

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**

5-11-09 update

- ☐ Intergovernmental Service Agreement (IGSA)
☒ ICE Service Processing Center (SPC)
☐ ICE Contract Detention Facility (CDF)

| |
|---|
| Name Krome North Service Processing Center |
| Address (Street and Name) 18201 S. W. 12 th Street |
| City, State and Zip Code Miami, Florida 33196 |
| County Dade |
| Name and Title of Chief Executive Officer (Warden/Superintendent/Facility Administrator) (b)(6), (b)(7)(c) Assistant Field Officer Director / OIC |
| Name and Title of Lead Compliance Inspector (b)(6), (b)(7)(c) |
| Date[s] of Review From 4/24/2012 to 4/26/2012 |
| Type of Review <input checked="" type="checkbox"/> Headquarters <input type="checkbox"/> Operational <input type="checkbox"/> Special Assessment <input type="checkbox"/> Other |

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 the “Does Not Meet Standard” or “N/A” ratings.

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

Outcome Measures Completion

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

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

Table of Contents

SECTION I – SAFETY

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

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**

SECTION III – ORDER

- Disciplinary System**

SECTION IV – CARE

- Food Service**
- Hunger Strikes**
- Medical Care**
- Personal Hygiene**
- Suicide Prevention and Intervention**
- Terminal Illness, Advance Directives, and Death**

SECTION V – ACTIVITIES

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

SECTION VI – JUSTICE

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

SECTION VII – ADMINISTRATION & MANAGEMENT

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

Performance-Based National Detention Standards

Section I SAFETY

- 1 Emergency Plans**
- 2 Environmental Health and Safety**
- 3 Transportation (By Land)**

PART 1 – 1. EMERGENCY PLANS

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 1. No Detainee or detainee groups exercise control or authority over other detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy states that detainees do not exercise control or authority over other detainees. |
| 2. Detainees are protected from: <ul style="list-style-type: none"> • Personal abuse • Corporal punishment • Personal injury • Disease • Property damage • Harassment from other detainees | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy identifies protection from all the items listed in this component. |
| 3. Staff are trained to identify signs of detainee unrest. <ul style="list-style-type: none"> • What type of training and how often? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | This type of training is provided during new officer and annual refresher training, and with annual updates in the hostage plan module. |
| 4. Staff effectively disseminate information on facility climate, detainee attitudes, and moods to the Facility Administrator. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Assistant Facility Director and Supervisory Detention and Deportation Officer are responsible for emergency plan development, implementation and distribution. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | There are six emergency plan manuals. Distribution is recorded and a system of accountability is in place. |
| 7. All staff receive training in the emergency plans during their orientation training as well as during their annual training. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Emergency plans training is conducted during staff orientation and annual refresher 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. The plans address the following issues: <ul style="list-style-type: none"> • Confidentiality • Accountability (copies and storage locations) • Annual review procedures and schedule • Revisions | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

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| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| 10. Contingency plans include a comprehensive general section with procedures applicable to most emergency situations, including procedures for handling detainees with special needs. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Contingency plans are comprehensive and include procedures for handling most emergency situations, including procedures for handling detainees with special needs. |
| 11. Contingency plans include a procedure for notification of neighbors residing in close proximity to the facility. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Incident Response Coordinator and the Public Information Officer shall inform nearby residents of the nature of the emergency. |
| 12. The facility has cooperative contingency plans with applicable: <ul style="list-style-type: none"> Local law enforcement agencies State agencies Federal agencies | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Facility did not meet this component during the 04/2011 review because they did not conduct a mock emergency exercise. Since then, a mock emergency exercise was conducted on 12/16/2011. After Action Report was completed 01/03/2012. |
| 14. All staff receive copies of the Facility Hostage policy and procedures. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 15. Staff are trained (b)(7)e (b)(7)e Within 24 hours after release, hostages are screened for medical and psychological effects. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 16. The facility maintains a list of translator services in the event one is needed during a hostage crisis. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Facility uses a telephone provider for interpretive services. |
| 17. Emergency plans include emergency medical treatment for staff and detainees during and after an incident. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 18. The Food Service Department maintains at least 3-days' worth of emergency meals for staff and detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 19. Written plans illustrate locations of shut-off valves and switches for utilities (water, gas, electric). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Emergency Contingency Plan manual has comprehensive color coded maps outlining the shut-off valves and switches for utilities. |
| 20. Written plans include a Staff Work Stoppage procedure. This procedure is available for limited supervisory review. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 1 – 1. EMERGENCY PLANS

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| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 21. (MANDATORY) Written procedures cover: <ul style="list-style-type: none"> • Work/Food Strike • Fire • Environmental Hazard • Detainee Transportation System Emergency • ICE-wide Lockdown • Staff Work Stoppage • Disturbances • Escapes • Bomb Threats • Adverse Weather • Internal Searches • Facility Evacuation • Detainee Transportation System Plan • Hostages (Internal) • Civil Disturbances | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Emergency plan is comprehensive and well organized. Plan documents written procedures covering all bulleted items. |
| 22. The Emergency Plans specify a procedure for post-emergency debriefings and discussions. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 1 – 1. EMERGENCY PLANS

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

Training records were reviewed, staff was interviewed and the Emergency Contingency Plan manual was reviewed.

Facility has mutual aid agreements with local, state and federal agencies on file. Contingency plans are in place to quickly and effectively respond to any emergency situations that arise and to minimize their severity.

Inspector verified that a Hostage Negotiations Team has been trained and is available.

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

 04/26/2012
 Reviewer's Signature / Date

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|-------------------------------------|---|
| 1. (MANDATORY) The facility has a system for storing, issuing, and maintaining inventories of hazardous materials. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Health and Safety Room is the central repository for hazardous materials. Remote storage sites located throughout the facility were secure with current inventories. |
| 2. Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each area of the facility. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3. The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. <ul style="list-style-type: none"> The files list all storage areas, and include a plant diagram and legend. The MSDSs and other information in the files are available to personnel managing the facility's safety program. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 4. All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures: <ul style="list-style-type: none"> Wear personal protective equipment. Report hazards and spills to the designated official. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. The MSDS are readily accessible to staff and detainees in the work areas. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A Material Safety Data Sheet (MSDS) binder is prominently displayed in all storage locations. |
| 6. Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> Quantities are limited. Detainees are trained. Staff always supervise detainees using these substances. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Hazardous materials are issued by staff. Daily use quantities are provided to detainee workers. These workers have received training in the safe handling of these materials. |
| 7. All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This facility does not store or use combustible or flammable materials inside the secure perimeter. |
| 8. Lighting fixtures and electrical equipment are installed in storage rooms and other hazardous areas and meet the National Electrical Code requirements. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. All toxic and caustic materials stored in their original containers in a secure area. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

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| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|-------------------------------------|---|
| 10. Excess flammables, combustibles, and toxic liquids are disposed of properly in accordance with MSDS. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This facility does not use methyl alcohol products. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All employees using hazardous materials have received training in the proper use, storage and disposal of the materials. |
| 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). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility has a reviewed/approved Fire Plan and current Hazardous Communication Plan. |
| 14. A technically qualified staff member conducts fire and safety inspections. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Compliance team members have been trained in a 'Collateral Duty Health and Safety Course'. All compliance team members conduct fire and safety inspections. The Health and Safety Manager, Plantation Field Office, also makes quarterly inspections. This individual is a credentialed environmental professional. |
| 15. The Safety Office (or officer) maintains files of inspection reports, including corrective actions taken. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 16. (MANDATORY) The facility has an approved fire prevention, control, and evacuation plan. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | In a letter dated 04/08/2011 the Miami-Dade Rescue Department states it has reviewed the facility's fire plan and found it: addresses all the elements listed in National Fire Protection Association (NFPA) 101:4.8.2.1 - Procedures for Provision of Private Fire Watch; and in accordance with NFPA 601, Standard for Security Services in Fire Loss Prevention. |

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 17. The plan requires: <ul style="list-style-type: none"> Monthly fire inspections. Fire protection equipment strategically located throughout the facility. Public posting of emergency plan with accessible building/room floor plans. Exit signs and directional arrows. An area-specific exit diagram conspicuously posted in the diagrammed area. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All of the bullet points listed in this component are addressed in the Fire Plan. |
| 18. Fire drills are conducted and documented quarterly in all facility locations including the administrative area. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Fire drills are conducted and documented monthly. |
| 19. A sanitation program covers barbering operations. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 20. The barbershop has the facilities and equipment necessary to meet sanitation requirements. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The barber shop is equipped with running water, disinfection solutions and cleaning materials in sufficient quantity to maintain a sanitary environment. |
| 21. The sanitation standards are conspicuously posted in the barbershop. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 22. Written procedures regulate the handling and disposal of used needles and other sharp objects. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy addresses the handling of needles and other sharp objects. |
| 23. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 24. Standard cleaning practices include: <ul style="list-style-type: none"> Using specified equipment; cleansers; disinfectants and detergents. An established schedule of cleaning and follow-up inspections. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Cleaning schedules, target areas and sanitation procedures are established and followed. |
| 25. Spill kits are readily available. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Spill kits are available in hazardous materials use/storage areas |
| 26. A licensed medical waste contractor disposes of infectious/bio-hazardous waste. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Steri-Cycle is the current medical waste contractor. |
| 27. Staff are trained to prevent contact with blood and other body fluids and written procedures are followed. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Blood borne pathogens is a mandatory module covered in initial orientation and annual refresher training courses. |
| 28. Do the methods for handling/disposing of refuse meet all regulatory requirements? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| 29. A Licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. <ul style="list-style-type: none"> At least monthly. The pest-control program includes preventive spraying for indigenous insects. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Guarantee Floridian is the contractual pest control vendor. Infestation/prevention spraying is performed every two weeks. |
| 30. Drinking water and wastewater is routinely tested according to a fixed schedule. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Drinking water and wastewater is managed by the Miami-Dade Water and Sewer Department. Testing is conducted by that department with results posted on their website: www.miamidade.gov/wasd/report_water_quality.asp . |
| 31. Emergency power generators are tested at least every two weeks. <ul style="list-style-type: none"> Other emergency systems and equipment receive testing at least quarterly. Testing is followed-up with timely corrective actions (repairs and replacements). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Emergency generators are tested every Friday. Other emergency systems are tested within prescribed manufacturer's safety guidelines. Repairs/replacements are promptly completed. |
| 32. The Facility appears clean and well maintained. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 33. Hazardous material storage rooms meet the security and structural requirements of the standard. Storage cabinets meet the physical requirements specified in the standard. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 34. The Health Services Administrator has implemented a program supporting a high level of environmental sanitation. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 35. The Health Services Administrator conducts medical-facility inspections daily. Each inspection includes noting the condition of floors, walls, windows, horizontal surfaces, and equipment. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Health Services Administrator (HSA) conducts and documents daily unit inspections. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The HSA has designated a Nurse Manager to conduct a quarterly tour/inspection of the facility and issue an environment 'Health and Safety Report'. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | If the 'Health and Safety Report' is determined to require corrective action, the HSA and other appropriate staff will meet, plan, draft and implement approved policies/procedures/protocols. |

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---------|
| 38. Environmental health and safety conditions shall be maintained at a level that meets recognized standards of safety and hygiene, including those from the: <ul style="list-style-type: none"> American Correctional Association, Occupational Safety and Health Administration, Environmental Protection Agency, Food and Drug Administration, National Fire Protection Association's Life Safety Code, and National Center for Disease Control and Prevention. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

☒ **Meets Standard** ☐ **Does Not Meet Standard** ☐ **N/A** ☐ **Repeat Finding**

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

An inspection of the health and safety room; interviews with fire and safety inspectors; review of hazardous materials issuance, storage and use practices; review of hazardous materials inventory records at storage locations; tour of the barber shop; review of the fire plan; review of water/sewer annual reports; interview with the HSA and tour of the medical unit; and review of environmental reports revealed detainees are protected by the facility maintaining an adequate standard of cleanliness and sanitation in its living, work, recreation and common areas.

(b)(6), (b)(7)(c) 04/26/2012
Reviewer's Signature / Date

PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 1. Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Inspector interviewed the Vehicle Coordinator and reviewed the post orders and training records to verify component requirement to comply with all laws. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Inspector reviewed copies of all staff Commercial Driver's License (CDL) issued by Florida. |
| 3. Supervisors maintain records for each vehicle operated. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Records were reviewed on the vehicles. |
| 4. Documentation indicating annual inspection of vehicles and annual inspection in accordance with state statutes is available for review. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Inspector reviewed annual vehicle inspection reports. Florida Department of Transportation conducts an annual inspection of facility vehicles. Documentation was current. |
| 5. Documentation indicating safety repairs are completed immediately and vehicles are not used until they have been repaired and inspected is available for review. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Inspector reviewed documentation of safety repairs completed. Reports indicate that vehicles were not in service before repairs were completed. |
| 6. Officers use a checklist during every vehicle inspection. <ul style="list-style-type: none"> Officers report deficiencies affecting operability. Deficiencies are corrected before the vehicle goes back into service. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Checklists were reviewed. Inspector observed a vehicle checklist being completed before transport bus left the sally port. No vehicle is put into use with known deficiencies. |

PART 1 – 3. TRANSPORTATION (BY LAND)

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| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|------------------------------|--------------------------|---|
| <p>7. Transporting officers:</p> <ul style="list-style-type: none"> Limit driving time to 10 hours in any 15 hour period when transporting detainees. Drive only after eight consecutive off-duty hours. Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours. Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days. During emergency conditions (including bad weather), officers may drive as long as necessary to reach a safe area—exceeding the 10-hour limit. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Driver logs were available and current. Logs are maintained by the Vehicle Coordinator and also maintained in the Control Center. All of the points listed in this component are managed and followed by supervisory reviews. |
| <p>8. (b)(7)(e) officers with valid Commercial Drivers Licenses, (CDL's) required in any vehicle transporting detainees.</p> <ul style="list-style-type: none"> When buses travel in tandem with detainees, there are (b)(7)(e) qualified officers per vehicle. An unaccompanied driver transports an empty vehicle. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Two transports were observed. Policy was followed. |
| 9. The transporting officer inspects the vehicle before the start of each detail. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A 'Trip Ticket' form (safety checklist) is completed by the transporting officer. Inspector observed a trip ticket form completed on 4/25/2012. |
| 10. Positive identification of all detainees being transported is confirmed. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 11. All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees are searched and a Garrett Wand (metal detector) is used before a detainee board a vehicle. |
| 12. The facility ensures that the number of detainees transported does not exceed the vehicle manufacturer's occupancy level. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Occupancy levels are posted in the vehicles. Number of detainees transported does not exceed occupancy level. |
| 13. (b)(7)(e) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (b)(7)(e) |
| <p>14. The vehicle crew conducts a visual count once all passengers are on board and seated.</p> <ul style="list-style-type: none"> Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Inspector observed the visual count taken before bus left on transport. Policy states that additional visual counts will be conducted. |

PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 15. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 16. Officers ensure that no one contacts the detainees. <ul style="list-style-type: none"> One officer remains in the vehicle at all times when detainees are present. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 17. Meals are provided during long distance transfers. <ul style="list-style-type: none"> The meals meet the minimum dietary standards, as identified by dietitians utilized by ICE. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Sack lunches were observed on the transport bus. Dietary staff confirmed that meals meet the minimum dietary standards. |
| 18. The vehicle crew inspects all Food Service meals before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). <ul style="list-style-type: none"> Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative. Basins, latrines, and drinking-water, containers, dispensers are cleaned and sanitized on a fixed schedule. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Logs reviewed documented that basins, latrines, and drinking-water are cleaned and sanitized following a fixed schedule. |
| 19. Vehicles have: <ul style="list-style-type: none"> (b)(7)e Equipment appropriate and necessary for transporting detainees with physical disabilities. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ICE and Doyan-Akal JV vehicles are used. All vehicles are equipped (b)(7)e One of the vans had equipment necessary for transporting detainees with disabilities. |
| 20. The vehicles are clean and sanitary at all times. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 21. Personal property of a detainee transferring to another facility: <ul style="list-style-type: none"> Is inventoried. Is inspected. Accompanies the detainee. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainee property was observed and documentation confirmed that inventory was completed, inspected and the property accompanied the transferring detainee. |

PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| 22. The following contingencies are included in the written procedures for vehicle crews: <ul style="list-style-type: none">• Attack• Escape• Hostage-taking• Detainee sickness• Detainee death• Vehicle fire• Riot• Traffic accident• Mechanical problems• Natural disasters• Severe weather• Passenger list is not exclusively men or women or minors | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy is in place and addresses all of the bulleted items in the component. Transportation post orders address each bulleted item. All post orders were signed by transporting officers interviewed. |

PART 1 – 3. TRANSPORTATION (BY LAND)

☒ **Meets Standard** ☐ **Does Not Meet Standard** ☐ **N/A** ☐ **Repeat Finding**

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

Vehicles are properly equipped, maintained and operated by qualified staff. Vehicle coordinators from ICE and Doyan-Akal JV were interviewed; logs were reviewed documenting trip ticket information and Florida CDL annual inspections.

Inspector observed the process of identifying detainees and completing the required documents before transporting detainees. Inspector observed several transport buses and vans. All vehicles were clean and sanitary and contained documents required by policy.

(b)(6), (b)(7)(c) / 04/26/2012

Reviewer's Signature / Date

Section II 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**

PART 2 – 4. ADMISSION AND RELEASE

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Admission orientation is accomplished through a video and the detainee handbook. All requirements listed in this component are covered in the orientation process. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | New arrivals remain in a holding cell until classified with available documentation, then placed in the general population. |
| 4. All new arrivals are searched in accordance with the "Detainee Search" standard. An officer of the same sex as the detainee conducts the search and the search is conducted in an area that affords as much privacy as possible. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All searches are conducted in accordance with the requirements listed in this component and the 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy states all requirements of this component will be enforced. Strip search documentation was reviewed and found to be correct. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility uses an I-387 Form to address lost or missing property claims. |
| 8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. All releases are coordinated with ICE. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All releases are approved by ICE staff. |

PART 2 – 4. ADMISSION AND RELEASE

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| 10. Staff complete paperwork/forms for release as required. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 11. Each detainee receives a receipt for personal property secured by the facility. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees receive a receipt for all property placed in the property storage room. |
| 12. The facility has a system to maintain accurate records and documentation for admission, orientation, and release. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility uses an electronic data management system to maintain records of admission, orientation, and release. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff was observed entering information referenced in this component into the Enforcement Alien Removal Module (EADM) during admission/release proceedings. |
| 14. All orientation material shall be provided in English, Spanish, and other language(s) as determined by the Field Office Director. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 2 – 4. ADMISSION AND RELEASE

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

ICE and contract staff was interviewed, policy examined, and the Processing Area inspected.

The facility has a secure, accurate, and orderly process for admitting and releasing detainees.

Detainees are oriented to facility rules and regulations, properly searched, examined by medical staff, and have their property inventoried and stored. Detainees are then placed in a housing unit according to their security needs through a system of classification. This process is reversed at the time of release.

Files of all actions are maintained electronically and on paper.

(b)(6), (b)(7)(c) 04/26/2012

Reviewer's Signature / Date

PART 2 – 5. CLASSIFICATION SYSTEM

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 1. SPC and CDF facilities use the required Objective Classification System. IGSA's use an objective classification system or similar system for classifying detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. The facility classification system includes: <ul style="list-style-type: none"> Classifying detainees upon arrival. Separating individuals who cannot be classified upon arrival from the general population. The first-line supervisor or designated classification specialist reviews every classification decision. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3. The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Only fact-based evidence is used to classify detainees. |
| 5. Housing assignments are based on classification-level. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Housing assignments are made on classification assignments. |
| 6. A detainee's classification-level does not affect his or her recreation opportunities. Detainees recreate with persons of similar classification designations. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 7. Detainee work assignments are based upon classification designations. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainee work assignments are made based on classification designations. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff reviews classification assignments according to the intervals noted in this component. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The detainee may appeal a classification assignment by filing a grievance. Only ICE supervisory staff may approve a reduction in classification level under these circumstances. |
| 10. Classification appeals are resolved w/in 5 business days. Detainees are notified of the outcome within 10 business days. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Classification appeals are resolved in less than five days (usually within 72 hours). The detainee is advised immediately. |

PART 2 – 5. CLASSIFICATION SYSTEM

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 11. Classification designations may be appealed to a higher authority such as the Facility Administrator or equivalent. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 12. The Detainee Handbook or equivalent for IGSA's explains the classification levels, with the conditions and restrictions applicable to each. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The handbook contains an explanation of the classification process. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees are assigned color-coded uniforms, and use a wrist-band identification system, to identify a classification level. |

PART 2 – 5. CLASSIFICATION SYSTEM

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

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

ICE and contracted staff were interviewed, policy inspected, and the classification process observed.

Staff, contractors, and the community are protected by a classification system that places detainees in the proper security setting (housing and work/recreation assignments) based on their needs. Accurate information (sometimes available before the arrival of detainees) is used to determine what level of security is needed to adequately manage a detainee. The classification level is regularly reviewed, detainees are advised of the process, and detainees may appeal a contested level by filing a grievance.

Detainee security levels are identified by the color of their uniforms and information on a wrist band. To facilitate their protection, detainees may only have contact with other detainees having a compatible security level.

