

Condition of Confinement Review Worksheet

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

This Form to be used for Inspections of all Facilities Used Over 72 Hours**ICE Detention Standards Review Worksheet****REVIEW TEAM USE: (Edits Permitted, ALL FIELDS REQUIRED)**

Facility Information			
Facility Name: Laredo Processing Center			Pre-Occupancy: <input type="checkbox"/>
Facility Type: IGSA Intergovernmental Service Agreement (IGSA), ICE Service Processing Center (SPC), ICE Contract Detention Facility (CDF)			
Address:	4702 East Saunders		
City: Laredo	State: TX	Zip Code: 78041	
County:	Webb		
CEO Name	(b)(6), (b)(7)(c)	CEO Title: Warden	
Review Information (Use following format for dates: mm/dd/yyyy)			
Start Date: 6/5/2012	End Date: 6/7/2012	Review Type: Headquarters	
Lead Name	(b)(6), (b)(7)(c)	Lead Title: LCI	
Review Document Issue Summary (See Document Check Section to Review/Update)			
Error(s) Found:	39	Items Not Rated:	0

ICE HQ USE ONLY: (DO NOT EDIT*)

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If Edits are required, contact ICE HQ for an updated form.*FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)**

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DOCUMENT CHECK

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

NOTE: FOR EACH STANDARD RATED BELOW ACCEPTABLE, FACILITIES **MUST** ATTACH A PLAN OF ACTION FOR BRINGING OPERATIONS INTO COMPLIANCE. EACH FACILITY SHOULD EXAMINE THE ENTIRE WORKSHEET TO IDENTIFY AREAS OF IMPROVEMENT, INCLUDING THOSE STANDARDS WHERE AN OVERALL FINDING OF ACCEPTABLE WAS ACHIEVED.

Section I

Detainee Service Standards

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

ACCESS TO LEGAL MATERIALS (Key: A)		
POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility provides a designated law library for detainee use.	Meets Standard	The inspector visited the law library, and examined the schedule for detainee use.
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.	Meets Standard	
3. The library contains a sufficient number of chairs, is well lit, and is reasonably isolated from noisy areas.	Meets Standard	The library is a private room, has an adequate supply of working space and chairs and is well lit.
4. The law library is adequately equipped with typewriters and/or computers, and has sufficient supplies for daily use by the detainees.	Meets Standard	The library has two computers, two typewriters and a printer.
5. In addition to the physical law library, detainees have access to the Lexus Nexus electronic law library.	Meets Standard	Both computers in the library are loaded with a current version of LexisNexis.
6. Where provided, the Lexus Nexus library is updated and is current.	Meets Standard	The inspector examined the LexisNexis disc which was loaded on each of the computers in the library. The disc was dated 02/2012.
7. 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 ICE prior to inclusion.	Meets Standard	
8. There is a designated ICE or facility employee who inspects, updates, and maintains/replaces legal materials and equipment on a routine basis.	Meets Standard	ICE logs documenting routine inspections of the law library equipment and materials were examined by the inspector.
9. Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.	Meets Standard	The law library is available for detainee use from 9 a.m. - 3 p.m., and again from 4:30 p.m. - 8:30 p.m. seven days per week. Detainees do not forego recreation time in lieu of library usage.
10. Detainees may request materials not currently in the law library. Each request is reviewed and, where appropriate, an acquisition request is timely initiated. Requests for copies of court decisions are accommodated within 3 – 5 business days.	Meets Standard	Request forms filed by detainees petitioning ICE for legal materials were examined.
11. Detainees are permitted to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	Meets Standard	

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ACCESS TO LEGAL MATERIALS (Key: A)		
POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
12. Illiterate or non-English-speaking detainees without legal representation receive access to more than just English-language law books after indicating their need for help.	Meets Standard	
13. Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.	Meets Standard	The detainee handbook details the amount and type of legal materials detainees may keep in their possession. Detainees are also allowed to check out legal reading materials from the library.
14. Detainees housed in Administrative Detention and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.	Meets Standard	Detainees held in segregation may request access to legal materials and the law library. The request is made and honored within 24 hours.
15. All denials of access to the law library fully documented.	Meets Standard	The inspector examined a log book in the segregation unit which is used to document detainee use of the law library. There were no instances of denials recorded.
16. Facility staff informs ICE Management when a detainee or group of detainees is denied access to the law library or law materials.	Meets Standard	
17. Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	Meets Standard	

ACCESS TO LEGAL MATERIALS – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> The assigned Immigration Enforcement Agent (IEA) and Deportation Officer (DO) were interviewed. The facility's law library was inspected. LexisNexis software was operating on each of the computers in the library. ICE records documenting routine maintenance visits to the library were reviewed. Postings in two different housing units advising detainees of law library hours were observed. Policy and handbook statements listing the library service and hours of availability were reviewed.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6), (b)(7)(c)	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

ADMISSION AND RELEASE (Key: B)		
POLICY: ALL DETAINEES WILL BE ADMITTED AND RELEASED IN A MANNER THAT ENSURES THEIR HEALTH, SAFETY, AND WELFARE. THE ADMISSIONS PROCEDURE WILL, AMONG OTHER THINGS INCLUDE: MEDICAL SCREENING; A FILE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WILL BE INVENTORIED, DOCUMENTED, AND SAFEGUARDED AS NECESSARY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. In-processing includes an orientation of the facility. The orientation includes: Unacceptable activities and behavior, and corresponding sanctions; How to contact ICE; The availability of <i>pro bono</i> legal services, and how to pursue such services; schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.	Meets Standard	Each new arrival receives an orientation to the facility which includes receiving a copy of the facility's and the ICE National Detainee Handbook, and viewing a "know your rights" video. Both detail rules and procedures governing such items as detainee behavior, correspondence, contact with ICE, telephone usage, correspondence and visitation.
2. Medical screenings are performed by medical staff <u>or</u> persons who have received specialized training for the purpose of conducting an initial health screening.	Meets Standard	All detainees are examined by the facility's medical staff prior to being assigned to a housing unit.
3. Each new arrival is classified according to criminal history and threat levels. Criminal history is provided for each detainee by the ICE field office.	Meets Standard	ICE classification forms and the facility's "booking form" were examined in ten detention files.
4. All new arrivals are searched in accordance with the "Detainee Search" standard. An officer of the same sex as the detainee conducts the search and the search is conducted in an area that affords as much privacy as possible.	Meets Standard	Upon admittance to the facility, detainees are pat searched by a member of the same sex.
5. Detainees are stripped searched only when cause has been established and not as routine policy. Non-criminal detainees are not strip-searched but are patted down, unless reasonable suspicion is established.	Meets Standard	Policy prohibits strip searching of detainees. Newly admitted detainees are pat searched. Detainees are also pat searched after contact visits with an attorney.
6. The "Contraband" standard governs all personal property searches. IGSA/CDFs use or have a similar contraband standard. Staff prepares a complete inventory of each detainee's possessions. The detainee receives a copy.	Meets Standard	
7. Staff completes Form I-387 or similar form for CDFs and IGSA for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	Meets Standard	
8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	Meets Standard	Bedding and clothing allocations are detailed in the detainee handbook and are geared to the climatic conditions of the local area.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

ADMISSION AND RELEASE (Key: B)		
POLICY: ALL DETAINEES WILL BE ADMITTED AND RELEASED IN A MANNER THAT ENSURES THEIR HEALTH, SAFETY, AND WELFARE. THE ADMISSIONS PROCEDURE WILL, AMONG OTHER THINGS INCLUDE: MEDICAL SCREENING; A FILE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WILL BE INVENTORIED, DOCUMENTED, AND SAFEGUARDED AS NECESSARY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
9. The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE Detainees are not charged for these items.	Meets Standard	Personal hygiene items, including items for female detainees when applicable, are issued to all detainees upon admission. Such items are replenished on a one for one exchange basis.
10. All releases are properly coordinated with ICE using a Form I-203.	Meets Standard	Completed I-203 forms were examined in five inactive detention files reviewed.
11. Staff completes paperwork/forms for release as required.	Meets Standard	Release check lists were reviewed in five inactive detention files.

ADMISSION AND RELEASE – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Ten active and five inactive detention files were examined. Policies and both English and Spanish versions of the detainee handbook were reviewed. ICE and facility officers responsible for admission and release of detainees at the facility were interviewed. A "Know Your Rights" video, which is shown to detainees upon admission as well as presented every other day in the housing units, was viewed by the inspector. There are Spanish and English versions of the video.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) <div style="border: 1px solid black; padding: 2px; display: inline-block;">(b)(6), (b)(7)(c)</div>	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

CLASSIFICATION SYSTEM (Key: C)		
POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a system for classifying detainees. In CDFs and IGSA's, an Objective Classification System or similar is used.	Meets Standard	Policy describes in detail the facility's classification/assessment system.
2. The facility classification system includes: <ul style="list-style-type: none"> Classifying detainees upon arrival; Separating from the general population those individuals who cannot be classified upon arrival; and The first-line supervisor or designated classification specialist reviewing every classification decision. 	Meets Standard	The inspector reviewed fifteen detention files, and found that detainees were classified upon arrival and that the classification had been reviewed by a facility supervisor.
3. The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	Meets Standard	All detainee files reviewed contained ICE classification forms (I-213).
4. Staff uses 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 detainees classifications.	Meets Standard	
5. Housing assignments are based on classification-level.	Meets Standard	The inspector visited two different housing units to confirm that housing assignments were based upon classification levels
6. A detainee's classification-level does not affect his/her recreation opportunities. Detainees recreate with persons of similar classification designations.	Meets Standard	The inspector observed similarly classified detainees at recreation.
7. Detainee work assignments are based upon classification designations.	Meets Standard	
8. The classification process includes reassessment/reclassification. At IGSA's, detainees may request reassessment 60 days after arrival.	Meets Standard	Policy and the handbook dictate that all detainee classification levels are routinely reviewed within 45 to 60 days subsequent to arrival.
9. Procedures exist for a detainee to appeal their classification assignment. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.	Meets Standard	The detainee handbook states that detainees may appeal a level two or three classification to the facility's classification officer, who will then petition the chief of security to rule on the appeal.
10. Classification appeals are resolved within five business days and detainees are notified of the outcome within 10 business days.	Meets Standard	

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CLASSIFICATION SYSTEM (Key: C)		
POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
11. Classification designations may be appealed to a higher authority, such as the Warden or equivalent.	Meets Standard	A detainee may appeal a negative decision by the chief of security to the facility warden.
12. The Detainee Handbook or equivalent for IGSA's explains the classification levels, with the conditions and restrictions applicable to each.	Meets Standard	

CLASSIFICATION SYSTEM – REVIEWER SUMMARY (Use following format for dates: mm/dd/yyyy)	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> The assigned Deportation Officer was interviewed. Policy and the detainee handbook (Spanish and English) sections describing the classification and appeal process were reviewed. Fifteen detention files containing ICE and facility classification documents were reviewed.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

CORRESPONDENCE AND OTHER MAIL (Key: D)		
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The rules for correspondence and other mail are posted in each housing or common area, or provided to each detainee via a detainee handbook.	Meets Standard	The detainee handbook (available in English and Spanish) details the facility's correspondence rules and procedures.
2. The facility provides key information in languages other than English; In the language(s) spoken by significant numbers of detainees. List any exceptions.	Meets Standard	Postings outlining the facility's correspondence policies and procedures were observed in the detainee housing units.
3. Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	Meets Standard	All incoming mail is distributed to detainees Monday through Friday within 24 hours after receipt.
4. Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	Meets Standard	
5. Staff does 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 Warden or equivalent for prevailing security reasons.	Meets Standard	Policy and the handbook dictate that all incoming and outgoing mail and packages will be opened only in the presence of the detainee, unless otherwise authorized by the Warden.
6. Staff does not read incoming general correspondence without the Warden's prior written approval.	Meets Standard	Incoming correspondence is not read.
7. Staff does not inspect incoming special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.	Meets Standard	
8. Staff is prohibited from reading or copying incoming special correspondence.	Meets Standard	Policy dictates that staff will neither read nor copy special correspondence.
9. Staff is only authorized to inspect outgoing correspondence or other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity.	Meets Standard	
10. Correspondence to a politician or to the media is processed as special correspondence and is not read or copied.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

CORRESPONDENCE AND OTHER MAIL (Key: D)		
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
11. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	Meets Standard	Forms used to advise both the sender and the addressee of the rejection of incoming mail were examined. The form contained signature blocks for both the detainee and the facility official of record.
12. The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	Meets Standard	
13. Staff maintains a written record of every item removed from detainee mail.	Meets Standard	
14. The Warden or equivalent monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	Meets Standard	Records documenting discovered contraband and its disposition were reviewed.
15. The procedure for safeguarding cash removed from a detainee protects the detainee from loss of funds and theft. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.	Meets Standard	All incoming mail containing cash is opened in the presence of the detainee. The detainee and two facility officers sign a receipt documenting the amount of the cash received. The cash is then deposited into the detainee's account and the detainee is given a copy of the deposit receipt.
16. Original identity documents (e.g., passports, birth certificates) are immediately removed and forwarded to ICE staff for placement in A-files.	Meets Standard	
17. Staff provides the detainee a copy of his/her identity document(s) upon request.	Meets Standard	Requests documented in logs maintained by the assigned Deportation Officer were reviewed.
18. Staff disposes of prohibited items found in detainee mail in accordance with the "Control and Disposition of Contraband" Standard or the similar prevailing policy in IGSA's.	Meets Standard	
19. Every indigent detainee has the opportunity to mail, at government expense, reasonable correspondence about a legal matter, in three one ounce letters per week and packages deemed necessary by ICE.	Meets Standard	Indigent detainees are allowed to post at no cost a minimum of five pieces of special mail per week.
20. The facility has a system for detainees to purchase stamps and for mailing all special correspondence and a minimum of 5 pieces of general correspondence per week.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

CORRESPONDENCE AND OTHER MAIL (Key: D)		
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
21. The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	Meets Standard	Writing materials are given to detainees upon request.

CORRESPONDENCE AND OTHER MAIL – REVIEWER SUMMARY (Use following format for dates: mm/dd/yyyy)	
Overall Remarks: (Record significant facts, observations, other sources used, etc.)(5000 Character Max) The facility's correspondence officer was interviewed. Posted housing unit officers who witness the opening of mail in the presence of detainees were also interviewed. Facility and ICE official logs documenting handling, and disposition of incoming and outgoing general and special correspondence were reviewed. Policy and handbook statements concerning detainee correspondence were reviewed.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6), (b)(7)(c)	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

DETAINEE HANDBOOK (Key: E)		
POLICY: EVERY OIC WILL DEVELOP A SITE-SPECIFIC DETAINEE HANDBOOK TO SERVE AS AN OVERVIEW OF, AND GUIDE TO, THE DETENTION POLICIES, RULES, AND PROCEDURES IN EFFECT AT THE FACILITY. THE HANDBOOK WILL ALSO DESCRIBE THE SERVICES, PROGRAMS, AND OPPORTUNITIES AVAILABLE THROUGH VARIOUS SOURCES, INCLUDING THE FACILITY, ICE, PRIVATE ORGANIZATIONS, ETC. EVERY DETAINEE WILL RECEIVE A COPY OF THIS HANDBOOK UPON ADMISSION TO THE FACILITY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The detainee handbook is written in English and translated into Spanish, or into the next most-prevalent language(s).	Meets Standard	An English or Spanish version of the Detainee Handbook is issued to each detainee at intake.
2. The handbook is supplemented by the facility orientation video, where one is provided.	Meets Standard	
3. All staff members receive a handbook and training regarding the handbook contents.	Meets Standard	Staff receive training on the Detainee Handbook during pre-service training and also during annual training.
4. The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.	Meets Standard	
5. There an annual review of the handbook by a designated committee or staff member.	Meets Standard	The Detainee Handbook is reviewed annually and amended as necessary. The warden approves the handbook annually.
6. The detainee handbook addresses the following issues: <ul style="list-style-type: none"> • Personal Items permitted to be retained by the detainee; and • Initial issue of clothes, bedding and personal hygiene items. 	Meets Standard	
7. The detainee handbook states in clear language the basic detainee responsibilities.	Meets Standard	
8. The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.	Meets Standard	
9. The handbook states when a medical examination will be conducted.	Meets Standard	Medical examinations are conducted within fourteen days of intake.
10. The handbook describes the facility, housing units, dayrooms, in-dorm activities, and special housing units.	Meets Standard	
11. The handbook describes official count times and count procedures; meal times and feeding procedures; procedures for medical or religious diets; smoking policy; clothing exchange schedules; and, if authorized, clothes washing and drying procedures, and expected personal hygiene practices.	Meets Standard	
12. The handbook describe times and procedures for obtaining disposable razors, and allows that detainees attending court will be afforded the opportunity to shave first.	Meets Standard	
13. The handbook describes barber hours and hair cutting restrictions.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

DETAINEE HANDBOOK (Key: E)		
POLICY: EVERY OIC WILL DEVELOP A SITE-SPECIFIC DETAINEE HANDBOOK TO SERVE AS AN OVERVIEW OF, AND GUIDE TO, THE DETENTION POLICIES, RULES, AND PROCEDURES IN EFFECT AT THE FACILITY. THE HANDBOOK WILL ALSO DESCRIBE THE SERVICES, PROGRAMS, AND OPPORTUNITIES AVAILABLE THROUGH VARIOUS SOURCES, INCLUDING THE FACILITY, ICE, PRIVATE ORGANIZATIONS, ETC. EVERY DETAINEE WILL RECEIVE A COPY OF THIS HANDBOOK UPON ADMISSION TO THE FACILITY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
14. The handbook describes the telephone policy; debit card procedures; direct and free calls; locations of telephones; policy when telephone demand is high; and policy and procedures for emergency phone calls.	Meets Standard	
15. The handbook addresses religious programming.	Meets Standard	Religious programming is provided by volunteers in this facility.
16. The handbook states times and procedures for commissary or vending machine usage, where available.	Meets Standard	
17. The handbook describes the detainee voluntary work program.	Meets Standard	
18. The handbook describes the library location and hours of operation, and law library procedures and schedules.	Meets Standard	The library/law library is open Monday through Sunday. Dorms 1, 2 and 3 may utilize the library from 9:00 a.m. until 3:00 p.m. Dorms 4, 5, 6 and 7 may utilize the library from 4:30 p.m. until 8:30 p.m. Extra law library time is available to detainees by submitting a request to the Recreation Officer.
19. The handbook describes attorney and regular visitation hours, policies, and procedures.	Meets Standard	
20. The handbook describes the facility contraband policy.	Meets Standard	
21. The handbook describes the facility visiting hours and schedule, and visiting rules and regulations.	Meets Standard	
22. The handbook describes the correspondence policy and procedures.	Meets Standard	
23. 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; and • Summary of the Disciplinary Process. 	Meets Standard	Disciplinary policy and procedures are described in detail in the handbook.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

DETAINEE HANDBOOK (Key: E)

POLICY: EVERY OIC WILL DEVELOP A SITE-SPECIFIC DETAINEE HANDBOOK TO SERVE AS AN OVERVIEW OF, AND GUIDE TO, THE DETENTION POLICIES, RULES, AND PROCEDURES IN EFFECT AT THE FACILITY. THE HANDBOOK WILL ALSO DESCRIBE THE SERVICES, PROGRAMS, AND OPPORTUNITIES AVAILABLE THROUGH VARIOUS SOURCES, INCLUDING THE FACILITY, ICE, PRIVATE ORGANIZATIONS, ETC. EVERY DETAINEE WILL RECEIVE A COPY OF THIS HANDBOOK UPON ADMISSION TO THE FACILITY.

