detainee, an ICE staff member will make the necessary special arrangements to provide this type of telephone call.	
18.	All telephone restrictions are documented.	Meets Standard	Any telephone restrictions are incorporated into the online telephone system provided by the telephone vendor. Additionally, restriction information is placed in the detainee's detention file.	
19.	The facility has a system for taking and delivering emergency detainee telephone messages.	Meets Standard	Emergency messages are received by the receptionist and forwarded to the shift supervisor. After verification, the supervisor notifies the detainee.	
20.	Phone call messages are given to detainees as soon as possible.	Meets Standard		
21.	Detainees are allowed to return emergency phone calls as soon as possible.	Meets Standard	The shift supervisor ensures that a detainee is allowed to return emergency phone calls as soon as possible.	

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)
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	A telephone on a rolling cart is available for use by detainees in disciplinary segregation. A wall-mounted phone is also available in the recreation yard. Calls relating to the detainee's immigration case or other legal matters are free.
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	Telephones are available to detainees in disciplinary segregation.
25.	Detainees in administrative segregation and protective custody are afforded the same telephone privileges as those in general population.	Meets Standard	
26.	When detainee phone calls are monitored, notification is posted by detainee telephones, including a recorded message on the phone system, that phone calls made by the detainees may be monitored. Special Access calls are not monitored.	Meets Standard	Notification is posted in areas where the phones are located, and a recorded message on the system alerts detainees that phone calls may be monitored. Special access calls are not monitored.
27.	The OIG phone number for reporting abuse is programmed into the detainee phone system. The reviewer must verify that the number is operable.	Meets Standard	The Office of Inspector General (OIG) telephone number is programmed into the detainee phone system. The number was called on the second day of the inspection and found to be operable.
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	ICE staff members routinely check the telephones during their visits to the housing units. These checks are documented.

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 facility provides the detainees with the opportunity to maintain ties with their families and others in the community by providing reasonable and equitable access to telephone services. On-site observations, a review of documentation and staff member interviews confirmed that detainees in all housing areas, including those in special management units, have access to telephone service. Kiosks in the common areas of the facility allow detainees to purchase telephone access time. Detainees are assigned a PIN number to access phones and may call any number not restricted. The facility accommodates special access and emergency telephone calls.

PART 5 – 31. TELEPHONE ACCESS – Reviewer Summary					
(Use following format for do	ates: mm/dd/yyyy)				
Overall Rating: Meets Standard					
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 9/20/2012				
Reviewer Signature (for printed form submission):					

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.

ieg	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	The detainee handbook provides written procedures for visitation, to include the schedule and hours for general visitation.	
2.	The visitation hours are tailored to the detainee population and the demand for visitation. The minimum duration for a visit is 30 minutes.	Meets Standard	General visitation is scheduled from 6:00 p.m. to 9:00 p.m. Monday through Friday and from 11:00 a.m. to 3:00 p.m. and 6:00 p.m. to 9:00p.m. on Saturday, Sunday and holidays.	
3.	The visitation schedule and rules are available to the public.	Meets Standard	The visitation schedule and rules are posted in the front entrance. Additionally, the facility web page provides this information.	
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	Upon request, a visitor will be provided with a copy, in English or Spanish, of the rules regulating visitation and hours of visitation.	
6.	A general visitation log is maintained.	Meets Standard		
7.	Detainees are permitted to retain authorized personal property items specified in the standard.	Meets Standard		
8.	A visitor dress code is available to the public.	Meets Standard		
9.	Visitors are searched and identified according to standard requirements.	Meets Standard	Visitors must present government-issued picture identification. After positive identification, they are screened by passing through a walk-through metal detector.	
10.	The requirement on visitation by minors is complied with.	Meets Standard	Minors are permitted to visit at this facility.	
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 permitted to visit at this facility.	
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 permitted to visit at this facility.	
13.	Anytime a visit is denied, to either a general population detainee or SMU detainee, the denial is documented.	Meets Standard	There have been no visits denied in the past year.	
14.	Detainees in special housing are afforded visitation.	Meets Standard		

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)
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 visits are permitted 24 hours a day, seven days a week.
17.	On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	Meets Standard	If a detainee elects to continue his/her legal visit through a meal, he/she will receive a meal after the visit is concluded.
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 five visiting rooms available for attorney meetings. These rooms provide for contact visits.
19.	There are written procedures governing detainee searches.	Meets Standard	
20.	Legal representatives and assistants are subject to a non-intrusive search – such as a pat-down search of the person or a search of the person's belongings - at any time for the purpose of ascertaining the presence of contraband.	Meets Standard	
21.	Per the Standard, prior to each visit, legal service providers and assistants are identified.	Meets Standard	Legal service providers and assistants are positively identified prior to each visit.
22.	The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	Meets Standard	
23.	SPCs and CDFs shall submit written requests for tours from domestic or international organizations and associated with detention issues to the appropriate Field Office Director for approval.	Meets Standard	Written policy requires that any such request be submitted to the ICE Field Office Director for approval.
24.	Provisions for NGO visitation as stated in the Detention Standards are complied with.	Meets Standard	
25.	Law enforcement officials, requesting to visit with a detainee, are referred to the ICE Facility Administrator for approval.	Meets Standard	The Assistant Field Office Director (AFOD) has the authority to approve/deny any such visitation.
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 AFOD has the authority to approve/deny any such visitation.

PART 5 - 32. VISITATION - Reviewer Summary

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

PART 5 - 32. VISITATION - Reviewer Summary

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

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

On-site observations, a review of documentation and staff member interviews confirmed that to maintain ties with their families and the community, detainees in all housing areas, including those in the SMU, are allowed to visit. Written visitation procedures, rules, schedules and hours for visitation are posted and made available to the public. The facility maintains five contact visitation rooms and four non-contact visitation booths. Detainees are allowed two contact visits per month, when requested. These contact visits are limited to four immediate family members. The number of non-contact visits per month is not restricted, but rather is based on the availability of visiting room space.