(b)(6), (b)(7)(c) 04/26/2012

Reviewer's Signature / Date

PART 2 – 6. CONTRABAND

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy dictates procedures for handling soft and hard contraband. |
| 2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Detention Supervisor confirmed that government property is retained as evidence when criminal prosecution is sought. |
| 3. Staff return property not needed as evidence to the proper authority. Written procedures cover the return of such property. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy describes procedures for returning property to proper authorities. |
| 4. Altered property is destroyed following documentation and using established procedures. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. Before confiscating religious items, the Facility Administrator or designated investigator contacts a religious authority. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The chaplain is contacted whenever a religious article is confiscated. Policy states: "...generally a religious authority will be contacted when a religious item is confiscated". The Detention Supervisor advised that in every circumstance, the chaplain is contacted and works with the investigator before disposition of item is finalized. |
| 6. Staff follow written procedures when destroying hard contraband that is illegal. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires that illegal hard contraband is turned over to local law enforcement. If prosecution is not warranted, the contraband is destroyed. |

PART 2 – 6. CONTRABAND

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|-------------------------------------|---|
| 7. Hard contraband that is illegal (under criminal statutes) is retained and used for official use, e.g. training purposes. <ul style="list-style-type: none"> If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use. Soft Contraband is mailed to a third party or stored in accordance with the Detention Standard on Funds and Personal Property. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 8. Detainees receive notification of contraband rules and procedures in the Detainee Handbook and notified when property is identified and seized as contraband. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The handbook contains a list of contraband rules and procedures. Detainees are made aware when contraband is discovered and seized from their property. |
| 9. Facilities with Canine Units only use them for contraband detection. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This facility does not have a canine unit. |

PART 2 – 6. CONTRABAND

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

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

Contraband policy enhances facility security and good order by identifying, detecting, controlling, and properly disposing of contraband.

The Detention Supervisor was interviewed and logs were reviewed which confirmed that policies and procedures are in place.

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

04/26/2012

Reviewer's Signature / Date

PART 2 – 7. FACILITY SECURITY AND CONTROL

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|-------------------------------------|---|
| 1. The facility administrator or assistant administrator and department heads visit detainee living quarters and activity areas weekly. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Log books confirm that required visits are conducted. |
| 2. At least (b)(7)e male and (b)(7)e female staff are on duty where both males and females are housed. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Females are not housed at this facility. Female staff is available in the Processing Area in the event a female was to be temporarily held. |
| 3. Comprehensive annual staffing analysis determines staffing needs and plans. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | An annual staffing analysis is completed by ICE and Doyon-Akal JV (security contractor) staff. |
| 4. Essential posts and positions are filled with qualified personnel. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. Every Control Center officer receives specialized training. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Training records reviewed and a Training Coordinator interview confirmed specialized training for Control Center officers is provided. |
| 6. Policy restricts staff access to the Control Center. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 7. Detainees do not have access to the Control Center. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 8. Communications are centralized in the Control Center. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Observation confirmed that communications are centralized in the Control Center. |
| 9. Facility security and safety will be monitored and coordinated by a secure, well-equipped, and continuously staffed control center. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Security and safety is monitored and coordinated in the continuously staffed Control Center. |
| 10. The Control Center maintain employee Personal Data Cards (Form G-74 or contract equivalent). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Personal data cards reviewed were current. |
| 11. Recall lists include the current home telephone number of each employee. Phone numbers are updated as needed. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The recall list of employees was current. |
| 12. (b)(7)e | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (b)(7)e |
| 13. Information about routine procedures, emergency situations, and unusual incidents will be continually recorded in permanent post logs and shift reports. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires information regarding routine procedures and unusual incidents be recorded in log books and shift reports. |
| 14. The front-entrance officer checks the ID of everyone entering or exiting the facility. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Observation confirms that the front entrance officer checks IDs and visually verifies individuals entering and exiting the facility. |
| 15. All visits officially recorded in a visitor logbook or electronically recorded. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 2 – 7. FACILITY SECURITY AND CONTROL

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 16. The facility has a secure, color-coded visitor pass system. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 17. Officers monitor all vehicular traffic entering and leaving the facility. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 18. The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: <ul style="list-style-type: none"> The driver's name Company represented Vehicle contents Delivery date and time Date and time out Vehicle license number Name of employee responsible for the vehicle during the facility visit | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Facility Operations Manager and Detention Supervisor were interviewed and provided documentation confirming a log is maintained addressing all of the bulleted items listed in this component. |
| 19. Officers thoroughly search each vehicle entering and leaving the facility. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 20. The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy and practice is in place to prevent the introduction of contraband into the facility. |
| 21. The front entrance has a sally-port type entrance, with interlocking electronic doors or grilles. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 22. The facility's perimeter will ensure that detainees remain within and that public access is denied without proper authorization. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 23. Written procedures govern searches of detainee housing units and personal areas. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 24. Housing area searches occur at irregular times. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Security posts are inside the housing units. Staff has direct observation and can hear the detainees. Personal contact and interaction between staff and detainees was observed. |
| 26. There are post orders for every security officer post. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 27. Detainee movement from one area to another area is controlled by staff. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainee movement is escorted by security staff. |
| 28. Living areas are constructed to facilitate continuous staff observation of cell or room fronts, dayrooms, and recreation space. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 29. Every search of the SMU and other housing units is documented. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 30. The SMU entrance has a sallyport. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 2 – 7. FACILITY SECURITY AND CONTROL

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 31. All tools entering SMU will be inspected and inventoried by the SMU officer prior to entering the housing unit. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 32. The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> • Posts to be inspected • Required inspection forms • Frequency of inspections • Guidelines for checking security features • Procedures for reporting weak spots, inconsistencies, and other areas needing improvement | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy lists the posts to be inspected and addresses all of the bullet points listed in this component. |
| 33. Every officer is required to conduct a security check of his/her assigned area. The results are documented. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy and post orders require security checks of assigned areas. Documentation of these checks is up to date. |
| 34. Documentation of security inspections is kept on file. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 35. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 36. Tools being taken into the secure area of the facility are inspected and inventoried before entering and prior to departure. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All tools entering and leaving a secure area of the facility are inspected and inventoried. |
| 37. Storage and supply rooms; walls, light and plumbing fixtures, accesses, and drains, etc. undergo frequent, irregular searches. These searches are documented. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 38. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 39. Daily procedures include: <ul style="list-style-type: none"> • Perimeter alarm system tests. • Physical checks of the perimeter fence. • Documenting the results. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (b)(7)(e) assigned the responsibility for documenting perimeter checks. Documentation is included on the shift report. |
| 40. Visitation areas receive frequent, irregular inspections. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Documentation supported frequent, random inspections of visiting area. |
| 41. An officer is assigned responsibility for ensuring the security inspection process covers all areas of the facility. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 42. The Maintenance Supervisor and Chief of Security or equivalent make monthly fence checks. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Maintenance Supervisor and Chief of Security conduct monthly fence checks. Checks are documented in the shift log and zone inspection reports. |

FACILITY SECURITY AND CONTROL

☒ **Meets Standard**

☐ **Does Not Meet Standard**

☐ **N/A**

☐ **Repeat Finding**

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

Rating of this standard was based on interviews with Detention Supervisor, Facility Operations Manager, and detention officers.

Perimeter and fence checks were on file and up to date.

Control Center is staffed continuously with staff who has received specialized training.

Policy is in place to protect the community, staff, contractors, volunteers, and detainees from harm by ensuring that facility security is maintained.

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

04/26/2012

Reviewer's Signature / Date

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|-------------------------------------|--|
| 1. Detainee funds and valuables are properly separated and stored. Detainee funds and valuables are accessible to designated supervisor(s) only. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainee funds and valuables are inventoried and controlled by designated Doyon-Akal JV (security contractor) staff. Access to the valuables/property storage areas are controlled by key authorizations. |
| 2. Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Large valuables are stored in a controlled access locked room located inside the Processing Area. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All detainee funds and valuables are inventoried and recorded on ICE approved forms: Property-Receipt Form (G-589); and a Baggage Check Form (I-77). |
| 4. (b)(7)(e) fficers are present during the processing of detainee funds and valuables, during admissions processing to the facility. (b)(7)(e) fficers verify funds and valuables. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (b)(7)(e) fficers count/verify funds. The count process is performed under recorded camera surveillance. |
| 5. For IGSA's and CDFs, Is the facility using a personal property inventory form that meets the ICE standard? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This is an SPC facility that uses ICE approved property forms. |
| 6. Staff give the detainee the original inventory form, filing copies in the detainee's detention file and the personal property container. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The detainee signs a completed inventory form attesting to its accuracy. Copies of the form are then: provided to the detainee; put in the A-file; and placed inside the detainee's sealed property storage bin. |
| 7. Staff forward an arriving detainee's medicine to the medical staff. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 8. Staff search arriving detainees and their personal property for contraband. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. Property discrepancies are immediately reported to the Chief of Security or equivalent. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 10. Staff follow written procedures when returning property to detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy addresses returning funds/valuables to transferees/releasees. |

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|-------------------------------------|--|
| 11. CDF/IGSA facility procedures for handling detainee property claims are similar to the ICE standard. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This is an SPC facility. Detainee property claims are handled according to policy and using approved ICE forms. Property claims for loss of or damage to properly receipted property are investigated with results provided to the detainee in writing. |
| 12. The facility attempts to notify an out-processed detainee that he/she left property in the facility. <ul style="list-style-type: none"> By sending written notice to the detainee's last known address; via certified mail; The notice states that the detainee has 30 days in which to claim the property, after which it will be considered abandoned. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Notification regarding left property is sent by certified mail to the detainee's last known or forwarding address advising the addressee such property has been discovered in the facility and they have 30 days to contact ICE to arrange for its shipment/pick-up. |
| 13. Staff obtain a forwarding address from each detainee. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainee forwarding addresses are gathered during the intake process. |
| 14. It is standard procedure for (b)(7)(C) officers to be present when removing/documenting the removal of funds from a detainee's possession. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Observations during the admissions process validated this practice. |
| 15. Staff issue and maintain property receipts (G-589s) in numerical order. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 16. Staff complete and distribute the G-589 in accordance with the ICE standard. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 18. Staff tag large valuables with both a G-589 and an I-77. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 19. The supervisor verifies the accuracy of every G-589. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Processing Area property supervisor verifies the accuracy of the completed G-589 form. Documentation is entered into an inventory logbook. |

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 20. The supervisor ensures that: <ul style="list-style-type: none"> • Detainee funds are, without exception, deposited into the cash box; • Every property envelope is sealed. • All sealed property envelopes are placed in the safe. • Large, valuable property is kept in the secured locked area. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 21. Staff tag every baggage/facility container with an I-77, completed in accordance with the ICE standard. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 22. Staff secure every container used to store property with a tamper-proof numbered strap. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Property storage bins are sealed with numbered 'tug tight' plastic strips. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 24. In SPCs, the Supervisory Immigration Enforcement Agent, accompanied by a detention staff member conducts a comprehensive weekly audit. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Comprehensive weekly audits of valuable properties are performed and documented by a Doyon-Akal JV line member and supervisor. This audit team (Captain and a line staff member) is comparable to the ICE staff members referenced in component. The standard states: "In SPCs ...without commissaries, a comprehensive weekly audit is to be completed jointly by the Detention Operations Supervisor ... and a detention staff member. The standard also states: "The chief of security or equivalent shall take the necessary steps, according to facility policy, to ensure that all detainee funds and valuables are accounted for." Facility policy states: "A comprehensive weekly audit is to be completed jointly by the first line and second line Supervisor." It is determined facility policy dictates the members of the weekly audit team. Therefore, the current practice of using a Doyon-Akal JV line staff and supervisor to conduct these weekly audits is allowed given the language of the standard. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Quarterly non-valuable property audits are conducted and documented in the Processing Area logbook. |
| 26. The facility positively identifies every detainee being released or transferred. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The positive identity of all transferees/releasees is established with a face-to-photo check by staff/supervisors processing the transfer/release. |
| 27. Staff routinely inform supervisors of lost/damaged property claims. Claims are properly investigated and missing or damaged property claim reports are filed. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---------|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

☒ **Meets Standard** ☐ **Does Not Meet Standard** ☐ **N/A** ☐ **Repeat Finding**

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

Interviews with Processing Area staff/supervisors; observation of the Processing Area intake/release procedures; observation of the property storage areas; and a review of logbooks support detainee personal property is safeguarded and controlled by a supervised and accountable system.

(b)(6), (b)(7)(c) / 04/26/2012
Reviewer's Signature / Date

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|-------------------------------------|-------------------------------------|--|
| 1. The hold room is situated in a location within the secure perimeter. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. The hold rooms are clean, in good repair, well ventilated, well lit, and all activating switches located outside the room. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Hold rooms were clean, well lit and properly ventilated. |
| 3. The hold rooms contain sufficient seating for the number of detainees held. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 4. No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside hold rooms. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. Hold room walls and ceilings are escape and tamper resistant. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 6. Detainees are not held in hold rooms for more than 12 hours. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Policy states that detainees may not be held in hold rooms for more than 12 hours. Outcome Measures Report indicates that 3% (373 out of 10,228) detainees were kept in hold rooms for longer than 12 hours during this reporting period. This was reported not as a common practice but rather an aberration to accommodate transportation schedules. |
| 7. Male and females detainees are segregated from each other at all times. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy states that females will be separated from males at all times. Females, however, are generally not housed as detainees at this facility. On rare occasion females may be held at the facility, for 1 - 2 hours, to accommodate a transportation schedule. They are never entered in the official count of the facility. |
| 8. Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees are pat searched and scanned by a metal detector to detect contraband prior to their placement into a hold room. |

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 11. When the last detainee has been removed, the hold room is inspected for the following: <ul style="list-style-type: none"> Cleaning. Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Logs reviewed confirmed that cleaning and security inspections of hold rooms are completed after the last detainee has been removed. |
| 12. (MANDATORY) There is a written evacuation plan. <ul style="list-style-type: none"> There is a designated officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (b)(7)e (b)(7)e as the designated officer responsible for detainees during evacuation or other emergencies. |
| 13. An appropriate emergency service is called immediately upon a determination that a medical emergency exists. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Facility has ICE Health Services Corps staff that serve as first responders. There is an intergovernmental agreement with Local 911 Dade County in place for additional medical services. |
| 14. Single occupant hold rooms contain a minimum of 37 square feet (7 unencumbered square feet for the detainee, 5 square feet for a combination lavatory/toilet fixture, and 25 square feet for a wheelchair turn-around area). <ul style="list-style-type: none"> If multiple-occupant hold rooms are used, there is an additional 7 unencumbered square feet for each additional detainee. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Immigration Enforcement Agent (IEA) provided inspector with documentation that single occupancy hold rooms are 59 square feet. The IEA documented that multiple occupancy rooms are within the prescribed square footage requirements of the standard. |
| 15. In SPCs designed after 1998 the hold rooms are equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They are: <ul style="list-style-type: none"> Compliant with the American Disabilities Act. Small hold rooms (1 to 14 detainees) have at least one combi-unit. Large hold rooms (15 to 49 detainees) are provided with at least two combi-units. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 16. In SPCs designed after 1998 the hold rooms have floor drain(s). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|-------------------------------------|---|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Facility does not house family units or juveniles. Females (without children) may be held for a minimum amount of time (1 - 2 hours) in hold rooms prior to transfer. Persons of advanced age would not be placed in hold rooms. |
| 19. Minors (under 18) are confined apart from adults, except for immediate relatives or guardians. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This facility does not house juveniles. |
| 20. Each detention facility maintains a detention log (manually or by computer) for each detainee placed in a hold cell. <ul style="list-style-type: none"> The log includes the required information specified in the standard. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires a detention log for each detainee placed in a hold cell. Documents were reviewed and were up to date. |
| 21. Officers provide a meal to any detainee detained in a hold room for more than six hours. <ul style="list-style-type: none"> Juveniles, babies and pregnant women have access to snacks, milk or juice. Meal are served to juveniles regardless of time in custody | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Meals are provided to detainees who are detained in hold rooms for longer than six hours. Meal service is logged. Facility does not accept juveniles or babies. |
| 22. Any detainee with disabilities, including temporary disabilities, will be housed in a manner that provides for his or her safety and security. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees with a significant disability are housed in the medical hold rooms. |
| 23. The maximum occupancy for the hold room will be posted. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 24. Before placing a detainee in a room, an officer shall observe each individual to screen for obvious mental or physical problems. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 25. Staff does not permit detainees to smoke in a hold room. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | This is a non-smoking facility. |
| 26. Officers closely supervise hold rooms through direct supervision, to ensure: <ul style="list-style-type: none"> Continuous auditory monitoring, even when the hold room is not in the officer's direct line of sight, and Visual monitoring at irregular intervals at least every 15 minutes, each time recording in the detention log, the time and officer's printed name and any unusual behavior or complaints under "Comments." Constant surveillance of any detainee exhibiting signs of hostility, depression, or similar behaviors. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Hold rooms are in direct line of sight to detention officers. Fifteen minute checks were logged, up to date and with commentary, when needed. Detainees exhibiting signs of hostility or questionable behavior are seen by health services staff. |

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

☒ **Meets Standard**

☐ **Does Not Meet Standard**

☐ **N/A**

☐ **Repeat Finding**

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

There are six large hold rooms which hold a maximum of 25 detainees in the Processing Area. There are four single cell hold rooms. After initial processing, detainees are moved to medical hold rooms.

The facility's Outcome Measures Report indicates that 373 detainees were held in hold rooms longer than 12 hours, therefore this component was rated "does not meet standard".

During the evaluation of this standard, detention officers and supervisors were interviewed, policy was reviewed, documentation was reviewed, the Processing Area was visited and detainees in hold cells were observed. The facility practices, procedures and policy indicate that the elements of this standard are incorporated into the daily operation of the facility.

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

04/26/2012

Reviewer's Signature / Date

PART 2 – 10. KEY AND LOCK CONTROL

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| 1. The security officer[s], or equivalent, has attended an approved locksmith training program. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility Locksmith attended training provided by the Bureau of Prisons. |
| 2. The security officer, or equivalent, has responsibility for all administrative duties and responsibilities relating to keys, locks etc. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3. The security officer, or equivalent, provides training to all employees in key and lock control. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ICE staff provides the training; the Locksmith approves the curriculum. |
| 4. The security officer, or equivalent, maintains inventories of all keys, locks and locking devices. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Inventories of all keys, locks and locking devices were reviewed. |
| 5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires a preventative maintenance program and documentation is maintained by the Locksmith. |
| 6. Facility policies and procedures address the issue of compromised keys and locks. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (b)(7)e |
| 7. The security officer, or equivalent, develops policy and procedures to ensure safe combinations integrity. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 8. Only dead bolt or dead lock functions are used in detainee accessible areas. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Appropriate locking devices are used in detainee accessible areas. |
| 9. Non-authorized locks (as specified in the Detention Standard) are not used in detainee accessible areas. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 10. The facility does not use grand master keying systems. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 11. All worn or discarded keys and locks cut up and properly disposed of. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Locksmith is the only employee authorized to cut up, grind down and dispose of worn or discarded keys. |
| 12. Padlocks and/or chains are not used on cell doors. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Neither padlocks nor chains were observed on cell doors or housing unit doors. |
| 13. The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to <ul style="list-style-type: none"> • Occupational Safety and Environmental Health Manual, Chapter 3 • National Fire Protection Association Life Safety Code 101. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | An annual inspection is completed to ensure that all doors to living quarters conform to the Occupational Safety and Health Administration (OSHA) and NFPA codes. |

PART 2 – 10. KEY AND LOCK CONTROL

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| 14. The operational key system sufficient to accommodate all the facility key rings including keys in use is located in a secure area. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Facility uses the 'Key Watcher' system. The key system is sufficient to accommodate all the key rings and is located in the Control Center. |
| 15. Procedures in place to ensure that key rings are: <ul style="list-style-type: none"> Identifiable Numbers of keys on the ring are cited? Keys cannot be removed from issued key rings | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (b)(7)e Keys are identifiable, the number of keys is cited on a key chit, and keys cannot be removed from issued key rings. |
| 16. Emergency keys are available for all areas of the facility. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Emergency keys are stored in the (b)(7)e |
| 17. The facility uses a key accountability system. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 18. Authorization is necessary to issue any restricted key. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A written form must be completed and signed by authorized ICE staff prior to issuance of a restricted key. |
| 19. Individual gun lockers are provided. <ul style="list-style-type: none"> They are located in an area that permits constant officer observation. In an area that does not allow detainee or public access. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | There are (b)(7)e gun lockers located in areas with constant officer observation. Areas are not accessible to detainees or the public. |
| 20. The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Keys are counted on each shift and documented on the shift report. |
| 21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. Detainees are not permitted to handle keys assigned to staff. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Training files were reviewed. Staff is trained with a curriculum approved by the Facility Operations Manager and Locksmith. |
| 22. Locks and locking devices are continually inspected, maintained, and inventoried. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 23. Each facility has the position of Security Officer. If not, a staff member appointed the collateral duties of security officer. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 24. The designated key control officer is the only employee who is authorized to add or remove a key from a ring. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 2 – 10. KEY AND LOCK CONTROL

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---------|
| 25. The splitting of key rings into separate rings is not authorized. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 2 – 10. KEY AND LOCK CONTROL

☒ **Meets Standard** ☐ **Does Not Meet Standard** ☐ **N/A** ☐ **Repeat Finding**

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

The Locksmith and Facility Operations Manager were interviewed. Documentation supported ongoing, effective key and lock controls. Monthly emergency key test reports, safe combination inspection reports, and the monthly maintenance reports were inspected.

The 'Key Watcher' system electronically records employee key issue and return. The reports are downloaded for supervisor review. Inspector observed key exchange. All policies and procedures were followed.

Inventories were inspected, staff was interviewed, training files were reviewed and key rings were checked. Adequate controls are in place and follow policy and procedure.