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
24. 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 CDF facilities: procedures for filing an appeal of a grievance with ICE. • Staff/detainee availability to help during the grievance process. • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Homeland Security. 	Meets Standard	The facility's grievance policy and procedures for filing a grievance are described in detail in the handbook.
25. The detainee handbook describes the medical sick call procedures for general population and segregation.	Meets Standard	
26. The handbook describes the facility recreation policy including: <ul style="list-style-type: none"> • Outdoor recreation hours. • Indoor recreation hours. 	Meets Standard	
27. The handbook describes the detainee dress code for daily living; and work assignments.	Meets Standard	
28. The handbook specifies the rights and responsibilities of all detainees.	Meets Standard	The rights and responsibilities of detainees are described in detail in the handbook.

DETAINEE HANDBOOK – REVIEWER SUMMARY

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

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

The facility's detainee handbook is issued to all detainees at intake. The handbook is available in Spanish and English. The information contained in the handbook is also delivered to detainees in a video, which is shown daily. The handbook is comprehensive and is reviewed annually and approved after review by the warden. The facility has a procedure in place for communicating changes to staff and detainees.

Overall Rating: Meets Standard

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

Completion Date: 6/7/2012

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

FOOD SERVICE (Key: F)		
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The food service program is under the direct supervision of a professionally trained and certified food service administrator. Responsibilities of cooks and cook foremen are in writing. The Food Service Administrator (FSA) determines the responsibilities of the Food Service Staff.	Meets Standard	The food service program is contracted to Trinity Service Group. The Food Service Administrator (FSA) and the Assistant Food Service Administrator (AFSA) are ServSafe certified. Their certifications are valid through January 2017. The responsibilities for the FSA and the ASFA are in writing.
2. The Cook Supervisor is on duty on days when the FSA is off duty and vice versa.	Meets Standard	The FSA or the AFSA is always on duty when the food service program is operating.
3. The FSA provides food service employees with training that specifically addresses detainee-related issues. <ul style="list-style-type: none"> In ICE Facilities this includes a review of the ICE "Food Service" standard 	Meets Standard	
4. Knife cabinets close with an approved locking device, and the on-duty cook foreman maintains control of the key that locks the device.	Meets Standard	The facility food service program does not utilize knives. All utensils are checked in and out by detention officers from a secured locked cabinet when needed for food preparation.
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 monitors the condition of knives and dining utensils.	Meets Standard	The facility food service program does not utilize knives. All utensils are checked in and out by detention officers from a secured locked cabinet when needed for food preparation. Detention officers and food service staff monitor the condition of food service and eating utensils.
6. When necessary, special procedures govern the handling of food items that pose a security threat.	Meets Standard	Food items which may pose a security threat are maintained behind two locks in areas not accessible to detainees.
7. Operating procedures include daily searches (shakedowns) of detainee work areas.	Meets Standard	Detention officers conduct daily searches of the detainee work areas in the food service program.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

FOOD SERVICE (Key: F)		
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
8. The FSA monitors staff implementation of the facility's population counts procedures. Staff is trained in count procedures.	Meets Standard	Detention officers conduct counts of detainees working in the food service program. Food service staff are aware of the importance of facility counts and assist in the count of food service workers as needed.
9. The detainees assigned to the food service department look neat and clean. Their clothing and grooming comply with the "Food Service" standard.	Meets Standard	
10. The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	Meets Standard	Detainee food service worker job descriptions are reviewed to ensure they are accurate and up to date.
11. The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	Meets Standard	The AFSA provides training to voluntary detainee workers in the rules and procedures of the food service department.
12. During orientation and training session(s), the CS explains and demonstrates: <ul style="list-style-type: none"> • Safe work practices and methods; • Safety features of individual products/pieces of equipment; and • Training covers the safe handling of hazardous material[s] the detainees are likely to encounter in their work. 	Meets Standard	Training provided to voluntary detainee workers includes safe work practices and safety features of individual products and pieces of equipment. Detainees do not handle hazardous materials in this facility.
13. The Cook Supervisor documents all training in individual detainee detention files.	Meets Standard	Training for voluntary detainee workers is documented in individual training packets. These packets were reviewed during the inspection.
14. Detainees at CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSA's are subject to local and state rules and regulations regarding detainee pay.	Meets Standard	Voluntary detainee workers are paid in accordance with facility policy. Morning workers are paid \$2.00 per day and evening workers are paid \$1.00 per day.
15. Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.	Meets Standard	Detainees receive two hot meals each day. No more than twelve hours elapse between the evening meal and breakfast.
16. For cafeteria style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	N/A	This facility does not utilize cafeteria style feeding operations.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

FOOD SERVICE (Key: F)		
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
17. The facility has a standard 35-day menu cycle. IGSA's use a 35 day or similar system for rotating meals.	Meets Standard	A 35-day menu cycle is utilized at this facility. The menu is approved by a registered dietitian.
18. The FSA or facility considers the ethnic diversity of the facility's detainee population when developing menu cycles (Provide examples).	Meets Standard	Ethnic diversity is considered in the preparation of the menu in this facility. Examples of menu items are chili con carne, tacos and Spanish rice.
19. A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	Meets Standard	A complete nutritional analysis is conducted of the 35-day menu by a registered dietitian. The menu and certification by the dietitian were reviewed during the inspection.
20. The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	Meets Standard	Menu items are prepared in accordance with standardized, approved recipes. These recipes are available in a notebook as well as on an automated program.
21. 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 FSA 	Meets Standard	The FSA and the AFSA can change the menu if necessary. Any changes must be justified and documented. Changes and justifications are provided to the warden.
22. All staff and volunteers know and adhere to written "food preparation" procedures.	Meets Standard	
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

FOOD SERVICE (Key: F)		
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>24. A common-fare menu available to detainees whose dietary requirements cannot be met on the main line.</p> <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; • Common-fare meals are served with: • Disposable plates and utensils. • Reusable plates and utensils. • Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items. 	Meets Standard	The 35-day menu includes substitutions which can, if necessary, change each meal to common-fare. Changes can be made at the facility level. Hot entrees are offered two times each day. A common-fare meal meets the recommended daily nutritional allowances. Hot water is provided as needed. Common-fare meals are served with reusable plates and utensils. Kosher meals would be prepared with separate cutting boards, knives, spoons, scoops and other utensils as needed.
25. A supervisor at the command level must approve a detainee's removal from the Common-Fare Program.	Meets Standard	
26. The Warden, in conjunction with the chaplain and/or local religious leaders, provides the FSA a schedule of the ceremonial meals for the following calendar year.	Meets Standard	The schedule of ceremonial meals for this facility was reviewed during the inspection.
<p>27. The common-fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year.</p> <ul style="list-style-type: none"> • Muslims fasting during Ramadan receive their meals after sundown. • Jews who observe Passover but do not participate in the Common-Fare Program receive the same Kosher-for- Passover meals as those who do participate. • Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. 	Meets Standard	All accommodations of this component are met by the facility when needed. There have been no requests for accommodations in the last year.
28. The food service program addresses medical diets.	Meets Standard	At the time of the inspection, 13 detainees were receiving special diets. Ten detainees were on low-fat diets, one was on a bland diet, one was on a pregnancy diet and one was on a non-religious common-fare diet.
29. Satellite-feeding programs follow guidelines for proper sanitation.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

FOOD SERVICE (Key: F)		
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
30. Hot and cold foods are maintained at the prescribed, "safe" temperature(s) while being served.	Meets Standard	Temperatures are taken and recorded for each meal. The documentation of temperature checks for three meals was reviewed during the inspection. Food service staff were observed taking food temperatures during the inspection.
31. All meals are provided in nutritionally adequate portions.	Meets Standard	
32. Food is not used to punish or reward detainees based upon behavior.	Meets Standard	
33. The food service staff instructs detainee volunteers on: <ul style="list-style-type: none"> Personal cleanliness and hygiene; Sanitary techniques for preparing, storing, and serving food; and The sanitary operation, care, and maintenance of equipment. 	Meets Standard	Detainee volunteer workers are instructed on personal cleanliness and hygiene, sanitary techniques for preparing, storing and serving food and the sanitary operation, care and maintenance of equipment. This training is documented in a training packet and was reviewed during the inspection.
34. Everyone working in the food service department complies with food safety and sanitation requirements.	Meets Standard	
35. Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment. <ul style="list-style-type: none"> Who conducts the inspections? 	Meets Standard	All food service areas, including food preparation areas and equipment, are inspected daily by food service personnel. The results of each inspection are documented. Documentation of these daily inspections was reviewed during the inspection.
36. Equipment is inspected for compliance with health and safety codes and regulations. <ul style="list-style-type: none"> When was the most recent inspection? Which agency conducted the inspection? 	Meets Standard	The City of Laredo Health Department inspects the food service operation at this facility two times each year. The last inspection was conducted March 16, 2012. No deficiencies were noted. The food service operation is inspected as a Retail Food Establishment Institution.
37. Reports of discrepancies are forwarded to the Warden or designated department head, and corrective action is scheduled and completed.	Meets Standard	The warden receives a copy of the City of Laredo Health Department inspection reports.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

FOOD SERVICE (Key: F)		
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
38. Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal.	Meets Standard	Dishwashing machine temperatures are checked and documented at each use. The documentation of these checks was reviewed during the inspection.
39. Staff documents the results of every refrigerator/freezer temperature check.	Meets Standard	Refrigerator/freezer temperatures are checked and documented at each use. The documentation of these checks was reviewed during the inspection.
40. The cleaning schedule for each food service area is conspicuously posted.	Meets Standard	
41. Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	Meets Standard	All incoming food shipments are inspected for damage, contamination and pest infestation by the FSA.
42. Storage areas are locked when not in use.	Meets Standard	

FOOD SERVICE – REVIEWER SUMMARY (Use following format for dates: mm/dd/yyyy)	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> The food service program at this facility is contracted to a private provider, Trinity Services Group. The food service area was clean and orderly. Food service personnel were observed preparing the meals and preparing trays for distribution to the detainees. The program utilizes voluntary detainee workers. Each detainee worker receives an orientation and training before working in the food service program. Detainee workers are searched in and out of the work area, and they are individually examined by the FSA or AFSA to ensure they are clean and in good health. Male detainees are allowed to work in the morning and female detainees are allowed to work in the evening. The program maintains documentation of required temperature checks of menu items as well as dishwashing machines, freezers and refrigerators.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

FUNDS AND PERSONAL PROPERTY (Key: G)

POLICY: ALL FACILITIES WILL IMPLEMENT PROCEDURES TO CONTROL AND SAFEGUARD DETAINEES' PERSONAL PROPERTY. PROCEDURES WILL PROVIDE FOR THE SECURE STORAGE OF FUNDS, VALUABLES, BAGGAGE AND OTHER PERSONAL PROPERTY; THE DOCUMENTATION AND RECEIPTING OF SURRENDERED PROPERTY; AND THE INITIAL AND REGULARLY SCHEDULED INVENTORYING OF ALL FUNDS, VALUABLES, AND OTHER PROPERTY.

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Detainee funds and valuables are properly separated, stored, and are accessible only by designated supervisor(s).	Meets Standard	
2. Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	Meets Standard	Large valuables are stored in a controlled area accessible to designated staff. Facility staff report that very few detainees come into the facility with large pieces of personal property.
3. Staff itemizes the baggage and personal property of arriving detainees (including funds and valuables). For IGSA's and CDFs, using a personal property inventory form that meets the ICE standard?	Meets Standard	Baggage and personal property of arriving detainees are inventoried and itemized. A personal property inventory form that meets ICE requirements is utilized.
4. Staff forwards an arriving detainee's medication to the medical staff.	Meets Standard	Medication of arriving detainees is immediately forwarded to medical staff.
5. Audits of baggage and non-valuable property occur each quarter and audits are logged and verified.	Meets Standard	Audits of detainee property are conducted once a month.
6. (b)(7)(e) officers are present during the processing of detainee funds and valuables during in-processing to the facility (b)(7)(e) officers verify funds and valuables.	Meets Standard	(b)(7)(e) officers are present when detainee funds and valuables are inventoried and itemized during intake (b)(7)(e) officers verify the inventory of funds and valuables.
7. Staff searches arriving detainees and their personal property for contraband.	Meets Standard	Detainees and their personal property are searched upon arrival at the facility prior to initiating the intake process.
8. Staff procedures follow written policy for returning forgotten property to detainees.	Meets Standard	Facility policy directs forgotten property of detainees to be forwarded to the ICE office.
9. Property discrepancies are immediately reported to the CDEO or Chief of Security.	Meets Standard	At this facility, any discrepancy related to detainee property is reported to supervisory staff.
10. Staff follows written procedures when returning property to detainees.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

FUNDS AND PERSONAL PROPERTY (Key: G)

POLICY: ALL FACILITIES WILL IMPLEMENT PROCEDURES TO CONTROL AND SAFEGUARD DETAINEES' PERSONAL PROPERTY. PROCEDURES WILL PROVIDE FOR THE SECURE STORAGE OF FUNDS, VALUABLES, BAGGAGE AND OTHER PERSONAL PROPERTY; THE DOCUMENTATION AND RECEIPTING OF SURRENDERED PROPERTY; AND THE INITIAL AND REGULARLY SCHEDULED INVENTORING OF ALL FUNDS, VALUABLES, AND OTHER PROPERTY.

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
11. CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.	Meets Standard	
12. The facility attempts to notify an out-processed detainee that he/she left property in the facility: <ul style="list-style-type: none"> By sending written notice to the detainee's last known address; Via certified mail; and The notice state that the detainee has 30 days in which to claim the property, after which it will be considered abandoned. 	Meets Standard	Facility policy directs forgotten and abandoned property of detainees to be forwarded to the ICE office.
13. The facility disposes of abandoned property in accordance with written procedures. <ul style="list-style-type: none"> If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE. 	Meets Standard	Facility policy directs forgotten and abandoned property of detainees to be forwarded to the ICE office.

FUNDS AND PERSONAL PROPERTY – REVIEWER SUMMARY

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

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

The facility uses written procedures for the itemization and inventory of detainee property. All detainee property is stored in secure areas accessible to designated staff. Detainee property is properly tagged, and accountability is maintained. Audits of detainee property are conducted monthly and documented. (b)(7)(e) officers inventory detainee funds and valuables. Procedures are in place to control and safeguard detainee property.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 6/7/2012

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

DETAINEE GRIEVANCE PROCEDURES (Key: H)		
<p>POLICY: EVERY FACILITY WILL DEVELOP AND IMPLEMENT STANDARD OPERATING PROCEDURES (SOPs) FOR ADDRESSING DETAINEE GRIEVANCES IN TIMELY FASHION. EACH STEP IN THE PROCESS WILL OCCUR WITHIN THE PRESCRIBED TIME FRAME. AMONG OTHER THINGS, A GRIEVANCE WILL BE PROCESSED, INVESTIGATED, AND DECIDED (SUBJECT TO APPEAL) IN ACCORDANCE WITH THE SOPs; A GRIEVANCE COMMITTEE WILL CONVENE AS PROVIDED IN THE SOPs. STANDARD PROCEDURE WILL INCLUDE PROVIDING THE DETAINEE WITH A WRITTEN RESPONSE TO ANY FORMAL GRIEVANCE, WHICH WILL INCLUDE THE BASIS FOR THE DECISION. THE FACILITY WILL ALSO ESTABLISH STANDARD PROCEDURES FOR HANDLING EMERGENCY GRIEVANCES. ALL GRIEVANCES WILL RECEIVE SUPERVISORY REVIEW. REPRISAL AGAINST THE FILER OF A GRIEVANCE WILL NOT BE TOLERATED.</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>1. Written procedures provide for the informal resolution of oral grievances (Not mandatory).</p> <ul style="list-style-type: none"> If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff. 	Meets Standard	Written procedures allow for the informal resolution of detainee grievances. Informal resolution of grievances is encouraged. A detainee is allowed seven days within which to make his/her concerns known to a staff member.
<p>2. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures.</p> <ul style="list-style-type: none"> Detainees may seek help from other detainees or facility staff when preparing a grievance. Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary. 	Meets Standard	Detainees may appeal a grievance decision to a facility grievance committee using established, formal proceedings. Detainees are allowed to help other detainees file a grievance or the detainee may seek assistance from a staff member. Special needs detainees may receive assistance in filing a grievance as needed.
<p>3. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.</p>	Meets Standard	
<p>4. There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodged a complaint:</p> <ul style="list-style-type: none"> If yes, explain. 	Meets Standard	There have been no cases of staff harassing, disciplining, penalizing or otherwise retaliating against a detainee for filing a grievance in the past year.
<p>5. Procedures include maintaining a Detainee Grievance Log.</p> <ul style="list-style-type: none"> If not, an alternative acceptable record keeping system is maintained. "Nuisance complaints" are identified in the records. For quality control purposes, staff document nuisance complaints received but not filed. 	Meets Standard	The facility maintains a grievance log. The log is maintained by the Grievance Officer. The log was reviewed during the inspection. Nine formal grievances have been filed in this calendar year to date. Should a detainee be determined to be abusing the grievance system, the right of the detainee to file additional grievances may be suspended.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

DETAINEE GRIEVANCE PROCEDURES (Key: H)

POLICY: EVERY FACILITY WILL DEVELOP AND IMPLEMENT STANDARD OPERATING PROCEDURES (SOPs) FOR ADDRESSING DETAINEE GRIEVANCES IN TIMELY FASHION. EACH STEP IN THE PROCESS WILL OCCUR WITHIN THE PRESCRIBED TIME FRAME. AMONG OTHER THINGS, A GRIEVANCE WILL BE PROCESSED, INVESTIGATED, AND DECIDED (SUBJECT TO APPEAL) IN ACCORDANCE WITH THE SOPs; A GRIEVANCE COMMITTEE WILL CONVENE AS PROVIDED IN THE SOPs. STANDARD PROCEDURE WILL INCLUDE PROVIDING THE DETAINEE WITH A WRITTEN RESPONSE TO ANY FORMAL GRIEVANCE, WHICH WILL INCLUDE THE BASIS FOR THE DECISION. THE FACILITY WILL ALSO ESTABLISH STANDARD PROCEDURES FOR HANDLING EMERGENCY GRIEVANCES. ALL GRIEVANCES WILL RECEIVE SUPERVISORY REVIEW. REPRISAL AGAINST THE FILER OF A GRIEVANCE WILL NOT BE TOLERATED.

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
6. Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	Meets Standard	

DETAINEE GRIEVANCE PROCEDURES – REVIEWER SUMMARY

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

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

The facility utilizes a formal grievance procedure. The grievance procedure is outlined in detail in the Detainee Handbook. Informal resolutions of grievances are allowed and encouraged. Staff are trained in the grievance procedure during pre-service training as well as annual refresher training. The facility maintains a grievance log. Grievance forms are available to detainees throughout the facility. Grievance boxes are checked twice daily for formal grievance filings. Staff are aware of the prescribed time frames for resolution of grievances.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 6/7/2012

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

GROUP LEGAL RIGHTS PRESENTATIONS (Key: I)

Policy: Facilities housing ICE detainees shall permit AUTHORIZE persons to make presentations to groups of detainees for the purpose of informing them of U.S. immigration law and procedures, consistent with the security and orderly operation of each facility. ICE encourages such presentations, which instruct detainees about the immigration system and their rights and options within it.