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

Completion Date: 9/20/2012

Reviewer Signature (for printed form submission):

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	
3.	At IGSAs detainees are never allowed to work outside the secure perimeter. SPCs and CDFs detainees classified as level 1 have the opportunity to participate in special details outside the secure perimeter under direct supervision.	Meets Standard	Detainees classified as Level 1 may work outside the secure perimeter of the facility, although this is not a regular occurrence. Outside work crews must be supervised at a 1:4 staff to detainee ratio.
4.	 Written procedures govern selection of detainees for the Voluntary Work Program. The same procedures apply for replacement workers as for "new" workers. Staff follow written procedures. 	Meets Standard	Facility policy addresses the selection process for detainees who want to work in the voluntary work program. Documentation of detainees' applications to the program was reviewed during the inspection.
5.	Where possible, physically and mentally challenged detainees participate in the program.	Meets Standard	Facility policy allows detainees who might be physically or mentally challenged to participate in the voluntary work program.
6.	The facility complies with work-hour requirements for detainees, not exceeding: Eight hours a day. Forty hours a week.	Meets Standard	Normal work hours for detainees at this facility are eight hours per day and no more than 40 hours per week.
7.	Detainee volunteers ordinarily work according to a fixed schedule.	Meets Standard	The work schedule for detainee workers was reviewed during the inspection. Detainees work according to a fixed schedule.
8.	If a detainee is removed from a work detail, staff place the written justification for the action in the detainee's detention file.	Meets Standard	
9.	Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	Meets Standard	Facility policy addresses the responsibility of the detainee to his or her work assignment and how the detainee will be apprised of those responsibilities.

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

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

Standard N/A

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

Components	Rating	Remarks (1000 Char Max)
 10. The voluntary work program meets: OSHA standards NFPA standards ACA standards 	Meets Standard	The listed standards are followed in the policies and procedures of the Voluntary Work Program.
 11. Medical staff screen and formally certifies detainee food service volunteers; Before the assignment begins As a matter of written procedure 	Meets Standard	Medical staff clears all voluntary detainee workers for work assignments. The documentation of the screening and clearance was reviewed during the inspection.
12. Detainees receive safety equipment/ training sufficient for the assignment	Meets Standard	Video safety training is provided to all voluntary detainee workers. The documentation of the training was reviewed during the inspection.
13. Proper procedure is followed when an ICE detainee is injured on the job.	Meets Standard	The work supervisor and medical services are notified immediately when a detainee is injured on the job.

PART 5 - 33. VOLUNTARY WORK PROGRAM - Reviewer Summary

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

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

Reviewer Signature (for printed form submission):

The facility has an extensive detainee voluntary work program. Detainees express their desire to participate in the program. Physically and mentally challenged detainees are not precluded from working in the program. All detainee volunteer workers receive safety equipment and training specific to their work assignments. Female detainees work on the evening shift in the food service department.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c) Completion Date: 9/20/2012

Section VI JUSTICE

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

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	The handbook is available in English, Spanish and Portuguese.
2.	The detainee handbook is written in English and translated into Spanish, and other languages spoken by significant numbers of detainees in that facility.	Meets Standard	
3.	A procedure for requesting interpretive services for essential communication has been developed.	Meets Standard	Facility policy requires that the information in the handbook be made available to each detainee in the language the detainee understands. If necessary, an interpreter is provided.
4.	Orientation materials are read to detainees who cannot read, or they are provided the material via audio or video recordings.	Meets Standard	
5.	The handbook supplements the facility orientation video where one is provided.	Meets Standard	The facility provides a verbal orientation to the facility as well as a video shown as part of the orientation process.
6.	The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.	Meets Standard	Copies of changes are posted on bulletin boards in the housing units and other prominent areas. New arrivals are informed of changes during the orientation process. Memoranda which address changes to the handbook are distributed 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 by a committee appointed by the Assistant Field Office Director.
8.	 The detainee handbook address the following issues: Personal Items permitted to be retained by the detainee. Initial issue of clothes, bedding and personal hygiene items. How to access care. 	Meets Standard	
9.	The detainee handbook states in clear language basic detainee responsibilities.	Meets Standard	

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.

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Components	Rating	Remarks (1000 Char Max)
10. The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.	Meets Standard	The classification process is clearly outlined in the handbook.
11. The handbook states when a medical examination will be conducted.	Meets Standard	The handbook addresses the initial medical examination in the admissions section.
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)	Meets Standard	The handbook describes the location and access to vending machines. The facility does not have a commissary.
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	This information is also posted on bulletin boards in the housing units.
23. The handbook describes the facility contraband policy.	Meets Standard	

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)
24. The handbook describes the facility visiting hours and schedule and visiting rules and regulations.	Meets Standard	
25. The handbook describes the correspondence policy and procedures.	Meets Standard	
 26. The handbook describes the detainee disciplinary policy and procedures, including: Prohibited acts and severity scale sanctions. Time limits in the Disciplinary Process. Summary of Disciplinary Process. 	Meets Standard	The disciplinary policy and procedures of the facility are described in detail in the handbook.
 27. The grievance section of the handbook explains all steps in the grievance process – Including: Informal (if used) and formal grievance procedures; The appeals process; In CDFs procedures for filing an appeal of a grievance with ICE. Staff/detainee availability to help during the grievance process. Guarantee against staff retaliation for filing/pursuing a grievance. How to file a complaint about officer misconduct with the Department of Homeland Security. 	Meets Standard	The detainee grievance/ complaint procedures are explained in detail in the handbook. The explanation covers all bulleted items listed in this component.
28. The handbook describes the medical sick call procedures for general population and segregation.	Meets Standard	
 29. The handbook describes the facility recreation policy including: Outdoor recreation hours. Indoor recreation hours. In dorm leisure activities. Rules for television viewing. 	Meets Standard	
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	Basic rights and responsibilities of detainees are described in detail in the handbook.
32. Detainees are required to sign for the handbook to ensure accountability.	Meets Standard	Detainees sign for the handbook, and a copy of the receipt is place in the detainee's detention file.