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

/ 04/26/2012

Reviewer's Signature / Date

PART 2 – 11. POPULATION COUNTS

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|-------------------------------------|--------------------------|--|
| 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. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Counts are scheduled at 4:00 A.M.; 8:00A.M.; 6:00 P.M.; and 10:00 P.M. There is a 10 hour gap between the 8:00 A.M. and 6:00 P.M. count. |
| 2. Activities cease or are strictly controlled while a formal count is being conducted. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | There is no detainee movement during count. |
| 3. There is a system for counting each detainee, including those who are outside the housing unit. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 4. Formal counts in all units take place simultaneously. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. Officers do not allow detainee participation in the count. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Counts are performed by two detention officers. Detainees are prohibited from participation. |
| 6. A face-to-photo count follows each unsuccessful recount. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires a face -to -photo count if a recount is necessary. |
| 7. Officers positively identify each detainee before counting him/her as present. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 8. Written procedures cover informal and emergency counts. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy covers all count types. |
| 9. The control officer (or other designated position) maintains an "out-count" record of all detainees temporarily out of the facility. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Processing Area officer is responsible for the "out count" of 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Training on count procedures is documented in training files. |

PART 2 – 11. POPULATION COUNTS

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

Staff interviews with the Detention Supervisor and Shift Commander, review of policy and observation of the count process on 04/25/2012 indicate that the facility has an ongoing, effective system of population counts and detainee accountability.

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

04/26/2012

Reviewer's Signature / Date

PART 2 – 12. POST ORDERS

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 1. Every fixed post has a set of Post Orders. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A post order is kept at each fixed post location. |
| 2. In SPCs and CDFs, Post Orders are arranged in the required six-part folder format. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Post orders are maintained in a binder arranged and separated by six tabs identifying each section. |
| 3. Each set contains the latest inserts (emergency memoranda, etc.) and revisions. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 4. One individual or department is responsible for keeping all Post Orders current with revisions that take place between reviews. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Facility Compliance Team department is responsible for keeping all post orders current. |
| 5. Review, updating, and reissuing of Post Orders occurs regularly and at least annually. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Documentation confirmed regular reviews and annual updates are completed. |
| 6. The facility administrator authorizes all Post Order changes. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Facility Administrator authorizes all post order changes. |
| 7. The facility administrator has signed and dated the last page of every section. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 8. A Post Orders master file is available to all staff. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Post orders are available to staff electronically on the facility's shared drive. |
| 9. Procedures keep Post Orders and logbooks secure from detainees at all times. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Post orders/logbooks are locked in a desk at each post location. |
| 10. Copies of the applicable Post Orders are retained at the post only if secure from detainee access. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A site specific post order is locked in a desk at each post location. |
| 11. Supervisors ensure that officers understand the Post Orders, regardless of whether the assignment is temporary, permanent, or due to an emergency. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Post orders are signed each time an officer is assigned a post. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Inspector observed the practice of detention officers signing post orders before beginning their assignment. |
| 13. Anyone assigned to an armed post qualifies with the post weapons before assuming post duty. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Armed post qualifications are documented in training records. |
| 14. Post Orders for armed posts, and for posts that control access to the institution perimeter, clearly state that: <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <div> <div></div> <div>(b)(7)e</div> </div> </div> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 15. Post Orders for armed posts provide instructions for escape attempts. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 2 – 12. POST ORDERS

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 16. The Post Orders for housing units track the daily event schedule. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy states that officers assigned to a housing unit must track the daily activity and event schedule. |
| 17. Housing unit post officers record all detainee activity in a log. The Post Orders include instructions on maintaining the logbook. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires that post orders include instructions on how to maintain the logbook. |

PART 2 – 12. POST ORDERS

☒ **Meets Standard** ☐ **Does Not Meet Standard** ☐ **N/A** ☐ **Repeat Finding**

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

During the evaluation of this standard, the detention supervisor, shift commander and detention officers were interviewed.

Post orders were observed, and were signed by the detention officers as well as a supervisor. The post order books were secured and out of reach of detainees. Post orders were specific to the assignment, with step-by-step procedures in sufficient detail to guide an officer assigned to that post for the first time. Post orders ensure that each officer assigned to a post have the opportunity to be aware of the procedures, duties, and responsibilities of that post.

(b)(6), (b)(7)(c) / 04/26/2012

Reviewer's Signature / Date

PART 2 – 13. SEARCHES OF DETAINEES

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 1. There are written policy and procedures governing searches of housing areas, work areas and of detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy governs the searching of housing units, 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy prohibits unnecessary force being used during searches, and preserves detainee dignity. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. Detainees are pat searched and screened by metal detectors routinely to control contraband. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees are screened by hand-held metal detectors, by the contraband team. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Strip searches are conducted in accordance with the provisions in this component. |

PART 2 – 13. SEARCHES OF DETAINEES

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Body cavity searches would be conducted in accordance with the provisions listed in this component. There have been no searches of this type during this rating period. |
| 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 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | "Dry cells" are only used when there is reasonable belief that contraband may be concealed, and only with proper authorization. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 10. Canines are not used in the presence of detainees | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Canines are not used at this facility. |

PART 2 – 13. SEARCHES OF DETAINEES

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

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

The Chief of Security was interviewed, policy read, and inspection logs reviewed during the evaluation of this standard. The facility has established a policy to search detainees in the least intrusive dignified, but effective, manner possible.

Strip and body cavity searches are only conducted when absolutely necessary, with the approval of senior staff.

Contraband found is inventoried, analyzed, stored and disposed of in accordance with policy.

Canines are not used at this facility.

(b)(6), (b)(7)(c) 04/26/2012
 Reviewer's Signature / Date

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

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| 1. The facility has a Sexual Abuse and Assault Prevention and Intervention Program. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Sexual abuse and assault prevention is addressed in a facility program. |

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

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 2. For SPCs and CDFs, the written policy and procedure has been approved by the Field Office Director. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The policy and procedure was approved by the Field Office Director on 04/12/2012. |
| 3. Tracking statistics and reports are readily available for review by the inspectors. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Tracking data was made readily available to this inspector. |
| 4. All staff are trained, during orientation and in annual refresher training, in the prevention and intervention areas required by the Detention Standard. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All staff is trained during initial orientation and annually in this area. Last staff training was held on 04/12/2012. |
| 5. Detainees are informed about the program in facility orientation and the detainee handbook (or equivalent). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees learn about the program during orientation, in the handbook, and through use of the Sexual Assault Awareness Information brochure. |
| 6. The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards. |
| 7. The Sexual Assault Awareness Information brochure is available for detainees. (Required in SPCs and CDFs.) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | There is a Sexual Assault Awareness Information brochure which is available for detainees. |
| 8. Detainees are screened upon arrival for “high risk” sexual assaultive and sexual victimization potential and housed and counseled accordingly. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees are screened on arrival by nurses as part of the medical/mental health screen. |
| 9. All incidents of sexual abuse or assault by a detainee on a detainee have been documented in the past year. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | There were no reported incidents of sexual abuse or assault by a detainee on a detainee since the last inspection. |
| 10. All incidents or allegations of sexual abuse or assault by staff on a detainee have been documented in the past year. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | There were no reported incidents of sexual abuse or assault by staff on a detainee since the last inspection. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires immediate intervention and reporting. |
| 12. When there is an alleged sexual assault, staff conduct a thorough investigation, gather and maintain evidence, and make referrals to appropriate law enforcement agencies for possible prosecution. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires an investigation, and if appropriate, referral to law enforcement for possible prosecution. |
| 13. When there is an alleged or proven sexual assault, the required notifications are promptly made. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires prompt notifications. |
| 14. Victims of sexual abuse or assault are referred to specialized community resources for treatment and gathering of evidence. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires outside referral, as appropriate. |

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

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All records are logged, tracked and maintained as required. Previous year's data was available. |

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

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

There were no reported incidents of detainee on detainee or staff on detainee sexual assault or abuse reported since the last inspection.

Policy and procedure is comprehensive, and training materials were made available.

(b)(6), (b)(7)(c) / 04/26/2012
Reviewer's Signature / Date

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| 1. Written policy and procedures are in place for special management units. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy describes procedures for the Special Management Unit (SMU). |
| 2. A detainee is placed in protective custody status in Administrative Segregation only when there is documentation that it is warranted and that no reasonable alternatives are available. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Documentation supports detainee placement in protective custody. Documentation is located in detainee files. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Disciplinary segregation placement is done after the disciplinary hearing panel has completed the reports and found detainee guilty. Inspector reviewed disciplinary reports. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Inspector observed a detainee at the Health Services Unit (HSU) completing a health care assessment for placement. Once assessment was completed, detainee was placed in the SMU. Supervisory staff met with the detainee and provided him with an orientation to the unit. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy outlines procedures for control and security of the SMU entrances, contraband, tools, and food carts. Staff was interviewed and was knowledgeable of procedures indicated in the component. |
| 6. The number of detainees confined to each cell or room does not exceed the capacity for which it was designed. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 7. Cells and rooms are well ventilated, adequately lit, appropriately heated and maintained in a sanitary condition at all times. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Permanent housing logs are maintained. Inspector reviewed the logs and the individual records completed on the I-888 Forms, which are also required by policy. |

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| <p>9. A permanent log is maintained in each SMU to record all activities concerning SMU detainees (meals served, recreation, visitors, etc.).</p> <p>In SPCs and CDFs, the SMU log records the detainee's name, A-number, housing location, date admitted, reasons for admission, tentative release date for detainees in Disciplinary Segregation, the authorizing official, and date released.</p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A permanent log is maintained, as well as the I-888 Forms which are completed on each detainee. The detainee's name and all of the requirements listed in this component are recorded in the log. |
| <p>10. In SPCs and CDFs, a separate log is maintained in the SMU that all persons visiting the unit must sign and record:</p> <ul style="list-style-type: none"> ▪ The time and date of the visit, and ▪ Any unusual activity or behavior of an individual detainee, with a follow-up memorandum sent through the facility administrator to the detainee's file. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Inspector reviewed the log of persons visiting the SMU. |
| <p>11. A Special Management Housing Unit Record is maintained on each detainee in an SMU:</p> <ul style="list-style-type: none"> ▪ In SPCs form I-888 (Special Management Housing Unit Record) is prepared immediately upon the detainee's placement in the SMU. ▪ In CDFs and IGSA facilities form I-888 or a comparable form is used. <p>In SPCs and CDFs:</p> <ul style="list-style-type: none"> ▪ By the end of each shift, the special housing unit officer records: <ul style="list-style-type: none"> ○ Whether the detainee ate, showered, exercised, and took any medication, and ○ Any additional information, for example, if the detainee has a medical condition, has exhibited suicidal or assaultive behavior, etc. ▪ When a health care provider visits an SMU detainee, he or she signs that individual's record, and the housing officer initials the record after all medical visits are completed and no later than the end of the shift. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Inspector reviewed the files of all six detainees in the SMU. All reports, forms and logs were complete per the requirements listed in this component. |

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Inspector reviewed a sample of detention files of detainees who had been in protective custody, administrative segregation and disciplinary segregation. At the time of this inspection, there were no detainees housed in disciplinary segregation. Interview with SMU staff indicated established procedure is in place requiring SMU housing release records be included in the A-file. |
| 13. There are written policy and procedures concerning the property detainees may retain in each type of segregation. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Property forms were reviewed. Detainees signed the form indicating compliance with this component. The handbook outlines what property the detainee may retain while in the SMU. |
| 14. There are written policy and procedures concerning privileges detainees may have in each type of segregation. (In Administrative Segregation, detainees generally receive the same general privileges as detainees in the general population, as is consistent with available resources and safety and security considerations.) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy is in place which outlines privileges afforded detainees in administrative segregation. Inspector observed a detainee completing a shower, another detainee watching TV in the dayroom, and another detainee at outside recreation. |
| 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). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Inspector reviewed the log book for the morning security checks. All checks were in order. When fifteen minute checks are warranted, detainee would be assigned to the HSU. |
| 17. The shift supervisor sees each segregated detainee daily, including weekends and holidays. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Logbooks confirm that the shift supervisor sees each detainee daily. Cross reference was done with the detainee file and the I-888 Form. |
| 18. The facility administrator (or designee) visits each SMU daily. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| 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). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A Health Services provider visits each detainee daily in the SMU. |
| 20. Detainees in SMUs are provided three nutritionally adequate meals per day, ordinarily from the general population menu. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees may shave and shower daily. Laundry is exchanged daily and bedding is exchanged weekly. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees in the SMU are not denied clothing, mattresses, linens or a pillow. When a detainee is unruly/disturbed, he is placed in the HSU for required treatment, control and follow-up. |
| 23. Detainees in an SMU may write and receive letters the same as the general population. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Inspector observed the mail distribution which is the same as that for the general population. |
| 24. Detainees in an SMU ordinarily retain visiting privileges. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff was not aware of any general visit denials since the last inspection. Staff interviewed advised that ICE staff would be contacted if a visit was denied. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff interviewed advised that no visits have been disallowed. |

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| 27. Under no circumstances is a detainee permitted to participate in general visitation while in restraints. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 29. In SPCs and CDFs, violent and disruptive detainees are limited to non-contact visits and, in extreme cases, not permitted to visit. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 30. Ordinarily, detainees in SMUs are not denied legal visitation. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees in SMU retain the same visiting privileges as detainees in the general population. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy allows SMU detainees to have clergy visits. Logs verified clergy visits. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires reading material to be provided in accordance with the standard. Detainees were observed with reading materials while in the dayroom. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Documentation supported detainee access to legal materials follows the requirements outlined in this component. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff interviews and documentation supported that detainees in administrative segregation are escorted to the law library. |
| 36. Policy and procedures provide for legal material to be brought to individuals in Disciplinary Segregation under certain circumstances. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 37. Any denial of access to the law library is always: <ul style="list-style-type: none"> Supported by compelling security concerns, For the shortest period required for security, and Fully documented in the SMU housing logbook. ICE/DRO is notified every time law library access is denied. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 38. Recreation for detainees in the SMU is separate from the general population. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The SMU has a separate indoor recreation area and a separate outdoor recreation area. Detainees were observed using each area. |
| 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.) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy addresses SMU detainees being provided services independently. Law library access may be provided to two detainees at the same time if they are in the same classification. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees are offered recreation daily. The SMU has an indoor recreation area and an outdoor area. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Detention Supervisor advised that there was one recreation denial in the SMU during this reporting period. Appropriate reviews were completed and documented. |

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| <p>43. Denial of recreation privileges for more than 15 days requires the concurrence of the facility administrator and the health authority. It is expected that such denials shall rarely occur, and only in extreme circumstances.</p> <p>The facility notifies ICE/DRO when a detainee is denied recreation privileges for more than 15 days.</p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| <p>44. Ordinarily, detainees in Administrative Segregation have telephone access similar to detainees in the general population, in a manner consistent with the special security and safety requirements of an SMU. Detainees in Disciplinary Segregation may be restricted from using telephones to make general calls as part of the disciplinary process; however, ordinarily, they are permitted to make direct and/or free and legal calls as described in the Detention Standard on Telephone Access, except for compelling and documented reasons of safety, security, and good order.</p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <p>Detainees in administrative segregation retain telephone privileges identical to the general population. Inspector observed detainees on the phone and reviewed documentation supporting telephone privileges were consistent with the general population.</p> |
| <p>45. Ordinarily, a written order is completed and approved by a supervisor before a detainee is placed in Administrative Segregation. If exigent circumstances make that impracticable, the order is prepared as soon as possible.</p> <p>A copy of the order is given to the detainee within 24 hours, unless delivery would jeopardize the safety, security, or orderly operation of the facility.</p> <p>If the segregation is for protective custody, the order states whether the detainee requested the segregation and whether the detainee requests a hearing.</p> <p>The order remains on file in the SMU until the detainee is released from the SMU, at which point the releasing officer records the date and time of release on the order and forwards it to the chief of security or supervisor for the detainee's detention file.</p> <p>(An Administrative Segregation Order is not required for a detainee awaiting removal, release, or transfer within 24 hours.)</p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <p>Inspector reviewed detainee files which supports that a supervisory review takes place before placement in the SMU. Records are maintained in the detainee's A-file.</p> |

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| <p>46. There are implemented written procedures for the regular review of all detainees in Administrative Segregation.</p> <p>A supervisor conducts a review within 72 hours of the detainee's placement in Administrative Segregation to determine whether segregation is still warranted. The review includes an interview with the detainee, and a written record is made of the decision and the justification. In SPCs and CDFs, the Administrative Segregation Review Form (I-885) is used.</p> <p>If a detainee is segregated for the detainee's protection, but not at the detainee's request, continued detention requires the authorizing signature of the facility administrator or assistant facility administrator on the I-885.</p> <p>When a detainee has spent seven days in Administrative Segregation, and every week thereafter for the first 60 days and at least every 30 days thereafter, a supervisor conducts a similar review, including an interview with the detainee, and documents the decision and justification.</p> <p>A reviewing authority who concludes a detainee should be removed from Administrative Segregation, submits that recommendation to the facility administrator (or designee) for approval.</p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff interviews confirmed that procedures are in place for the review process. Inspector reviewed detainee files which confirmed that reviews are done within established policy/procedures and requirements listed in this component. |
| <p>47. A copy of the decision and justification for each review is given to the detainee, unless, in exceptional circumstances, this provision would jeopardize security. The detainee is given an opportunity to appeal a review decision to a higher authority within the facility.</p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Inspector reviewed reports which documented that copies of decisions were given to the detainee. |
| <p>48. After seven consecutive days in Administrative Segregation, the detainee may exercise the right to appeal to the facility administrator the conclusions and recommendations of any review conducted. The detainee may use any standard form of written communication (for example, detainee request form), to file the appeal.</p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainee files were reviewed which verified that detainees may appeal conclusions and recommendations of any review conducted. |
| <p>49. If a detainee has been in Administrative Segregation for more than 30 days and objects to this status, the facility administrator reviews the case to determine whether that status should continue, taking into account the views of the detainee. A written record is made of the decision and the justification.</p> <p>A similar review is done every 30 days thereafter.</p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Detention Supervisor was not aware of any detainees who were in administrative segregation for more than 30 days since the last inspection. Policy is consistent with the standard. |

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires a signed copy of the review be sent to the assigned Supervisory Detention and Deportation Officer (SDDO). The SDDO will forward the packet to Unit Chief for possible transfer. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy limits sanctions to 60 days for a single incident. The handbook outlines the procedure. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy is in place to ensure a detainee is provided a written copy of the disciplinary panel recommendation within 24 hours. |

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| <p>55. The facility has implemented written procedures for the regular review of all Disciplinary Segregation cases.</p> <p>A supervisor interviews and reviews the status of each detainee in Disciplinary Segregation every seven days and documents his or her findings on a Disciplinary Segregation Review Form (I-887).</p> <p>At each formal review, the detainee is to be given a written copy of the reviewing officer's decision and the basis for this finding, unless institutional security would be compromised.</p> <p>The reviewer may recommend the detainee's early release upon finding that Disciplinary Segregation is no longer necessary to regulate the detainee's behavior. Early release and return to the general population requires approval of the facility administrator.</p> <p>All review documents are placed in the detainee's detention file.</p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <p>There were no detainees in disciplinary segregation. Policy is in place to ensure that all disciplinary segregation cases are regularly reviewed. Inspector reviewed detainee files which included case reviews.</p> |

PART 2 – 15. SPECIAL MANAGEMENT UNITS

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

The SMU housed six detainees during the inspection. The detainees were in protective custody or administrative segregation status.

Detainee files were reviewed; and interviews were conducted with officers and supervisors. Staff was knowledgeable of expected practices and policies. Log books were orderly and up to date. Individual detainee records were up to date and comprehensive.

Inspector observed a detainee admission to the SMU after being assessed at the HSU.

Detainees in protective custody status have been reviewed by classification to ensure that no reasonable alternatives for placement exist.

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

04/26/2012

Reviewer's Signature / Date

PART 2 – 16. STAFF-DETAINEE COMMUNICATION

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

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 1. The ICE/DRO Field Office Director ensures that weekly announced and unannounced visits occur. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. Detention Staff and Deportation Staff conduct scheduled weekly visits with detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ICE staff conducts visits to housing units every Thursday. |
| 3. Scheduled visits are posted in ICE/DRO detainee housing areas. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The visiting schedule and system to request additional visits are posted in the housing units. |
| 4. Visiting ICE staff observe and note current climate and conditions of confinement. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ICE staff addresses any condition of confinement issues with the unit officer and supervisory staff. |
| 5. ICE/DRO Detainee Request Forms are available for use by ICE/DRO detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 6. The facility treats detainee correspondence to ICE/DRO staff as Special Correspondence. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Letters sent to ICE/Deportation Removal Officer (DRO) staff are processed as special correspondence. |
| 7. A secure box is located in an accessible location for detainee's to place their Detainee Request Forms. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Secure mail box locations are in the: dining room; Special Management Unit; and the health care unit. Detainees can mail their detainee request forms daily. |
| 8. Only ICE staff are able to retrieve the contents of the secure box containing Detainee Request Forms, | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Only the Grievance Officer may open the secure mail box. |
| 9. ICE/DRO staff respond to a detainee request from a facility within 72 hours and document the response in a log. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Grievance Officer (ICE staff) responds to requests within one business day. The responses are documented in a log. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 11. OIG Hotline Informational Posters are mounted in all appropriate common areas (recreation, dining, etc.) and, in SPCs and CDFs, in all housing areas. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 12. Daily telephone serviceability checks are documented in the housing unit logbook. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Daily phone serviceability checks are logged into the unit log book, and were reviewed. |

PART 2 – 16. STAFF-DETAINEE COMMUNICATION

☒ **Meets Standard**

☐ **Does Not Meet Standard**

☐ **N/A**

☐ **Repeat Finding**

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

The Grievance Officer was interviewed, and policy reviewed concerning this standard.