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The Field Office is responsive to requests by attorneys and accredited representatives for group presentations.	N/A	
2. Upon receipt of concurrence by the Field Office Director, the facility or authorized ICE Field Office ensures timely and proper notification to attorneys or accredited representatives.	N/A	
3. The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.	N/A	
4. Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	N/A	
5. Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.	N/A	
6. When the number of detainees allowed to attend a presentation is limited, the facility provides a sufficient number of presentations so that all detainees signed up may attend.	N/A	
7. Detainees in segregation, unable to attend for security reasons, may request separate sessions with presenters. Such requests are documented.	N/A	
8. Interpreters are admitted when necessary to assist attorneys and other legal representatives.	N/A	
9. Presenters are afforded a minimum of one hour to make the presentation and to conduct a question-and-answer session.	N/A	
10. Staff permits presenters to distribute ICE-approved materials.	N/A	
11. Presenters are permitted to meet with small groups of detainees to discuss their cases after the group presentation. ICE or authorized detention staff is present but do not monitor conversations with legal providers.	N/A	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

GROUP LEGAL RIGHTS PRESENTATIONS (Key: I)

Policy: Facilities housing ICE detainees shall permit AUTHORIZE persons to make presentations to groups of detainees for the purpose of informing them of U.S. immigration law and procedures, consistent with the security and orderly operation of each facility. ICE encourages such presentations, which instruct detainees about the immigration system and their rights and options within it.

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
12. Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee; and the reasons for suspension are documented. The Headquarters Office for Detention and Removal, Field Operations and Detention management Division, is notified when a group or individual is suspended from making presentations.	N/A	
13. The facility plays ICE-approved videotaped presentations on legal rights at regular opportunities, at the request of outside organizations.	N/A	
14. A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request	N/A	

GROUP LEGAL RIGHTS PRESENTATIONS – REVIEWER SUMMARY

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

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

There have been no group legal rights presentations in the past twelve months.

Overall Rating: N/A

Reviewer Name (Printed)

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

Completion Date: 6/7/2012

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

Issuance and Exchange of Clothing, Bedding, and Towels (Key: J)		
POLICY: ICE REQUIRES THAT ALL FACILITIES HOUSING ICE DETAINEES PROVIDE CLEAN CLOTHING, BEDDING, LINENS AND TOWELS TO EVERY ICE DETAINEE UPON ARRIVAL. FURTHER, FACILITIES SHALL PROVIDE ICE DETAINEES WITH REGULAR EXCHANGES OF CLOTHING, LINENS, AND TOWELS FOR AS LONG AS THEY REMAIN IN DETENTION.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, and towels. <ul style="list-style-type: none"> The supply of these items exceeds the minimum required for the number of detainees. 	Meets Standard	Facility policy addresses the regular issuance and exchange of clothing, bedding, linens and towels. The facility maintains an ample supply of these items.
2. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive: <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); and One pair of facility-issued footwear. 	Meets Standard	Detainees receive clean, temperature appropriate clothing during in-processing to the facility. The amount of clothing and underwear detainees receive exceeds the requirements of this component.
3. Additional clothing is available for changing weather conditions, or as seasonally appropriate.	Meets Standard	
4. New detainees are issued clean bedding, linens, and towels. They receive at a minimum: <ul style="list-style-type: none"> One mattress; One blanket; Two sheets; One pillowcase; One towel; and Additional blankets are issued based on local weather conditions. 	Meets Standard	Detainees are issued clean bedding, linens and towels during in-processing. Mattresses remain on the bunk but are cleaned and sanitized prior to use by another detainee. Issuance of these items at this facility exceeds the requirements of this component.
5. Detainees assigned to special work areas are clothed in accordance with the requirements of the job.	Meets Standard	
6. Detainees are provided clean clothing, linen and towels. <ul style="list-style-type: none"> Socks and undergarments - exchanged daily. Outer garments - twice weekly. Sheets - weekly. Towels - weekly. Pillowcases - weekly. 	Meets Standard	Detainees are issued clean clothing, linens and towels during in-processing in numbers that exceed the requirements of this standard. The laundering and exchange of these items in this facility results in the detainee having clean clothing, linens and towels in accordance with the requirements of this component.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

Issuance and Exchange of Clothing, Bedding, and Towels (Key: J)

POLICY: ICE REQUIRES THAT ALL FACILITIES HOUSING ICE DETAINEES PROVIDE CLEAN CLOTHING, BEDDING, LINENS AND TOWELS TO EVERY ICE DETAINEE UPON ARRIVAL. FURTHER, FACILITIES SHALL PROVIDE ICE DETAINEES WITH REGULAR EXCHANGES OF CLOTHING, LINENS, AND TOWELS FOR AS LONG AS THEY REMAIN IN DETENTION.

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
7. Food service detainee volunteer workers are permitted to exchange outer garments daily.	Meets Standard	Food service workers are allowed to exchange outer garments as needed. Food service staff inspect each detainee prior to the detainee beginning work to ensure the detainee and the detainee's clothing are in compliance with sanitation requirements.
8. Volunteer detainee workers are permitted to exchange outer garments more frequently.	Meets Standard	

Issuance and Exchange of Clothing, Bedding, and Towels – REVIEWER SUMMARY

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

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

The facility operates a laundry. Voluntary detainee workers are allowed to work in the laundry. Amounts of clothing, undergarments, linens and towels issued to detainees exceed the requirements of this standard. Laundering and issuance of clothing, undergarments, linens and towels also exceed the requirements of this standard. Detainee workers are allowed more frequent exchange of clothing if needed. Additional clothing is available for changing weather conditions or as seasonally appropriate. Visual inspections of detainees indicated they have clean, temperature appropriate clothing.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 6/7/2012

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

Marriage Requests (Key: K)		
POLICY: ALL DETAINEE MARRIAGE REQUESTS WILL RECEIVE CASE-BY-CASE CONSIDERATION FROM ICE MANAGEMENT.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The Field Office considers detainee marriage requests on a case-by-case basis.	Meets Standard	Marriage requests are considered on a case-by-case basis at this facility.
2. The Field Office Director reviews every marriage request rejected by a Warden/OIC or IGSA. Rejections are documented.	Meets Standard	A detainee may appeal the rejection of a marriage request by the warden to the Field Office Director. If a marriage request is rejected, the rejection is documented and the detainee is notified in writing.
3. It is standard practice to require a written request for permission to marry.	Meets Standard	A marriage request must be submitted in writing. Facility staff report most marriage requests are submitted on a grievance form which is allowable and starts the process.
4. The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	Meets Standard	Documentation to support a marriage request must include a signed statement from the intended spouse confirming their intent to marry the detainee.
5. The Warden/OIC provides a written copy of his/her decision to the detainee and his/her legal representative.	Meets Standard	
6. When permission is denied, the Warden/OIC states the basis for his/her decision.	Meets Standard	
7. The Warden/OIC provides the detainee with a place and time to make wedding arrangements.	Meets Standard	When a marriage request is granted, the time, date and necessary arrangements will be coordinated with and through a staff member designated by the facility.

Marriage Requests – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> All marriage requests are reviewed on a case-by-case basis by the ICE Field Office. The facility gathers the required documentation for review by the warden, who in turn makes a recommendation to the ICE Field Office. Any denial of a marriage request by the warden may be appealed to the ICE Field Office. The facility provides the detainee with a place and time to make wedding arrangements.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 6/7/2012

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

Marriage Requests – REVIEWER SUMMARY

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

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

NON-MEDICAL EMERGENCY ESCORTED TRIPS (Key: L)

POLICY: THE IMMIGRATION AND CUSTOMS ENFORCEMENT (ICE) MAY PROVIDE DETAINEES WITH STAFF-ESCORTED TRIPS INTO THE COMMUNITY FOR THE PURPOSE OF VISITING CRITICALLY ILL MEMBERS OF THE DETAINEE'S IMMEDIATE FAMILY, OR FOR ATTENDING FUNERALS.

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The Field Office Director considers and approves, on a case-by-case basis, trips to an immediate family member's: <ul style="list-style-type: none"> Funeral; or Deathbed 	N/A	
2. The facility recognizes mother, father, brother, sister, spouse, child, step-parent, and foster parent as "immediate family".	N/A	
3. The IGSA facility notifies ICE of all detainee requests for non-medical escorts.	N/A	
4. The detainee's Deportation Officer reviews the file before forwarding a detainee's request, with recommendation, to the approving official. Each recommendation addresses the individual's suitability for travel; e.g., the kind of supervision required.	N/A	
5. Each escort includes at least (b)(7)(d) officers.	N/A	
6. Escorting officers report unexpected situations to the originating facility as a matter of procedure, and the ranking supervisor on duty has the authority to issue instructions for completion of the trip.	N/A	
7. Escorting officers have the discretion to increase or decrease minimum restraints in accordance with written procedures and classification level of the detainee.	N/A	
8. Escort officers are precluded from accepting gifts/gratuities from a detainee, or detainee's relative or friend for any reason.	N/A	
9. Escort officers ensure that detainees: <ul style="list-style-type: none"> Conduct themselves in a manner that does not bring discredit to the ICE; Do not violate federal, state, or local laws; Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants; Make no unauthorized phone calls; and Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return. 	N/A	
10. Standard procedure requires the immediate return to the facility of any detainee who violates trip rules.	N/A	

NON-MEDICAL EMERGENCY ESCORTED TRIPS – REVIEWER SUMMARY

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

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

NON-MEDICAL EMERGENCY ESCORTED TRIPS – REVIEWER SUMMARY

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

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

ICE handles all non-medical emergency trips at this facility.

Overall Rating: N/A

Reviewer Name (Printed)

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

Completion Date: 6/7/2012

Reviewer Signature (for printed form submission):

RECREATION (Key: M)

POLICY: IT IS ICE POLICY TO PROVIDE ACCESS TO RECREATIONAL PROGRAMS AND ACTIVITIES TO ALL ICE DETAINEES, TO THE EXTENT POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTECT THEIR SAFETY AND WELFARE.

Standard N/A

Click the above button if outdoor recreation is offered. Items 19-26 will be marked "N/A".

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a recreation program and facility.	Meets Standard	
2. A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.	Meets Standard	The facility utilizes a Recreation Coordinator for the oversight of the program.
3. Regular maintenance keeps recreational facilities and equipment in good condition.	Meets Standard	Inspection of the dayrooms and outdoor recreation area indicated the facilities and equipment are in good condition.
4. The recreational specialist or trained equivalent supervises detainee recreation workers.	N/A	There are no voluntary detainee workers in the recreation program.
5. The recreational specialist or trainee equivalent oversees recreation programs for special housing units (SHU) and special-needs detainees.	Meets Standard	Detention officers provide one-on-one supervision of recreation of detainees in special housing and detainees with special needs.
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	Meets Standard	
7. Outside activities are restricted to limited-contact sports.	Meets Standard	Detainees participating in outdoor recreation are not allowed to engage in contact sports.
8. Each detainee has the opportunity to participate in daily recreation.	Meets Standard	Each detainee is allowed one hour of outside recreation each day, seven days a week, as well as access to sedentary games in the dayrooms of their housing units.
9. Detainees have access to recreation activities outside the housing units for at least one hour daily, 5 days a week.	Meets Standard	Each detainee is allowed one hour of outside recreation each day, seven days a week.
10. Staff checks all items for damage and condition when equipment is returned.	Meets Standard	Equipment is checked by staff after each use.
11. Staff conducts searches of recreation areas before and after use.	Meets Standard	Detention officers conduct searches of recreation areas before and after use.
12. All recreation areas under constant staff supervision.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

RECREATION (Key: M)

POLICY: IT IS ICE POLICY TO PROVIDE ACCESS TO RECREATIONAL PROGRAMS AND ACTIVITIES TO ALL ICE DETAINEES, TO THE EXTENT POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTECT THEIR SAFETY AND WELFARE.

Standard N/A

Click the above button if outdoor recreation is offered. Items 19-26 will be marked "N/A".

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
13. Supervising staff is equipped with radios.	Meets Standard	Detention officers are equipped with radios.
14. The facility provides detainees in the SHU at least one hour of outdoor recreation time daily, five times per week.	Meets Standard	Detainees in the Special Housing Unit (SHU) are allowed one hour of outdoor recreation each day seven days a week, weather permitting.
15. Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his/her recreation privileges.	Meets Standard	If the recreation privileges of a detainee in the SHU are revoked, the detainee receives a written explanation of the reason for the revocation.
16. Special programs or religious activities are available to detainees.	Meets Standard	
17. Volunteers are required to sign a waiver of liability before entering a secure portion of the facility where detainees are present.	Meets Standard	Volunteers are required to sign a waiver of liability before entering the secure portion of the facility. The waiver was included in the volunteer packets reviewed during the inspection.
18. Visitors, relatives or friends are not allowed to serve as volunteers.	Meets Standard	Relatives, visitors and friends of detainees would be allowed to volunteer in the facility only if that person was cleared by ICE.
19. If the facility has no outside recreation, are detainees considered for transfer after six months? • If yes, written procedures ensure timely review of all eligible detainees.	N/A	
20. Case officers make written transfer recommendations about every six-month detainee to the OIC.	N/A	
21. The OIC documents all detainee-transfer decisions, whether yes or no.	N/A	
22. The detainee's written decision for or against an offered transfer documented in his/her A-file.	N/A	
23. Staff notifies the detainee's legal representative of his/her decision to accept/decline a transfer.	N/A	
24. If no recreation is available, the ICE Districts routinely review transfer eligibility for all detainees after 60 days.	N/A	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

RECREATION (Key: M)

POLICY: IT IS ICE POLICY TO PROVIDE ACCESS TO RECREATIONAL PROGRAMS AND ACTIVITIES TO ALL ICE DETAINEES, TO THE EXTENT POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTECT THEIR SAFETY AND WELFARE.

Standard N/A

Click the above button if outdoor recreation is offered. Items 19-26 will be marked "N/A".

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
25. The A-file of every detainee who is held more than 60 days without access to recreation contains either a transfer-waiver signed by the detainee, or the OIC's written determination of the detainee's ineligibility for transfer.	N/A	
26. The detainee's legal representative is notified of the detainee's/OIC's decision.	N/A	

RECREATION – REVIEWER SUMMARY

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

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

The facility has a Recreation Coordinator who oversees recreational programs and volunteers. Recreation is available to detainees both in the dayrooms of the housing units as well as outdoors. Outdoor recreation is provided, weather permitting, seven days a week for one hour. Sedentary games are available to detainees in the housing units. The outdoor recreation area is supervised at all times by staff assigned both within the fenced recreation yard and on the exterior of the yard. Complete volunteer packets are maintained for each volunteer. Each volunteer must be cleared by ICE prior to being qualified as a volunteer in the facility.

Overall Rating: Meets Standard

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

Completion Date: 6/7/2012

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

RELIGIOUS PRACTICES (Key: N)		
POLICY: FACILITIES WILL PROVIDE ICE DETAINEES OF ALL FAITHS WITH REASONABLE AND EQUITABLE OPPORTUNITIES TO PARTICIPATE IN THE PRACTICES OF THEIR FAITH, LIMITED ONLY BY THE CONSTRAINTS OF SAFETY, SECURITY, THE ORDERLY OPERATIONS OF THE FACILITY AND BUDGETARY CONSIDERATIONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Detainees are allowed to engage in religious services.	Meets Standard	Religious services are conducted by volunteers.
2. Space is available for detainees to conduct religious services.	Meets Standard	A multi-purpose room is used for religious services and programming.
3. The facility allows detainees to observe the major "holy days" of their religious faith. <ul style="list-style-type: none"> List any exceptions. 	Meets Standard	Detainees are allowed to observe the major "holy days" of their religious faith, limited only by the threats to the safe and secure operation of the facility. No exceptions were noted during the inspection.
4. The facility accommodates recognized holy-day observances by: <ul style="list-style-type: none"> Providing special meals, consistent with dietary restrictions; Honoring fasting requirements; Facilitating religious services; and Allowing activity restrictions. 	Meets Standard	The facility recognizes holy day observances with special meals, fasting, facilitating religious services and allowing activity restrictions as needed.
5. Each detainee is allowed religious items in his/her immediate possession.	Meets Standard	
6. Volunteer's credentials are checked and verified before allowing participation in detainee programs.	Meets Standard	A review of volunteer credentials indicated the credentials are checked and verified prior to allowing the volunteer to lead detainee religious programming.
7. Members of faiths not represented by clergy may conduct their own services within security allowances.	Meets Standard	
8. Detainees in the Special Management Unit are allowed to participate in religious practices unless otherwise documented for the safety and security of the facility.	Meets Standard	Religious programming is provided to detainees in the Special Housing Unit on an individual basis.

RELIGIOUS PRACTICES – REVIEWER SUMMARY	
(Use following format for dates: mm/dd/yyyy)	
Overall Remarks: (Record significant facts, observations, other sources used, etc.)(5000 Character Max) Detainees are provided reasonable opportunities to participate in the practice of their chosen faith at this facility. Religious programs are provided by volunteers who must be cleared to work in the facility by ICE. Holy days are observed and holy day observances, including special meals, fasting and other facilitation of religious services, are permitted.	
Overall Rating: Meets Standard	
Reviewer Name (Printed)	Completion Date: 6/7/2012

RELIGIOUS PRACTICES – REVIEWER SUMMARY

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

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

DETAINEE TELEPHONE ACCESS (Key: O)		
POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Detainees are allowed access to telephones during established facility waking hours.	Meets Standard	Telephones are available for detainee use Sunday-Thursday from 6 a.m. -10:30 p.m. and Friday and Saturday from 6 a.m. - 1 a.m.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	Meets Standard	Each detainee is given a handbook upon admission to the facility. The handbook explains the facility's telephone rules.
3. Access rules are posted in housing units.	Meets Standard	English and Spanish postings explaining telephone use were observed in each of the housing units.
4. The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	Meets Standard	The handbook explaining telephone use and rules is available in English and Spanish.
5. Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	Meets Standard	Six operating telephones were observed in each of the housing units, providing more than the required minimum ratio.
6. Telephones are inspected regularly by facility staff to ensure that they are in good working order.	Meets Standard	ICE records document routine inspection and timely maintenance of the housing unit telephones.
7. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	Meets Standard	
8. The facility administration monitors repair progress and takes appropriate measures to ensure that required repairs are begun and completed timely.	Meets Standard	
9. Detainees are afforded a reasonable degree of privacy for legal phone calls.	Meets Standard	Telephones are located in a common area of the housing unit. The area is far enough away from other common and sleeping areas to allow a reasonable amount of privacy while using the phone.
10. A procedure exists to assist a detainee who is having trouble placing a confidential call.	Meets Standard	The inspector witnessed a detainee ask a facility officer for assistance in making a telephone call.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

DETAINEE TELEPHONE ACCESS (Key: O)		
POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
11. The facility provides the detainees with the ability to make non-collect (special access) calls.	Meets Standard	The handbook states special phone inquiries, such as those to consulates and pro bono legal services, are available at no charge.
12. Special Access calls are at no charge to the detainees.	Meets Standard	Postings advising detainees that they may make special calls at no charge were observed in the housing units.
13. The OIG phone number for reporting abuse is programmed into the detainee phone system and the phone number was checked by the inspector during the review.	Meets Standard	The Office of Inspector General (OIG) number was programmed into the housing unit telephones. The programmed number was successfully used to dial the OIG office.
14. In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.	N/A	The facility fully meets this requirement.
15. No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".	Meets Standard	
16. Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.	Meets Standard	Forms used to document a call to a family member in another facility were examined.
17. Any telephone restrictions are documented.	Meets Standard	There have been no phone restrictions at this facility within the past twelve months.
18. The facility has a system for taking and delivering emergency detainee telephone messages.	Meets Standard	The facility's housing officer will deliver an emergency message to a detainee upon receipt. The officer will also assist the detainee in returning the call.
19. Emergency phone call messages are immediately given to detainees.	Meets Standard	
20. Detainees are allowed to return emergency phone calls as soon as possible.	Meets Standard	
21. Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	Meets Standard	The inspector examined a log book in the segregation unit documenting phone use by detainees held in that unit.
22. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	Meets Standard	
23. Detainees in disciplinary segregation are allowed phone calls for family emergencies.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

DETAINEE TELEPHONE ACCESS (Key: O)		
POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
24. Detainees in administrative detention and protective custody are afforded the same telephone privileges as those in general population.	Meets Standard	Detainees held in administrative detention and protective custody may use a telephone located in the detention unit upon request. Rules governing the use of the phone are the same as those for the general population.
25. When detainee phone calls are monitored, notification is posted by detainee telephones that phone calls made by the detainees may be monitored. Special Access calls are not monitored.	Meets Standard	Policy and the handbook dictate that phone calls may be monitored and explain how a detainee may make a special access call that is not monitored.