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)
33. Orientation materials are provided to illiterate detainees either orally or via audio/video tapes in a language they can understand.	Meets Standard	An orientation video is played on a continuous loop during the admissions process. The audio of this video is in either English or Spanish. Written orientation material is provided in English, Spanish or Portuguese.

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)

Detainees held in this facility receive a copy of the ICE National Detainee Handbook as well as the site-specific detainee handbook. The handbooks provide comprehensive written materials which describe detainee rights and responsibilities as well as specific information about the facility. The facility handbook is available in English, Spanish and Portuguese. An orientation video is also shown during admission. The information is made available to detainees with special needs on an as needed basis.

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

Completion Date: 9/20/2012

Reviewer Signature (for printed form submission):

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 addresses the informal and formal grievance processes at the facility.
2.	The admissions process includes providing each new arrival with a copy of the detainee handbook (or equivalent).	Meets Standard	
3.	 The grievance section of the handbook explains all steps in the grievance process – Including: Informal and formal grievance procedures; The appeals process and step-by-step procedures; 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 grievance section of the facility detainee handbook covers the bulleted elements listed in this component in detail.
4.	Written procedures provide for the informal resolution of oral grievances (Not mandatory). If yes, the detainee has up to five days within which to make his or her concern known to a member of the staff.	Meets Standard	
5.	 Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. 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	Another detainee or staff member may assist a detainee in preparing a grievance. Illiterate, disabled or non-English speaking detainees may be provided additional assistance.
6.	Facility has written procedures for identifying and handling a time-sensitive emergency grievance.	Meets Standard	
7.	Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	Meets Standard	
8.	Staff shall not harass, discipline, punish or otherwise retaliate against a detainee who files a complaint or grievance.	Meets Standard	

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

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

Components	Rating	Remarks (1000 Char Max)
 9. Procedures include maintaining a Detainee Grievance Log. If not, an alternative acceptable record keeping system is maintained. "Nuisance complains" are identified in the records. For quality control purposes, staff document nuisance complaints received but not filed. 	Meets Standard	Two detainee grievance logs are maintained. The informal grievance logbook is maintained manually, while the formal grievance log is automated. Although some grievances are identified as "nuisance complaints", they are recorded as such and processed.
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	Although some grievances are identified as "nuisance complaints", they are still recorded and processed.
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	Facility policy requires that all detainee grievances which contain allegations of officer misconduct be sent to a supervisor or higher level official in the chain of command.
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. In all facilities written procedures cover detainee appeals and are included in the detainee handbook 	Meets Standard	Detainees are allowed to appeal any proposed grievance resolution to the Assistant Field Office Director. Written procedures detail how detainees can file appeals, and those procedures are included in the detainee handbook.
15. <u>In SPCs/CDFs</u> , the detainee has a reasonable timeframe after the incident or informal-grievance outcome to file a formal grievance.	Meets Standard	The facility allows a reasonable time frame for the detainee to file a formal grievance after the event or after the unsuccessful conclusion of an informal grievance.

PART 6 – 35. GRIEVANCE SYSTEM – Reviewer Summary

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

PART 6 - 35. GRIEVANCE SYSTEM - Reviewer Summary

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

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

The facility's grievance system provides detainees with a procedure whereby they can express their concerns and complaints about their treatment and receive timely responses to those complaints. Detainees have the opportunity to file their complaints informally or immediately pursue formal resolution of the complaint. Detainees may appeal decisions to the Detainee Grievance Committee if the detainee is not satisfied with the resolution offered. Detainees may file emergency grievances, and facility staff members are trained to recognize emergency grievances. Any grievance filed alleging staff misconduct is immediately forwarded to supervisory staff.

Overall Rating: Meets Standard

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

Completion Date: 9/20/2012

Reviewer Signature (for printed form submission):

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL (Key: AJ)			
Thi	s Detention Standard protects detainees' rights by ensuring	their access to courts, cour	nsel, and legal materials.
	Components	Rating	Remarks (1000 Char Max)
1.	The facility provides a designated law library for detainee use.	Meets Standard	A separate, stand-alone library is located in the center of the facility compound.
2.	 The law library contains all materials listed in the "Access to Legal Materials" Standard, Attachment A. The listing of materials is posted in the law library. In lieu of/or in addition to the physical law library, ICE detainees have access to the Lexus Nexus electronic law library. 	Meets Standard	The library has both a physical law library and installed LexisNexis software.
3.	 If the Lexis/Nexis CD-ROM service alternative is used for the publications in Attachment A, the facility provides detainees sufficient: Operable computers and printers, in sufficient numbers in order to provide access Photocopiers, and Supplies for both. 	Meets Standard	The facility provides six computer stations, two printers, two typewriters, a copier and adequate supplies for the equipment. The LexisNexis software was last updated on August 14, 2012.
4.	The library contains a sufficient number of chairs, is well lit and is reasonably isolated from noisy areas.	Meets Standard	
5.	The law library is adequately equipped with typewriters, computers or both and has sufficient supplies for daily use by the detainees.	Meets Standard	The facility has six computer stations, two printers, two typewriters and adequate supplies for the equipment.
6.	Detainees are provided with the means to save legal work in a private electronic format for future use.	Meets Standard	If a detainee wishes to save his private work in an electronic format, he is issued a floppy disk. The detainee has the responsibility of transferring the material to the disc and turning it in to the library officer for storage when he departs the library.
7.	The facility subscribes to updating services where applicable and legal materials requiring updates are current.	Meets Standard	ICE headquarters provides the necessary updates.
8.	Outside persons and organizations are permitted to submit published legal material for inclusion in the legal library. Outside published material is forwarded and reviewed by the ICE prior to inclusion.	Meets Standard	
9.	There is a designated ICE or facility employee who inspects, updates, and maintain/replace legal material and equipment on a routine basis. The designee properly disposes outdated supplements and replaces damaged or missing material promptly.	Meets Standard	A contract staff member assigned to the law library contacts ICE for supplies, equipment and updated legal materials.