ICE detention staff is assigned to this facility and have regular contact with detainees. Detainees may send confidential requests to staff and receive a prompt response.

Telephone function is checked and logged daily, and detainees are advised of how to call the OIG Hotline number.

Detainees were observed interacting with several staff.

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

04/26/2012

Reviewer's Signature / Date

PART 2-17. TOOL CONTROL

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 1. (MANDATORY) There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Facility Operations Manager is responsible for developing tool control procedure and accountability. Tools are located outside the secure perimeter in the warehouse. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Tools are received and inventoried at the warehouse, which is located outside the secure perimeter. There are established procedures for entry/exit of tools inside the secure perimeter. Hazardous tools are immediately secured upon receipt. |
| 3. (MANDATORY) The use of tools, keys, medical equipment, and culinary equipment is controlled. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Tools were inspected in the kitchen and health services unit. Documentation was reviewed which supported a security and maintenance inventory. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. Tool inventories are required for: <ul style="list-style-type: none"> • Facility Maintenance Department • Medical Department • Food Service Department • Electronics Shop • Recreation Department • Armory | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Recreation department is not issued tools. All other areas in this component are outside the secure perimeter. Policy requires that an inventory is done in these areas. Inspector reviewed documentation. |
| 6. Tool Inventories are conspicuously posted on all tool boards, tool boxes and tool kits. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 7. The facility has a policy for the regular inventory of all tools. <ul style="list-style-type: none"> • The policy sets minimum time lines for physical inventory and all necessary documentation. • ICE facilities use AMIS bar code labels when required. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires weekly inventory of food service tools and a monthly inventory of tools in the medical area. Inventories are maintained by the Facility Operations Manager, using the 'Sunflower' system. Tools are not bar coded. This facility is not required to use AMIS bar codes on its tools. |

PART 2-17. TOOL CONTROL

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 8. The facility has a tool classification system. Tools are classified according to: <ul style="list-style-type: none"> Restricted (dangerous/hazardous) Non Restricted (non-hazardous). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Restricted tools are classified as A; non-restricted are classified as B. |
| 9. Department heads are responsible for implementing proper tool control procedures as described in the standard. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 10. There are policies and procedures in place to ensure that all tools are properly marked and readily identifiable. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy specifies storage and inventory guidelines for tools too small to etch or mark. |
| 11. The facility has an approved tool storage system. <ul style="list-style-type: none"> The system ensures that all stored tools are accountable. Tools are stored on shadow boards in which the shadows resemble the tool. Shadow boards have a white background. Restricted tools are shadowed in red. Non-restricted tools are shadowed in black. Commonly used tools (tools that can be mounted) are stored in such a way that missing tools are readily noticed. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Tool storage system addresses the bulleted items listed in the component. |
| 12. Tools removed from service have their shadows removed from shadow boards. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Tools removed from service for repair or replacements are replaced with a chit until tool is repaired. |
| 13. Tools not adaptable to a shadow board are stored in a locked drawer or cabinet. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 14. Sterile packs are stored under lock and key. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 15. Each facility has procedures for the issuance of tools to staff and detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees are not issued tools for any reason. |
| 16. There are policies and procedures to address the issue of lost tools. The policy and procedures include: <ul style="list-style-type: none"> Verbal and written notification. Procedures for detainee access. Necessary documentation/review for all incidents of lost tools. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 17. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 2-17. TOOL CONTROL

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 19. Hoses longer than three feet in length are classified as a restricted tool. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Hoses are considered a restricted tool. |
| 20. Scissors used for in-processing detainees are tethered to the furniture (e.g. table, counter, etc.) where they are used. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | There are no scissors in the Processing Area. |

PART 2-17. TOOL CONTROL

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

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

The Facility Operations Manager was interviewed. He is responsible for the orderly facility operations governing control of tools, culinary utensils and medical and dental instruments, equipment, and supplies.

Observation in the kitchen, health services area and review of inventory logs confirm that policies and practices are in place to ensure protection of detainees, staff, contractors, and volunteers from harm.

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

04/26/2012

Reviewer's Signature / Date

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| 1. (MANDATORY) The facility has a Use of Force Policy. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Facility has a use of force policy. |
| 2. Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy outlines situations when immediate use of force is authorized. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy states that when the detainee is in an area that is isolated, staff shall take time to assess the possibility of resolving the situation without resorting to force. |
| 4. Written policy asserts that calculated rather than immediate use of force is feasible in most cases. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. The facility subscribes to the prescribed Confrontation Avoidance Procedures. • Ranking detention official, health professional, and others confer before every calculated use of force. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy identifies the Confrontation Avoidance Procedures. Appropriate staff members confer, when possible, before an application of a calculated use of force. |
| 6. When a detainee must be forcibly moved and/or restrained and there is time for a calculated use of force, staff use the Use-of-Force Team Technique. • Under staff supervision. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy dictates that the use of force team is used in calculated use of force situations and outlines the procedures. The incident is supervised. |
| 7. Staff members are trained in the performance of the Use-of-Force Team Technique. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Training records verify that all staff is trained in the use of force team technique. |
| 8. All use-of-force incidents are documented and reviewed. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | According to the Supervisory Detention and Deportation Officer, calculated uses of force incidents are videotaped. Documentation follow-up of these incidents, as required in the component, was completed. |

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 10. Staff: <ul style="list-style-type: none"> Does not use force as punishment. Attempts to gain the detainee's voluntary cooperation before resorting to force Uses only as much force as necessary to control the detainee. Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy addresses all bulleted items listed in the component. |
| 11. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy states that the medical authority must authorize the use of medication for restraint purposes. |
| 12. (MANDATORY) Use-of-Force Teams follow written procedures that attempt to prevent injury and exposure to communicable disease(s). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Written procedures are in place directing use of force teams to prevent or minimize injury and exposure to bodily fluid. |
| 13. Standard procedures associated with using four/five point restraints include: <ul style="list-style-type: none"> Soft (nylon/leather) restraints. Dressing the detainee appropriately for the temperature. A bed, mattress, and blanket/sheet. Checking the detainee at least every 15 minutes. Logging each check. Repositioning detainee often enough to prevent soreness or stiffness. Medical evaluation of the restrained detainee twice per eight-hour shift. When qualified medical staff are not immediately available, staff position the detainee "face-up." | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy addresses all of the bulleted items listed in this component. |
| 14. The shift supervisor monitors the detainee's position/condition every two hours. He/she allows the detainee to use the restroom at these times under safeguards. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires that the shift supervisor monitors the detainee's position every two hours. |
| 15. All detainee checks are logged. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 16. In immediate-use-of-force situations, officers contact medical staff once the detainee is under control. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|-------------------------------------|--|
| 17. When the Facility Administrator authorizes use of non-lethal weapons: <ul style="list-style-type: none"> Medical staff are consulted before staff use pepper spray/non-lethal weapons. Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires notification of medical staff unless escalating tensions require immediate action. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 19. If Intermediate Force Weapons are stored in the Special Management Unit (SMU), they are stored and maintained the same as Class R tools. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Intermediate Force Weapons are not stored in the Special Management Unit (SMU). |
| 20. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> Medical personnel are consulted | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Facility does not house female detainees. |
| 21. Protective gear is worn when restraining detainees with open cuts or wounds. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 22. Staff document every use of force, including what type of restraints was used during the incident. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Uses of force forms were reviewed. |
| 23. It is standard practice to review any use of force and the non-routine application of restraints. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Command staff reviews all use of force incidents. |
| 24. All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. <ul style="list-style-type: none"> Specialized training is given to officers ensuring they are certified in all devices approved for use. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 26. The use of canines is restricted to contraband detection purposes only. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There are no canines at this facility. |
| 27. The officers are thoroughly trained in the use of soft and hard restraints. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 28. In SPCs, the Use of Force form is used. In other facilities (IGSAs / CDFs) this form or its equivalent is used. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Use of force form is used. |

PART 2 – 18. USE OF FORCE AND RESTRAINTS

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

Remarks: (Record significant facts, observations, other sources used, etc.)

The inspector reviewed policies and observed practices. The Shift Commander and Detention Supervisors were interviewed and use of force documents were reviewed. Documentation supports the procedures outlined in the policies. Training records verify use of force training.

The use of force continuum is a five-level model used to illustrate the levels of force staff may use to gain control of the detainee. All staff is trained to follow this model.

Documentation supports that all reasonable efforts are used to resolve a situation before use of force is necessary. Procedure is in place for the protection of staff, detainees, and the prevention of escape or serious property damage.

Facility does not use unauthorized/unsafe types of force. Training curriculum verified staff is trained in proper use of force techniques.

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

04/26/2012

Reviewer's Signature / Date

Performance-Based National Detention Standards

Section III ORDER

19 Disciplinary System

PART 3 – 19. DISCIPLINARY SYSTEM

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| 1. The facility has a written disciplinary system using progressive levels of reviews and appeals. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. The facility rules state that disciplinary action shall not be capricious or retaliatory. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainee handbook documents that disciplinary action will not be retaliatory. |
| 3. Written rules prohibit staff from imposing or permitting the following sanctions: <ul style="list-style-type: none"> • corporal punishment • deviations from normal food service • clothing deprivation • bedding deprivation • denial of personal hygiene items • loss of correspondence privileges • deprivation of legal access and legal materials • deprivation of physical exercise | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All of the bulleted items are addressed in the handbook. |
| 4. The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. The following items are conspicuously posted in Spanish and English or other dominate languages used in the facility: <ul style="list-style-type: none"> • Rights and Responsibilities • Prohibited Acts • Disciplinary Severity Scale • Sanctions | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy and practice encourage informal resolutions for minor offenses. |
| 7. Incident Reports and Notice of Charges are promptly forwarded to the designated supervisor. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 8. Incident Reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before investigations end. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. An intermediate disciplinary process is used to adjudicate minor infractions. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The intermediate process is described in the policy. |

PART 3 – 19. DISCIPLINARY SYSTEM

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| 10. A disciplinary panel (or equivalent in IGSA's) adjudicates infractions. The panel: <ul style="list-style-type: none"> • Conducts hearings on all charges and allegations referred by the UDC • Considers written reports, statements, physical evidence, and oral testimony • Hears pleadings by detainee and staff representative • Bases its findings on the preponderance of evidence • Imposes only authorized sanctions | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy addresses all of the bulleted items listed in this component. |
| 11. A staff representative is available if requested for a detainee facing a disciplinary hearing | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy states that a staff representative is available. The facility handbook and National Detainee Handbook address the issue of representation. |
| 12. The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy is consistent with the standard. |
| 14. Written procedures govern the handling of confidential-source information. Procedures include criteria for recognizing "substantial evidence". | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 3 – 19. DISCIPLINARY SYSTEM

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

Interviews with the detention supervisors, shift commanders, and detention officers confirm that policies and procedures are in place to promote 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 that do not.

Inspector reviewed disciplinary reports and the disciplinary checklist which confirmed that policy and practice are in effect. Signatures for all documents were up to date and fulfill the requirements of the policy.

There were no detainees in disciplinary segregation.

| | |
|----------------------|-------------------|
| (b)(6), (b)(7)(c) | <u>04/26/2012</u> |
| Reviewer's Signature | / Date |

Section IV CARE

20 Food Service

21 Hunger Strikes

22 Medical Care

23 Personal Hygiene

24 Suicide Prevention and Intervention

25 Terminal Illness, Advance Directives, and Death

PART 4 – 20. FOOD SERVICE

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Food Service Administrator (FSA) has 20 plus years of restaurant/facility dietary experience, and is currently licensed by the National Registry of Food Safety Professionals. |
| 2. The Cook Foreman is on duty on days when the FSA is off duty and vice versa. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Each food service employee has a file documenting the training received and the instructor's signature validating its delivery. |
| 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 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Knives are stored in a locked cage, behind a locked door. All tools are stored on a shadow board. The tool inventory is reconciled twice each day by the FSA or Assistant Food Service Administrator (AFSA). The FSA or AFSA maintains the knife cabinet/room keys and is personally responsible for signing these tools in and out. Knives are inventoried and stored in accordance with the 'Tool Control' standard. |
| 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 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Knives are only used in a secure cutting room and they are tethered to the work station. Detainees using knives are under staff monitoring. |
| 6. Special procedures (when necessary) govern the handling of food items that pose a security threat. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 7. Operating procedures include daily searches (shakedowns) of detainee work areas. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 8. The FSA monitors staff implementation of the facility population count procedures. These procedures are in writing. Staff are trained in count procedures. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy addresses count procedures and staff responsibility. |

PART 4 – 20. FOOD SERVICE

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All detainee workers are approved food handlers. The FSA/AFSA visually inspects each worker, before their shift, for visible health and/or personal hygiene concerns. These inspections are documented. Detainee clothing and grooming practices subscribe to the expectation of the standard. |
| 10. The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 11. The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Each detainee job has a post description. The FSA or AFSA instructs newly assigned workers in the specific rules, duties and responsibilities of their position. This instruction is documented. |
| 12. During orientation and training session(s), the Cook Supervisor (CS) explains and demonstrates: <ul style="list-style-type: none"> • Safe work practices and methods. • Safety features of individual products/ pieces of equipment. • Training covers the safe handling of hazardous material[s] the detainee are likely to encounter in their work. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Each detainee job position receives orientation and training on work rules, equipment and safety/sanitation schedule and cleaning procedures relative to their assignment. |
| 13. The Cook Foreman documents all training in individual detainee detention files. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 14. Detainees at SPCs and CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSA's are subject to local and State rules and regulations regarding detainee pay. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees receive three hot meals every day. Meal times are: 6:00 A.M.; 11:00 A.M.; and 4:00 P.M. |
| 16. For cafeteria-style operations, a transparent "sneeze guard" protects both the serving line and salad bar line. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 17. The facility has a standard 35-day menu cycle. IGSA's use a 35 day or similar system for rotating meals. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 4 – 20. FOOD SERVICE

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 18. (MANDATORY) A registered dietitian shall conduct a complete nutritional analysis that meets U.S. Recommended Daily Allowances (RDA), at least annually, of every master-cycle menu planned by the FSA. The dietitian must certify menus before they are incorporated into the food service program. If necessary, the FSA shall modify the menu in light of the nutritional analysis to ensure nutritional adequacy. The menu will need to be revised and re-certified by the registered dietitian in that event. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A registered dietitian/nutritionist completes a nutritional analysis of the master cycle menu annually. Suggested changes are accommodated into the cycle menu. There have been no such adjustments since the last inspection. |
| 19. The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 20. The Cook Foreman has the authority to change menu items if necessary. <ul style="list-style-type: none"> If yes, documenting each substitution, along with its justification, with copy to the FSA | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All menu substitutions and justifications are recorded. The FSA is provided a copy of the documentation. |
| 21. All staff and volunteers know and adhere to written "food preparation" procedures. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Recipe cards are available for reference. Doyon-Akal JV has established food preparation procedures. They are practiced in meal preparation. |
| 22. A Common Fare menu available to detainees, at no charge, whose dietary requirements cannot be met on the main. <ul style="list-style-type: none"> Changes to the planned Common Fare menu can be made at the facility level. Hot entrees are offered three times a week. The Common Fare menus satisfy nutritional recommended daily allowances (RDAs). Staff routinely provide hot water for instant beverages and foods. <ul style="list-style-type: none"> Common Fare meals are served with: Disposable plates and utensils. Reusable plates and utensils. Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the Common Fare diet items. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainee participation in a Common Fare menu is documented on an 'Authority for Common Fare Participation' form. Common Fare meals come pre-packaged. In the event some preparation for these meals becomes necessary, utensils specifically dedicated for Common Fare are used. |
| 23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 24. A supervisor at the command level must approve a detainee's removal from the Common Fare Program. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | At this facility removal from participation in the Common Fare Program is authorized by the Chaplain and the OIC. |

PART 4 – 20. FOOD SERVICE

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Chaplain provides an annual calendar of religious dates/ceremonial meals. |
| 26. The Common Fare Program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. <ul style="list-style-type: none"> Muslims fasting during Ramadan receive their meals after sundown. Jews who observe Passover but do not participate in the Common Fare Program receive the same Kosher-for- Passover meals as those who do participate. Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All of the bullet points listed in this component are honored by dietary practices. |
| 27. The food service program addresses medical diets. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 28. Satellite-feeding programs follow guidelines for proper sanitation. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 29. Hot and cold foods are maintained at the prescribed, "safe" temperature(s) as served. See Detention Standard on Food Service for guidance. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Hot and cold food temperature readings are within prescribed ranges specified in the standard. |
| 30. All meals provided in nutritionally adequate portions. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Observation of food trays prepared for the lunch meal on 04/25/2012 revealed adequate portions are being served. |
| 31. Food is not used to punish or reward detainees based upon behavior. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 32. The food service staff instruct detainee volunteers on: <ul style="list-style-type: none"> Personal cleanliness and hygiene; Sanitary techniques for preparing, storing, and serving food, and; The sanitary operation, care, and maintenance of equipment. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainee instruction on the bullet points listed in this component is delivered and documented. |
| 33. Everyone working in the food service department complies with food safety and sanitation requirements. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy addresses weekly inspection schedules and staff responsibilities. |

PART 4 – 20. FOOD SERVICE

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 35. Reports of discrepancies are forwarded to the Facility Administrator or designated department head and corrective action is scheduled and completed. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Inspection findings/discrepancies are immediately reported to the Facility Manager of Operations. That individual is responsible for implementing corrective action. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Dishwashing machine temperatures are recorded at breakfast, lunch and dinner. Temperature ranges are within the established guidelines outlined in the standard. |
| 37. (MANDATORY) Staff document the results of every refrigerator/ freezer temperature check, in accordance with the Detention Standard on Food Service. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Refrigerator/freezer temperatures are recorded daily at: 4:30 A.M.; 12:30 P.M.; and 7:00 P.M. Temperature ranges are within the established guidelines outlined in the standard. |
| 38. The cleaning schedule for each food service area is conspicuously posted. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Cleaning/sanitation schedules are posted at several locations throughout the kitchen. |
| 39. Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The FSA or AFSA meets, inspects and approves all arriving shipments as undamaged and sanitary prior to signing the invoice. |
| 40. Storage areas are locked when not in use. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 41. Food service personnel conduct shakedowns along with detention staff. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 42. <u>In SPCs only:</u> The ICE supervisor on duty ensures that ICE officers participate in dining room supervision. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Security staff is present during meals in the dining room. |
| 43. Menus are certified by a registered dietitian prior to being incorporated into the Food Service Program. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Menus are certified by a registered dietitian/nutritionist. |
| 44. <u>In SPCs only:</u> the FSA prepares quarterly cost estimates for the Common Fare Program. This quarterly estimate is factored into the quarterly budget. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | At this facility the FSA prepares monthly cost estimates for the Common Fare Program. |
| 45. When required, only food service staff prepare the sack lunches for detainee transportation. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Sack lunches are provided to detainees and staff on transports occurring during scheduled meal times. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 47. Staff comply with the ICE requirements for "food receipt and storage. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 4 – 20. FOOD SERVICE

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| 48. Stock inventory levels are monitored and adjusted to correct overage and shortage problems. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 49. Staff comply with all ICE Housekeeping, Storeroom/Refrigerator requirements. Identify and explain any shortcomings. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 50. Dining room facilities and operating procedures will provide sufficient space and time for detainees to eat meals in a relatively relaxed, unregimented atmosphere. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Lunch seatings were timed on 04/24/2012. Each cycle lasted approximately 20 minutes. Detainees interviewed registered no substantive concerns about the time allowed to eat their meals or dining room conditions. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Commercial Appliance Parts and Service conduct annual inspections of kitchen facilities and equipment to assess compliance with current federal/state/local safety and code requirements. The last inspection was conducted 03/12/2012. No concerns were noted. |
| 52. Personnel inspecting the food service department shall note needed corrective action(s), if any, in a written report to the Facility Administrator. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Material Safety Data Sheet(s) (MSDS), for all hazardous materials used in the kitchen, are available in multiple locations in the kitchen. |
| 54. (MANDATORY) The FSA is responsible for pest control in the food service department, including contracting the services of an outside exterminator. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Guarantee Floridian is the contractual pest control vendor. Infestation/prevention spraying is performed every two weeks. |

FOOD SERVICE

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

Interviews with the FSA, AFSA and dietary security staff; inspection of kitchen preparation and storage areas; review of menu cycles and certification, annual inspection documentation, the Common Fare Program, and log book temperature entries; review of detainee and staff training modules and training documentation; observation of meal preparation and serving; and observation of cleaning/sanitation procedures gave testament that detainees are provided a nutritionally balanced diet that is prepared and served in a sanitary and hygienic environment.