DETAINEE TELEPHONE ACCESS – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Postings in English and Spanish instructing detainees on telephone use were observed in the housing units. Policy and handbook sections detailing facility telephone policy and services were reviewed. ICE officer's records documenting routine and timely maintenance of housing unit telephones were examined. A log detailing detainee telephone use while in segregation was examined. The programmed number to the OIG hotline was used to contact the OIG office. The inspector and a facility officer were able to reach the OIG hot line using the programmed number; however, neither was able to speak with a person at the OIG office.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) <div style="border: 1px solid black; padding: 2px; display: inline-block;">(b)(6), (b)(7)(c)</div>	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

VISITATION (Key: P)		
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. There is a written visitation schedule and hours for general visitation.	Meets Standard	The detainee handbook details the facility's visitation schedule. The inspector observed visitation schedules posted in the main entrance to the facility.
2. The visitation hours tailored to the detainee population and the demand for visitation.	Meets Standard	
3. The visitation schedule and rules are available to the public.	Meets Standard	Postings detailing visitation times, rules and regulations were observed by the inspector in the main entrance to the facility.
4. The hours for all categories of visitation are posted in the visitation waiting area.	Meets Standard	
5. A written copy of the rules regulating visitation and the hours of visitation is available to visitors.	Meets Standard	Written copies of the facility's visitation policy are available to visitors upon request.
6. A general visitation log is maintained.	Meets Standard	The inspector examined a log used for sign-in by family and other general visitors.
7. The detainees are permitted to retain personal property items specified in the standard.	Meets Standard	
8. A visitor dress code is available to the public.	Meets Standard	Postings at the facility entrance and the detainee handbook detail the visitor dress code.
9. Visitors are searched and identified according to standard requirements.	Meets Standard	Visitors and their possessions must pass through a metal detector before entering the visitation area of the facility.
10. The requirement on visitation by minors is complied with.	Meets Standard	Minors are allowed to visit detainees if accompanied by an adult.
11. At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, within the first 30 days.	N/A	Minors are permitted to visit at this facility.
12. After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.	N/A	Minors are permitted to visit.
13. Detainees in special housing are afforded visitation.	Meets Standard	
14. Legal visitation is available seven (7) days a week, including holidays.	Meets Standard	Detainees may receive legal visits seven days a week.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

VISITATION (Key: P)		
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
15. On regular business days legal visitation hours are provide for a minimum of eight (8) hours per day, and a minimum of four hours per day on weekends and holidays.	Meets Standard	Attorneys may visit a detainee from 9 a.m. - 9 p.m. seven days a week.
16. On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	Meets Standard	
17. Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	Meets Standard	The inspector observed a private room set aside for attorney visits with detainees.
18. There are written procedures governing detainee searches.	Meets Standard	Policy dictates circumstances under which a detainee may be searched.
19. When strip searches are required after every contact visit with a legal representative, the facility provides an option for non-contact visits with legal representatives.	Meets Standard	Policy prohibits strip searches of detainees.
20. Prior to each visit, legal service providers and assistants are identified per the standard.	Meets Standard	The inspector reviewed the log used to record legal service visitors. Copies of their credentials were kept in the log.
21. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	Meets Standard	The inspector examined postings in the housing units listing pro bono legal organizations and their contact information.
22. The decision to permit or deny a tour is not delegated below the level of Field Office Director.	Meets Standard	
23. Provisions for NGO visitation, as stated in the Detention Standards, are complied with.	Meets Standard	
24. Law enforcement officials who request to visit with a detainee are referred to the ICE Field Office for approval.	Meets Standard	The inspector noted law enforcement official signatures on the general sign-in log maintained at the entrance to the facility. All such visitors were approved by the local ICE officials.
25. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the OIC or ICE Field Office.	Meets Standard	
26. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	Meets Standard	

VISITATION – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

VISITATION – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> General and legal representative sign-in logs were examined by the inspector. Legal sign-in logs contained copies of the legal representative's credentials. Postings detailing visitation schedules were observed in the visitor's entrance to the facility. The visitor dress code is located on postings in the entrance to the facility as well as in the detainee handbook. Private rooms for detainee/attorney visits were observed. The facility officer posted at the visitor entrance to the facility was interviewed.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

VOLUNTARY WORK PROGRAM (Key: Q)

POLICY: IN EVERY FACILITY OFFERING A VOLUNTARY WORK PROGRAM, ICE DETAINEES WILL HAVE THE OPPORTUNITY TO WORK AND EARN MONEY BY PARTICIPATING. WHILE NOT LEGALLY REQUIRED, ICE AFFORDS DETAINEE WORKERS BASIC OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA) PROTECTIONS.

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Does the facility have a voluntary work program? • Do ICE detainees participate?	Meets Standard	ICE detainees are allowed to participate in the voluntary work program at this facility.
2. Detainee housekeeping meets neatness and cleanliness standards.	Meets Standard	The facility is neat and clean.
3. Detainees have the opportunity to participate in special details, however, are never allowed to work outside the secure perimeter.	Meets Standard	Detainees are allowed to participate in special work programs, but are not allowed to work outside the secure perimeter.
4. Written procedures govern selection of detainees for the Voluntary Work Program.	Meets Standard	Facility policy addresses the Voluntary Work Program, specifically addressing the procedures governing the selection of detainees for the program.
5. Where possible, physically and mentally challenged detainees participate in the program.	Meets Standard	
6. The facility complies with work-hour requirements for detainees, not exceeding: • Eight hours a day and Forty hours a week.	Meets Standard	Voluntary detainee workers do not work in excess of eight hours a day or forty hours a week.
7. Detainee volunteers generally work according to fixed schedule.	Meets Standard	
8. If a detainee is removed from a work detail, staff places the written justification for the action in the detainee's detention file.	Meets Standard	A detainee is notified in writing if he/she is removed from a work detail.
9. Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	Meets Standard	Detainee workers are oriented to the responsibilities of the job prior to being allowed to work.
10. The voluntary work program meets: • OSHA, NFPA, ACA standards	Meets Standard	
11. Medical staff screen and formally certify detainee food service volunteers. • Before the assignment begins; and • As a matter of written procedure	Meets Standard	Detainee food service workers are medically screened prior to working in the food service program. They are also examined daily by food service personnel to ensure they meet sanitation guidelines.

VOLUNTARY WORK PROGRAM (Key: Q)

POLICY: IN EVERY FACILITY OFFERING A VOLUNTARY WORK PROGRAM, ICE DETAINEES WILL HAVE THE OPPORTUNITY TO WORK AND EARN MONEY BY PARTICIPATING. WHILE NOT LEGALLY REQUIRED, ICE AFFORDS DETAINEE WORKERS BASIC OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA) PROTECTIONS.

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
12. Detainees receive safety equipment/ training sufficient for the assignment.	Meets Standard	Detainee workers are trained in the safe operation of any equipment they will be using and working around.
13. Proper procedure is followed when an ICE detainee is injured on the job.	Meets Standard	

VOLUNTARY WORK PROGRAM – REVIEWER SUMMARY

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

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

The facility uses voluntary detainee workers in the food service program and the laundry. Each detainee is oriented and trained prior to beginning a job. Detainees do not work more than eight hours a day nor forty hours a week. The facility, where possible, allows physically and mentally challenged detainees to participate in the work program.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 6/7/2012

Reviewer Signature (for printed form submission):

Section II

Health Service Standards

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

HUNGER STRIKES (Key: R)		
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. When a detainee has refused food for 72 hours, it is standard practice for staff to refer him/her to the medical department.	Meets Standard	Facility policy requires staff to refer detainees to the medical department when they have refused food or fluids for 72 hours.
2. CDFs and IGSAs immediately report a hunger strike to the ICE.	Meets Standard	Facility policy requires staff to report hunger strikes to ICE personnel when the detainee has missed two consecutive meals.
3. The facility has established procedures to ensure staff respond immediately to a hunger strike.	Meets Standard	Facility policy outlines procedures for the management of hunger strikes and requires staff to respond immediately.
4. Policy and procedure require that staff isolate a hunger-striking detainee from other detainees. • If yes, in an observation room?	Meets Standard	Facility policy requires hunger striking detainees to be placed in medically appropriate housing.
5. Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	Meets Standard	Medical staff is authorized to place the hunger striking detainees in one of the observation cells within the health services unit or in the Special Management Unit.
6. Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	Meets Standard	Facility policy requires a qualified health care professional to record a hunger striker's weight, vital signs and overall appearance every 24 hours.
7. The OIC of the facility obtains a hunger striker's consent before medical treatment.	Meets Standard	A signed and dated consent for treatment is obtained from each detainee during medical in-processing procedures. Additional consents are obtained when invasive procedures are considered.
8. A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.	Meets Standard	Staff attempts to obtain a signature on a Refusal of Treatment form when a hunger striker refuses evaluation or treatment.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

HUNGER STRIKES (Key: R)		
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
9. During a hunger strike, staff document and provide the hunger-striking detainee three meals a day.	Meets Standard	Facility policy requires staff to deliver three meals per day to hunger striking detainees.
10. Staff maintains the hunger striker's supply of drinking water/other beverages.	Meets Standard	Facility policy requires staff to maintain a supply of drinking water for hunger strikers.
11. During a hunger strike, staff removes all food items from the hunger striker's living area.	Meets Standard	Facility policy requires all food and edible commissary items to be removed from a hunger striker's cell.
12. Staff is directed to record the hunger striker's fluid intake and food consumption; Does staff always use Hunger Strike Monitoring Form I-839 or similar IGSA form.	Meets Standard	Facility policy requires staff to document all food and fluid intake in the medical record.
13. The medical staff has written procedures for treating hunger strikers.	Meets Standard	Facility policy provides basic procedures for the medical management of hunger striking detainees. Management is individualized on a case-by-case basis.
14. Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.	Meets Standard	Facility policy requires staff to document all patient encounters, including efforts to convince the detainee to voluntarily end the hunger strike.
15. Staff has received training in identification of hunger strikes. Medical staff receives early training in hunger-strike evaluation and treatment. Staff remains current in evaluation and treatment techniques.	Meets Standard	All staff receive hunger strike training as part of the Emergency Plans portion of their five week pre-service training and again annually during refresher training.

HUNGER STRIKE – REVIEWER SUMMARY	
(Use following format for dates: mm/dd/yyyy)	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Policies and procedures are in place for the identification, referral and management of hunger striking detainees. Procedures ensure the monitoring of the health and welfare of hunger strikers. All staff are trained on the hunger strike procedures as part of their pre-service and annual training. There were no detainee hunger strikes since the previous inspection. The standard's rating was based on observations, the review of policies and training records and staff interviews.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 6/7/2012

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

HUNGER STRIKE – REVIEWER SUMMARY

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

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Facilities operate a health care facility in compliance with state and local laws and guidelines.	Meets Standard	The facility has a current "waived category" Clinical Laboratory Information Amendments (CLIA) certificate and a current Drug Enforcement Agency (DEA) registration. Licenses of health care providers were reviewed and were current and verified.
2. The facility's in-processing procedures for arriving detainees include medical screening.	Meets Standard	In-processing procedures for detainees include medical and mental health screening by a nurse. The health records of 20 ICE detainees were reviewed, and all had medical and mental health screening upon arrival to the facility.
3. All detainees have access to and receive medical care.	Meets Standard	Detainees receive routine medical care by completing a sick call request form and placing the form in a locked box. The forms are collected each day by the evening nurse. Sick call appointments are arranged based on a triage process. Most routine medical concerns are addressed within 24-48 hours. Urgent or emergency requests can be made to any staff member and evaluations are provided immediately. Dental and mental health staff provide services each week. Detainees with health care needs beyond the scope of services provided by the facility are referred to community providers or transferred to a facility that can meet their needs.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
4. The facility has access to a PHS/DIHS Managed Health Care Coordinator.	Meets Standard	The facility uses the computerized "Medical Provider Analysis and Review" (MedPAR) system to access the Immigration Health Service Corps' (IHSC) Field Case Managers.
5. The medical staff is large enough to provide, examine, and treat the facility's detainee population.	Meets Standard	Staffing is sufficient to provide medical, mental health and dental services. Full time staffing consists of (b)(7)(e) Health Services Administrator, (b)(7)(e) Registered Nurses, (b)(7)(e) Licensed Vocational Nurses, (b)(7)(e) emergency medical technicians and (b)(7)(e) medical records clerk. Part time positions include a physician 10 hours per week, a Family Nurse Practitioner 8 hours per week, a dentist 4 hours per week, an as needed psychiatrist, a mental health coordinator and an x-ray technician.
6. The facility has sufficient space and equipment to afford detainee privacy when receiving health care.	Meets Standard	Space in the health services unit is cramped, but sufficient to provide privacy when health care is delivered. There are two examination rooms that double as a phlebotomy station and x-ray room when not in use for examinations.
7. The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	Meets Standard	The health services unit is within the secure perimeter of the facility and has its own restricted access area.
8. The medical facility entrance includes a holding/waiting room.	Meets Standard	The health services unit has a waiting room.
9. The medical facility's holding/waiting room is under the direct supervision of custodial staff.	Meets Standard	The waiting room is under constant direct supervision of a detention officer.
10. Detainees in the holding/waiting room have access to a drinking fountain.	Meets Standard	There is a water fountain in the waiting room.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
11. 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; and Procedurally, no copies made and placed in detainee files. 	Meets Standard	The facility uses a computerized medical record. Access to the medical record is User ID and Password protected. Access is restricted to authorized health care staff. Detention staff does not have access to medical information. No copies of medical information are placed in the detention file.
12. Pharmaceuticals are stored in a secure area.	Meets Standard	Pharmaceuticals are stored in a locked medication cabinet that is stored in the medical records area within the health services unit. The medical records room has a large, thin, Plexiglas window that has metal bars running across the opening. The health services unit has a detention officer posted outside this area at all times.
13. Medical screening includes a Tuberculosis (TB) test. <ul style="list-style-type: none"> Every arriving detainee receives a TB test during the admission process; Detainee's TB-screening does not occur more than one business day after his/her arrival at the facility; and Detainees not screened are housed separate from the general population. 	Meets Standard	Tuberculosis (TB) screening is performed by means of a chest x-ray which is obtained within 24 hours of the detainee's arrival. The facility contracts with Corridor Mobile Medical Services to obtain the x-rays. Interpretation is performed within 24 hours. The health records of 20 ICE detainees were reviewed, and all had chest x-rays within 24 hours of arrival. Detainees who are symptomatic for TB or have chest x-rays suspicious for TB are housed in one of two negative airflow respiratory isolation rooms until they are medically cleared to be placed in the general population.
14. 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; and Before a detainee's assignment to a housing unit. 	Meets Standard	Mental health screening is performed by a nurse during in-processing procedures and before a detainee is assigned to a housing unit.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
15. The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.	Meets Standard	Medical and mental health screening is performed by medical staff and therefore reviewed by them when screenings are conducted.
16. The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.	Meets Standard	The health records of 20 ICE detainees housed for over 14 days were reviewed and all had physical assessments within 14 days of arrival. The assessments are conducted by a physician or a nurse practitioner.
17. Detainees in the Special Management Unit have access to health care services.	Meets Standard	Detainees in the Special Management Unit (SMU) have the same access to health care as the general population. Additionally, each detainee in the SMU is visited daily by a staff nurse. The SMU log was inspected and confirmed that a nurse visits the unit daily, even when no detainees are housed in the area.
18. Staff provides detainees with health services (sick call) request slips daily, upon request. <ul style="list-style-type: none"> Request slips are available in languages other than English, including every language spoken by a sizeable number of the facility's detainee population. Service-request slips are delivered in a timely fashion to the health care provider. 	Meets Standard	Sick call request forms are available in each housing unit. The forms are available in English and Spanish. Sick call forms are collected daily, on the evening shift.
19. The facility has a written plan for the delivery of 24-hour emergency health care when no medical personnel are on duty at the facility, or when immediate outside medical attention is required.	Meets Standard	Medical staff is on-site 24 hours per day, seven days per week. Facility policy provides guidance to staff when immediate outside medical attention is required.
20. The plan includes an on-call provider.	Meets Standard	The on-call provider list is posted in the health services unit and in central control.
21. The plan includes a list of telephone numbers for local ambulance and hospital services.	Meets Standard	The plan lists 911 as the number for an ambulance service. The telephone number of the local hospital is posted in the health services unit and in central control.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
22. The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.	Meets Standard	Facility policies on emergency response and transportation procedures instruct staff to use safety and security measures when providing emergency health care.
23. Detention staff is trained to respond to health-related emergencies within a 4-minute response time.	Meets Standard	Facility policy requires staff to respond to medical emergencies within four minutes. All staff are CPR (cardiopulmonary resuscitation) and First Aid certified. There is no place within the facility that cannot be accessed by trained staff in less than four minutes.
24. Where staff is used to distribute medication, a health care provider properly trains these officers.	N/A	Only health care staff distribute medications. Detention officers never distribute medication.
25. The medical unit keeps written records of medication that is distributed.	Meets Standard	Health care staff use a computerized Medication Administration Record (MAR) to record when medication is distributed.
26. The Form I-819 (or IGSA equivalent) is used to notify the Warden/Facility of a detainee that has special medical needs.	Meets Standard	Health care staff notifies facility staff when a detainee requires special housing or lifestyle accommodations.
27. A signed and dated consent form is obtained from a detainee before medical treatment is administered.	Meets Standard	Each detainee signs a medical consent form during the medical intake screening process.
28. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	Meets Standard	Detainees sign an Authorization for Release of Protected Health Information form to authorize the release of medical information to outside sources.
29. The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	Meets Standard	Health care staff is usually provided adequate advance notice when detainees are transferred, removed or released.
30. Detainee's medical records or a copy thereof, are available and transferred with the detainee.	Meets Standard	The facility uses the Medical Summary of Federal Prisoner/Alien in Transit form to relay pertinent medical information to other facilities.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
31. Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL".	Meets Standard	Medical records are placed in a sealed envelope and labeled with the detainee's name and A-number. The envelope is also marked "Medical Confidential."