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		
11. Detainees may request material not currently in the law library. Each request is reviewed and where appropriate an acquisition request is initiate and timely pursued. Request for copies of court decisions are accommodated within 3 – 5 business days.	Meets Standard	Any such requests are sent directly to ICE for fulfillment. Requests are handled in a timely manner, normally within five days.	
12. The facility permits detainees to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	Meets Standard	Detainees are permitted to assist other detainees voluntarily, without compensation.	
13. Staff ensure that illiterate or non-English-speaking detainees without legal representation receive more than access to English-language law books after indicating their need for help.	Meets Standard	Special arrangements are made for a detainee without legal representation who is illiterate or non-English speaking and requests assistance.	
14. Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.	Meets Standard		
15. Detainees housed in Administrative Segregation and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.	Meets Standard	Detainees in the Special Management Unit (SMU) are provided access to the law library similar to those in general population, but at different times. The library is available for this population during the evening hours.	
16. All denials of access to the law library fully documented.	Meets Standard		
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	Policy requires that ICE be immediately notified when a detainee is denied access to the law library. There have been no such denials in the past year.	
18. Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	Meets Standard		
19. Indigent detainees are provided with free envelopes and stamps to mail related to legal matters.	Meets Standard		

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

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

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

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

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

A review of documentation, on-site observations and staff member and detainee interviews confirmed that the facility provides detainees, including those assigned to the SMU, with access to courts, counsel, legal materials and the support services necessary for them to prepare their legal work. The library is quiet and well lighted, contains appropriate furniture and provides a pleasant work environment. LexisNexis was current on all computers. Interviews with detainees revealed no concerns about the law library.

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

Completion Date: 9/20/2012

Reviewer Signature (for printed form submission):

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")

WI	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	Policy requires that the ICE Field Office respond to this type of request. However, no such request has been submitted within the past year.		
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			
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	Written policy establishes procedures for rejecting or modifying material provided by an accredited representative or attorney.		
4.	Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	Meets Standard	Announcements are posted in each housing unit showing recurring visits by the Diocesan Migrant & Refugee Services, Inc. (DMRS). These visits occur every Monday, Wednesday and Friday from 9:00 a.m. to 11:00 a.m.		
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	The DMRS presentation also includes a video on "Know Your Rights". After the formal presentation, a question and answer session is conducted.		
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	The presentation area is large enough to allow all detainees who have signed up to attend.		
7.	Detainees in segregation, unable to attend for security reasons may request separate sessions with presenters. Such requests are documented.	Meets Standard			
8.	attorneys and other legal representatives.	Meets Standard	The presenters from DMRS are fluent in both English and Spanish.		
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	The DMRS presenters are allowed two hours for their presentations. If necessary, the facility will extend the time.		

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)
10. Staff permit presenters to distribute ICE/DRO-approved materials.	Meets Standard	
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	Detention staff members are present when these small group discussions are held. They are present for security only and do not monitor the conversations.
12. Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee, and the reasons for suspension are documented. The Headquarters Office for Detention and Removal, Field Operations and Detention management Division is notified when a group or individual is suspended from making presentations.	Meets Standard	There have been no presenters that have had their privileges suspended within the past year. However, procedures exist in policy to notify the ICE Field Office Director if a suspension becomes necessary.
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	If requested, a written copy of the presentation is provided.
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)

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

ICE and facility staff member interviews, a review of documentation and on-site observations confirmed that the facility has the procedures in place to ensure detainees have access to presentations by authorized persons and organizations for the purpose of informing detainees of U.S. immigration laws and procedures. The Diocesan Migrant & Refugee Services, Inc. conducts scheduled presentations three times per week. This inspector visited the presentation on 9/19/2012 and found it to be well attended and informative.

Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6), (b)(7)(c)	Completion Date: 9/20/2012
Paviawar Signatura (for printed form submission)	

Section VII ADMINISTRATION & MANAGEMENT

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

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	The facility requires that a detention file be created for every detainee who is expected to remain at the facility in excess of 24 hours.
2.	The detainee Detention File contains either originals or copies of documentation and forms generated during the admissions process.	Meets Standard	Ten detention files were reviewed and found to have all appropriate documentation.
3.	 The detainee's Detention File also contains documents generated during the detainee's custody. Special requests Any G-589s and/or I-77s or IGSA equivalent, closed-out during the detainee's stay Disciplinary forms/Segregation forms Grievances, complaints, and the disposition(s) of same 	Meets Standard	
4.	The Detention Files are located and maintained in a secured area. If not the cabinets are lockable and distribution of the keys is limited to supervisors.	Meets Standard	The detention files are stored in the property room, which is a secure area. Keys to the room are restricted to assigned staff members and supervisors.
5.	The Detention File remains active during the detainee's stay. When the detainee is released from the facility, staff add copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent and other documentation.	Meets Standard	
6.	The officer closing the Detention File makes a notation that the file is complete and ready to be archived.	Meets Standard	
7.	Staff make copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.	Meets Standard	When approved by a supervisor, staff members will make copies and send documents from the file when appropriately requested.
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	Only authorized staff members have access to the detention files. Each file must be properly logged out and back in by an authorized staff member.
9.	Electronic record-keeping systems and data are protected from unauthorized access.	Meets Standard	