(b)(6), (b)(7)(c) 04/26/2012
 Reviewer's Signature / Date

PART 4 – 21. HUNGER STRIKES

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires a detainee referral to the health service unit (HSU) when he has not eaten for 72 hours. |
| 2. Facility immediately reports via the chain of command a hunger strike to ICE/DRO. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ICE is immediately informed. |
| 3. The facility has established procedures to ensure staff respond immediately to a hunger strike. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff is required to initiate hunger strike procedures when a detainee has not eaten for 72 hours. |
| 4. Policy and procedure require that staff isolate a hunger-striking detainee from other detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The hunger striker is housed in the special housing unit or the Health Service Unit's Short Stay Unit (SSU). |
| 5. Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Medical personnel may place a hunger striker in the SSU. |
| 6. Medical staff record the weight and vital signs of a hunger-striking detainee at least once every 24 hours. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Vital signs are recorded twice per day, and weight once per day. |
| 7. The facility medical authority obtains a hunger striker's consent before medical treatment. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All examinations and treatments require the detainee's informed consent. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Medical personnel must attempt to secure a signed refusal of treatment form. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff physically delivers three meals per day to the hunger striker. Policy requires these offerings be documented. |
| 10. Staff maintain the hunger striker's supply of drinking water/other beverages. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff provides an adequate supply of drinking water and offers other beverages. |
| 11. During a hunger strike, staff remove all food items from the hunger striker's living area. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All food not authorized by the medical director is removed from the cell. |
| 12. Staff are directed to record the hunger striker's fluid intake and food consumption on the Hunger Strike Monitoring Form I-839 or equivalent. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff records food and fluid intake on the electronic medical record. |
| 13. The medical staff have written procedures for treating hunger strikers. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Written procedures govern the treatment of hunger strikers. |

PART 4 – 21. HUNGER STRIKES

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Conscious patients are encouraged to eat and drink. Staff documents that encouragement in the medical record. |
| 15. All staff receive orientation and annual training on recognizing the signs of a hunger striker and on the procedures for referral for medical assessment. Medical staff receive training in hunger-strike evaluation and treatment and remain up-to-date on these techniques. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff receives initial orientation and annual refresher training. The latest training was held on 04/09/2012. |

PART 4 – 21. HUNGER STRIKES

☒ **Meets Standard** ☐ **Does Not Meet Standard** ☐ **N/A** ☐ **Repeat Finding**

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

There was one serious hunger strike in the past year. A male detainee was admitted to the facility on 01/13/2012 on a hunger strike. He was housed in the SSU. The hunger strike protocol was followed, as documented in the medical record. Eventually, court intervention was sought and granted. He was fed via a feeding tube, preventing further deterioration and improving his health status, until his deportation on 03/20/2012.

(b)(6), (b)(7)(c) 04/26/2012

Reviewer's Signature / Date

PART 4 – 22. MEDICAL CARE

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 1. The facility operates a health care facility in compliance with state and local laws and guidelines. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility is accredited by the National Commission on Correctional Health Care (NCCHC) and The Joint Commission (TJC). The facility underwent an American Correctional Association (ACA) inspection two weeks prior to this inspection. |
| 2. The facility's in-processing procedures of arriving detainees include medical screening. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All detainees are medically screened on admission. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The staffing plan, reviewed annually by Immigration Health Service Corps (IHSC), includes 46 Full Time Equivalents (FTEs). |
| 4. (MANDATORY) Newly admitted detainees will be informed, orally and in writing (in a language they can understand), about how to access health services. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees are informed, on admission, how to access health services, verbally, and as described in writing in the detainee handbook, as posted on housing units, and in the health service unit (HSU), in English, Spanish, and Creole. |
| 5. Detainees will have access to and receive specified 24-hour emergency medical, dental, and mental health services. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Medical staff is on site 24 hours per day. In addition, a physician, mental health clinician, and dentist are on call 24 hours per day. |
| 6. New direct care staff will receive tuberculosis tests prior to their job assignment and periodically thereafter and will be offered the hepatitis B vaccine series. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | As evidenced in personnel records, new direct care staff receives tuberculosis (TB) testing. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Health care staff is credentialed and licensed, as applicable. Job descriptions are available for all titles. |
| 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). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Each detainee receives the detainee handbook, in English, Spanish or Creole, where access to health care is explained. |
| 9. In SPCs and CDFs, medical personnel credentialing and verification complies with the standards established by the NCCHC and Joint Commission. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility complies with the medical personnel credentialing required of NCCHC and TJC. |

PART 4 – 22. MEDICAL CARE

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 10. Within 12 hours of arrival, all newly admitted detainees receive initial medical, dental and mental health screening by a health care provider or a detention officer specially trained to perform this function. <ul style="list-style-type: none">When screening is performed by a detention officer, the facility maintains documentation of the officer's special training. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | As evidenced in medical records, newly admitted detainees receive initial medical, dental and mental health screening by a nurse during the admission process. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A 'Language Service Line' is available for translation purposes. |
| 12. The facility has sufficient space and equipment to afford each detainee privacy when receiving health care. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The HSU is large and clean and described further below. |
| 13. The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The HSU is a restricted area within the secure perimeter. |
| 14. The medical facility entrance includes a holding/waiting room. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | There are two holding rooms. |
| 15. The medical facility's holding/waiting room under the direct supervision of custodial staff. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The holding rooms are supervised by custodial staff. |
| 16. Detainees in the holding/waiting room have access to a toilet and a drinking fountain. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | There is a toilet/sink in each holding room, and a drinking fountain directly outside the rooms, accessible to detainees. |
| 17. Medical records are kept apart from other files. They are: <ul style="list-style-type: none">Secured in a locked area within the medical unit.With physical access restricted to authorized medical staff.Procedurally, no copies made and placed in detainee files. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility uses an electronic medical record, with restricted access. Paper records are scanned into the electronic record. No medical records are placed in detainee A-files. |
| 18. (MANDATORY) A signed and dated consent form is obtained from a detainee before medical treatment is administered. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | As evidenced in medical records, detainees sign a medical consent form. |
| 19. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees use the I-813 Form, or make a written request for the release of medical records. |
| 20. The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Per interview with the Health Service Administrator (HSA), and as observed in the medical records office, advance release notice is given. |

PART 4 – 22. MEDICAL CARE

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| 21. A detainee's medical records will be transferred as appropriate. All detainees will be transferred with a copy of their transfer summary. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A paper copy of the electronic medical record is transferred with the detainee. |
| 22. Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL." | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | As observed, the medical record is contained and labeled as required. |
| 23. Medical screening includes a Tuberculosis (TB) test. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | As evidenced in medical records, TB testing is being done via chest x-ray. |
| 24. All detainees receive a mental-health screening upon arrival. It is conducted: <ul style="list-style-type: none"> By a health care provider or specially trained officer; Before a detainee's assignment to a housing unit. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | New detainees receive a mental health screen by a nurse during the admission process. |
| 25. The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Nursing personnel perform initial screens. They are able to immediately identify detainees needing medical attention. |
| 26. (MANDATORY) Each facility's health care provider conducts a health appraisal and physical examination on each detainee within 14 days of arrival. If there is documentation of one within the previous 90 days, the facility health care provider may determine that a new appraisal is not required. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | As evidenced in medical records, detainees receive physical exams within 14 days of arrival. |
| 27. Detainees in the Special Management Unit have access to the same level of health care as detainees in the general population. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Nursing makes rounds in the special management unit on a daily basis and offers access to each individual detainee, as documented in nursing log books. |
| 28. Staff provide detainees with health- services (sick call) request slips daily, upon request. <ul style="list-style-type: none"> Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population. Service-request slips are delivered in a timely fashion to the health care provider. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Sick call request slips are available in English, Spanish and Creole and are placed in a medical lock box in the dining hall. Nursing retrieves the slips on a daily basis. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility has medical personnel on site 24 hours per day. There is a plan when urgent or emergent care is necessary. |
| 30. The plan includes an on-call provider. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A mid-level provider, physician, dentist, and mental health clinician are on call. |

PART 4 – 22. MEDICAL CARE

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|-------------------------------------|--|
| 31. The plan includes a list of telephone numbers for local ambulances and hospital services. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | AMR (local ambulance company) is used for non-life threatening ambulance service, and local 911 for emergency ambulance service. The primary hospital is Kendall Regional Medical Center. |
| 32. The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Emergency care is rendered while maintaining safety and security. |
| 33. (MANDATORY) Detention and health care personnel will be trained, at least annually, to respond to health-related situations within four minutes and to properly use first aid kits, available in designated areas. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All staff is trained on initial orientation and annually on first aid and cardiopulmonary resuscitation (CPR), as evidenced in personnel folders. |
| 34. Where staff are used to distribute medication, a health care provider properly trains these officers. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Only medical staff distributes medications. |
| 35. Pharmaceuticals and nonprescription medicines will be stored, inventoried, dispensed, and administered in accordance with sound standards and facility needs for safety and security. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Pharmaceuticals are managed as appropriate. |
| 36. (MANDATORY) Each facility has written policy and procedures for the management of pharmaceuticals that include: <ul style="list-style-type: none"> • A formulary of all prescription and nonprescription medicines stocked or routinely procured from outside sources. • A method for obtaining medicines not on the formulary. • Prescription practices, including requirements that medications are prescribed only when clinically indicated and that prescription are reviewed before being renewed. • Procurement, receipt, distribution, storage, dispensing, administration, and disposal of medications. • Secure storage and perpetual inventory of all controlled substances (DEA Schedule II-V), syringes, and needles. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy and procedure address: a formulary; use of non-formulary drugs; provider prescription practices; medication management; and storage and inventory of controlled substances, needles and syringes. |

PART 4 – 22. MEDICAL CARE

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|-------------------------------------|--|
| <p>37. All pharmaceuticals are stored in a secure area with the following features:</p> <ul style="list-style-type: none"> • A secure perimeter; • Access limited to authorized medical staff (never detainees); • Solid walls from floor to ceiling and a solid ceiling; • A solid core entrance door with a high security lock (with no other access); and • A secure medication storage area. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Pharmaceuticals are securely stored in the pharmacy which has a secure perimeter and controlled access. The walls, ceiling and door are solid. |
| <p>38. In SPCs and CDFs, the pharmacy has a locking pass-through window.</p> <ul style="list-style-type: none"> • Administration and management in accordance with state and federal law. • Supervision by properly licensed personnel. • Administration of medications by personnel properly trained and under the supervision of the health services administrator, or equivalent. • Accountability for administering or distributing medications in a timely manner and according to physician orders. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The pharmacy has a locking pass through window. Medications are distributed by licensed nursing personnel, under the supervision of the HSA and as ordered by the physician. |
| <p>39. Distribution of medication is in accordance with specific instructions and procedures established by the health care provider. Written records of all medication given to detainees are maintained.</p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Medications are distributed in accordance with provider order. Medication administration records are used to document medication distribution. |
| <p>40. Medication may not be delivered or administered by detainees.</p> <ul style="list-style-type: none"> • In facilities that are medically staffed 24 hours a day, the health care provider distributes medication. • In facilities that are not medically staffed 24 hours a day, medication may be distributed by detention officers, who have received proper training by the health care provider, only when medication must be delivered at a specific time when medical staff are not on duty. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility has 24 hour medical coverage and only medical staff distributes medications. |
| <p>41. The facility maintains documentation of the training given any officer required to distribute medication, and the officer has available for reference the training syllabus or other guide or protocol provided by the health authority.</p> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Only medical staff distributes medications. |
| <p>42. The Warden/Facility receives notification that a detainee that has special medical needs.</p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The OIC receives notice of special needs detainees via IHSC-819 Form. |

PART 4 – 22. MEDICAL CARE

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| 43. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The detainee may make a request in writing to the Field Office Director. |
| 44. (MANDATORY) Each facility has a written plan (or plans) that address the management of infectious and communicable diseases, including prevention, education, identification, surveillance, immunization (when applicable), treatment, follow-up, isolation (when indicated), and reporting to local, state, and federal agencies. Plans include: <ul style="list-style-type: none"> • Coordination with public health authorities; • Ongoing education for staff and detainees; • Control, treatment, and prevention strategies; • Protection of individual confidentiality; • Media relations; • Management of tuberculosis, hepatitis A, B, and C, HIV infection, avian influenza, and • Reporting communicable diseases to local and/or state health departments in accordance with local and state regulations. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility has comprehensive plans addressing various infectious diseases to include reporting requirements, education, prevention and control, confidentiality, and media relations. |
| 45. Detainees diagnosed with a communicable disease are isolated according to local medical operating procedures. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees with communicable diseases are isolated as is clinically appropriate. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | As evidenced in medical records, all new detainees receive TB testing via chest x-ray on admission and before a housing decision is made. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees symptomatic of TB may be placed in one of six negative pressure rooms in the short stay unit. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Typically, the security contractor provides transportation for offsite medical care. |

PART 4 – 22. MEDICAL CARE

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|-------------------------------------|---|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | As evidenced in medical records, treatment plans are provided for detainees with close, chronic or convalescent medical needs. |
| 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. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There are no female detainees housed at the facility. |
| 51. (MANDATORY) Detainees with chronic conditions (such as hypertension and diabetes) will receive periodic care and treatment that includes monitoring of medications, laboratory testing, and chronic care clinics, and others will be scheduled for periodic routine medical examinations, as determined by the health authority | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | As evidenced in medical records, detainees with chronic diseases have treatment plans outlining care, monitoring, and scheduling of clinic visits. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The OIC receives notice of special needs detainees via IHSC-819 Form. |
| 53. Detainees will have access to emergency and specified routine dental care provided under direction and supervision of a licensed dentist. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | As evidenced in medical records, detainees receive routine and emergency dental care from the 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | As evidenced in medical records, detainees with mental health issues are referred to a mental health clinician. |
| 55. Crisis intervention services are available for detainees who experience acute mental health episodes. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | As evidenced in medical records, crisis intervention services are available to detainees. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | As observed in the HSU, medical and mental health contacts are conducted with as much privacy as possible. There are no female detainees at the facility. |
| 57. (MANDATORY) Any detainee referred for mental health treatment receives a comprehensive evaluation by a licensed mental health provider within 14 days of the referral. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | As evidenced in medical records, detainees with a mental health referral are seen and receive a comprehensive evaluation within 14 days. |

PART 4 – 22. MEDICAL CARE

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| <p>58. (MANDATORY) Restraints for medical or mental health purposes may be authorized only by a qualified medical or mental health provider, after reaching the conclusion that less restrictive measures are not successful. The facility has written procedures that specify:</p> <ul style="list-style-type: none"> • The conditions under which restraints may be applied; • The types of restraints to be used; • How a detainee in restraints is to be monitored; • The length of time restraints are to be applied; • Requirements for documentation, including efforts to use less restrictive alternatives; and • After-incident review. • The medical authority or mental health provider completes a Post-Restraints Observation Report form DIHS-867 or similar form. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Facility procedures address restraint use to include requirement for physician order (limited to four hours maximum), behavior justification, type of restraint, constant observation monitoring, progress note, post restraint debriefing, and post restraint documentation. |
| <p>59. (MANDATORY) Involuntary administration of psychotropic medications to detainees complies with applicable laws and regulations and the authorizing physician or psychiatrist will:</p> <ul style="list-style-type: none"> • Specify the duration of therapy; • Obtain an order authorizing the administration of the drug from a Federal District Court. • Document that less restrictive intervention options have been exercised without success; • Detail how the medication is to be administered; • Monitor the detainee for adverse reactions and side effects; and • Prepare treatment plans for less restrictive alternatives as soon as possible. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Involuntary emergency administration of psychotropic medications requires a physician order specifying the reason for and duration of therapy. Documentation includes less restrictive methods used, administration, dosage and possible side effects and adverse reactions. Notification of DHS/ICE Chief Counsel is necessary for possible court order for continued involuntary non-emergency administration of psychotropic medications. |
| <p>60. An initial dental screening exam should be performed within 14 days of the detainee's arrival. If no on-site dentist is available, the initial dental screening may be performed by a physician, physician's assistant, nurse practitioner or trained RN.</p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | As evidenced in medical records, detainees receive an initial dental screen on admission. |
| <p>61. In each detention facility, the designated health authority and Facility Administrator determines the contents, number, location(s), use protocols, and procedures for monthly inspections of first aid kits.</p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | IHSC and ICE manage first aid kits. |
| <p>62. An automatic external defibrillator should be available for use at the facility.</p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | There are four automated external defibrillators in the facility. |

PART 4 – 22. MEDICAL CARE

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ICE is notified immediately when a detainee refuses treatment. |
| 64. In SPCs and CDFs, the Facility Administrator and health services administrator will meet at least quarterly and include other facility and medical staff as appropriate. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The OIC and HSA meet weekly, as reported by the HSA and documented in meeting minutes. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Steri-Cycle is contracted to remove bio-hazardous waste. The dental autoclave machine is tested both on and off-site and the testing is current. |
| 66. (MANDATORY) The health authority will implement a system of internal review and quality assurance. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Currently, studies re: Management of Insulin Dependent Patients and Consent Form for Psychotropic Medications are being conducted. |

PART 4 – 22. MEDICAL CARE

☒ **Meets Standard** ☐ **Does Not Meet Standard** ☐ **N/A** ☐ **Repeat Finding**

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

Medical staffing includes

(b)(7)(e)

(b)(7)(e)

The HSU is large, clean and well stocked. It is divided into two main areas: outpatient and inpatient. The outpatient area includes eight offices, dental suite with two chairs, lab and x-ray, two medical records rooms, pharmacy and medication room, urgent care room, five exam rooms, triage room, laboratory, two holding cells, and an officers' station. The inpatient area (short stay area) includes four medical wards with 12 beds, six negative pressure rooms, day room with access to outside recreation, four mental health wards with ten beds, two watch rooms (including a padded room), central nurses' and officers' station, a medication room, kitchen and two offices. There is also a large medical screening area with x-ray located in the Processing Area.

During the inspection 15 electronic medical records were reviewed. In all 15 records, medical and mental health screening were conducted on admission by a nurse and TB testing was performed. Consent to treatment was observed in all records. Physical exams were performed well within the 14 days requirement, usually within one day. Chronic disease and mental health diagnoses were noted and detainees were treated and seen as appropriate. Sick call was timely.

A random count of needles, sharp instruments and other tools was performed and found to be correct. A random count of controlled substances was performed and found to be correct.

(b)(6), (b)(7)(c) 04/26/2012

Reviewer's Signature / Date

PART 4 – 23. PERSONAL HYGIENE

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility has policy and procedure on personal hygiene. There is an adequate supply of necessary items. |
| 2. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive, at a minimum: <ul style="list-style-type: none"> One uniform shirt and one pair of uniform pants or one jumpsuit. One pair of socks. One pair of underwear (daily change). One pair of facility-issued footwear. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All new detainees receive two detainee uniforms, two shorts, four sets of drawers and t-shirts, four pairs of socks and two pairs of shoes. |
| 3. Additional clothing is available for changing weather conditions and as is seasonally appropriate. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Jackets are available seasonally. |
| 4. New detainees are issued clean bedding, linens and towels, at a minimum: <ul style="list-style-type: none"> One mattress One blanket Two sheets One pillow One pillowcase One towel Additional blankets, based on local weather conditions. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | New detainees are issued a mattress with pillow attached, two sheets, and one towel. |
| 5. The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE detainees are not charged for these items. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility provides shampoo, toothpaste, deodorant, a comb and lotion. There are only males housed at this facility. |
| 6. Toilet facilities are: <ul style="list-style-type: none"> Clean Adequate in number and can be used without staff assistance 24 hours per day when detainees are confined in their cells or sleeping areas. ACA Expected Practice 4-ALDF-4B-08 requires that toilets be provided at a minimum ratio of one for every 12 male detainees or one for every 8 female detainees. For males, urinals may be substituted for up to one-half of the toilets. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Toilet facilities are clean and may be used without staff assistance. There is one toilet available for every 7 - 10 detainees. |

PART 4 – 23. PERSONAL HYGIENE

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| <p>7. Bathing facilities are:</p> <ul style="list-style-type: none"> • Clean • Operable with temperatures between 100 and 120 degrees Fahrenheit. <p>ACA Expected Practice 4-ALDF-4B-08 requires one washbasin for every 12 detainees.</p> <p>ACA Expected Practice 4-ALDF-4B-09 requires a minimum ratio of one shower for every 12 detainees.</p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Bathing facilities are clean with operable temperatures of 101 degrees. There is one wash basin available for every 8 - 9 detainees. There is one shower available for every 5 - 7 detainees. |
| 8. Detainees with disabilities are provided adequate facilities, support, and assistance needed for self-care and personal hygiene. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees with disabilities are provided assistance with activities of daily living. |
| <p>9. Detainees are provided clean clothing, linen and towels.</p> <ul style="list-style-type: none"> • Socks and undergarments - daily. • Outer garments - twice weekly. • Sheets - weekly. • Towels - weekly. • Pillowcases - weekly. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees are provided with socks, undergarments daily and outer garments two times per week and sheets weekly. |
| 10. Food service detainee volunteer workers are permitted to exchange outer garments daily. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food service workers may exchange outer garments daily. |
| 11. Volunteer detainee workers are permitted to exchanges of outer garments more frequently. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Other detainee workers may exchange outer garments more frequently than twice per week. |

PART 4 – 23. PERSONAL HYGIENE

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

Detainees are able to maintain acceptable personal hygiene practices. Detainees may exchange clothing and other items on a one for one basis. Exchange schedules allow for the provision of clean clothing as required.