ACCESS TO MEDICAL CARE – REVIEWER SUMMARY	
(Use following format for dates: mm/dd/yyyy)	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Health care in the facility is provided by employees of Corrections Corporation of America and their contractors. The facility does not hold accreditation by any outside organization. Routine medical, dental and mental health services are provided within the facility. Required services that are beyond the scope of practice for the health service unit are referred to community providers. Health care services are provided in a clean but cramped environment that is appropriately staffed. Detainees with acute and chronic needs are identified during the intake screening and physical assessment processes. Detainees with chronic care medical and mental health conditions are provided with regular and timely follow up. Routine medical, dental and mental health care services are also provided in a timely manner. Detainees requiring close observation for medical concerns are housed in one of the two medical observation rooms. A review of ICE detainee medical records confirmed timely medical and mental health intake screenings and physical assessments.</p> <p>ICE detainees do not pay for medical, mental health or dental services.</p> <p>The standard's rating was based on a review of policies, training records and health care records and on observations and staff interviews.</p>	
<p>Overall Rating: Meets Standard</p>	
<p>Reviewer Name (Printed) (b)(6), (b)(7)(c)</p>	<p>Completion Date: 6/7/2012</p>
<p>Reviewer Signature (for printed form submission):</p>	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

SUICIDE PREVENTION AND INTERVENTION (Key: T)		
POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.	Meets Standard	All staff members receive suicide prevention and intervention training as part of their pre-service training and annual refresher training. A sampling of training records was reviewed and confirmed the training.
2. Training prepares staff to: <ul style="list-style-type: none"> • Recognize potentially suicidal behavior; • Refer potentially suicidal detainees, following facility procedures; and • Understand and apply suicide-prevention techniques. 	Meets Standard	The PowerPoint presentation for suicide prevention was reviewed and confirmed that the training prepares staff to recognize, refer and manage potentially suicidal detainees.
3. 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. 	Meets Standard	A nurse performs the screening for suicide potential during the in-processing mental health screening and before a detainee is assigned to a housing unit.
4. Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.	Meets Standard	Facility policies on suicide prevention, management and risk reduction provide guidance to staff regarding referring at-risk detainees to medical staff. Interviews with medical and detention staff confirm their knowledge of the procedures.
5. The facility has a designated isolation room for evaluation and treatment.	Meets Standard	The designated rooms for suicide watch are in the Special Management Unit and in the health services area.
6. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	Meets Standard	This component was found to be deficient during the previous inspection, as the bed in the isolation room had metal tie down loops that may have been used in a hanging attempt. Since the last inspection, the metal loops have been removed. The designated isolation rooms do not contain structures or small items that could be used in a suicide attempt.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

SUICIDE PREVENTION AND INTERVENTION (Key: T)		
POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
7. Medical staff has approved the room for this purpose.	Meets Standard	The health services administrator has approved the isolation rooms for use for suicide watch.
8. Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes.	Meets Standard	When a detainee is on suicide watch, they are under direct observation by a detention officer. The officer's observations are recorded at least every 15 minutes.

SUICIDE PREVENTION AND INTERVENTION – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> <p>All staff are trained in the recognition, referral and management of potentially suicidal detainees. The training occurs during pre-service orientation and as part of annual refresher training. A review of health records provided evidence of screening for suicide potential during medical in-processing. Clinically suicidal detainees are provided with preventative supervision and treatment. Policy and procedures protect the health and well-being of detainees on suicide watch.</p> <p>The standard's rating was based on a review of policies, training records and medical records and on observations of detainees on suicide watch and staff interviews. There were no successful suicides or serious suicide attempts since the last inspection.</p>	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH (Key: U)

POLICY ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLICIES AND PROCEDURES ADDRESSING THE ISSUES OF TERMINAL ILLNESS OR INJURY, MEDICAL ADVANCED DIRECTIVES, AND DETAINEE DEATH, TO INCLUDE THE PROCEDURES TO ENSURE PROPER NOTIFICATION IS PROVIDED TO ICE OFFICIALS, FAMILY MEMBERS AND OTHER INTERESTED PARTIES IN THE EVENT OF A DETAINEE BECOMING TERMINALLY ILL OR INJURED OR DEATH OF A DETAINEE OCCURS. IN ADDITION, THE POLICY WILL COVER PROCEDURES TO BE TAKEN IF THE DEATH OF A DETAINEE OCCURS WHILE IN TRANSIT.

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Detainees who are chronically or terminally ill are transferred to an appropriate offsite medical facility.	Meets Standard	Detainees who are seriously or terminally ill are not routinely housed in this facility. Detainees who become seriously ill are transferred to the Laredo Medical Center, the local hospital, or transferred to a more appropriate detention facility.
2. The facility or appropriate ICE office promptly notifies the next of kin of the detainee's medical condition, to include: <ul style="list-style-type: none"> The detainee's location; and The limitations placed on visiting. 	Meets Standard	When detainees become seriously ill or are hospitalized, the facility notifies ICE personnel and ICE notifies the next of kin regarding the detainee's location and visiting restrictions.
3. There are guidelines addressing the State Advanced Directive Form for Implementing Living Wills and Advanced Directives. <ul style="list-style-type: none"> The guidelines include instructions for detainees who wish to have a living will other than the generic form the DIHS provides or who wishes to appoint another to make advance decisions for him or her. 	Meets Standard	Facility policy addresses advanced directives, living wills and durable power of attorney requests. Policy instructs staff to use the state's forms when available.
4. The guidelines provide the detainee the opportunity to have a private attorney prepare the documents.	Meets Standard	Facility policy does not specify that a private attorney may prepare advanced directives. However, the detainee handbook states that detainees may use a private attorney to prepare the documents.
5. There is a policy addressing "Do Not Resuscitate Orders"	Meets Standard	Facility advanced directives policy addresses Do Not Resuscitate (DNR) orders.
6. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation?	Meets Standard	When a detainee has a DNR order in his/her medical record, facility policy requires staff to provide maximal therapeutic efforts short of resuscitation.

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH (Key: U)

POLICY ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLICIES AND PROCEDURES ADDRESSING THE ISSUES OF TERMINAL ILLNESS OR INJURY, MEDICAL ADVANCED DIRECTIVES, AND DETAINEE DEATH, TO INCLUDE THE PROCEDURES TO ENSURE PROPER NOTIFICATION IS PROVIDED TO ICE OFFICIALS, FAMILY MEMBERS AND OTHER INTERESTED PARTIES IN THE EVENT OF A DETAINEE BECOMING TERMINALLY ILL OR INJURED OR DEATH OF A DETAINEE OCCURS. IN ADDITION, THE POLICY WILL COVER PROCEDURES TO BE TAKEN IF THE DEATH OF A DETAINEE OCCURS WHILE IN TRANSIT.

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
7. The facility notifies the DIHS Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSA's, this notification is made through the local ICE representative.	Meets Standard	Facility policy requires staff to notify ICE when a detainee has a DNR order in his/her medical record. Local ICE authorities contact the Immigration Health Service Corps (IHSC).
8. The facility has written procedures to address the issues of organ donation by detainees.	Meets Standard	Facility policy addresses organ donation by detainees.
9. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.	Meets Standard	Facility policy requires staff to notify the Assistant Field Office Director (AFOD) or designee when a detainee dies in service. ICE personnel are responsible for notifying the family members and consulates.
10. The facility has a policy and procedure to address the death of a detainee while in transport.	N/A	The facility does not perform detainee transportation.
11. At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	Meets Standard	There have been no deaths in this facility since the last inspection. However, the facility would work with ICE to return the remains to the deceased detainee's family or appropriate consulate.
12. 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's is a U.S. military veteran, is the Department of Veterans Affairs notified? 	Meets Standard	ICE would provide an indigent's burial if neither the family nor the consulate claims the detainee's remain. The AFOD confirmed that the Department of Veterans Affairs would be contacted if the detainee was a U.S. military veteran.
13. An original or certified copy of a detainee's death certificate is placed in the subject's a-file.	Meets Standard	There have been no detainee deaths at this facility since the last inspection. However, should one occur, a certified copy of the detainee's death certificate would be placed in the detainee's A-file.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH (Key: U)

POLICY ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLICIES AND PROCEDURES ADDRESSING THE ISSUES OF TERMINAL ILLNESS OR INJURY, MEDICAL ADVANCED DIRECTIVES, AND DETAINEE DEATH, TO INCLUDE THE PROCEDURES TO ENSURE PROPER NOTIFICATION IS PROVIDED TO ICE OFFICIALS, FAMILY MEMBERS AND OTHER INTERESTED PARTIES IN THE EVENT OF A DETAINEE BECOMING TERMINALLY ILL OR INJURED OR DEATH OF A DETAINEE OCCURS. IN ADDITION, THE POLICY WILL COVER PROCEDURES TO BE TAKEN IF THE DEATH OF A DETAINEE OCCURS WHILE IN TRANSIT.

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
14. 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; • Who will perform the autopsy; • Obtaining state approved death certificates; and • Local transportation of the body. 	Meets Standard	Facility policies regarding incident reporting and notification of next of kin provide guidance to staff regarding performance of an autopsy, obtaining death certificates and local transportation of the body. Policy requires staff to contact the coroner when a detainee dies within the facility. The local coroner makes the decision regarding performance of an autopsy.
15. ICE staff follows established procedures to properly close the case of a deceased detainee.	Meets Standard	Upon receipt of a death certificate, the case is closed.

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH – REVIEWER SUMMARY

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

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

Medical facilities and staffing are adequate to meet the routine outpatient needs of the detainee population. However, staffing and medical facilities preclude the facility from routinely accepting detainees who are seriously or terminally ill. Policies and procedures are in place for notifying ICE and other interested parties when detainees become seriously ill or die while in the facility. Facility policies are also in place that address the preparation of advanced directives, living wills, do not resuscitate orders and organ donation.

There were no detainee deaths since the last inspection.

The standard's rating was based on a review of policies and staff interviews.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 6/7/2012

Reviewer Signature (for printed form submission):

Section III

SECURITY AND CONTROL STANDARDS

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

CONTRABAND (Key: V)		
POLICY: ALL DETENTION FACILITIES WILL ENSURE THE PROPER HANDLING AND DISPOSAL OF ALL CONTRABAND. DOCUMENTATION OF CONTRABAND DESTRUCTION IS REQUIRED.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility follows a written procedure for handling illegal contraband. Staff inventory, hold, and report it when necessary to the proper authority for action/possible seizure.	Meets Standard	Policy includes step-by-step directions for employees who confiscate contraband.
2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	Meets Standard	
3. Staff returns property not needed as evidence to the proper authority. Written procedures cover the return of such property.	Meets Standard	
4. Altered property is destroyed following documentation and using established procedures.	Meets Standard	The Chief of Security determines whether or not to destroy an item of contraband. No contraband of questionable ownership may be destroyed prior to 120 days from confiscation in order to provide adequate time to establish ownership.
5. Before confiscating religious items, the OIC or designated investigator contacts a religious authority.	Meets Standard	The chaplain from the neighboring correctional facility is consulted regarding religious items.
6. Staff follows written procedures when destroying hard contraband that is illegal.	Meets Standard	
7. Hard contraband that is illegal (under criminal statutes) may be 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. 	Meets Standard	Hard contraband that is retained for training purposes is secured in the facility (b)(7)e

CONTRABAND – REVIEWER SUMMARY	
(Use following format for dates: mm/dd/yyyy)	
Overall Remarks: (Record significant facts, observations, other sources used, etc.)(5000 Character Max) Contraband is handled and disposed of according to specific procedures, and appropriately documented. Policy was reviewed and staff were interviewed to determine compliance with this standard.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

DETENTION FILES (Key: W)		
POLICY: EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY ICE DETAINEE BOOKED INTO THE FACILITY, EXCLUDING ONLY DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETENTION FILE WILL CONTAIN COPIES AND, IN SOME CASES, THE ORIGINAL OF SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE FACILITY: CLASSIFICATION SHEET, MEDICAL QUESTIONNAIRE, PROPERTY INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. A detention file is created for every new arrival whose stay will exceed 24 hours.	Meets Standard	Ten active and five inactive detention files were reviewed. They were all created the day the detainee was admitted to the facility.
2. The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	Meets Standard	Copies or originals of various ICE admission and release (I-203), personal property inventory, and Record of Deportable/ Inadmissible Alien forms were examined in each detention file reviewed.
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 closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same 	Meets Standard	
4. The detention files are located and maintained in a secure area. If not, the cabinets are lockable and distribution of the keys is limited to supervisors.	Meets Standard	The inspector reviewed detention files which were kept in a locked cabinet in a secure area of the facility.
5. The detention file remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent, and other documentation.	Meets Standard	Five inactive detention files were reviewed. Each contained completed forms, such as returned property forms, signed by the detainee.
6. The officer closing the detention file makes a notation that the file is complete and ready to be archived.	Meets Standard	Each inactive file reviewed by the inspector had a "release" check list on the cover. The check list was signed by a facility official noting that the file was complete and ready to be archived.
7. Staff makes copies and sends documents from the file when properly requested by supervisory personnel at the receiving facility or office.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

DETENTION FILES (Key: W)		
POLICY: EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY ICE DETAINEE BOOKED INTO THE FACILITY, EXCLUDING ONLY DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETENTION FILE WILL CONTAIN COPIES AND, IN SOME CASES, THE ORIGINAL OF SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE FACILITY: CLASSIFICATION SHEET, MEDICAL QUESTIONNAIRE, PROPERTY INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
8. Appropriate staff has access to the detention files, and other departmental requests are accommodated by making a request for the file. Each file is properly logged out and in by a representative of the responsible department.	Meets Standard	The file sign-out log was reviewed by the inspector.

DETENTION FILES – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Ten active and five inactive detention files were reviewed by the inspector. Each active file contained admission forms (I-203) completed the day the detainee was admitted to the facility. Inactive files had a "release check list" form attached to the folder. Check boxes for items such as funds/personal property inventories signed by the detainee and reason for transfer were checked. The inspector asked a facility officer to randomly choose the files for review. The officer pulled the files and recorded each on a log, listing his name, the detainee's date and time, and purpose of removal.	
Overall Rating: Meets Standard	
Reviewer Name (Printed)	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

DISCIPLINARY POLICY (Key: X)		
POLICY: ALL FACILITIES HOUSING ICE DETAINEES ARE AUTHORIZED TO IMPOSE DISCIPLINE ON DETAINEES WHOSE BEHAVIOR IS NOT IN COMPLIANCE WITH FACILITY RULES AND REGULATIONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	Meets Standard	
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	Meets Standard	
3. Written rules prohibit staff from imposing or permitting the following sanctions: <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 physical exercise 	Meets Standard	Facility policy prohibits sanctions involving the bullet points in this component as well as prohibiting denial of legal access, denial of medical services, and deprivation of sleep. Policy also states that discipline will never be administered in a way that would degrade or humiliate a detainee.
4. The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	Meets Standard	
5. The following items are conspicuously posted in Spanish and English, and other dominate languages used in the facility: <ul style="list-style-type: none"> • Rights and Responsibilities • Prohibited Acts • Disciplinary Severity Scale • Sanctions 	Meets Standard	
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	Meets Standard	Policy allows for minor infractions to be handled informally, with the goal of achieving mutual consent between the employee and the detainee.
7. Incident reports and Notice of Charges are promptly forwarded to the designated supervisor.	Meets Standard	Disciplinary reports must be submitted by the writing employee by the end of their assigned shift. The supervisor must review the disciplinary reports before going off-duty from their assigned shift.
8. Incident reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before an investigation ends.	Meets Standard	
9. An intermediate disciplinary process is used to adjudicate minor infractions.	Meets Standard	Minor disciplinary infractions have a separate set of lower-level sanctions.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

DISCIPLINARY POLICY (Key: X)

POLICY: ALL FACILITIES HOUSING ICE DETAINEES ARE AUTHORIZED TO IMPOSE DISCIPLINE ON DETAINEES WHOSE BEHAVIOR IS NOT IN COMPLIANCE WITH FACILITY RULES AND REGULATIONS.

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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 detainees and staff representatives; • Bases its findings on the preponderance of evidence; and • Imposes only authorized sanctions 	Meets Standard	
11. A staff representative is available if requested for a detainee facing a disciplinary hearing.	Meets Standard	Staff representatives are assigned by the warden when requested by the detainee or if the detainee is illiterate.
12. The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	Meets Standard	
13. The duration of punishment set by the OIC, as recommended by the disciplinary panel, does not exceed established sanctions. The maximum time in disciplinary segregation is limited to 60 days for a single offense.	Meets Standard	
14. Written procedures govern the handling of confidential-informant information. Standards include criteria for recognizing "substantial evidence"	Meets Standard	Policy requires the disciplinary committee to document the factual basis for finding confidential information reliable.
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	Meets Standard	

DISCIPLINARY POLICY – REVIEWER SUMMARY

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

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

The facility imposes discipline as prescribed in the standard, ensuring due process and providing equitable treatment of those detainees who become subject to the disciplinary process. To evaluate this standard, policy was reviewed, staff were interviewed and detainees were interviewed.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 6/7/2012

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

EMERGENCY (CONTINGENCY) PLANS (Key: Y)		
POLICY ALL FACILITIES HOLDING ICE DETAINEES WILL RESPOND TO EMERGENCIES WITH A PREDETERMINED STANDARDIZED PLAN TO MINIMIZE THE HARMING OF HUMAN LIFE AND THE DESTRUCTION OF PROPERTY. IT IS RECOMMENDED THAT SPCs AND CDFs ENTER INTO AGREEMENT, VIA MEMORANDUM OF UNDERSTANDING (MOU), WITH FEDERAL, LOCAL AND STATE AGENCIES TO ASSIST IN TIMES OF EMERGENCY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Policy precludes detainees or detainee groups from exercising control or authority over other detainees.	Meets Standard	
2. Detainees are protected from: <ul style="list-style-type: none"> • Personal abuse • Corporal punishment • Personal injury • Disease • Property damage • Harassment from other detainees 	Meets Standard	
3. Staff is trained to identify signs of detainee unrest. <ul style="list-style-type: none"> • What type of training and how often? 	Meets Standard	All facility staff receive comprehensive training in pre-service and during annual in-service training on all aspects of the emergency plans. The facility also conducts quarterly exercises.
4. Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Officer In Charge (OIC)	Meets Standard	
5. There is a designated person or persons responsible for emergency plans and their implementation. Sufficient time is allotted to the person or group for development and implementation of the plans.	Meets Standard	
6. The plans address the following issues: <ul style="list-style-type: none"> • Confidentiality • Accountability (copies and storage locations) • Annual review procedures and schedule • Revisions 	Meets Standard	Policy provides specific information regarding the storage, revision, and confidentiality of emergency plans.
7. Contingency plans include a comprehensive general section with procedures applicable to most emergency situations.	Meets Standard	
8. The facility has cooperative contingency plans with applicable: <ul style="list-style-type: none"> • Local law enforcement agencies • State agencies • Federal agencies 	Meets Standard	The facility has agreements with Webb County Detention center, Laredo Fire Department, Houston Processing Center, Webb County Sheriff, Laredo Police Department, TransCor of America and the Laredo Hospital.
9. All staff receives copies of Hostage Situation Management policy and procedures.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

EMERGENCY (CONTINGENCY) PLANS (Key: Y)		
POLICY ALL FACILITIES HOLDING ICE DETAINEES WILL RESPOND TO EMERGENCIES WITH A PREDETERMINED STANDARDIZED PLAN TO MINIMIZE THE HARMING OF HUMAN LIFE AND THE DESTRUCTION OF PROPERTY. IT IS RECOMMENDED THAT SPCs AND CDFs ENTER INTO AGREEMENT, VIA MEMORANDUM OF UNDERSTANDING (MOU), WITH FEDERAL, LOCAL AND STATE AGENCIES TO ASSIST IN TIMES OF EMERGENCY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
10. Staff is trained to (b)(7)e Within 24 hours after release, hostages are screened for medical and psychological effects.	Meets Standard	
11. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	Meets Standard	Medical treatment is part of the written plans, and examinations are required during and after an incident.
12. Food service maintains at least 3 days' worth of emergency meals for staff and detainees.	Meets Standard	Policy dictates that a minimum of three day's supply of meals and disposable service ware be available at all times.
13. Written plans identify locations of shut-off valves and switches for all utilities (water, gas, electric).	Meets Standard	Facility policy and maps specifically identify the locations of shut-off valves and switches for utilities.
14. Written procedures cover: <ul style="list-style-type: none"> • Work/Food Strike • Disturbances • Escapes • Bomb Threats • Adverse Weather • Internal Searches • Facility Evacuation • Detainee Transportation System Plan • Internal Hostages • Civil Disturbances 	Meets Standard	Internal search procedures are included in each applicable plan, as well as in a separate internal search plan.