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

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

Components	Rating	Remarks (1000 Char Max)
10. Unless release of information is required by statute or regulation, a detainee must sign a release-of-information consent form prior to the release of any information, and a copy of the form is maintained in the detainee's Detention File.	Meets Standard	Any request for release of information not required by statute or regulation must be submitted to the Assistant Field Office Director for approval. A detainee's signed release-of-information consent form is required for any release of such information. A copy of this form is placed in the detainee's detention file.
11. Electronic data on individual detainees is subject to the same Privacy Act regulations as the contents of traditional paper Detention Files and A-files.	Meets Standard	
12. The Facility Administrator or staff designate ensures that necessary equipment and supplies, including copier and copier supplies are available; all equipment is maintained in good working order and that equipment has the capacity to handle the volume of work.	Meets Standard	Staff interviews and on-site observations confirmed that necessary equipment and supplies, including a copier, are available. All equipment is maintained in good working order.
13. The Detention Operations Supervisor or equivalent can direct certain documents be added to a detainee's detention File.	Meets Standard	
14. Archived files are purged after six years by shredding or burning.	Meets Standard	Files are shredded in accordance with the time frame specified in this component.
15. Field Offices maintains detention files on detainees housed in IGSA Facilities as needed. These files are maintained for a minimum of 18 months.	N/A	This facility is an SPC. No files of detainees held in an IGSA facility are stored at this facility.

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)

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

Overall Rating: Meets Standard

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

Reviewer Signature (for printed form submission):

Completion Date: 9/20/2012

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	Written policy and procedures require that the ICE Field Office Director (FOD) approve all interviews by media representatives/reporters not covered by the Detention Standard on Visitation.
2.	All personal interviews are documented with the News Interview Authorization form (or equivalent) and filed in the detainee's A-file with a copy in the facility's Detention File.	Meets Standard	Policy requires that a News Interview Authorization form be completed, and that copies be filed in both the detainee's A-file and detention file after an interview. There have been no such interviews in the past year.
3.	The Field Office Director consulted with Headquarters before deciding to allow an interview with a detainee who was the center of a controversy, or special interest, or high profile case.	Meets Standard	
4.	Signed released forms are obtained and retained in the detainee's a-file from any media representatives who photographed or recorded any detainee in any way that would individually identify him or her.	Meets Standard	Policy requires that release forms be completed and filed in the detainee's A-file. However, no such recording or photographing has occurred in the past year.
5.	 All press pools are organized `according to the procedures in the Detention Standard. A press pool may be established when the Field Office Director and facility administrator determine that the volume of interview requests warrants such action. 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	Written policy requires that a press pool be established when the FOD and the Assistant Field Office Director (AFOD) determine that the volume of interview requests warrants such action. The AFOD then notifies media representatives in accordance with this component. All material generated from the press pool is shared with all interested news media.

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

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

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

A review of documentation and staff member interviews confirmed that the facility has procedures in place to ensure that the public and the media are informed of events within the facility's areas of responsibility. There have been no requests for interviews in the past twelve months. Facility policy addresses all components of this standard. Staff members interviewed stated that all interviews are handled by the Public Affairs Office of the ICE Field Office.

PART 7 - 39. NEWS MEDIA INTERVIEWS AND TOURS – Reviewer Summary			
(Use following format for dates: mm/dd/yyyy)			
Overall Rating: Meets Standard			
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 9/20/2012		
Reviewer Signature (for printed form submission):			

	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			
3.	At least one qualified individual with specialized training for the position coordinates and oversees the staff development and training program. At a minimum, full-time training personnel complete a 40-hour training-for-trainers course.	Meets Standard	The training officer for the security services contractor is certified as a trainer of trainers. ICE training personnel are qualified trainers.		
4.	Training is governed and guided by a training plan that is reviewed and approved annually by the facility administrator.	Meets Standard	Both the ICE and the security services contractor staff training plans are approved by the Assistant Field Office Director.		
5.	 An accurate and complete record is maintained of all formal training activities in: Individual training folders, Other training records systems, and/or Electronic systems. 	Meets Standard	Staff training records were reviewed during the inspection and found to be accurate and complete.		

PART 7 - 40. STAFF TRAINING (Key: AN)

Components	Rating	Remarks (1000 Char Max)
 6. Each new employee, contractor, and volunteer is provided an orientation prior to assuming duties. While tailored specifically for staff, contractors, and volunteers, the orientation programs include, at a minimum: Working conditions Cultural diversity/understanding staff & detainees Code of ethics Personnel policy manual Employees' rights and responsibilities Drug-free Workplace Health-related emergencies Signs of Suicide risk and precautions Suicide prevention and intervention Hunger strikes 	Rating Meets Standard	The training curriculum for new employees, contractors and volunteers was reviewed. The
 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 	Meets Standard	employees, contractors and
 Orientation and training on detainee handbook and detainee rights. 		
 Requirement of special-needs detainees. 		
National Detention Standards		

PART 7 - 40. STAFF TRAINING (Key: AN)

Components	Rating	Remarks (1000 Char Max)
 7. Clerical/support employees who have minimal detainee contact receive a minimum of: Working conditions Cultural diversity/understanding staff & detainees Code of ethics Personnel policy manual Employees' rights and responsibilities Overview of the criminal justice system Tour of the facility Facility goals and objectives Facility organization Staff rules and regulations Sexual harassment/sexual misconduct awareness Personnel policies Program overview National Detention Standards. Key and Lock Control. Suicide risk and prevention. 	Meets Standard	The security services contractor does not have clerical/support personnel on-site that have minimal contact with detainees. ICE staff members who have minimal contact with detainees receive forty hours of training which addresses the elements of this component.

PART 7 - 40. STAFF TRAINING (Key: AN)

Components	Rating	Remarks (1000 Char Max)
 8. Professional and support employees (including contractors) who have regular or daily detainee contact will receive training on the following subjects, at a minimum: Security procedures and regulations Code of Ethics Health-related emergencies Drug-free workplace Supervision of detainees Signs of suicide risk and hunger strike Suicide precautions 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 members who have minimal contact with detainees receive training which address the elements of this component.