(b)(6), (b)(7)(c) 04/26/2012

Reviewer's Signature / Date

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| 1. The facility has a written suicide prevention and intervention program approved and signed by the health authority and Facility Administrator and reviewed annually. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility's 'Suicide Prevention and Intervention Program' was approved and signed by the Health Services Administrator and the Facility Administrator in January, 2012. |
| 2. At a minimum, the Program shall include procedures to address: <ul style="list-style-type: none"> • Intake screening and referral requirements; • The identification and supervision of suicide-prone detainees; • Staff training requirements; • The management and reporting of suicidal incidents, suicide watches, and deaths; • Provision of safe housing for suicidal detainees; • Debriefing of any suicides and suicide attempts by administrative, security, and health services staff; • Guidelines for returning a previously suicidal detainee to a facility's general population, upon written authorization of the clinical director.; • Reporting guidelines for facility personnel when suspected suicidal behavior is observed; and Written procedures for the proper handling of detainees who exhibit suicidal behavior. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Program includes written procedures addressing admission requirements and the identification, supervision, management, reporting, and housing of suicidal detainees. In addition, debriefing and returning to general population is included, as are training requirements. |
| 3. Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation and annual training. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff receives training on initial orientation and annually. The last training was held on 04/11/2012 |
| 4. Training prepares staff to: <ul style="list-style-type: none"> • Effective methods for identifying the warning signs and symptoms of impending suicidal behavior, • Demographic, cultural, and precipitating factors of suicidal behavior, • Responding to suicidal and depressed detainees, • Effective communication between correctional and health care personnel, • Necessary referral procedures, • Housing observation and suicide-watch level procedures, • Follow-up monitoring of detainees who have already attempted suicide, and • Reporting and written documentation procedures. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Training prepares staff to: learn the signs of potential suicide and identify risk factors; describe typical detainee suicide profile; to respond, communicate, refer, house and follow-up regarding suicidal detainees; and to report and document all of the above. |

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|-------------------------------------|--------------------------|---|
| 5. A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process. <ul style="list-style-type: none"> Screening does not occur later than one working day after the detainee's arrival. Documentation exists that "specially trained officers" have completed training in accordance with a syllabus approved by the medical authority. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A nurse screens all detainees on admission for suicide potential. |
| 6. Written procedures contain when and how to refer at-risk detainees to medical staff and procedures are followed. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff is aware of how to refer detainees to medical staff, as evidenced in interview and documented in medical records. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The medical director authorizes the detainee's return to the general population. |
| 8. The facility has a designated isolation room for evaluation and treatment. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | There are two designated isolation rooms located on the Short Stay Unit (SSU). One is a "soft" walled room (padded) with no protrusions and a floor grate. The other is a room with sink/toilet and some protrusions on the wall and ceiling. |
| 9. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | One of the designated isolation rooms has protrusions on the wall and other grated surfaces that could be used in a suicide attempt. Mitigating factors are that detainees on suicide watch are on constant observation and are given suicide resistant bedding and clothing. |
| 10. Medical staff have approved the room for this purpose. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Medical staff has approved the rooms for this purpose. |
| 11. Staff observe and document the status of a suicide-watch detainee at least once every 15 minutes/constant observation. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff keeps constant observation on the suicide watch and documents that observation 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility has 24 hour medical staff. Security staff maintains constant observation for suicidal detainees and documents that observation every 15 minutes. Medical record documentation was provided demonstrating medical staff progress notes every two hours. |

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|-------------------------------------|--|
| 13. In CDFs or IGSA's, 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 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | The facility is an SPC and has 24 hour a day medical staff. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires staff/detainee debriefing and mortality review for completed suicides. |

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

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

There have been no suicides or serious suicide attempts at the facility since the last inspection.

There are two suicide watch cells. One is completely smooth walled and floored (padded). The other is a cell that does contain wall protrusions and small grate coverings that could be used in a suicide attempt.

Policy and procedure on suicide prevention and intervention is comprehensive.

(b)(6), (b)(7)(c) 04/26/2012

Reviewer's Signature / Date

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

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

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 1. Detainees, who are chronically or terminally ill, are transferred to an appropriate off-site medical facility. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility does not normally accept detainees who are terminally ill. Should a detainee become terminally ill while at the facility, he would be transferred to a more appropriate medical facility. |
| 2. The facility or appropriate ICE office promptly notifies the next-of-kin of the detainee's: medical condition. <ul style="list-style-type: none"> The detainee's location. The visiting hours and rules at that location. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The OIC notifies the next of kin. ICE will provide as much opportunity for visits as possible. |
| 3. There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives. <ul style="list-style-type: none"> These guidelines include instructions for detainees who wish to have a living will. These guidelines provide the detainee the opportunity to have a private attorney prepare the documents, at the detainee's expense. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility uses the State of Florida Advance Directive Guidelines as well the IHSC guidelines. Living wills and private attorneys are addressed. |
| 4. There is a policy addressing "Do Not Resuscitate Orders" | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The policy states that Do Not Resuscitate (DNR) orders may apply to detainees in the short stay unit. |
| 5. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees with a DNR order receive care consistent with sound medical practice. |
| 6. The facility notifies ICE/DRO Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSA's, this notification is made through the local ICE representative. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ICE makes all notifications. |
| 7. The facility has written procedures to address the issues of organ donation by detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A detainee may request organ donation through his advance directive. |
| 8. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in custody. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ICE notifies the family and other interested parties. |
| 9. The facility has a policy and procedure to address the death of a detainee while in transport. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy addresses detainee death via land or air transport. |

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

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

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 10. At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires the standard be followed. |
| 11. In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. <ul style="list-style-type: none"> If the detainee is a U.S. military veteran, the Department of Veterans Affairs notified. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ICE would schedule the detainee's burial, after consulting with the Department of Veterans Affairs |
| 12. An original or certified copy of a detainee's death certificate is placed in the subject's A-File. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The death certificate or medical examiner's report would be placed in the A-file. |
| 13. The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as; <ul style="list-style-type: none"> Performance of an autopsy. Person(s) to perform the autopsy. Obtaining State approved death certificates. Local transportation of the body. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility incorporates Florida state law into its procedure. The FBI, local coroner, or IHSC may request an autopsy. Medical staff makes arrangements for autopsy by the local coroner and transportation of the body. ICE obtains the death certificate. |
| 14. ICE staff follow established procedures to properly close the case of a deceased detainee. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Closing the case involves sending the fingerprint card to the FBI, placing the gravesite title in the A-file, and closing the Enforcement Alien Removal Module (EARM) file. |

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

☒ **Meets Standard** ☐ **Does Not Meet Standard** ☐ **N/A** ☐ **Repeat Finding**

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

There have been no deaths at the facility since the last inspection.

Facility policy and procedure regarding advance directives, living wills, DNR orders, and organ donation is comprehensive.

(b)(6), (b)(7)(c) 04/26/2012
 Reviewer's Signature / Date

Section V 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 5 – 26. CORRESPONDENCE AND OTHER MAIL

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility has policy addressing all issues listed in this component. |
| 2. The facility provides key information in English, Spanish, and other languages spoken by a significant number of detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility provides key information in English, Spanish, and Creole. |
| 3. Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 4. Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Outgoing mail is forwarded to the Post Office the next business day. |
| 5. Staff maintain a logbook-recording acceptance of priority, priority overnight, and certified mail delivered to the facility for a detainee. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff opens all mail in the presence of detainees. All mail is delivered at the mail room window, except mail delivered to detainees in the Special Management Unit. Their mail is also opened in their presence. |
| 7. Staff do not read incoming general correspondence without the Facility Administrator's prior approval. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 8. Staff do not inspect incoming Special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All special correspondence is inspected in the presence of the detainee. |
| 9. Staff are prohibited from reading or copying incoming and outgoing Special Correspondence without the detainee present. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff never read or copy special correspondence. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 11. Correspondence to a politician or to the media is processed as Special Correspondence and is not read or copied. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Mail sent to a politician or the media is treated as special correspondence. |
| 12. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Mail room staff notifies the detainee and addressee of rejected correspondence in writing. |

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 13. The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 14. Staff maintain a written record of every item removed from detainee mail. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Items removed from detainee mail are documented. The detainee is notified in writing of this removal. |
| 15. The Facility Administrator or designee monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The issues noted in this component are required by policy. The processing of cash was observed during this inspection. |
| 17. Original identity documents (for example, passports, and birth certificates) are immediately removed and forwarded to ICE staff for placement in the A-files. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Only copies of original identity documents are provided to the detainee. Originals are forwarded to ICE staff for placement in the A-file. |
| 18. Staff provide the detainee a copy of his or her identity document(s) upon request. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Only copies of original identity documents are provided to the detainee upon request. |
| 19. Staff dispose of prohibited items found in detainee mail in accordance with the Detention Standard on "Contraband". | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Indigent detainees receive stamps, paper, and envelopes from mail room staff 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 22. The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Mail room staff provides the items listed in this component to detainees at no cost. |
| 23. SMU detainees have the same correspondence privileges as general population. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 24. Detainees have access to outside publications. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees may receive publications only from the publisher. |

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

Mail room staff was interviewed, policy reviewed, and the Mail Room inspected, concerning this standard. Mail Room operations were also observed.

Policy allows detainees to correspond with family, friends, attorneys, government officials, and others within the limits of good security practice. Detainees receive mail within one day, with out-going mail being sent out within one day. Mail is inspected for contraband only in the detainee's presence, and mail sent to attorneys, the media, or government officials is handled confidentially as special correspondence. Contraband found in mail is disposed of in accordance with policy, and detainees are provided with writing supplies free of charge. Indigent detainees are provided stamps at no cost.

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

04/26/2012

Reviewer's Signature / Date

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

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

☐ **Standard NA: Check this box 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.**

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|-------------------------------------|--|
| 1. The Field Office Director considers and approves, on a case-by-case basis, trips to an immediate family member's: <ul style="list-style-type: none"> • Funeral • Deathbed | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Supervisory Detention and Deportation Officer (SDDO) makes a recommendation to the Field Office Director when a detainee requests a non-medical escorted trip. |
| 2. The facility recognizes as "immediate family member" a parent (including stepparent or foster parent), brother, sister, child, and spouse (including common-law spouse). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3. The CDF/IGSA facility notifies ICE of all detainee requests for non-medical escorts. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This facility is an SPC. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Deportation Officer reviews the file and makes a recommendation to the SDDO. |
| 5. Detainees who require overnight housing are placed in approved IGSA facilities. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 6. Each escort detail includes at least (b)(7)(e) officers. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 7. The detainee remains under constant, direct visual supervision of escorting staff. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. Escorting officers have the discretion to increase or decrease minimum restraints in accordance with written instruction, procedures and classification level of the detainee. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy states that the officers may increase the level of restraints, but may not reduce the minimum requirement established in the operations plan. |
| 10. Escort officers do not accept gifts/gratuities from a detainee, detainee's relative or friend for any reason. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

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

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

☐ **Standard NA:** Check this box 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.

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

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

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

There have been no non-medical escorted trips during this reporting period according to the SDDO. Inspector reviewed a detainee request for a trip. Trip was denied because "body was not available for a private viewing".

Policy is in place for detainee to request a trip in order to maintain ties with their families.

(b)(6), (b)(7)(c) / 04/26/2012

Reviewer's Signature / Date

PART 5 – 28. MARRIAGE REQUESTS

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 1. The Field Office Director or Facility Administrator considers detainee marriage requests on a case-by-case basis. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Protocol allows the Facility Administrator to consider marriage requests. |
| 2. The Field Office Director reviews every marriage request rejected by a Facility Administrator or IGSA. Rejections are documented. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Protocol requires the Facility Administrator to review rejected marriage requests. There have been no such rejections since the last inspection. If a marriage request is rejected the decision would be documented and both parties provided written rationale. |
| 3. It is standard practice to require a written request for permission to marry. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 4. The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A Deportation Removal Officer (DRO) assists the detainee in obtaining documentation from the intended spouse. |
| 5. The Facility Administrator provides a written copy of his or her decision to the detainee and his or her legal representative. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Marriage decisions are provided in writing to both parties. A detainee's legal representative of record is also provided a copy of the decision. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 7. The Facility Administrator provides the detainee with a place and time to make wedding arrangements. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 8. The detainee handbook explains the marriage request process. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. In SPCs the Facility Administrator or highest ranking ICE official on-site is the only officer authorized to approve a request to marry. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | At this facility the Assistant Field Office Director (Facility Administrator) only recommends approval; final approval is granted by the Deputy Field Office Director (DFOD) in the Plantation, Florida Field Office. |

PART 5 – 28. MARRIAGE REQUESTS

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

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

Interviews with a DRO and the Chaplain revealed marriage requests are considered on a case-by-case basis. Reviews and decisions follow established protocols. The DFOD approves all marriage requests.

(b)(6), (b)(7)(c) / 04/26/2012

PART 5 - 29. RECREATION

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.

☒ If outdoor recreation is offered check this box. Items 19-27 should then be marked "N/A".

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|-------------------------------------|--|
| 1. The Facility provides: <ul style="list-style-type: none"> An indoor recreation program. An outdoor recreation program. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Indoor recreation occurs in the common area of each housing unit. Outdoor recreation yards are available. |
| 2. A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3. Regular maintenance keeps recreational facilities and equipment in good condition. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 4. The recreational specialist or trained equivalent supervises detainee recreation workers. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This facility does not use detainee recreation workers. |
| 5. The recreational specialist or trainee equivalent oversees recreation programs for Special Management Unit and special-needs detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 6. Dayrooms offer sedentary activities, e.g., board games, cards, television. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All housing unit common areas are equipped with a television. Board games, cards, etc are available from the housing unit officer, upon request. |
| 7. Outside activities are restricted to limited-contact sports. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Outdoor activities are limited to volleyball, basketball and soccer. |
| 8. Each detainee has the opportunity to participate in daily recreation. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | One hour of recreation is offered daily to all detainees. |
| 9. Detainees have access to recreation activities outside the housing units for at least one hour daily. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 10. Staff check all items for damage and condition when equipment is returned. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 11. Staff conduct searches of recreation areas before and after use. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 5 - 29. RECREATION

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.

☒ If outdoor recreation is offered check this box. Items 19-27 should then be marked "N/A".

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|-------------------------------------|---|
| 12. Recreation areas are under constant staff supervision. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Recreation areas are under constant staff supervision and camera surveillance. |
| 13. Supervising staff are equipped with radios. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All staff carries a radio. |
| 14. The facility provides detainees in the SMU at least one hour of outdoor recreation time daily, five times per week. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | SMU detainees receive at least one hour of outdoor recreation daily. |
| 15. Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his or her recreation privileges. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Protocol requires a written explanation for denial of recreation privileges. There have been no such denials since the last inspection. |
| 16. Special programs or religious activities are available to detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 17. All volunteers have completed an orientation program with documentation required before entering a secure portion of the facility where detainees are present. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All volunteers receive eight hours of orientation training prior to their entry inside the facility. |
| 18. Visitors, relatives or friends of detainees are not allowed to serve as volunteers. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 19. If the facility has no outside recreation, are detainees considered for transfer after six months? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | The facility has outdoor recreation areas. |
| 20. If yes, written procedures ensure timely review of all eligible detainees. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 21. Case officers make written transfer recommendations about every six-month detainee to the Facility Administrator. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 22. The Facility Administrator documents all detainee-transfer decisions, whether yes or no. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 23. The detainee's written decision for or against an offered transfer documented in his or her A-file. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 24. Staff notify the detainee's legal representative of his or her decision to accept/decline a transfer. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 25. If no recreation is available, the ICE Field Office routinely review transfer eligibility for all detainees after 60 days. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 26. Does the A-file of every detainee held more than 60 days without access to recreation contains either a transfer-waiver signed by the detainee or the Facility Administrator's written determination of the detainee's ineligibility for transfer. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 27. The detainee's legal representative is notified of the detainee's/Facility Administrator's decision. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

PART 5 - 29. RECREATION

☒ **Meets Standard**

☐ **Does Not Meet Standard**

☐ **N/A**

☐ **Repeat Finding**

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

An interview with the Recreation Specialist; observation of outdoor/indoor recreation activities; and interviews with housing unit officers determined detainees have access to recreational activities within the safety and security guidelines outlined in the standard.

(b)(6), (b)(7)(c) / 04/26/2012

Reviewer's Signature / Date

PART 5 – 30. RELIGIOUS PRACTICES

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

| Components | Meets Standards | Does Not Meet Standards | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 1. Detainees are allowed to engage in religious services. When available, these services are provided in major languages spoken within the facility. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. Space is available for detainees to participate in religious services. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Religious services are conducted in the dining hall (after meals), multi-purpose room, and attorney visiting rooms (small, private religious services). |
| 3. The facility allows detainees to observe the major "holy days" of their religious faith. • List any exceptions. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Dietary and security departments are made aware of special fasting/activity requirements and/or prayer schedules, by the Chaplain. |
| 5. Each detainee is allowed religious items in his/her immediate possession; refer to the Funds and Personal Property Standard. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 6. Volunteer's credentials are checked and verified before allowing participation in detainee programs. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Chaplain validates volunteer credentials prior to their entry inside the facility. |
| 7. Members of faiths not represented by clergy may request to present their own services within security allowances. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | If these situations were to arise security staff would be present inside the room. There have been no such occasions since the last inspection. |
| 8. Detainees in the Special Management Unit may participate in religious practices unless otherwise documented for the safety and security of the facility. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Special Management Unit (SMU) detainees normally have services conducted inside the SMU. Protocol does allow for SMU detainees to attend general population services but under security escort, in restraints and seated apart from other detainees on the distant periphery of the group. |

RELIGIOUS PRACTICES

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

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

An interview with the Chaplain, security staff and dietary supervisors; and observation of the selected religious venues revealed detainees of different faiths/beliefs are allowed reasonable and equitable opportunities to participate in the practice of their expressed faith.

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

04/26/2012

Reviewer's Signature / Date

PART 5 – 31. TELEPHONE ACCESS

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|-------------------------------------|--|
| 1. Detainees are allowed to access to telephones during established facility waking hours, including access to TTY devices. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. Upon admittance, detainees are made aware of the facility's telephone access policy. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees are advised of telephone policy during orientation and in the handbook. |
| 3. Notification explaining the facilities telephone policy is in the Detainee Handbook. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 4. Access rules, including updated telephone and consulate number, are posted in housing units. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Telephone policy and information is posted in the housing units and recreation yard. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 6. Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility exceeds the number of required phones. |
| 7. Telephones are inspected daily by facility staff to ensure that they are in good working order. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Housing unit officers inspect phones daily and document the results in a logbook. |
| 8. Telephones are located a reasonable distance from televisions. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Phone malfunctions are immediately reported to Talton (telephone vendor). |
| 10. The facility administration monitors repair progress and takes appropriate measures to ensure that the required repairs are begun and completed timely. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 11. Detainees are afforded a reasonable degree of privacy for legal phone calls. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A privacy screen is attached to the sides of every phone. |
| 12. A procedure exists to assist a detainee who is having trouble placing a confidential call. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees needing assistance can send a request form to staff or ask for help. |
| 13. The facility provides the detainees with the ability to make non-collect (special access) calls. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 14. Special Access calls are at no charge to the detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This facility fully meets these requirements, hence making the component non-applicable. |
| 16. No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List". | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | There are no restrictions placed on detainee legal calls. |

PART 5 – 31. TELEPHONE ACCESS

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 17. Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Upon request, detainees can make calls to other detainees with staff assistance. |
| 18. All telephone restrictions are documented. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Telephone restrictions occur only through documented disciplinary action. |
| 19. The facility has a system for taking and delivering emergency detainee telephone messages. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | On-duty ICE staff and/or the Chaplain deliver emergency messages to detainees. |
| 20. Phone call messages are given to detainees as soon as possible. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 21. Detainees are allowed to return emergency phone calls as soon as possible. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees are allowed to return emergency phone messages promptly. |
| 22. Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 23. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | There are no restrictions on disciplinary segregation detainee calls of this nature. |
| 24. Detainees in disciplinary segregation are allowed phone calls for family emergencies. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 25. Detainees in administrative segregation and protective custody are afforded the same telephone privileges as those in general population. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility complies with the provisions noted in the component. |
| 27. The OIG phone number for reporting abuse is programmed into the detainee phone system. The reviewer must verify that the number is operable. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The OIG hotline number was called from a housing unit; contact was established. |
| 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 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ICE staff monitors the function of phones and documents the results on a daily/weekly basis. |

PART 5 – 31. TELEPHONE ACCESS

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

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

Several ICE and Doyon-Akal JV (contractual security) staff were interviewed, policy reviewed, and detainee phone use observed concerning this standard.

Detainees maintain contact with family and legal service providers through equitable, reasonable, and secure telephone access. The facility provides phones in the housing units and in recreation areas. Phones are active from 6:00 A.M. to 11:00 P.M. daily.

Emergency phone messages are delivered to detainees through the Chaplain. Detainees are permitted to return calls quickly from a private setting. Staff assistance in making the calls is available.

Phone function is checked daily and needed repairs are made by Talton (telephone vendor) in a timely manner.

Detainees in disciplinary segregation may make calls unless restricted by disciplinary action (does not apply to legal calls).

(b)(6), (b)(7)(c) / 04/26/2012
Reviewer's Signature / Date

| PART 5 – 32. VISITATION | | | | |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
| 1. There is a written visitation procedure, schedule, and hours for general visitation. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. The visitation hours are tailored to the detainee population and the demand for visitation. The minimum duration for a visit is 30 minutes. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Visitation hours and demand are tailored to the detainee population, and the minimum visiting time is one hour. |
| 3. The visitation schedule and rules are available to the public. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The visiting schedule and rules are posted in the front lobby and at the visitors' parking lot. |
| 4. The hours for all categories of visitation are posted in the visitation waiting area. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The visiting policy is posted in English, Spanish, and Creole. |
| 6. A general visitation log is maintained. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 7. Detainees are permitted to retain authorized personal property items specified in the standard. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Property brought to the facility is accepted by property room officers and processed in accordance with policy. Detainees are given permissible items. |
| 8. A visitor dress code is available to the public. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. Visitors are searched and identified according to standard requirements. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 10. The requirement on visitation by minors is complied with. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 5 – 32. VISITATION

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|-------------------------------------|--|
| 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. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Minors are allowed 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. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Minors are allowed to visit at this facility. |
| 13. Anytime a visit is denied, to either a general population detainee or SMU detainee, the denial is documented. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 14. Detainees in special housing are afforded visitation. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees in the Special Housing Unit are allowed visitation, unless restricted by documented disciplinary action. |
| 15. Legal visitation is available seven (7) days a week, including holidays. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Legal visits are permitted seven days a week, including holidays. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy complies with the provisions noted in this component. |
| 17. On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees may continue to visit through a meal. |
| 18. Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Private contact and non-contact rooms are available, and the exchange of documents is permitted. |
| 19. There are written procedures governing detainee searches. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Legal visitors are admitted in accordance with the rules noted in this component, which is the same as for all visitors. |
| 21. Per the Standard, prior to each visit, legal service providers and assistants are identified. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 22. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A list of pro bono legal organizations is posted in all housing units and in the law library. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 24. Provisions for NGO visitation as stated in the Detention Standards are complied with. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Rules governing Non-Governmental Organizations (NGO) visitation are found in policy. Several NGO visits were observed by this inspector. |

PART 5 – 32. VISITATION

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 25. Law enforcement officials, requesting to visit with a detainee, are referred to the ICE Facility Administrator for approval. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Facility Administrator approves all visits by law enforcement officials. |
| 26. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the Facility Administrator or ICE Field Office. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 5 – 32. VISITATION

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

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

ICE and contracted staff were interviewed, policy reviewed, and the Visiting Room inspected, concerning this standard.