EMERGENCY (CONTINGENCY) PLANS – REVIEWER SUMMARY	
(Use following format for dates: mm/dd/yyyy)	
Overall Remarks: (Record significant facts, observations, other sources used, etc.)(5000 Character Max) The facility plans include specific response plans designed to minimize harm to detainees and staff. The facility has numerous Memorandums of Understanding to complement their resources in case of emergency. Staff were interviewed and policy was reviewed to evaluate this standard.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	Meets Standard	Facility policy addresses the storing, issuing and maintenance of inventories of hazardous materials.
2. Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	Meets Standard	Constant inventories of all caustic, flammable and toxic substances are maintained in all storage areas.
3. The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. <ul style="list-style-type: none"> The files list all storage areas, and include a plant diagram and legend. The MSDSs and other information in the files are available to personnel managing the facility's safety program. 	Meets Standard	This component was found to be deficient in the last year's inspection because Material Safety Data Sheets (MSDS) were not located at every location as stipulated in the component. A review of the storage areas for this inspection revealed that MSDS are in place in all locations where hazardous materials are stored. Master MSDS files are maintained in the Safety Office and the Health Services Office.
4. All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: <ul style="list-style-type: none"> Wear personal protective equipment; and Report hazards and spills to the designated official. 	Meets Standard	
5. The MSDSs are readily accessible to staff and detainees in work areas.	Meets Standard	
6. Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> Quantities are limited; and Staff always supervises detainees using these substances. 	Meets Standard	Detainee workers do not handle hazardous substances. Quantities of hazardous substances are limited and under lock and key in all areas of the facility.
7. All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	Meets Standard	
8. Lighting fixtures and electrical equipment installed in storage rooms and other hazardous areas meet National Electrical Code requirements.	Meets Standard	
9. The facility has sufficient ventilation, and provides and ensures clean air exchanges throughout all buildings.	Meets Standard	
10. Vents return vents, and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
11. Living units are maintained at appropriate temperatures in accordance with industry standards. (68 to 74 degrees in the winter and 72 to 78 degrees in the summer.)	Meets Standard	Temperature is maintained at 72 degrees throughout the facility.
12. Shower and sink water temperatures do not exceed the industry standard of 120 degrees.	Meets Standard	Water temperature is maintained at appropriate levels by the facility maintenance team and monitored daily.
13. All toxic and caustic materials are stored in their original containers in a secure area.	Meets Standard	Inspection of the storage areas indicated toxic and caustic materials are stored in their original containers.
14. Excess flammables, combustibles, and toxic liquids are disposed of properly and in accordance with MSDSs.	Meets Standard	
15. Staff directly supervise and account for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, e.g., shoe dye. All such products are clearly labeled. "Accountability" includes issuing such products to detainees in the smallest workable quantities.	N/A	Products with methyl alcohol are not used in the facility.
16. Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.	Meets Standard	Training in the use, storage and disposal of flammable, toxic and caustic material is provided to all staff during new employee training and annual refresher training.
17. The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association and the Occupational Safety and Health Administration (OSHA).	Meets Standard	
18. A technically qualified officer conducts the fire and safety inspections.	Meets Standard	The safety officer has received advanced training from the Occupational Safety and Health Administration.
19. The Safety Office (or officer) maintains files of inspection reports.	Meets Standard	Copies of all inspection documents are maintained in the Safety Office.
20. The facility has an approved fire prevention, control, and evacuation plan.	Meets Standard	The fire prevention, control and evacuation plan of the facility is approved by the Laredo Fire Department.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
21. The plan requires: <ul style="list-style-type: none"> • Monthly fire inspections; • Fire protection equipment strategically located throughout the facility; • Public posting of emergency plans with accessible building/room floor plans; • Exit signs and directional arrows; and • An area-specific exit diagram conspicuously posted in the diagrammed area. 	Meets Standard	The fire prevention, control and evacuation plan addresses the required elements of this component.
22. Fire drills are conducted and documented monthly.	Meets Standard	Fire drills are conducted monthly as required and documented. The documentation of the fire drills conducted since January was reviewed during the inspection.
23. A sanitation program covers barbering operations.	Meets Standard	
24. The barber shop has the facilities and equipment necessary to meet sanitation requirements.	Meets Standard	
25. The sanitation standards are conspicuously posted in the barbershop.	Meets Standard	Sanitation standards are posted in the barber shop.
26. Written procedures regulate the handling and disposal of used needles and other sharp objects.	Meets Standard	
27. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	Meets Standard	
28. Standard cleaning practices include: <ul style="list-style-type: none"> • Using specified equipment; cleansers; disinfectants and detergents. • An established schedule of cleaning and follow-up inspections. 	Meets Standard	Standard cleaning procedures are utilized in this facility. Appropriate equipment, cleansers, disinfectants and detergents are used to clean the facility. Facility cleaning is conducted on an established schedule.
29. The facility follows standard cleaning procedures.	Meets Standard	
30. Spill kits are readily available.	Meets Standard	Spill kits are available in various locations throughout the facility.
31. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	Meets Standard	Stericycle is contracted to dispose of infectious/bio-hazardous waste.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
32. Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	Meets Standard	Training to prevent contact with blood and other body fluids is provided to all staff during new employee training and annual refresher training.
33. Do the methods for handling/disposing of refuse meet all regulatory requirements?	Meets Standard	
34. 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 preventative spraying for indigenous insects. 	Meets Standard	Pest control services are provided by a licensed pest control company on a monthly basis. The service provider can be called for additional services as needed.
35. Drinking water and wastewater is routinely tested according to a fixed schedule.	Meets Standard	Facility water is provided by the City of Laredo. The results of the latest test of the water system, issued in June 2011, indicate the water meets or surpasses all state and federal regulations for safe drinking water.
36. Emergency power generators are tested at least every two weeks. <ul style="list-style-type: none"> Other emergency systems and equipment receive testing at least quarterly. Testing is followed-up with timely corrective actions (repairs and replacements). 	Meets Standard	All emergency systems are tested as required. The emergency power generator is tested weekly and load tested monthly. If needed, corrective action is taken in a timely manner.

ENVIRONMENTAL HEALTH AND SAFETY – REVIEWER SUMMARY	
(Use following format for dates: mm/dd/yyyy)	
Overall Remarks: (Record significant facts, observations, other sources used, etc.)(5000 Character Max) The facility is well maintained and clean. Maintenance staff are on site and have in-depth knowledge of the facility. Chemicals are maintained under lock and key with running inventories maintained in each storage area. MSDS sheets are present in all storage areas, with master copies of all MSDS sheets maintained in the Safety Office and Medical Department. The fire prevention, control and evacuation plan has been approved by the Laredo Fire Department. Water and wastewater services are provided by the City of Laredo.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

HOLD ROOMS IN DETENTION FACILITIES (Key: AA)		
POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS, MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSING INTO OR OUT OF THE FACILITY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The hold rooms are situated within the secure perimeter.	Meets Standard	Hold rooms are located within the secure main building of the facility.
2. The hold rooms are well ventilated well lighted, and all activating switches are located outside the room.	Meets Standard	
3. The hold rooms contain sufficient seating for the number of detainees held.	Meets Standard	
4. Bunks, cots, beds, or other related make-shift sleeping apparatus are precluded from use inside hold rooms.	Meets Standard	Seats and washroom facilities are the only apparatus/ furniture in the hold rooms.
5. The walls and ceilings of the hold rooms are tamper and escape proof.	Meets Standard	
6. Individuals are not held in hold rooms for more than 12 hours.	Meets Standard	
7. Male and females are segregated from each other.	Meets Standard	One hold room is designated exclusively for female detainees.
8. Detainees under the age of 18 are not held with adult detainees.	Meets Standard	
9. Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	Meets Standard	Detainees are provided the hygiene items as required by the standard and are permitted to shower upon arrival at the facility, prior to processing.
10. In older facilities, officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.	Meets Standard	
11. All detainees are given a pat down search for weapons or contraband before being placed in the room.	Meets Standard	
12. Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring.). <ul style="list-style-type: none"> • Hold rooms are irregularly monitored every 15 minutes. • Unusual behavior or complaints are noted. 	Meets Standard	Officers are stationed outside of the hold rooms constantly when the hold rooms are occupied.
13. When the last detainee has been removed from the hold room, it is given a thorough inspection.	Meets Standard	
14. There is a written evacuation plan that includes a designated officer to remove detainees from hold rooms in case of fire and/or building evacuation.	Meets Standard	Written evacuation plans are posted in the holding room area, designating the fire evacuation route to take in case of a fire emergency. The officer assigned to the receiving area is responsible to ensure detainee evacuation.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

HOLD ROOMS IN DETENTION FACILITIES (Key: AA)		
POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS, MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSING INTO OR OUT OF THE FACILITY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
15. An appropriate emergency service is called immediately upon a determination that a medical emergency may exist.	Meets Standard	

HOLD ROOMS IN DETENTION FACILITIES – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> The facility has four hold rooms, all of which have drains. Hold rooms are limited in their use to in-processing and out-processing detainees. The inspectors observed the hold rooms being utilized per the requirements of the standard and as mandated by facility policy.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) (Key: AB)		
POLICY IT IS THE POLICY OF THE ICE SERVICE TO MAINTAIN AN EFFICIENT SYSTEM FOR THE USE, ACCOUNTABILITY AND MAINTENANCE OF ALL KEYS AND LOCKS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The security officer[s], or equivalent in IGSAs, has attended an approved locksmith training program.	Meets Standard	The Key Control Officer is a trained locksmith.
2. The security officer, or equivalent in IGSAs, has responsibly for all administrative duties and responsibilities relating to keys, locks etc.	Meets Standard	The Key Control Officer assumes these responsibilities.
3. The security officer, or equivalent in IGSAs, provides training to employees in key control.	Meets Standard	
4. The security officer, or equivalent in IGSAs, maintains inventories of all keys, locks and locking devices.	Meets Standard	
5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	Meets Standard	
6. Facility policies and procedures address the issue of compromised keys and locks.	Meets Standard	Compromised keys are taken out of circulation and destroyed.
7. The security officer, or equivalent in IGSAs, develops policy and procedures to ensure safe combinations integrity.	Meets Standard	(b)(7)e
8. Only dead bolt or dead lock functions are used in detainee accessible areas.	Meets Standard	
9. Only authorized locks (as specified in the Detention Standard) are used in detainee accessible areas.	Meets Standard	
10. Grand master keying systems are prohibited.	Meets Standard	
11. All worn or discarded keys and locks are cut up and properly disposed of.	Meets Standard	
12. Padlocks and/or chains are prohibited from use on cell doors.	Meets Standard	There are no padlocks or chains used to secure detainee areas.
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, Ch. 3; National Fire Protection Association Life Safety Code 101. 	Meets Standard	
14. The operational keyboard is sufficient to accommodate all the facility key rings, including keys in use, and is located in a secure area.	Meets Standard	The operational keyboard is maintained inside the central control room and is adequate for the amount and type of keys for which it is utilized.
15. Procedures are in place to ensure that key rings are: <ul style="list-style-type: none"> Identifiable; The numbers of keys are cited; and Keys cannot be removed. 	Meets Standard	Key rings are secured using high-security clamps, which preclude tampering.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) (Key: AB)		
POLICY IT IS THE POLICY OF THE ICE SERVICE TO MAINTAIN AN EFFICIENT SYSTEM FOR THE USE, ACCOUNTABILITY AND MAINTENANCE OF ALL KEYS AND LOCKS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
16. Emergency keys are available for all areas of the facility.	Meets Standard	
17. The facilities use a key accountability system.	Meets Standard	Keys are placed on an inventory and issued to employees in exchange for chits. The chits are identified by employee.
18. Authorization is necessary to issue any restricted key.	Meets Standard	
19. Individual gun lockers are provided. <ul style="list-style-type: none"> They are located in an area that permits constant officer observation. In an area that does not allow detainee or public access. 	Meets Standard	Gun lockers are housed inside a secure section of fence in the (b)(7)(e) Policy for gun lockers is consistent with the standard and the lockers are not in a public-accessible area.
20. The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	Meets Standard	Keys are counted twice on each of the three security shifts.
21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. Detainees are not permitted to handle keys assigned to staff. 	Meets Standard	

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) – REVIEWER SUMMARY	
(Use following format for dates: mm/dd/yyyy)	
Overall Remarks: (Record significant facts, observations, other sources used, etc.)(5000 Character Max) Keys are maintained and accounted for in a secure manner. To evaluate this standard, staff were interviewed, key issue was observed, key rings were checked, gun lockers were inspected, sally port procedures were observed and policy/post order was reviewed.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

POPULATION COUNTS (Key: AC)		
POLICY: ALL DETENTION FACILITIES SHALL ENSURE AROUND-THE-CLOCK ACCOUNTABILITY FOR ALL DETAINEES. THIS REQUIRES THAT THEY CONDUCT AT LEAST ONE FORMAL COUNT OF THE DETAINEE POPULATION PER SHIFT, WITH ADDITIONAL FORMAL AND INFORMAL COUNTS CONDUCTED AS NECESSARY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Staff conduct a formal count at least once each shift.	Meets Standard	Formal counts are conducted twice each shift. A standing count is conducted at least once every 24 hour period.
2. Activities cease or are strictly controlled while a formal count is being conducted.	Meets Standard	Activities cease during count.
3. Certain operations cease during formal counts.	Meets Standard	Many operations are suspended during count.
4. All movement ceases for the duration of a formal count.	Meets Standard	
5. Formal counts in all units take place simultaneously.	Meets Standard	
6. Detainee participation in counts is prohibited.	Meets Standard	
7. A face-to-photo count follows each unsuccessful recount.	Meets Standard	Face-to-photo counts are conducted twice per every 24 hour period.
8. Officers positively identify each detainee before counting him/her as present.	Meets Standard	
9. Written procedures cover informal and emergency counts. <ul style="list-style-type: none"> They are followed during informal counts and emergencies. 	Meets Standard	The facility conducts at least two informal counts per shift, as dictated by policy.
10. The control officer (or other designated position) maintains an out -count record of all detainees temporarily leaving the facility.	Meets Standard	The out count is maintained by the control center officer.
11. This training is documented in each officer's training folder.	Meets Standard	

POPULATION COUNTS – REVIEWER SUMMARY	
(Use following format for dates: mm/dd/yyyy)	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> The facility has 24 hour accountability of the detainees. To evaluate this standard, count was observed, staff were interviewed and policy was reviewed.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

POST ORDERS (Key: AD)		
POLICY: ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR CARRYING OUT THEIR DUTIES. THIS GUIDANCE INCLUDES THE POST ORDERS ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST ANNUALLY, AND GIVEN TO EACH OFFICER UPON ASSIGNMENT TO THAT POST.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Every fixed post has a set of post orders.	Meets Standard	Inspectors observed post orders on every fixed post.
2. Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	Meets Standard	
3. One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.	Meets Standard	The Chief of Security is responsible for all post order updates.
4. The IGSA maintains a complete set (central file) of post orders.	Meets Standard	A complete set of post orders is maintained in the Chief of Security's office and the shift supervisor's office.
5. The central file is accessible to all staff.	Meets Standard	
6. The OIC or Contract / IGSA equivalent initiates/authorizes all post-order changes.	Meets Standard	The Chief of Security makes post order changes under the authority of the warden.
7. The OIC or Contract / IGSA equivalent has signed and dated the last page of every section.	Meets Standard	
8. A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.	Meets Standard	Post orders are reviewed annually by the warden.
9. Procedures keep post orders and logbooks secure from detainees at all times.	Meets Standard	
10. Every armed-post officer qualifies with the post weapon(s) before assuming post duty.	Meets Standard	Only employees who are weapons-certified may work armed posts. Updated weapons certification lists were observed in the control room.
11. Armed-post post orders provide instructions for escape attempts.	Meets Standard	
12. The post orders for housing units track the event schedule.	Meets Standard	
13. Housing-unit post officers record all detainee activity in a log. The post order includes instructions on maintaining the logbook.	Meets Standard	Post log books provide a detailed representation of the activities on each post.