PART 7 - 40. STAFF TRAINING (Key: AN)

	Components	Rating	Remarks (1000 Char Max)
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: 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.	Rating Meets Standard	Training provided to full-time health care employees includes the elements listed in this component.
	Requirement for special needs detainees.Code of Ethics		
	Drug free workplace		
	 Hostage situations and staff conduct if taken hostage. 		

PART 7 – 40. STAFF TRAINING (Key: AN)

Components	Rating	Remarks (1000 Char Max)
10. Security personnel (including contractors) will receive training on the following subjects, at a minimum: Security procedures and regulations Supervision of detainees Searches of detainees, housing units, and work areas Signs of suicide risk, precaution, prevention and intervention. Code of Ethics Health-related emergencies Drug-free workplace Suicide precautions Self-defense techniques Use-of-force regulations and tactics Report writing Detainee rules and regulations Key control Rights and responsibilities of detainees Safety procedures Emergency plans and procedures Interpersonal relations Social/cultural lifestyles of the detainee population Cultural diversity/understanding staff & detainees Communication skills Cardiopulmonary resuscitation (CPR)/first aid Counseling techniques Sexual abuse/assault awareness National Detention Standards.	Meets Standard	Security staff members receive training which includes the elements listed in this component. Contract security services personnel receive 141 hours of training in their first year on the job and forty hours of annual training thereafter.
 Situation Response Teams (SRTs) receive: Specialized training before undertaking their assignments. 	Meets Standard	
12. Facility management and supervisory staff receive:Management and Supervisory training	Meets Standard	
13. (MANDATORY) Personnel authorized to use firearms receive training that covers their use, safety, and care and constraints on their use before being assigned to a post involving their possible use.	Meets Standard	(b)(7)e

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.			
14. (MANDATORY) All personnel authorized to use firearms demonstrate competency in their use at least annually.	Meets Standard	(b)(7)e	
15. (MANDATORY) Personnel authorized to use chemical agents receive training in the use of chemical agents and in the treatment of individuals exposed to a chemical agent before being assigned to a post involving their possible use.	Meets Standard	Only ICE personnel are allowed to use chemical agents in this facility. ICE personnel have been trained in the use of chemical agents and the treatment of individuals exposed to a chemical agent.	
 16. All staff receives orientation and annual training on the facility's drug-free workplace program. Typical contents are: Staff, contractors, and volunteers prohibited from: Using illegal drugs. Possessing illegal drugs except in the authorized performance of official duties. Procedures to be used to ensure compliance. Opportunities available for treatment and/or counseling for drug abuse. Penalties for violation of the policy. 	Meets Standard	All staff members are trained in the facility drug-free workplace program. Training is provided in the initial orientation as well as during annual refresher training.	
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	Copies of the signed acknowledgement were reviewed in the individual personnel files of selected staff.	
 18. All staff are trained during orientation and annually thereafter, regarding the facility's code of ethics. Typical contents are: Staff, contractors, and volunteers prohibited from: Using their official positions to secure privileges for themselves or others. Engaging in activities that constitute a conflict of interest. Accepting any gift or gratuity from, or engaging in personal business transactions with a detainee or a detainee's immediate family. Acceptable behavior in the areas of campaigning, 	Meets Standard	All staff members receive training in the facility code of ethics, which addresses the elements listed in this component.	

lobbying or political activities.

PART 7 – 40. STAFF TRAINING (Key: AN)

Components	Rating	Remarks (1000 Char Max)
19. New staff are required to acknowledge in writing that they have reviewed and understand facility work rules, ethics, regulations, conditions of employment, and related documents, and a copy of the signed acknowledgement is maintained in that person's personnel file.	Meets Standard	Tierra (2000 Cital Max)
 20. (MANDATORY) All staff in frequent contact with detainees is trained at least annually to respond to health-related emergencies within four minutes. The training is provided by a responsible medical authority in cooperation with the facility administrator and includes: Recognizing of signs of potential health emergencies and the required responses. Administering first aid and cardiopulmonary resuscitation (CPR). Obtaining emergency medical assistance through the facility plan and its required procedures. Recognizing signs and symptoms of mental illness, suicide risk, retardation, and chemical dependency. The facility's established plan and procedures for providing emergency medical care including, when required, the safe and secure transfer of detainees for appropriate hospital or other medical services, including by ambulance when indicated. 	Meets Standard	All staff members in frequent contact with detainees are trained in cardiopulmonary resuscitation (CPR) and first aid, and are aware of the requirement to respond to emergencies within four minutes. Basic and annual refresher training includes instruction in the recognition of signs and symptoms of mental illness, suicide risk, retardation and chemical dependency.
 21. All staff in frequent contact with detainees are trained at least annually on the facility's Sexual Abuse and Assault Prevention and Intervention Program, to include: Understanding that sexual abuse or assault is never an acceptable consequence of detention. 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	The initial basic training and annual refresher training of staff members in frequent contact with detainees addresses the facility Sexual Abuse and Assault Prevention and Intervention Program. The training addresses the elements listed in this component.