Policy allows the maintenance of community ties, within the limits of good security practice, through a visitation program. Social visitation occurs on weekends and holidays, and legal visits daily (NGO visits occur on Tuesdays and Wednesdays). Visitors are advised of the visitation schedule and rules, screened upon arrival, must abide by a dress code, and may bring approved property to detainees. Detainees may receive visits from family, approved others, and legal representatives/organizations. Detainees housed in the Special Management Unit may receive visits unless limited by documented disciplinary action. Contact and non-contact visitation is available.

(b)(6), (b)(7)(c) 04/26/2012
Reviewer's Signature / Date

PART 5 – 33. VOLUNTARY WORK PROGRAM

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

☐ Check here if ICE detainees are not authorized to work at the IGSA facility. Mark NA on Form G-324A, page 3 and move to next section.

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|-------------------------------------|--|
| 1. The facility has a voluntary work program. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. Detainee housekeeping meets acceptable levels of neatness, cleanliness and sanitation standards. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3. At IGSA's detainees are never allowed to work outside the secure perimeter. SPCs and CDFs detainees classified as level 1 have the opportunity to participate in special details outside the secure perimeter under direct supervision. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | At this facility detainees are not allowed to work outside the secure perimeter. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy addresses the voluntary work program's hiring/firing procedures. |
| 5. Where possible, physically and mentally challenged detainees participate in the program. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 6. The facility complies with work-hour requirements for detainees, not exceeding: • Eight hours a day. • Forty hours a week. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 7. Detainee volunteers ordinarily work according to a fixed schedule. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All detainee work positions are assigned fixed work schedules. |
| 8. If a detainee is removed from a work detail, staff place the written justification for the action in the detainee's detention file. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | When a detainee is removed from a work assignment a 'Removal From Work Form' is completed and attached to support documentation. This information is then placed in the A-file. |
| 9. Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The voluntary work program supervisor provides a verbal job orientation to the assigned detainee. The assignment supervisor then provides an additional orientation on the detainee's first day of work. |
| 10. The voluntary work program meets: • OSHA standards • NFPA standards • ACA standards | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 5 – 33. VOLUNTARY WORK PROGRAM

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

☐ Check here if ICE detainees are not authorized to work at the IGSA facility. Mark NA on Form G-324A, page 3 and move to next section.

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 11. Medical staff screen and formally certifies detainee food service volunteers; <ul style="list-style-type: none"> Before the assignment begins As a matter of written procedure | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy addresses medical screening and certification for food handlers. All detainees must be approved food handlers before their kitchen assignment begins. |
| 12. Detainees receive safety equipment/ training sufficient for the assignment | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All detainees receive a tutorial regarding equipment operation and safety practices relative to their new position. |
| 13. Proper procedure is followed when an ICE detainee is injured on the job. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 5 – 33. VOLUNTARY WORK PROGRAM

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

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

An interview with the Voluntary Work Program supervisor; observation of assignment process; review of policy; and review of A-file documentation indicated detainees have an opportunity to work and earn money while detained at the facility.

(b)(6), (b)(7)(c) / 04/26/2012
 Reviewer's Signature / Date

Section VI JUSTICE

34 Detainee Handbook

35 Grievance System

36 Law Libraries and Legal Material

37 Legal Rights Group Presentations

PART 6 - 34. DETAINEE HANDBOOK

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| 1. The facility has a detainee handbook. Each detainee receives a copy of the local handbook and the ICE National Detainee Handbook. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Each detainee signs a statement documenting receipt of a handbook. |
| 2. The detainee handbook is written in English and translated into Spanish, and other languages spoken by significant numbers of detainees in that facility. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3. A procedure for requesting interpretive services for essential communication has been developed. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 4. Orientation materials are read to detainees who cannot read, or they are provided the material via audio or video recordings. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff ensures materials are communicated to all new admissions in a language or manner that is understood. |
| 5. The handbook supplements the facility orientation video where one is provided. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A ten minute orientation video is played in the Processing Area in English, Spanish and Creole. |
| 6. The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The handbook is revised annually. Interim revisions are posted, in bulletin form, in all housing units and that bulletin is inserted, as an attachment, into subsequently issued handbooks. |
| 7. There is an annual review of the handbook by a designated committee or staff member. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 8. The detainee handbook address the following issues: <ul style="list-style-type: none"> Personal Items permitted to be retained by the detainee. Initial issue of clothes, bedding and personal hygiene items. How to access care. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The handbook addresses all of the bullet points listed in this component. |
| 9. The detainee handbook states in clear language basic detainee responsibilities. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 10. The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 11. The handbook states when a medical examination will be conducted. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Medical screenings are performed within 24 hours of arrival and a physical examination is conducted within 14 days thereafter. |
| 12. The handbook describes the facility, housing units, dayrooms, In-dorm activities and special management units. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 6 - 34. DETAINEE HANDBOOK

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All of the requirements listed in this component are included in the handbook. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 15. The handbook describes barber hours and hair cutting restrictions. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All of the requirements listed in this component are included in the handbook. |
| 17. The handbook addresses religious programming. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 18. The handbook states times and procedures for commissary or vending machine usage. (where available) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Vending machines are accessible seven days a week from 5:00 A.M. to 11:00 P.M. |
| 19. The handbook describes the detainee voluntary work program. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 20. The handbook describes the library location and hours of operation and law library procedures and schedules. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The location of the library is inferred by language that instructs detainees to request its access from their housing unit officer. All detainees are escorted to the library. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All of the requirements listed in this component are included in the handbook. |
| 22. The handbook/supplement provides local ICE contact information. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 23. The handbook describes the facility contraband policy. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 24. The handbook describes the facility visiting hours and schedule and visiting rules and regulations. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 25. The handbook describes the correspondence policy and procedures. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 6 - 34. DETAINEE HANDBOOK

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 26. The handbook describes the detainee disciplinary policy and procedures, including: <ul style="list-style-type: none"> Prohibited acts and severity scale sanctions. Time limits in the Disciplinary Process. Summary of Disciplinary Process. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All bullet points listed in this component are included in the handbook. |
| 27. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> Informal (if used) and formal grievance procedures; The appeals process; In CDFs procedures for filing an appeal of a grievance with ICE. Staff/detainee availability to help during the grievance process. Guarantee against staff retaliation for filing/pursuing a grievance. How to file a complaint about officer misconduct with the Department of Homeland Security. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All of the bullet points listed in this component are included in the handbook. |
| 28. The handbook describes the medical sick call procedures for general population and segregation. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Sick call slips are available in the housing units. |
| 29. The handbook describes the facility recreation policy including: <ul style="list-style-type: none"> Outdoor recreation hours. Indoor recreation hours. In dorm leisure activities. Rules for television viewing. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All of the bullet points listed in this component are included in the handbook. |
| 30. The handbook describes the detainee dress code for daily living; and work assignments and the meaning of color-coded uniforms. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 31. The handbook specifies the rights and responsibilities of all detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 32. Detainees are required to sign for the handbook to ensure accountability. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The receipt for the handbook is filed in the detainee's A-file. |
| 33. Orientation materials are provided to illiterate detainees either orally or via audio/video tapes in a language they can understand. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Orientation materials delivered to illiterate detainees are presented in a language or manner that effectively communicates the information. |

PART 6 - 34. DETAINEE HANDBOOK

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

A review of the handbook; interviews with Immigration Enforcement Agents; and review of A-Files showed all detainees are provided a handbook/orientation materials in a language or manner that effectively communicates the requirements of the standard.

(b)(6), (b)(7)(c) 04/26/2012

Reviewer's Signature / Date

PART 6 – 35. GRIEVANCE SYSTEM

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 1. Detainees are informed about the facility's informal and formal grievance system. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The handbook addresses the grievance system. |
| 2. The admissions process includes providing each new arrival with a copy of the detainee handbook (or equivalent). | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All new admissions receive a handbook and sign a receipt documenting such. This receipt is placed in the detainee A-file. |
| 3. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> • Informal and formal grievance procedures; • The appeals process and step-by-step procedures; • Staff/detainee availability to help during the grievance process • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Justice. • How to file an emergency grievance. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All of the bullet points listed in this component are addressed in the handbook. |
| 4. Written procedures provide for the informal resolution of oral grievances (Not mandatory). If yes, the detainee has up to five days within which to make his or her concern known to a member of the staff. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. <ul style="list-style-type: none"> • Detainees may seek help from other detainees or facility staff when preparing a grievance. • Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Grievance forms are available in each housing unit. Detainees directly place their grievances into one of three designated mail boxes (dining hall, medical unit and Special Management Unit). Detainees may assist one another in grievance preparation. Staff ensures detainees receive the assistance necessary to effectively communicate their concern. |
| 6. Facility has written procedures for identifying and handling a time-sensitive emergency grievance. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy addresses emergency grievance recognition and hearing procedures. |

PART 6 – 35. GRIEVANCE SYSTEM

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 7. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Grievance Officers know how to identify emergency grievances. All grievances are picked up daily, Monday through Friday, by a Grievance Officer. They are then reviewed and sorted for appropriate hearing action. |
| 8. Staff shall not harass, discipline, punish or otherwise retaliate against a detainee who files a complaint or grievance. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy addresses this issue. |
| 9. Procedures include maintaining a Detainee Grievance Log. <ul style="list-style-type: none"> If not, an alternative acceptable record keeping system is maintained. "Nuisance complains" are identified in the records. For quality control purposes, staff document nuisance complaints received but not filed. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A grievance log is maintained. It does track receipt and disposition of 'nuisance complaints'. |
| 10. If a detainee who establishes a pattern of filing nuisance complaints or otherwise abusing the grievance system, the Facility Administrator may authorize staff to refuse to process subsequent complaints. This authority may not be delegated, even to an acting Facility Administrator. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All grievances involving alleged staff misconduct are automatically and immediately forwarded to the Supervisory Immigration and Enforcement Agent (SIEA) for handling. |
| 11. Staff are required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All grievances involving alleged staff misconduct are automatically and immediately forwarded to the Supervisory Immigration and Enforcement Agent (SIEA) for handling. |
| 12. Informal resolution of a written grievance is documented in the detainee's Detention File. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All grievances involving alleged staff misconduct are automatically and immediately forwarded to the Supervisory Immigration and Enforcement Agent (SIEA) for handling. |
| 14. In SPCs and CDFs, when a Detainee does not accept the grievance committee's decision, he/she files an appeal with the ICE Facility Administrator. <ul style="list-style-type: none"> In all facilities written procedures cover detainee appeals and are included in the detainee handbook | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | At this facility appeals are forwarded to the Supervisory Deportation Detention Officer (SDDO). That individual's decision is subject to final approval by the Facility Administrator. |

PART 6 – 35. GRIEVANCE SYSTEM

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---------|
| 15. In SPCs/CDFs, the detainee has a reasonable timeframe after the incident or informal-grievance outcome to file a formal grievance. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 6 – 35. GRIEVANCE SYSTEM

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

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

An interview with the Grievance Officer; review of the grievance activity over March and April, 2012; a review of grievance log entries; and a review of policy showed detainee grievances are processed through a fair, equitable system in a timely manner.

(b)(6), (b)(7)(c) 04/26/2012

Reviewer's Signature / Date

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| 1. The facility provides a designated law library for detainee use. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. The law library contains all materials listed in the "Access to Legal Materials" Standard, Attachment A. The listing of materials is posted in the law library. <ul style="list-style-type: none"> In lieu of/or in addition to the physical law library, ICE detainees have access to the Lexus Nexus electronic law library. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The library was inspected and found to be in compliance with the provisions found in this component. |
| 3. If the Lexis/Nexis CD-ROM service alternative is used for the publications in Attachment A, the facility provides detainees sufficient: <ul style="list-style-type: none"> Operable computers and printers, in sufficient numbers in order to provide access Photocopiers, and Supplies for both. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees have access to four computers that have the Lexis/Nexis program, and copiers with paper supplies. |
| 4. The library contains a sufficient number of chairs, is well lit and is reasonably isolated from noisy areas. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. The law library is adequately equipped with typewriters, computers or both and has sufficient supplies for daily use by the detainees. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The law library has computers, typewriters, and writing supplies available for detainee use. |
| 6. Detainees are provided with the means to save legal work in a private electronic format for future use. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees are provided with a floppy disc to store data. This disc remains secured in the law library, and reissued to the appropriate detainee upon request. |
| 7. The facility subscribes to updating services where applicable and legal materials requiring updates are current. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Legal materials from outside organizations are placed in the law library with ICE approval. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Recreation Specialist (ICE employee) manages the law library program, and complies with the requirements of this component. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 11. Detainees may request material not currently in the law library. Each request is reviewed and where appropriate an acquisition request is initiated and timely pursued. Request for copies of court decisions are accommodated within 3 – 5 business days. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 12. The facility permits detainees to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees are permitted to assist other detainees with legal work, free of charge. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ICE staff assists illiterate and non-English speaking detainees upon request. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 16. All denials of access to the law library fully documented. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All denials of access to the law library would be documented. There have been no denials for law library access during this rating period. |
| 17. Facility staff inform ICE Management when a detainee or group of detainees is denied access to the law library or law materials. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires ICE management to be notified if a group of detainees is denied law library access. |
| 18. Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 19. Indigent detainees are provided with free envelopes and stamps to mail related to legal matters. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Indigent detainees are provided stamps and writing materials free of charge. |

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

☒ **Meets Standard**
☐ **Does Not Meet Standard**
☐ **N/A**
☐ **Repeat Finding**

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

ICE and Doyon-Akal JV (contractual security) staff were interviewed, policy reviewed, and the law library inspected, concerning this standard. Law library activities by detainees were also observed.

The facility has a law library program that ensures access to the courts, legal representatives and legal materials. The law library contains four computers and two typewriters dedicated to legal work, legal reference material with contact information (legal

assistance providers), tables and chairs, is well lit, and has staff supervision. Reference material is kept current. Detainees have access to the law library a minimum of one hour a day, and may request additional time when necessary. Detainees housed in the Special Management Unit have access to the law library.

(b)(6), (b)(7)(c) 04/26/2012

Reviewer's Signature / Date

PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> Check here if No Group Presentations were conducted within the past 12 months. Mark Standard as Acceptable overall and continue on with next portion of worksheet. | | | | |
| 1. The Field Office is responsive to requests by attorneys and accredited representatives for group presentations. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3. The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy addresses publication/legal materials review procedures. |
| 4. Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy complies with the provisions noted in this component. There have been no denials to attend any presentation. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Two or more presentations are scheduled to address any overflow or excessive attendance issues. |
| 7. Detainees in segregation, unable to attend for security reasons may request separate sessions with presenters. Such requests are documented. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Presenters make special arrangements to provide sessions for detainees housed in the Special Management Unit. |
| 8. Interpreters are admitted when necessary to assist attorneys and other legal representatives. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. Presenters are afforded a minimum of one hour to make the presentation and additional time to conduct a question-and-answer session. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Presenters are allowed at least one hour for the presentation, can address questions, and are permitted to meet privately with detainees following their presentation. |
| 10. Staff permit presenters to distribute ICE/DRO-approved materials. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> Check here if No Group Presentations were conducted within the past 12 months. Mark Standard as Acceptable overall and continue on with next portion of worksheet. | | | | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy complies with the provisions noted in this component. There have been no privileges suspended during this rating period. |
| 13. The facility plays ICE/DRO-approved videotaped presentations on legal rights, at regular opportunities at the request of outside organizations. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 14. A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The policy referenced in this component is available for detainee access in the law library. |
| 15. The facility maintains equipment for viewing approved electronically formatted presentations. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Equipment is available in meeting rooms to comply with this component. |

PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

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

The Recreation Specialist (responsible for managing Legal Rights Group presentations) was interviewed, policy reviewed, and several group presentations observed, concerning this standard.

Detainee rights are preserved by allowing their access to organizations that will inform and provide detainees assistance concerning U.S. Immigration law and procedures.

ICE management staff approves all presentations and materials provided. Detainees are informed of presentation dates/times in advance. All interested detainees are permitted to attend these presentations, including those housed in the Special Housing Unit. Presenters are allowed sufficient time to provide information, answer questions, and meet with detainees individually.

(b)(6), (b)(7)(c) / 04/26/2012

Reviewer's Signature / Date

Section VII ADMINISTRATION & MANAGEMENT

- 38 Detention Files**
- 39 News Media Interviews and Tours**
- 40 Staff Training**
- 41 Transfer of Detainees**

PART 7 – 38. DETENTION FILES

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 1. A Detention File is created for every new arrival whose stay will exceed 24 hours. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A detention file is created for all new arrivals |
| 2. The detainee Detention File contains either originals or copies of documentation and forms generated during the admissions process. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detention files contain all documents received at admission except those required to be placed in an A-file. |
| 3. The detainee's Detention File also contains documents generated during the detainee's custody. <ul style="list-style-type: none"> • Special requests • Any G-589s and/or I-77s or IGSA equivalent, closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Several detention files were reviewed and found to contain the forms noted in this component. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detention files are stored in a secure room in the Processing Area. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 6. The officer closing the Detention File makes a notation that the file is complete and ready to be archived. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff closing the detention file makes a notation indicating the file is complete and ready for archiving. |
| 7. Staff make copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. Electronic record-keeping systems and data are protected from unauthorized access. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Computers used for electronic data management are maintained in secure settings. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detainees sign a release of information form, if necessary, at the time of admission. The form is then placed in the detention file. |

PART 7 – 38. DETENTION FILES

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The area where detention files are processed was inspected and found to meet the requirements of this component. |
| 13. The Detention Operations Supervisor or equivalent can direct certain documents be added to a detainee's detention File. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Management staff can direct additional documents be added to a detention file. |
| 14. Archived files are purged after six years by shredding or burning. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires that files be purged in this manner. |
| 15. Field Offices maintains detention files on detainees housed in IGSA Facilities as needed. These files are maintained for a minimum of 18 months. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 7 – 38. DETENTION FILES

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

ICE and Doyon-Akal JV (contractual security) staffs were interviewed, policy reviewed, and detention files examined, concerning this standard. The file storage room and processing desk was also inspected.

Facility management is enhanced by files of information being created on detainees admitted to the facility. This data contains significant and critical information on detainees' current status, history, a property inventory, and other relevant information. The files contain paper documents hand-written or produced by electronic data systems. The files are maintained securely, handled only by staff, are inventoried, and closed at the time of a detainee's release.

Archived files are stored for safekeeping.

(b)(6), (b)(7)(c) 04/26/2012

Reviewer's Signature / Date

PART 7 - 39. NEWS MEDIA INTERVIEWS AND TOURS

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

| Components | Meets Standards | Does Not Meet Standards | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The facility Public Information Officer makes recommendations to the Field Office Director concerning all media requests, who will approve or reject same. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Field Office Director consults with Headquarters concerning all cases described in this component. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. All press pools are organized according to the procedures in the Detention Standard. <ul style="list-style-type: none"> A press pool may be established when the Field Office Director and facility administrator determine that the volume of interview requests warrants such action. All media representatives with pending or requested, tours, or visits were notified that, effective immediately and until further notice, all media representatives must comply with the press pool guidelines established by the Field Office Director. All material generated from such a press pool is made available to all news media, without right of first publication or broadcast. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | There has been no press pools established during this inspection period. Facility policy addresses all issues listed in this component. |

PART 7 - 39. NEWS MEDIA INTERVIEWS AND TOURS

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

The facility Public Information Officer (PIO) (handles all media issues) was interviewed by phone, and policy reviewed, concerning this standard.

Policy allows the public and media to be informed of facility events through interviews and tours.

The PIO addresses all media inquiries requiring involvement of the facility, and the Field Officer Director consults with Headquarters concerning high profile detainees and issues. An ICE PIO is also available for consultation when necessary.