POST ORDERS – REVIEWER SUMMARY	
(Use following format for dates: mm/dd/yyyy)	
Overall Remarks: (Record significant facts, observations, other sources used, etc.)(5000 Character Max) Post orders are present on every post and provide the necessary guidance for employees to carry out their duties. Officers must sign their post orders daily as an indication of their understanding. Post orders and policy were reviewed, log books were reviewed and staff were interviewed during the evaluation of this standard.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 6/7/2012

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

POST ORDERS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>
Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

SECURITY INSPECTIONS (Key: AE)		
POLICY: POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHERE SPECIAL SECURITY PROCEDURES MUST BE FOLLOWED, WILL BE RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNDING IN FACILITY OPERATIONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. 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; and • Procedures for reporting weak spots, inconsistencies, and other areas needing improvement 	Meets Standard	Policy designates the shift supervisor as the responsible authority to ensure that all required security inspections, which include the elements of this component, are conducted as stipulated in the standard.
2. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	Meets Standard	"Daily Dormitory Sanitation and Security Checklists" are used to document security checks.
3. Documentation of security inspections is kept on file.	Meets Standard	Security inspection reports are maintained by the shift supervisor.
4. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	Meets Standard	The Chief of Security follows up and ensures the correction of reported deficiencies.
5. The front-entrance officer checks the ID of everyone entering or exiting the facility.	Meets Standard	
6. All visits are officially recorded in a visitor logbook or electronically recorded.	Meets Standard	
7. The facility has a secure visitor pass system.	Meets Standard	
8. Every Control Center officer receives specialized training.	Meets Standard	Control room officers receive specialized on-the-job training on control room procedures.
9. The Control Center is staffed around the clock.	Meets Standard	
10. Policy restricts staff access to the Control Center.	Meets Standard	A list of authorized staff is maintained in the control center.
11. Detainees are restricted from access to the Control Center.	Meets Standard	
12. Communications are centralized in the Control Center.	Meets Standard	
13. Officers monitor all vehicular traffic entering and leaving the facility.	Meets Standard	The control center officer monitors video of all traffic. The sally port officer is physically present in the sally port when vehicles are entering/departing and monitors all vehicular traffic.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

SECURITY INSPECTIONS (Key: AE)		
POLICY: POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHERE SPECIAL SECURITY PROCEDURES MUST BE FOLLOWED, WILL BE RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNDING IN FACILITY OPERATIONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
14. 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; and Name of employee responsible for the vehicle during the visit 	Meets Standard	
15. Officers thoroughly search each vehicle entering and leaving the facility.	Meets Standard	The inspectors observed the search procedure of vehicles in the sally port.
16. The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	Meets Standard	
17. Tools being taken into the secure area of the facility are inventoried before entering and prior to departure.	Meets Standard	
18. The SMU entrance has a sally port.	Does Not Meet Standard	This component was found deficient during the 2011 inspection due to there being no sally port in the segregation entrance. There is still no sally port at the segregation entrance.
19. Written procedures govern searches of detainee housing units and personal areas.	Meets Standard	
20. Housing area searches occur at irregular times.	Meets Standard	Policy dictates frequent, unannounced searches of housing areas.
21. Every search of the SMU and other housing units is documented.	Meets Standard	
22. Storage and supply rooms, walls, light and plumbing fixtures, accesses, and drains, etc., undergo frequent, irregular searches. These searches are documented.	Meets Standard	
23. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	Meets Standard	
24. Daily procedures include: <ul style="list-style-type: none"> Perimeter alarm system tests; Physical checks of the perimeter fence; and Documenting the results. 	Meets Standard	<div style="background-color: #cccccc; padding: 5px; border: 1px solid black;">(b)(7)e</div> <div style="background-color: #cccccc; padding: 2px; border: 1px solid black; display: inline-block;">(b)(7)e</div> Results are documented on the Daily Shift Report.
25. Visitation areas receive frequent, irregular inspections.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

SECURITY INSPECTIONS – REVIEWER SUMMARY

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

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

The facility assigns experienced, trained staff to work sensitive posts, such as the control center. Security is maintained through a system of security checks, post orders, searches, and detainee accountability. Evaluation of this standard was achieved by observing sally port procedures, observing control room procedures, observing housing unit and recreational activities, interviewing staff, reviewing policy and post orders, reviewing logs, and inspecting the perimeter and other sensitive areas.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 6/7/2012

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. <ul style="list-style-type: none"> • Detainees are placed in the SMU (administrative) in accordance with written criteria. 	Meets Standard	
2. In exigent circumstances, staff may place a detainee in the SMU (administrative) before a written order has been approved. <ul style="list-style-type: none"> • A copy of the order given to the detainee within 24 hours. 	Meets Standard	
3. The OIC (or equivalent) regularly reviews the status of detainees in administrative detention. <ul style="list-style-type: none"> • A supervisory officer conducts a review within 72 hours of the detainee's placement in the SMU (administrative). 	Meets Standard	
4. A supervisory officer conducts another review after the detainee has spent seven days in administrative segregation, and: <ul style="list-style-type: none"> • Every week thereafter for the first month; and • Every 30 days after the first month. • Does each review include an interview with the detainee? • Is a written record made of the decision and the justification? 	Meets Standard	Policy dictates that a confinement committee, established specifically for the purpose of segregation reviews, conducts these reviews.
5. The detainee is given a copy of the decision and justification for each review. <ul style="list-style-type: none"> • The detainee is given an opportunity to appeal the reviewer's decision to someone else in the facility. 	Meets Standard	Policy mandates that the detainee is provided a copy within 24 hours and is supplied appeal information.
6. The OIC (or equivalent) routinely notifies the Field Office Director (or staff officer in charge of IGSA's) any time a detainee's stay in administrative detention exceeds 30 days. <ul style="list-style-type: none"> • Upon notification that the detainee's administrative segregation has exceeded 60 days, the FD forwards written notice to HQ Field Operations Branch Chief for DRO. 	Meets Standard	The warden makes this required notification as mandated in facility policy.
7. The OIC (or equivalent) reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU. <ul style="list-style-type: none"> • A written record is made of the decision and the justification. • The detainee receives a copy of this record. 	Meets Standard	The warden is required to review and approve in writing any placement in segregation exceeding 30 days, whether or not the detainee objects.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
8. The detainee is given the right to appeal to the OIC (or equivalent) the conclusions and recommendations of any review conducted after the detainee have remained in administrative segregation for seven consecutive days.	Meets Standard	
9. Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	Meets Standard	
10. The SMU is: <ul style="list-style-type: none"> Well ventilated; Adequately lighted; Appropriately heated; and Maintained in a sanitary condition. 	Meets Standard	The four segregation cells all incorporate the elements of this component.
11. All cells are equipped with beds. <ul style="list-style-type: none"> Every bed is securely fastened to the floor or wall. 	Meets Standard	
12. The number of detainees in any cell does not exceed the occupancy limit. <ul style="list-style-type: none"> When occupancy exceeds recommended capacity, do basic living standards decline? Do criteria for objectively assessing living standards exist? If yes, are the criteria included in the written procedures? 	Meets Standard	There have been no occasions for the warden to approve excess occupancy in segregation cells. Given that eventuality, the warden would be required to approve occupancy beyond one detainee per cell.
13. The segregated detainees have the same opportunities to exchange/laundry clothing, bedding, and linen as detainees in the general population.	Meets Standard	
14. Detainees receive three nutritious meals per day, from the general population's menu of the day. <ul style="list-style-type: none"> Do detainees eat only with disposable utensils? Is food ever used as punishment? 	Meets Standard	Disposable utensils are used, and food is never used as punishment.
15. Each detainee maintains a normal level of personal hygiene in the SMU. <ul style="list-style-type: none"> The detainees have the opportunity to shower and shave at least three times a week. If not, explain. 	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
16. The detainees are provided: <ul style="list-style-type: none"> • Barbering services; • Recreation privileges in accordance with the "Detainee Recreation" standard; • Non-legal reading material; • Religious material; • The same correspondence privileges as detainees in the general population; • Telephone access similar to that of the general population; and • Personal legal material. 	Meets Standard	
17. A health care professional visits every detainee at least three times a week. <ul style="list-style-type: none"> • The shift supervisor visits each detainee daily. • Weekends and holidays. 	Meets Standard	The segregation log book revealed that health care staff visit each detainee in segregation at least once per day. Supervisors visit each detainee in segregation at least once per shift.
18. Procedures comply with the "Visitation" standard. <ul style="list-style-type: none"> • The detainee retains visiting privileges; and • The visiting room is available during normal visiting hours. 	Meets Standard	
19. Visits from clergy are allowed.	Meets Standard	
20. Detainees have the same law-library access as the general population. <ul style="list-style-type: none"> • Are they required to use the law library <input checked="" type="checkbox"/> Separately, or <input type="checkbox"/> As a group? • Are legal materials brought to them? 	Meets Standard	There are scheduled law library hours for segregated detainees. They are escorted individually when they desire to go during these times.
21. The SMU maintains a permanent log of detainee-related activity, e.g., meals served, recreation, visitors etc.	Meets Standard	The log book and individual segregation sheet record all activity.
22. SPC procedures include completing the SMU Housing Record (I-888) immediately upon a detainee's placement in the SMU. <ul style="list-style-type: none"> • Staff completes the form at the end of each shift. • CDFs and IGSA facilities use Form I-888 (or local equivalent). 	Meets Standard	This facility uses an equivalent form to the I-888. It is completed as stipulated in the standard.

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
23. Staff record whether the detainee ate, showered, exercised, and took any applicable medication during every shift. <ul style="list-style-type: none"> Staff logs record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc; The medical officer/health care professional signs each individual's record during each visit; and The housing officer initials the record when all detainee services are completed or at the end of the shift. 	Meets Standard	The log book and individual segregation sheets record this activity and have the accompanying signatures/initials.
24. A new record is created for each week the detainee is in Administrative Segregation. <ul style="list-style-type: none"> The weekly records are retained in the SMU until the detainee's return to the general population. 	Meets Standard	

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) – REVIEWER SUMMARY (Use following format for dates: mm/dd/yyyy)	
Overall Remarks: (Record significant facts, observations, other sources used, etc.)(5000 Character Max) The facility maintains a segregation area consisting of four secure cells to isolate detainees as needed for safety and security. Staff were interviewed, log books and segregation sheets were checked, policy was reviewed and the segregation area was toured to evaluate this standard.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)		
POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Officers placing detainees in disciplinary segregation follow written procedures.	Meets Standard	Policy addresses all segregation placements.
2. The sanctions for violations committed during one incident are limited to 60 days.	Meets Standard	
3. A completed Disciplinary Segregation Order accompanies the detainee into the SMU. <ul style="list-style-type: none"> The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation. 	Meets Standard	
4. Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at set intervals. <ul style="list-style-type: none"> After each formal review, the detainee receives a written copy of the decision and supporting reasons. 	Meets Standard	Detainees are reviewed every seven days and receive a written copy of the decision following each formal review.
5. The conditions of confinement in the SMU are proportional to the amount of control necessary to protect detainees and staff.	Meets Standard	The segregation cells are adequately secure.
6. Detainees in disciplinary segregation have fewer privileges than those housed in administrative segregation.	Meets Standard	
7. Living conditions in disciplinary SMUs remain the same regardless of behavior. <ul style="list-style-type: none"> If no, does staff prepare written documentation for this action? Does the OIC sign to indicate approval. 	Meets Standard	Food may be served in alternative forms, such as finger foods, for detainees who abuse utensils. These meals are nutritionally equivalent to the regular meals. An alternative Meal Service form is prepared as documentation and the warden must approve the action in writing.
8. Every detainee in disciplinary segregation receives the same humane treatment, regardless of offense.	Meets Standard	
9. The quarters used for segregation are: <ul style="list-style-type: none"> Well-ventilated. Adequately lighted. Appropriately heated. Maintained in a sanitary condition. 	Meets Standard	
10. All cells are equipped with beds that are securely fastened to the floor or wall of the cell.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)		
POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
11. The number of detainees confined to each cell or room is limited to the number for which the space was designate. <ul style="list-style-type: none"> Does the OIC approve excess occupancy on a temporary basis? 	Meets Standard	There have been no occasions for the warden to approve excess occupancy in segregation cells. Given that eventuality, the warden would be required to approve occupancy beyond one detainee per cell.
12. When a detainee is segregated without clothing, mattress, blanket, or pillow (in a dry cell setting), a justification is made and the decision is reviewed each shift. Items are returned as soon as it is safe.	Meets Standard	
13. Detainees in the SMU have the same opportunities to exchange clothing, bedding, etc., as other detainees.	Meets Standard	
14. Detainees in the SMU receive three nutritious meals per day, selected from the Food Service's menu of the day. <ul style="list-style-type: none"> Food is not used as punishment. 	Meets Standard	Detainees in segregation are served the same menu as the general population.
15. Detainees are allowed to maintain a normal level of personal hygiene, including the opportunity to shower and shave at least three times/week.	Meets Standard	
16. Detainees receive, unless documented as a threat to security: <ul style="list-style-type: none"> Barbering services; Recreation privileges; Other-than-legal reading material; Religious material; The same correspondence privileges as other detainees; and Personal legal material. 	Meets Standard	
17. When phone access is limited by number or type of calls, the following areas are exempt: <ul style="list-style-type: none"> Calls about the detainee's immigration case or other legal matters; Calls to consular/embassy officials; and Calls during family emergencies (as determined by the OIC/Warden). 	Meets Standard	The facility does not limit the amount and type of calls.
18. A health care professional visits every detainee in disciplinary segregation every week day. <ul style="list-style-type: none"> The shift supervisor visits each segregated detainee daily Weekends and holidays. 	Meets Standard	The segregation log book revealed that health care staff visit each detainee in segregation at least once per day. Supervisors visit each detainee in segregation at least once per shift.
19. SMU detainees are allowed visitors, in accordance with the "Visitation" standard.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)		
POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
20. SMU detainees receive legal visits, as provided in the "Visitation" standard. <ul style="list-style-type: none"> Legal service providers are notified of security concerns arising before a visit. 	Meets Standard	
21. Visits from clergy are allowed. <ul style="list-style-type: none"> The clergy member is given the option of visiting/not visiting the segregated detainee. Violent/uncooperative detainees are denied access to religious services when safety and security would otherwise be affected. 	Meets Standard	
22. SMU detainees have law library access. <ul style="list-style-type: none"> Violent/uncooperative detainees retain access to the law library unless adjudicated a security threat in writing. Legal material brought to individuals in the SMU on a case-by-case basis. Staff documents every incident of denied access to the law library. 	Meets Standard	There have been no denials of access to the law library during the rating period.
23. All detainee-related activities are documented, e.g. meals served, recreation activities, visitors, etc.	Meets Standard	The log book and individual segregation sheets document all activities for segregated detainees.
24. The SPCs, the Special Management Housing Unit Record (I-888 or equivalent), is prepared as soon as the detainee is placed in the SMU. <ul style="list-style-type: none"> All I-888s are filled out by the end of each shift. The CDF/IGSA facility use Form. I-888 (or equivalent local form). 	Meets Standard	Equivalent forms to the I-888 are completed as required by the standard.
25. SMU staff record whether the detainee ate, showered, exercised, took medication, etc. <ul style="list-style-type: none"> Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc. The health care official sign individual records after each visit. The housing officer initials the record when all detainee services are completed or at the end of the shift. A new record is created weekly for each detainee in the SMU. The SMU retains these records until the detainee leaves the SMU. 	Meets Standard	Log books and individual segregation sheets record all details as stipulated in the standard and this component.

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) – REVIEWER SUMMARY (Use following format for dates: mm/dd/yyyy)
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) – REVIEWER SUMMARY

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

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

The segregation area of this facility houses detainees segregated for administrative and disciplinary reasons in a safe and secure manner. There were no detainees in segregation during the inspection. Policy was reviewed, log books and individual segregation sheets were checked, staff were interviewed and the segregation area was inspected during the evaluation of this standard.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 6/7/2012

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

TOOL CONTROL (Key: AH)		
POLICY: IT IS THE POLICY OF ALL FACILITIES THAT ALL EMPLOYEES SHALL BE RESPONSIBLE FOR COMPLYING WITH THE TOOL CONTROL POLICY. THE MAINTENANCE SUPERVISOR SHALL MAINTAIN A COMPUTER GENERATED OR TYPEWRITTEN MASTER INVENTORY LIST OF TOOLS AND EQUIPMENT AND THE LOCATION IN WHICH TOOLS ARE STORED. THESE INVENTORIES SHALL BE CURRENT, FILED AND READILY AVAILABLE FOR TOOL INVENTORY AND ACCOUNTABILITY DURING AN AUDIT.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	Meets Standard	A security officer is assigned as the Tool Control Officer for the facility.
2. Department heads are responsible for implementing this standard in their departments.	Meets Standard	
3. Tool inventories are required for the: <ul style="list-style-type: none"> • Maintenance Department; • Medial Department; • Food Service Department; • Electronics Shop; • Recreation Department; and • Armory. 	Meets Standard	Tools are maintained on inventories in the maintenance area, the food service area, and the medical area. While checking the inventory of the dental tools, the nurse could not identify each specific tool to the inspector.
4. The facility has a policy for the regular inventory of all tools. <ul style="list-style-type: none"> • The policy sets minimum time lines for physical inventory and all necessary documentation. • ICE facilities use AMIS bar code labels when required. 	Meets Standard	
5. The facility has a tool classification system. Tools are classified according to: <ul style="list-style-type: none"> • Restricted (dangerous/hazardous); and • Non-Restricted (non-hazardous). 	Meets Standard	Tools are classified as Class A-restricted, Class A and Class B. Each level of classification has commensurate levels of secure storage, with the Class A-Restricted classification being the most secure.
6. Department heads are responsible for implementing tool-control procedures.	Meets Standard	
7. The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable.	Meets Standard	Tools are marked and inventoried. Inventories were checked during the inspection and were accurate.
8. The facility has an approved tool storage system. <ul style="list-style-type: none"> • The system ensures that all stored tools are accountable. • Commonly used tools (tools that can be mounted) are stored in such a way that missing tool is readily notice. 	Meets Standard	Tools are on written inventories and stored on shadow boards. Missing tools are easily identified due to the vacancy created on the shadow board.
9. Each facility has procedures for the issuance of tools to staff and detainees.	Meets Standard	Staff must sign out tools and are limited in the amount they can sign out at one time. Detainees are not issued tools.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

TOOL CONTROL (Key: AH)		
POLICY: IT IS THE POLICY OF ALL FACILITIES THAT ALL EMPLOYEES SHALL BE RESPONSIBLE FOR COMPLYING WITH THE TOOL CONTROL POLICY. THE MAINTENANCE SUPERVISOR SHALL MAINTAIN A COMPUTER GENERATED OR TYPEWRITTEN MASTER INVENTORY LIST OF TOOLS AND EQUIPMENT AND THE LOCATION IN WHICH TOOLS ARE STORED. THESE INVENTORIES SHALL BE CURRENT, FILED AND READILY AVAILABLE FOR TOOL INVENTORY AND ACCOUNTABILITY DURING AN AUDIT.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
10. The facility has 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; and • Necessary documentation/review for all incidents of lost tools. 	Meets Standard	
11. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	Meets Standard	Broken/worn tools are forwarded to the Tool Control Officer for disposition. Tools are disposed of outside of the facility.
12. All private or contract repairs and maintenance workers under contract to ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility.	Meets Standard	

TOOL CONTROL – REVIEWER SUMMARY (Use following format for dates: mm/dd/yyyy)	
Overall Remarks: (Record significant facts, observations, other sources used, etc.)(5000 Character Max) Tools are controlled in a manner which provides their security within the facility. There is a master inventory which lists all tools. This inventory was correct when checked by the inspector. The tool storage areas were toured, policy was reviewed, log books were reviewed and employees were interviewed during the evaluation of this standard.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

TRANSPORTATION (Land Transportation) (Key: AI)

POLICY: THE IMMIGRATION AND NATURALIZATION SERVICE WILL TAKE ALL NECESSARY PRECAUTIONS TO PROTECT THE LIVES, SAFETY, AND WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUSTODY DURING THE TRANSPORTATION OF DETAINEES. STANDARDS HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER THE SUPERVISION OF EXPERIENCED AND TRAINED DETENTION ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL.