PART 7 - 40. STAFF TRAINING (Key: AN)

Components	Rating	Remarks (1000 Char Max)
 22. (MANDATORY) All staff in frequent contact with detainees are trained at least annually on the facility's Suicide Prevention and Intervention Program, to include: Identifying the warning signs and symptoms of impending suicidal behavior, Demographic, cultural, and precipitating factors of suicidal behavior, 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	The initial basic and annual refresher training of staff members in frequent contact with detainees addresses the facility Suicide Prevention and Intervention Program. The training addresses the elements listed in this component.
23. All staff are trained during orientation and annually to recognize the signs of a hunger strike and on the procedures for referral for medical assessment.	Meets Standard	
24. All staff are trained in proper procedures for the care and handling of keys. Orientation training shall be accomplished before staff are issued keys, and key control shall be among the topics covered in annual training. Ordinarily, such training is done by the Security Officer or Key Control Officer.	Meets Standard	All staff members receive training in key control during the basic orientation and the annual refresher training program.
 25. Through ongoing (at least annual) training, all detention facility staff are made aware of their responsibilities to control situations involving aggressive detainees. At a minimum, training shall include: The requirements of this Detention Standard The use of force continuum Communication techniques Cultural diversity Dealing with the mentally ill Confrontation-avoidance techniques Approved methods of self-defense Force cell-move techniques Communicable diseases, particularly precautions to be taken for use of force Application of restraints (progressive and hard) Reporting procedures. 	Meets Standard	All staff members receive training in the control of aggressive detainees during the basic orientation and in the annual refresher training program.

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)			
26. Employees are encouraged to continue their education and professional development through incentives such as salary enhancement, reimbursement of costs, and administrative leave.	Does Not Meet Standard	The contract security services staff are not provided incentives for continued 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)

ICE and contract services security staff members receive extensive training to ensure they are competent in their assigned duties. A review of training records of both ICE and contract security services staff members indicated records are maintained of all training and are up-to-date. All armed facility staff members receive extensive firearms training and qualify with their weapons quarterly. The contract security services staff are not provided incentives for continued education.

Overall Rating: Meets Standard

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

Completion Date: 9/20/2012

Reviewer Signature (for printed form submission):

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.

ma	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. The notification is recorded in the detainee's file When the A-File is not available, notification is noted within ENFORCE. 	Meets Standard	ICE staff members confirmed that if a detainee is represented by legal counsel and has a G-28 on file, the detainee's deportation officer will make the required notifications.	
2.	Notification includes the reason for the transfer and the location of the new facility,	Meets Standard		
3.	The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	Meets Standard		
4.	The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	Meets Standard	The deportation officer informs both the attorney of record and the detainee that it is their responsibility to make the transfer notification.	
5.	 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 mandates all of the items listed in this component.	
6.	The detainee is provided with a completed Detainee Transfer Notification Form.	Meets Standard		
7.	Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	Meets Standard	Either a Form G-391 or a Form I- 216 is used.	
8.	 For medical transfers: The Division of Immigration Health Services (DIHS) Medical Director or designee approves the transfer. Medical transfers are coordinated through the local ICE/DRO office. A medical transfer summary is completed and accompanies the detainee. Detainee is issued a minimum of 7 days worth of prescription medications. 	Meets Standard	An interview with on-site ICE staff members confirmed that the process for medical transfers includes the bulleted items listed in this component.	
9.	Detainees are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number and the envelope is marked Medical Confidential.	Meets Standard	ICE staff confirmed that detainees are transferred with a completed transfer summary.	

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

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

Components	Rating	Remarks (1000 Char Max)
10. For medical transfers, transporting officers receive instructions regarding medical issues.	Meets Standard	
11. Detainee's funds, valuables and property are returned and transferred with the detainee to his or her new location.	Meets Standard	ICE and facility staff interviews confirmed that funds, valuables and property are transferred with the detainee to his new location.
12. Transfer and documentary procedures outlined in Section C and D are followed.	Meets Standard	
13. Indigent detainees unable to make a telephone call at their new location are able to make a telephone call at the government's expense within 12 hours of arrival.	Meets Standard	ICE procedures require that all detainees be permitted to make a telephone call at the government's expense within 12 hours of arrival at their new location.
14. Meals are provided when transfers occur during normally schedule meal times.	Meets Standard	Sack lunches are provided when transfers occur during scheduled meal times.
15. An A-File or work folder accompanies the detainee when transferred to a different Field Office or sub-office.	Meets Standard	ICE staff stated that an A-file always accompanies a detainee when transferred.
16. A-Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.	Meets Standard	

PART 7 - 41. TRANSFER OF DETAINEES - Reviewer Summary

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

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

Interviews with facility and ICE staff members confirmed detainees are transferred with their records, funds, personal property and proper identification. The facility has the necessary procedures in place to ensure that detainees are transferred from one facility to another in a professional and responsible manner.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6), (b)(7)(c) Completion Date: 9/20/2012

Reviewer Signature (for printed form submission):

DOCUMENT CHECK

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

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

Review Document Issue Summary Ratings Check Status					
Check Document:	Run Check	Error(s) Found:	0	Items Not Rated:	0
Errors:					
Items Not Rated:					

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



MEMORANDUM FOR:

Adrian Macias

Field Office Director

JUL 15 2013

FROM:

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

Assistant Director for Custody Management

SUBJECT:

El Paso Service Processing Center Annual Review

The annual review for the El Paso Service Processing Center conducted on September 18-20, 2012 in El Paso, Texas has been received. A final rating of <u>Meets the Standards</u> has been assigned and this review is now closed.

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

1) Notify the facility <u>within</u> 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, Custody Management Division at (202) 732 (6), (b)(7)(c)