(b)(6), (b)(7)(c) / 04/26/2012
Reviewer's Signature / Date

PART 7 – 40. STAFF TRAINING

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 1. The facility conducts appropriate orientation, initial training, and annual training for all staff, contractors, and volunteers. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All staff, ICE and contractual, receives an orientation session. All ICE staff, security and non-security, receives 40 hours of 'New Officer Initial Orientation Training'. ICE security staff receives 40 hours of annual refresher training and non-security receives 16 hours. Doyon-Akal JV (contractual security provider) security staff receives 54 hours of 'New Officer Training', and 40 hours of annual refresher training. Doyon-Akal JV non-security staff (dietary staff) receives 32 hours of initial orientation training and 16 hours of annual refresher training. Volunteers receive 8 hours of initial orientation training. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Training Officer has successfully completed numerous U.S. Border Patrol and ICE Instructor Training Programs. He is also a professor at a local university and guest lecturer at local community colleges. |
| 4. Training is governed and guided by a training plan that is reviewed and approved annually by the facility administrator. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The training plan is entitled 'Performance-Based Standards for Adult Local Detention Facilities'. It is an American Correctional Association (ACA) publication. |
| 5. An accurate and complete record is maintained of all formal training activities in: <ul style="list-style-type: none"> Individual training folders, Other training records systems, and/or Electronic systems. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Training records are a combination of electronic and paper files accessible to all training instructors. Training files are current and inclusive of required curricula. |

PART 7 – 40. STAFF TRAINING

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| <p>6. Each new employee, contractor, and volunteer is provided an orientation prior to assuming duties. While tailored specifically for staff, contractors, and volunteers, the orientation programs include, at a minimum:</p> <ul style="list-style-type: none"> • Working conditions • Cultural diversity/understanding staff & detainees • Code of ethics • Personnel policy manual • Employees' rights and responsibilities • Drug-free Workplace • Health-related emergencies • Signs of Suicide risk and precautions • Suicide prevention and intervention • Hunger strikes • Use of Force • Keys and Locks • Overview of the criminal justice system • Tour of the facility • Facility goals and objectives • Facility organization • Staff rules and regulations • Sexual harassment/sexual misconduct awareness • Personnel policies • Program overview • Orientation and training on detainee handbook and detainee rights. • Requirement of special-needs detainees. • National Detention Standards | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <p>The 2012 annual training schedule includes the bullet points listed in this component. These topics are addressed to all employees in their initial orientation training session. Volunteers only receive applicable training modules during their eight hours of orientation training (i.e. code of ethics, drug-free workplace, working conditions, etc.).</p> |

PART 7 – 40. STAFF TRAINING

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---|
| <p>7. Clerical/support employees who have minimal detainee contact receive a minimum of:</p> <ul style="list-style-type: none">• Working conditions• Cultural diversity/understanding staff & detainees• Code of ethics• Personnel policy manual• Employees' rights and responsibilities• Overview of the criminal justice system• Tour of the facility• Facility goals and objectives• Facility organization• Staff rules and regulations• Sexual harassment/sexual misconduct awareness• Personnel policies• Program overview• National Detention Standards.• Key and Lock Control.• Suicide risk and prevention. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <p>The 2012 annual training schedule includes the bullet points listed in this component. Clerical/support employees receive training on these topics in their initial orientation training session and/or annual refresher training.</p> |

PART 7 – 40. STAFF TRAINING

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| <p>8. Professional and support employees (including contractors) who have regular or daily detainee contact will receive training on the following subjects, at a minimum:</p> <ul style="list-style-type: none"> • Security procedures and regulations • Code of Ethics • Health-related emergencies • Drug-free workplace • Supervision of detainees • Signs of suicide risk and hunger strike • Suicide precautions • Use-of-force regulations and tactics • Report writing • Detainee rules and regulations • Key control • Rights and responsibilities of detainees • Safety procedures • Emergency plan and procedures • Interpersonal relations • Social/cultural lifestyles of the detainee population • Cultural diversity/understanding staff & detainees • Communication skills • Cardiopulmonary resuscitation (CPR)/First aid • Counseling techniques • Sexual harassment/sexual misconduct awareness. • National Detention Standards. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <p>The 2012 annual training schedule includes the bullet points listed in this component. Professional, management and support employees receive training on these topics in their initial orientation training session and/or annual refresher training.</p> |

PART 7 – 40. STAFF TRAINING

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| <p>9. Full-time health care employees receive at least 40 hours of formal orientation before undertaking their assignments. At a minimum, the orientation program includes:</p> <ul style="list-style-type: none">• The purpose, goals, policies and procedures for the facility and parent agency security and contraband regulations• Key control; appropriate conduct with detainees• Responsibilities and rights of employees• Standard precautions• Occupational exposure• Personal protective equipment• Bio-hazardous waste disposal• Overview of the detention operations.• National Detention Standards.• Medical grievance procedures and protocol.• Requirement for special needs detainees.• Code of Ethics• Drug free workplace• Hostage situations and staff conduct if taken hostage. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <p>The 2012 annual training schedule includes the bullet points listed in this component. These topics are addressed to all full-time health care employees in their initial orientation training session. This training is delivered prior to their assuming health care duties.</p> |

PART 7 – 40. STAFF TRAINING

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| <p>10. Security personnel (including contractors) will receive training on the following subjects, at a minimum:</p> <ul style="list-style-type: none"> • Security procedures and regulations • Supervision of detainees • Searches of detainees, housing units, and work areas • Signs of suicide risk, precaution, prevention and intervention. • Code of Ethics • Health-related emergencies • Drug-free workplace • Suicide precautions • Self-defense techniques • Use-of-force regulations and tactics • Report writing • Detainee rules and regulations • Key control • Rights and responsibilities of detainees • Safety procedures • Emergency plans and procedures • Interpersonal relations • Social/cultural lifestyles of the detainee population • Cultural diversity/understanding staff & detainees • Communication skills • Cardiopulmonary resuscitation (CPR)/first aid • Counseling techniques • Sexual abuse/assault awareness • National Detention Standards. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The 2012 annual training schedule includes the bullet points listed in this component. All security staff, ICE and Doyon-Akal JV, receives training on these topics in their initial orientation training session and/or annual refresher training. |
| <p>11. Situation Response Teams (SRTs) receive:</p> <ul style="list-style-type: none"> • Specialized training before undertaking their assignments. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (b)(7)e |
| <p>12. Facility management and supervisory staff receive:</p> <ul style="list-style-type: none"> • Management and Supervisory training | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| <p>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.</p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (b)(7)e |

PART 7 – 40. STAFF TRAINING

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|---|
| 14. (MANDATORY) All personnel authorized to use firearms demonstrate competency in their use at least annually. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All staff authorized to use firearms demonstrate competency in their use during quarterly range qualification. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Only ICE staff is authorized to use chemical agents. They receive training in the use of chemical agents prior to it being assigned to them. |
| 16. All staff receives orientation and annual training on the facility's drug-free workplace program. Typical contents are: <ul style="list-style-type: none"> • Staff, contractors, and volunteers prohibited from: • Using illegal drugs. • Possessing illegal drugs except in the authorized performance of official duties. • Procedures to be used to ensure compliance. • Opportunities available for treatment and/or counseling for drug abuse. • Penalties for violation of the policy. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A drug-free workplace program is a training component included in all initial orientation and 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | New staff is required to sign a statement that they have received and understand the drug-free workplace program. This documentation is kept in their training file. |
| 18. All staff are trained during orientation and annually thereafter, regarding the facility's code of ethics. Typical contents are: <ul style="list-style-type: none"> • Staff, contractors, and volunteers prohibited from: • Using their official positions to secure privileges for themselves or others. • Engaging in activities that constitute a conflict of interest. • Accepting any gift or gratuity from, or engaging in personal business transactions with a detainee or a detainee's immediate family. • Acceptable behavior in the areas of campaigning, lobbying or political activities. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Code of ethics is a training component included in all initial orientation and annual refresher training. The bullet points listed in this component are included in the training module. |

PART 7 – 40. STAFF TRAINING

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | New staff is required to sign a statement that they have received and understand the work rules, code of ethics, applicable policies and procedures, conditions of employment and personnel policies. This documentation is kept in their training file. |
| 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: <ul style="list-style-type: none"> • Recognizing of signs of potential health emergencies and the required responses. • Administering first aid and cardiopulmonary resuscitation (CPR). • Obtaining emergency medical assistance through the facility plan and its required procedures. • Recognizing signs and symptoms of mental illness, suicide risk, retardation, and chemical dependency. • The facility's established plan and procedures for providing emergency medical care including, when required, the safe and secure transfer of detainees for appropriate hospital or other medical services, including by ambulance when indicated. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All security staff is trained as first responders in the health related emergencies module. All of the bullet points listed in this component are included in this and other modules. |
| 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: <ul style="list-style-type: none"> • Understanding that sexual abuse or assault is never an acceptable consequence of detention. • Recognizing housing or other situations where sexual abuse or assault may occur. • Recognizing the physical, behavioral, and emotional signs of sexual abuse or assault and ways to prevent such occurrences. • Knowing how to report knowledge or suspicion of sexual abuse or assault and make intervention referrals in the facility's program. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Sexual Abuse and Assault Prevention and Intervention Program are provided to all employees in annual refresher training. All of the bullet points listed in this component are included in this training module. |

PART 7 – 40. STAFF TRAINING

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|--|
| <p>22. (MANDATORY) All staff in frequent contact with detainees are trained at least annually on the facility's Suicide Prevention and Intervention Program, to include:</p> <ul style="list-style-type: none"> Identifying the warning signs and symptoms of impending suicidal behavior, Demographic, cultural, and precipitating factors of suicidal behavior, Responding to suicidal and depressed detainees, Communication between correctional and health care personnel, Referral procedures, Housing observation and suicide-watch level procedures, and Follow-up monitoring of detainees who have attempted suicide. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The Suicide Prevention and Intervention Program is provided to all employees in annual refresher training. All of the bullet points listed in this component are included in this training module. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The 'Signs of Hunger Strikes' is a training module provided to all employees in initial orientation and annual refresher training sessions. |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| <p>25. Through ongoing (at least annual) training, all detention facility staff are made aware of their responsibilities to control situations involving aggressive detainees. At a minimum, training shall include:</p> <ul style="list-style-type: none"> The requirements of this Detention Standard The use of force continuum Communication techniques Cultural diversity Dealing with the mentally ill Confrontation-avoidance techniques Approved methods of self-defense Force cell-move techniques Communicable diseases, particularly precautions to be taken for use of force Application of restraints (progressive and hard) Reporting procedures. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All of the bullet points listed in this component are addressed in security officers' initial orientation training session and annual refresher training. |

PART 7 – 40. STAFF TRAINING

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 | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|--------------------------|---------|
| 26. Employees are encouraged to continue their education and professional development through incentives such as salary enhancement, reimbursement of costs, and administrative leave. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 7 – 40. STAFF TRAINING

☒ **Meets Standard** ☐ **Does Not Meet Standard** ☐ **N/A** ☐ **Repeat Finding**

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

Interviews with ICE and Doyon-Akal JV Training Officers; a review of training files; and review of the 2012 training plan and synopses of training modules revealed staff, contractors and volunteers receive initial orientation and annual refresher training that provides information to adequately prepare and maintain competent performance in their assigned positions.

(b)(6), (b)(7)(c) 04/26/2012

Reviewer's Signature / Date

PART 7 - 41. TRANSFER OF DETAINEES

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|---|-------------------------------------|--------------------------|--------------------------|--|
| 1. When a detainee is represented by legal counsel or a legal representative, and a G-28 has been filed, the representative of record is notified by the detainee's Deportation Officer within 24 hours of transfer. <ul style="list-style-type: none"> The notification is recorded in the detainee's file When the A-File is not available, notification is noted within ENFORCE. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The representative of record is notified by phone within 24 hours by ICE staff of the detainee's transfer. Documentation of this contact is placed in the detainee's A-file. |
| 2. Notification includes the reason for the transfer and the location of the new facility, | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3. The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The deportation officer exercises discretion in making notification of transfers if security concerns exist. |
| 4. The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy requires that the attorney and detainee be advised that they must notify family members of the transfer. |
| 5. Facility policy mandates that: <ul style="list-style-type: none"> Times and transfer plans are never discussed with the detainee prior to transfer. The detainee is not notified of the transfer until immediately prior to departing the facility. The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policy complies with the requirements of this component. |
| 6. The detainee is provided with a completed Detainee Transfer Notification Form. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 7. Form G-391 or equivalent authorizing the removal of a detainee from a facility is used. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A G-391 Form or equivalent is used authorizing the removal of a detainee. |
| 8. For medical transfers: <ul style="list-style-type: none"> The Division of Immigration Health Services (DIHS) Medical Director or designee approves the transfer. Medical transfers are coordinated through the local ICE/DRO office. A medical transfer summary is completed and accompanies the detainee. Detainee is issued a minimum of 7 days worth of prescription medications. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

PART 7 - 41. TRANSFER OF DETAINEES

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

| Components | Meets Standard | Does Not Meet Standard | N/A | Remarks |
|--|-------------------------------------|--------------------------|-------------------------------------|---|
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 10. For medical transfers, transporting officers receive instructions regarding medical issues. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 11. Detainee's funds, valuables and property are returned and transferred with the detainee to his or her new location. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All detainee property is transferred with the detainee at the time of his move to a new location. |
| 12. Transfer and documentary procedures outlined in Section C and D are followed. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Indigent detainees are allowed to make a phone call at the time of arrival. |
| 14. Meals are provided when transfers occur during normally schedule meal times. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Meals (sack lunches) are provided when transfers occur during meal times. |
| 15. An A-File or work folder accompanies the detainee when transferred to a different Field Office or sub-office. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 16. A-Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | A-files are given to transportation staff and travel with the detainees to the new facility. |

PART 7 - 41. TRANSFER OF DETAINEES

☒ **Meets Standard** ☐ **Does Not Meet Standard** ☐ **N/A** ☐ **Repeat Finding**

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

ICE staff were interviewed, policy reviewed, and the transfer process observed (in the Processing Area), concerning this standard.

Policy outlines the professional and secure transfer process to another facility, ensuring a safe movement, and the protection of detainee funds and property.

Transfer documents were found to be accurate, and forwarded to staff transporting detainees. These files and documents are presented to staff at the receiving facility.

(b)(6), (b)(7)(c) 04/26/2012

Reviewer's Signature / Date

A. Type of Facility Reviewed

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

Estimated Man-days Per Year
217,345

B. Current Inspection

Type of Inspection
☐ Field Office ☒ HQ Inspection

Date[s] of Facility Review
04/24/2012 - 04/26/2012

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
April 5-7, 2011

Previous Rating
☒ Meets Standards ☐ Does Not Meet Standards

D. Name and Location of Facility

Name
Krome North Service Processing Center

Address (Street and Name)
18201 SE 12th Street

City, State and Zip Code
Miami, Florida 33196

County
Dade

Name and Title of Facility Administrator
(Warden/OIC/Superintendent)

(b)(6), (b)(7)(c) / AFOD / OIC

Telephone # (Include Area Code)
(305) 207-6, (b)(7)(c)

Field Office / Sub-Office (List Office with oversight responsibilities)

Miami, FL

Distance from Field Office
On-site

E. ICE Information

Name of Inspector (Last Name, Title and Duty Station)

(b)(6), (b)(7)(c) LCI / Nakamoto Group

Name of Team Member / Title / Duty Location

(b)(6), (b)(7)(c) Medical SME / Nakamoto Group

Name of Team Member / Title / Duty Location

(b)(6), (b)(7)(c) Inspector / Nakamoto Group

Name of Team Member / Title / Duty Location

(b)(6), (b)(7)(c) Security SME / Nakamoto Group

Name of Team Member / Title / Duty Location

/ /

F. CDF/IGSA Information Only

Contract Number Date of Contract or IGSA

Basic Rates per Man-Day

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

; ;

G. Accreditation Certificates

List all State or National Accreditation[s] received:
NCCHC, TJC

☐ Check box if facility has no accreditation[s]

H. Problems / Complaints (Copies must be attached)

The Facility is under Court Order or Class Action Finding

☐ Court Order ☐ Class Action Order

The Facility has Significant Litigation Pending

☐ Major Litigation ☐ Life/Safety Issues

☒ Check if None.

I. Facility History

Date Built
1979

Date Last Remodeled or Upgraded
January, 2007

Date New Construction / Bedspace Added
N/A

Future Construction Planned

☒ Yes ☐ No Date: November, 2012

Current Bedspace Future Bedspace (# New Beds only)
581 Number: 30 Date: November, 2012

J. Total Facility Population

Total Facility Intake for previous 12 months
10,228

Total ICE Mandays for Previous 12 months
217,345

K. Classification Level (ICE SPCs and CDFs Only)

| | L-1 | L-2 | L-3 |
|--------------|-----|-----|-----|
| Adult Male | 183 | 238 | 142 |
| Adult Female | N/A | N/A | N/A |

L. Facility Capacity

| | Rated | Operational | Emergency |
|--|-------|-------------|-----------|
| Adult Male | 581 | 581 | 1,014 |
| Adult Female | N/A | N/A | N/A |
| <input type="checkbox"/> Facility holds Juveniles Offenders 16 and older as Adults | | | |

M. Average Daily Population

| | ICE | USMS | Other |
|--------------|-----|------|-------|
| Adult Male | 584 | 0 | 0 |
| Adult Female | N/A | N/A | N/A |

N. Facility Staffing Level

Security: Support:

(b)(7)(e)

Significant Incident Summary Worksheet

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

| <i>Incidents</i> | <i>Description</i> | Jan – Mar | Apr – Jun | Jul – Sept | Oct – Dec |
|--|--|------------------|------------------|-------------------|------------------|
| Assault: Offenders on Offenders ¹ | Types (Sexual ² , Physical, etc.) | 35/P | 28/P | 34/P | 22/P |
| | With Weapon | 1 | 1 | 1 | 0 |
| | Without Weapon | 34 | 27 | 33 | 22 |
| Assault: Detainee on Staff | Types (Sexual Physical, etc.) | 6/P | 6/P | 7/P | 2/P |
| | With Weapon | 0 | 0 | 0 | 0 |
| | Without Weapon | 6 | 6 | 7 | 2 |
| Number of Forced Moves, incl. Forced Cell moves ³ | | 22 | 10 | 9 | 20 |
| Disturbances ⁴ | | 2 | 0 | 0 | 0 |
| Number of Times Chemical Agents Used | | 0 | 0 | 0 | 0 |
| Number of Times Special Reaction Team Deployed/Used | | 1 | 1 | 1 | 0 |
| # Times Four/Five Point Restraints applied/used | Number/Reason (M=Medical, V=Violent Behavior, O=Other) | 2/M | 0 | 0 | 2/M |
| | Type (C=Chair, B=Bed, BB=Board, O=Other) | B | N/A | N/A | B |
| Number of Times Canines Used in Facility | | 0 | 0 | 0 | 0 |
| Offender / Detainee Medical Referrals as a result of injuries sustained. | | 14 | 8 | 9 | 4 |
| Escapes | Attempted | 1 | 0 | 0 | 0 |
| | Actual | 0 | 0 | 0 | 1 |
| Grievances: | # Received | 30 | 109 | 80 | 34 |
| | # Resolved in favor of Offender/Detainee | 5 | 29 | 10 | 0 |
| Deaths | Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other) | N/A | N/A | N/A | N/A |
| | Number | 0 | 0 | 0 | 0 |
| Psychiatric / Medical Referrals | # Medical Cases referred for Outside Care | 113 | 183 | 120 | 111 |
| | # Psychiatric Cases referred for Outside Care | 11 | 8 | 8 | 6 |

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

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

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

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

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

LCI Review Assurance Statement

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

| | |
|--|-------------------|
| Lead Compliance Inspector: (Print Name) | Signature |
| (b)(6), (b)(7)(c) | (b)(6), (b)(7)(c) |
| Title & Duty Location | Date |
| Lead Compliance Inspector, Safety/Food Service SME, The Nakamoto Group, Inc. | 04/26/2012 |

| Team Members | |
|--|---|
| Print Name, Title, & Duty Location | Print Name, Title, & Duty Location |
| (b)(6), (b)(7)(c) Medical SME The Nakamoto Group, Inc. | (b)(6), (b)(7)(c) Inspector The Nakamoto Group, Inc. |
| Print Name, Title, & Duty Location | Print Name, Title, & Duty Location |
| (b)(6), (b)(7)(c) Security SME The Nakamoto Group, Inc. | |

Recommended Rating:

☒ Meets Standards
☐ Does Not Meet Standards

Comments: The facility is located in Miami, Florida on a converted United States military compound previously used as a Nike Missile Base from 1964-1979. The facility opened in 1979. It consists of multiple buildings housing: medical unit; kitchen/dining hall; program areas; visiting rooms; law library; laundry; indoor/outdoor recreation areas; administrative ICE offices; and housing units configured into dormitory settings of various occupancy that combine to a rated capacity of 581.

The detainees registered no substantive complaints about: food; medical treatment; staff treatment; access to legal materials; personal property; religious services; access to telephones; or any other operation/program concerns. The population was orderly, quiet and responsive to staff. Staff were aware of their responsibilities and knowledgeable of daily schedules and protocols.

The Significant Incident Summary Worksheet lists one actual and one attempted escape. The details are as follows: The actual escape was a November 2, 2011 unauthorized release from the facility. The Processing Area bonded out the wrong detainee (the two detainees shared the same first and last name, only the middle initial was different). On November 4, 2011 the error was discovered. Subsequently, the Fugitive Operation Team was dispatched. The detainee was found and returned to the facility without incident the same day. The attempted escape was a detainee in unauthorized proximity of the exterior fence. The perimeter was neither breached nor the fence climbed. Staff responded to that location and escorted the detainee to the Special Management Unit for investigation without incident.

The average length of stay was reported as approximately fourteen days. The facility does not have a canine unit, and there are no tasers on its equipment inventory.

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



U.S. Immigration
and Customs
Enforcement

MEMORANDUM FOR: Marc J. Moore
Field Office Director

FROM:

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

(A) AD

Assistant Director for Custody Management

SUBJECT: Krome North Service Processing Center Annual Review 2012

The annual review of the Krome North Service Processing Center conducted on April 24-26, 2012, in Miami, Florida has been received. A final rating of **Meets Standards** has been assigned and this review is closed.

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

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

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

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

Deputy Assistant Director, Custody Management Division at (202) 732-7320

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

cc: Official File