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	N/A	
2. Every transporting officer required to drive a commercial size bus has a valid Commercial Driver's License (CDL) issued by the state of employment.	N/A	
3. Supervisors maintain records for each vehicle operator.	N/A	
4. Officers use a checklist during every vehicle inspection. <ul style="list-style-type: none"> Officers report deficiencies affecting operability; and Deficiencies are corrected before the vehicle goes back into service. 	N/A	
5. Transporting officers: <ul style="list-style-type: none"> Limit driving time to 10 hours in any 15 hour period; 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 and safe to reach a safe area—exceeding the 10-hour limit. 	N/A	
6. (b)(7)(e) officers with valid CDLs required in any bus transporting detainees. <ul style="list-style-type: none"> When buses travel in tandem with detainees, there are (b)(7)(e) qualified officers per vehicle. An unaccompanied driver may transport an empty vehicle. 	N/A	
7. Before the start of each detail, the vehicle is thoroughly searched.	N/A	
8. Positive identification of all detainees being transported is confirmed.	N/A	
9. All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.	N/A	
10. The facility ensures that the number of detainees transported does not exceed the vehicles manufacturer's occupancy level.	N/A	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

TRANSPORTATION (Land Transportation) (Key: AI)

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Standard N/A

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

COMPONENTS		RATING	REMARKS (1000 CHAR MAX)
11.	(b)(7)e are provided to all transporting officers.	N/A	
12.	The vehicle crew conducts a visual count once all passengers are on board and seated. <ul style="list-style-type: none"> Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop. 	N/A	
13.	Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	N/A	
14.	Officers ensure that no one contacts the detainees. <ul style="list-style-type: none"> (b)(7)(e) officer remains in the vehicle at all times when detainees are present. 	N/A	
15.	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. 	N/A	
16.	The vehicle crew inspects all Food Service pickups before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). <ul style="list-style-type: none"> Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative; Basins, latrines, and drinking-water containers/dispensers are cleaned and sanitized on a fixed schedule. 	N/A	
17.	Vehicles have: <ul style="list-style-type: none"> (b)(7)e 	N/A	
18.	The vehicles are clean and sanitary at all times.	N/A	
19.	Personal property of a detainee transferring to another facility is: <ul style="list-style-type: none"> Inventoried; Inspected; and Accompanies the detainee. 	N/A	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

TRANSPORTATION (Land Transportation) (Key: AI)

POLICY: THE IMMIGRATION AND NATURALIZATION SERVICE WILL TAKE ALL NECESSARY PRECAUTIONS TO PROTECT THE LIVES, SAFETY, AND WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUSTODY DURING THE TRANSPORTATION OF DETAINEES. STANDARDS HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER THE SUPERVISION OF EXPERIENCED AND TRAINED DETENTION ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL.

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
20. 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 includes women or minors 	N/A	

TRANSPORTATION (Land Transportation) – REVIEWER SUMMARY

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

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

ICE handles all land transportation for this facility.

Overall Rating: N/A

Reviewer Name (Printed):

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

Completion Date: 6/7/2012

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

USE OF FORCE (Key: AJ)		
POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	Meets Standard	
2. 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, officers must try to resolve the situation without resorting to force.	Meets Standard	Policy dictates that the application of force is to be used only as a last resort.
3. Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	Meets Standard	
4. The facility subscribes to the prescribed Confrontation Avoidance Procedures. <ul style="list-style-type: none"> Ranking detention official, health professional, and others confer before every calculated use of force. 	Meets Standard	Medical staff must be consulted prior to the application of force and they must be present during the application of force.
5. When a detainee must be forcibly moved and/or restrained, and there is time for a calculated use of force, staff uses the Use-of-Force Team Technique. <ul style="list-style-type: none"> Under staff supervision. 	Meets Standard	
6. Staff members are trained in the performance of the Use-of-Force Team Technique.	Meets Standard	
7. All use-of-force incidents are documented and reviewed.	Meets Standard	Force incidents are documented on video and in written report format.
8. Staff: <ul style="list-style-type: none"> Do not use force as punishment; Attempt to gain the detainee's voluntary cooperation before resorting to force; Use only as much force as necessary to control the detainee; and Use restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical. 	Meets Standard	
9. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	N/A	Medication is not used for restraint purposes.
10. Use-of-Force Team follows written procedures that attempt to prevent injury and exposure to communicable disease(s).	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

USE OF FORCE (Key: AJ)		
POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
11. Standard procedures associated with using four-point restraints include: <ul style="list-style-type: none"> • Soft restraints (e.g., vinyl); • Dressing the detainee appropriately for the temperature; • A bed, mattress, and blanket/sheet; • Checking the detainee at least every 15 minutes; • Logging each check; • Turning the bed-restrained detainee often enough to prevent soreness or stiffness; • Medical evaluation of the restrained detainee twice per eight hour shift; and • When qualified medical staff is not immediately available, staff position the detainee "face-up". 	Meets Standard	(b)(7)e
12. The shift supervisor monitors the detainee's position/condition every two hours. <ul style="list-style-type: none"> • He/she allows the detainee to use the rest room at these times under safeguards. 	Meets Standard	
13. All detainee checks are logged.	Meets Standard	
14. In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	Meets Standard	Medical exams are conducted immediately after use-of-force incidents.
15. When the OIC authorizes use of non-lethal weapons: <ul style="list-style-type: none"> • Medical staff is consulted before staff use pepper spray/non-lethal weapons. • Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized. 	Meets Standard	
16. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> • Medical personnel are consulted 	Meets Standard	Policy addresses the restraint of pregnant detainees in great detail.
17. Protective gear is worn when restraining detainees with open cuts or wounds.	Meets Standard	
18. Staff documents every use of force and/or non-routine application of restraints.	Meets Standard	All applications of force are documented.
19. It is standard practice to review any use of force and the non-routine application of restraints.	Meets Standard	
20. 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 and Officers are certified in all devices they use. 	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

USE OF FORCE (Key: AJ)		
POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
21. In SPCs, is the Use of Force form is used? In other facilities (IGSAs / CDFs) is this form or its equivalent used?	Meets Standard	This IGSA uses force reporting forms that are equivalent to the ICE Use of Force form.

USE OF FORCE – REVIEWER SUMMARY (Use following format for dates: mm/dd/yyyy)	
Overall Remarks: (Record significant facts, observations, other sources used, etc.)(5000 Character Max) Force is applied only as a last resort, and then is only used to the extent necessary to gain control. To evaluate this standard, staff was interviewed, policy was reviewed, and the inventories of chemical agents and restraints were checked. (b)(7)e or canines.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6), (b)(7)(c)	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

STAFF DETAINEE COMMUNICATIONS (Key: AK)		
POLICY: PROCEDURES MUST BE IN PLACE TO ALLOW FOR FORMAL AND INFORMAL CONTACT BETWEEN KEY FACILITY STAFF AND ICE STAFF AND ICE DETAINEE AND TO PERMIT DETAINEES TO MAKE WRITTEN REQUESTS TO ICE STAFF AND RECEIVE AN ANSWER IN AN ACCEPTABLE TIME FRAME.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The ICE Field Office Director ensures that weekly announced and unannounced visits occur at the IGSA.	Meets Standard	The Deportation Officer's (DO) log book annotating ICE officer's scheduled and unannounced visits was reviewed.
2. Detention and Deportation Staff conduct scheduled weekly visits with detainees held in the IGSA.	Meets Standard	
3. Scheduled visits are posted in ICE detainee areas.	Meets Standard	Postings in the housing units announcing ICE weekly visits were observed.
4. Visiting staff observe and note current climate and conditions of confinement at each IGSA.	Meets Standard	The DO log book noted various items observed in the detainee housing units including climatic conditions.
5. ICE information request Forms are available at the IGSA for use by ICE detainees.	Meets Standard	Information forms available for detainee use were observed in the detainee housing unit.
6. The IGSA treats detainee correspondence to ICE staff as Special Correspondence.	Meets Standard	The process by which a detainee request is given to ICE for follow up was observed by the inspector.
7. ICE staff responds to a detainee request from an IGSA within 72 hours.	Meets Standard	Documentation substantiating that detainee ICE communications and responses occur within 72 hours was reviewed.
8. ICE detainees are notified in writing upon admission to the facility of their right to correspond with ICE staff regarding their case or conditions of confinement.	Meets Standard	

STAFF DETAINEE COMMUNICATIONS – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> The assigned Immigration Enforcement Agent (IEA) responsible for receiving, recording and processing detainee requests was interviewed. The IEA's log and electronic records were examined. Policy and handbook statements describing forms and methods used for communicating with ICE were reviewed. Postings listing regularly schedule ICE officer visits were observed in the housing units. Visiting ICE officer's names and locating information were posted in the housing units. Spanish and English versions of a video which discussed why and how detainees may contact ICE was viewed.	
Overall Rating: Meets Standard	
Reviewer Name (Printed)	Completion Date: 6/7/2012
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

DETAINEE TRANSFER STANDARD (Key: AL)		
POLICY: ICE WILL MAKE ALL NECESSARY NOTIFICATIONS WHEN A DETAINEE IS TRANSFERRED. IF A DETAINEE IS BEING TRANSFERRED VIA THE JUSTICE PRISONER ALIEN TRANSPORTATION SYSTEM (JPATS), ICE WILL ADHERE TO JPATS PROTOCOLS. IN DECIDING WHETHER TO TRANSFER A DETAINEE, ICE WILL TAKE INTO CONSIDERATION WHETHER THE DETAINEE IS REPRESENTED BEFORE THE IMMIGRATION COURT. IN SUCH CASES, THE FIELD OFFICE DIRECTOR WILL CONSIDER THE DETAINEE'S STAGE WITHIN THE REMOVAL PROCESS, WHETHER THE DETAINEE'S ATTORNEY IS LOCATED WITHIN REASONABLE DRIVING DISTANCE OF THE FACILITY, AND WHERE THE IMMIGRATION COURT PROCEEDINGS ARE TAKING PLACE.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. When a detainee is represented by legal counsel or a legal representative, and a G-28 has been filed, the representative of record is notified by the detainee's Deportation Officer. <ul style="list-style-type: none"> The notification is recorded in the detainee's file; and When the A File is not available, notification is noted within DACS 	Meets Standard	The Deportation Officer (DO) assigned to the facility was interviewed. Working records documenting legal counsel advisement of transfers were reviewed.
2. Notification includes the reason for the transfer and the location of the new facility.	Meets Standard	Five inactive files of transferred detainees were reviewed. Each contained forms which specified the reason for transfer.
3. The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	Meets Standard	
4. The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	Meets Standard	
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; and The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 	Meets Standard	Policies dictating the process by which detainees are prepared for transfer were reviewed. Directives such as not notifying the detainees of the transfer until it is imminent and suspending telephone use were noted.
6. The detainee is provided with a completed Detainee Transfer Notification Form.	Meets Standard	
7. Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	Meets Standard	Transfer forms were noted in five detention files.
8. For medical transfers: <ul style="list-style-type: none"> The Detainee Immigration Health Service (or IGSA) (DIHS) Medical Director or designee approves the transfer; Medical transfers are coordinated through the local ICE office; and A medical transfer summary is completed and accompanies the detainee. 	Meets Standard	The Deportation Officer (DO) coordinates all medical transfers with the assigned Immigration Health Service Corps (IHSC) representative and the facility's health services administrator.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

DETAINEE TRANSFER STANDARD (Key: AL)

POLICY: ICE WILL MAKE ALL NECESSARY NOTIFICATIONS WHEN A DETAINEE IS TRANSFERRED. IF A DETAINEE IS BEING TRANSFERRED VIA THE JUSTICE PRISONER ALIEN TRANSPORTATION SYSTEM (JPATS), ICE WILL ADHERE TO JPATS PROTOCOLS. IN DECIDING WHETHER TO TRANSFER A DETAINEE, ICE WILL TAKE INTO CONSIDERATION WHETHER THE DETAINEE IS REPRESENTED BEFORE THE IMMIGRATION COURT. IN SUCH CASES, THE FIELD OFFICE DIRECTOR WILL CONSIDER THE DETAINEE'S STAGE WITHIN THE REMOVAL PROCESS, WHETHER THE DETAINEE'S ATTORNEY IS LOCATED WITHIN REASONABLE DRIVING DISTANCE OF THE FACILITY, AND WHERE THE IMMIGRATION COURT PROCEEDINGS ARE TAKING PLACE.

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
9. Detainees in ICE facilities having DIHS staff and medical care are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number, and the envelope is marked Medical Confidential.	Meets Standard	IHSC staff are not assigned full time to this facility. However, a transfer summary sheet is prepared for each transferring detainee and placed in a sealed and appropriately marked envelope.
10. For medical transfers, transporting officers receive instructions regarding medical issues.	Meets Standard	
11. Detainee's funds, valuables, and property are returned and transferred with the detainee to his/her new location.	Meets Standard	Property inventory forms signed by detainees acknowledging return of personal property were examined.
12. Transfer and documentary procedures outlined in Section C and D are followed.	Meets Standard	
13. Meals are provided when transfers occur during normally schedule meal times.	Meets Standard	Documentation in the DO's records substantiated that meals were provided to detainees being transferred.
14. An A File or work folder accompanies the detainee when transferred to a different field office or sub-office.	Meets Standard	
15. Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.	Meets Standard	

DETAINEE TRANSFER STANDARD – REVIEWER SUMMARY

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

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

Five inactive detainee files were reviewed. Forms (I-203) noting time, date and reason for the detainee transfer were examined. The Deportation Officer was interviewed. ICE records and log books detailing detainee transfers were reviewed.

Overall Rating: Meets Standard

Reviewer Name (Printed)

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

Completion Date: 6/7/2012

Reviewer Signature (for printed form submission):

DOCUMENT CHECK

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

Review Document Issue Summary		Ratings check complete.			
Check Document:	<input type="button" value="Run Check"/>	Error(s) Found:	39	Items Not Rated:	0
Errors:					
<div style="border: 1px solid #ccc; padding: 10px;"> <ul style="list-style-type: none"> -Future Review end date not permitted. -Standard A has a future completion date which is not permitted. -Standard B has a future completion date which is not permitted. -Standard C has a future completion date which is not permitted. -Standard D has a future completion date which is not permitted. -Standard E has a future completion date which is not permitted. -Standard F has a future completion date which is not permitted. -Standard G has a future completion date which is not permitted. -Standard H has a future completion date which is not permitted. </div>					
Items Not Rated:					

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



U.S. Immigration
and Customs
Enforcement

MEMORANDUM FOR: Enrique M. Lucero
Field Office Director
San Antonio Field Office

FROM: (b)(6), (b)(7)(c) (A) AD DEC - 3 2012
Assistant Director for Custody Management

SUBJECT: Laredo Processing Center Annual Review

The annual review of the Laredo Processing Center conducted on June 5-7, 2012 in Laredo, Texas, has been received. A final rating of Good has been assigned and this review is now closed.

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

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

Should you or your staff have any questions regarding this matter, please contact (b)(6), (b)(7)(c) Deputy Assistant Director, Custody Management Division at (202) 732-7332 (b)(6), (b)(7)(c)

cc: Official File

A. Type of Facility Reviewed

<input type="checkbox"/>	ICE Service Processing Center
<input type="checkbox"/>	ICE Contract Detention Facility
<input checked="" type="checkbox"/>	ICE Intergovernmental Service Agreement

B. Current Inspection

Type of Inspection
<input type="checkbox"/> Field Office <input checked="" type="checkbox"/> HQ Inspection
Date[s] of Facility Review
June 5-7, 2012

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
June 7-9, 2011
Previous Rating
<input type="checkbox"/> Superior <input checked="" type="checkbox"/> Good <input type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk

D. Name and Location of Facility

Name
LAREDO PROCESSING CENTER
Address (Street and Name)
4702 East Saunders
City, State and Zip Code
Laredo, TX 78041
County
Webb
Name and Title of Chief Executive Officer (Warden/OIC/Supt.)
(b)(6), (b)(7)(c)
Telephone # (Include Area Code)
(956) 727-7176
Field Office / Sub-Office (List Office with oversight responsibilities)
San Antonio, Texas
Distance from Field Office
170 miles

E. ICE Information

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

F. CDF/IGSA Information Only

Contract Number	Date of Contract or IGSA
IGA #79-02-0106	7-1-2010
Basic Rates per Man-Day	
\$59.79	
Other Charges: (If None, Indicate N/A)	
N/A	

Estimated Man-days Per Year:
109,000

G. Accreditation Certificates

List all State or National Accreditation[s] received:
<input checked="" type="checkbox"/> 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
<input type="checkbox"/> Court Order <input type="checkbox"/> Class Action Order
The Facility has Significant Litigation Pending
<input type="checkbox"/> Major Litigation <input type="checkbox"/> Life/Safety Issues
<input checked="" type="checkbox"/> Check if None.

I. Facility History

Date Built	
1985	
Date Last Remodeled or Upgraded	
August 2009	
Date New Construction / Bed space Added	
N/A	
Future Construction Planned	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date:	
Current Bed space	Future Bed space (# New Beds only)
403	Number: N/A Date: N/A

J. Total Facility Population

Total Facility Intake for previous 12 months
13,484
Total ICE Man-days for Previous 12 months
117,783

K. Classification Level (ICE SPCs and CDFs Only)

	L-1	L-2	L-3
Adult Male	176	31	28
Adult Female	85	11	0
	261	42	28

L. Facility Capacity

	Rated	Operational	Emergency
Adult Male	323	323	323
Adult Female	80	80	80
<input type="checkbox"/> Facility holds Juveniles Offenders 16 and older as Adults			

M. Average Daily Population

	ICE	USMS	Other
Adult Male	247.58	N/A	N/A
Adult Female	46.45	N/A	N/A

N. Facility Staffing Level

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

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ICE 2012FOIA03030.009615

Significant Incident Summary Worksheet

For Nakamoto 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.)	Physical	N/A	Physical	Physical
	With Weapon	0	0	0	0
	Without Weapon	2	0	2	1
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	N/A	N/A	Physical	N/A
	With Weapon	0	0	0	0
	Without Weapon	0	0	1	0
Number of Forced Moves, incl. Forced Cell moves ³		0	0	0	0
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		0	0	0	0
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
	Type (C=Chair, B=Bed, BB=Board, O=Other)	N/A	N/A	N/A	N/A
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	0	0	0
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	2	7	1	1
	# Resolved in favor of Offender/Detainee	0	0	0	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	4	2	11	8
	# Psychiatric Cases referred for Outside Care	0	0	0	0

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

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

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

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

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DHS/ICE Detention Standards Review Summary Report					
1. Acceptable	2. Deficient	3. At Risk	4. Repeat Finding	5. Not Applicable	
Legal Access Standards					1. 2. 3. 4. 5.
1. Access to Legal Materials	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Group Presentations on Legal Rights	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Visitation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Telephone Access	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainee Services					
5. Admission and Release	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Classification System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Correspondence and Other Mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Detainee Handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Food Service	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Funds and Personal Property	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Detainee Grievance Procedures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Issuance and Exchange of Clothing, Bedding, and Towels	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Marriage Requests	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Non-Medical Emergency Escorted Trip	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
15. Recreation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Religious Practices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Voluntary Work Program	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health Services					
18. Hunger Strikes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Medical Care	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Suicide Prevention and Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Terminal Illness, Advanced Directives and Death	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Security and Control					
22. Contraband	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. Detention Files	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Disciplinary Policy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Emergency Plans	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. Environmental Health and Safety	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. Hold Rooms in Detention Facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. Key and Lock Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. Population Counts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30. Post Orders	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. Security Inspections	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Special Management Units (Administrative Segregation)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Special Management Units (Disciplinary Segregation)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34. Tool Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35. Transportation (Land management)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
36. Use of Force	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37. Staff / Detainee Communication (Added August 2003)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38. Detainee Transfer (Added September 2004)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

All findings (Deficient and At-Risk) require written comment describing the finding and what is necessary to meet compliance.

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ICE 2012FOIA03030.009617

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
The Nakamoto Group, Inc.	06/07/2012

Team Members

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

Recommended Rating:

- ☐ Superior
☐ Good
☒ Acceptable
☐ Deficient
☐ At-Risk

Comments: The Laredo Processing Center is a single-story, L-shaped, 400 bed facility housing adult male and female ICE detainees of all levels. The average length of stay for detainees is 12 days. There are seven housing dormitories, a celled segregation unit, two medical cells, two negative airflow/respiratory isolation rooms and large outdoor recreation areas. Each of the living areas also has indoor recreation space and activities.

The facility is privately managed by the Corrections Corporation of America. Food service is contracted through a private provider (Trinity). The facility is clean and the operations are orderly. Detainees lodged no substantive complaints to inspectors.

There is no medical co-pay. (b)(7)e r canines.

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