cc: Official File

A. Type of Facility Review	ed	Estimated Ma
ICE Service Process	sing Center	7 L
☐ ICE Contract Deter	ntion Facility	
☐ ICE Intergovernme	ntal Service Agreement	
		G. Accredit
B. Current Inspection		List all State of
Type of Inspection		ACA, NCCH
☐ Field Office ☐ HQ Insp	ection	Check box
Date[s] of Facility Review		
09/18/2012 to 09/20/2012		H. Problems
		The Facility is
C. Previous/Most Recent F		Court Ord
Date[s] of Last Facility Review	W	The Facility h
09/20/2011 to 09/22/2011		Major Liti
Previous Rating		☐ Check if I
Meets Standards	Does Not Meet Standards	I Facility l
D 34 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		I. Facility I Date Built
D. Name and Location of F	acility	1967
Name		Date Last Rer
El Paso Service Processing Co	enter	1998
Address (Street and Name)		Date New Co
8915 Montana Avenue		1998 - No bed
City, State and Zip Code El Paso, Texas 79925		Future Constr
County		☐ Yes ⊠ N
El Paso		Current Beds
Name and Title of Facility Ad	ministrator	840
_(Warden/OIC/Superintendent)		
(b)(6), (b)(7)(c) AFOD (J. Total Fa
Telephone # (Include Area Co		Total Facility
915-2(B)(6), (b)(7)(c)		22132
Field Office / Sub-Office (List	t Office with oversight	Total ICE Ma
responsibilities)	Z.	22132
El Paso		
Distance from Field Office		K. Classifica
0.5 miles		
		Adult Male
E. ICE Information		Adult Female
Name of Inspector (Last Name		
(b)(6), (b)(7)(q)_CI / Nakamoto Group		L. Facility (
Name of Team Member / Title		
(b)(6), (b)(7)(c) Medical SME / N		Adult Male
Name of Team Member / Title		Adult Female
(b)(6), (b)(7)(c) Safety-Food Servi		☐ Facility ho
Name of Team Member / Title		M Avianaga
(b)(6), (b)(7)(Security SME / Naka		M. Average
Name of Team Member / Title	e / Duty Location	Adult Male
/ /		Adult Female
F. CDF/IGSA Information	Only	Adult Pelliale
F. CDF/IGSA Information Contract Number	Date of Contract or IGSA	N. Facility S

N/A

N/A

Basic Rates per Man-Day

N/A; ; ;

Other Charges: (If None, Indicate N/A)

Estimated Man-days P	er Year				
G. Accreditation Ce	ertificates				
List all State or Nation	nal Accreditation[s] received:				
ACA, NCCHC, The Jo					
Check box if facil	ity has no accreditation[s]				
H. Problems / Com	plaints (Copies must be attached)				
The Facility is under C	Court Order or Class Action Finding				
Court Order	Class Action Order				
The Facility has Signi	ficant Litigation Pending				
☐ Major Litigation	Life/Safety Issues				
☐ Check if None.					
I. Facility History					
Date Built					
1967	TT 1.1				
Date Last Remodeled	or Upgraded				
Date New Construction	n / Redspace Added				
1998 - No bed space a					
Future Construction P					
☐ Yes ☒ No Date:					
Current Bedspace	Future Bedspace (# New Beds only)				
840	Number: N/A Date: N/A				
J. Total Facility Po					
Total Facility Intake for previous 12 months					
22132					
Total ICE Mandays for Previous 12 months					
22132					
K Classification La	K. Classification Level (ICE SPCs and CDFs Only)				
X. Ciassification Le	I_1 I_2 I_3				

	L-1	L-2	L-3
Adult Male	352	182	38
Adult Female	176	25	0

Capacity

	Rated	Operational	Emergency
Adult Male	616	552	800
Adult Female	224	224	400
☐ Facility holds Juveniles Offenders 16 and older as Adults			

Daily Population

	ICE	USMS	Other
Adult Male	363	0	0
Adult Female	242	0	0

N.	Facility	Staffing Level
Car		

11. Tacinty	Stating Level		
Security:		Support:	
Security.		Bupport.	
	(b)(7)(e)		

Significant Incident Summary Worksheet

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

Incidents	Description	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault:	Types (Sexual ² , Physical, etc.)	Physical	Physical	Physical	Physical
Offenders on Offenders ¹	With Weapon	0	0	0	0
	Without Weapon	17	23	15	10
Assault:	Types (Sexual Physical, etc.)	N/A	Physical	Physical	N/A
Detainee on Staff	With Weapon	0	0	0	0
	Without Weapon	0	1	1	0
Number of Forced Moves, incl. Forced Cell moves ³		0	0	0	0
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		0	0	0	0
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
Restraints applied/used	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	0
Number of Times Canines Used in Facility		0	1	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.		58	39	37	67
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	41	45	55	44
	# Resolved in favor of Offender/Detainee	13	10	8	11
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	N/A	N/A	N/A	I
	Number	0	0	0	1
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	269	245	207	199
	# Psychiatric Cases referred for Outside Care	64	4	5	5

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

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

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

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

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

LCI Review Assurance Statement

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

Lead Compliance Inspector: (Print Name)	Signature
(b)(6), (b)(7)(c)	(b)(6), (b)(7)(c)
Title & Duty Location	Date
Lead Compliance Inspector, The Nakamoto Group, Inc.	09/20/2012
Team Members	

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

Recommended Rating:	⋈ Meets Standards
	Does Not Meet Standards

Comments: The El Paso Service Processing Center is an 840-bed facility operated under contract by Doyon-Akal JV. The facility opened in 1967 and was last remodeled in 1998. Contract staff members perform most operational functions at the facility. ICE staff members were observed in all areas interacting with the detainees. This facility houses both male and female ICE detainees. The count on 09/19/2012 was 735, consisting of 545 males and 190 females. This population broken down by security levels included 486 Level I, 201 Level II and 48 Level III detainees.

The facility was very clean. There was good communication and interaction between detainees and staff and between detainees of different ethnicities. No tension was noted among general population detainees. Detainees interviewed indicated that they were treated respectfully and had no difficulty accessing needed services. Detainees also indicated that ICE staff visited the housing units regularly and talked with them about their status on a regular basis. The mood, tone and climate of the facility were very good.

Tasers are not used at this facility. Only trained ICE staff members are permitted to use oleoresin-capsicum (OC) spray. Policy prohibits the use of choke holds. Canines were used once during the past 12 months for drug detection. There were no escapes, attempted escapes or attempted suicides during the previous 12months.

One ICE detainee death was reported	(b)(6), (b)(7)(c)	(b)(6), (b)(7)(c)	
_		_	
(b)(6), (b)(7)(c)			
	(-)		