



**U.S. Department of Homeland Security**  
Immigration and Customs Enforcement  
Office of Professional Responsibility  
Inspections and Detention Oversight Division  
Washington, DC 20536-5501

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## Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations  
ERO San Francisco Field Office  
Contra Costa County Jail West  
Richmond, CA

July 26-28, 2016

**COMPLIANCE INSPECTION  
for the  
CONTRA COSTA COUNTY JAIL WEST  
RICHMOND, CALIFORNIA**

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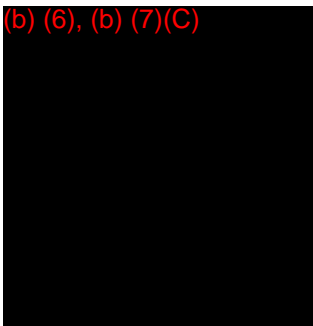
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**INSPECTION TEAM MEMBERS**



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Inspections and Compliance Specialist	ODO
Section Chief	ODO
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## EXECUTIVE SUMMARY

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Contra Costa County Jail West (CCCJW) in Richmond, California from July 26 to 28, 2016.<sup>1</sup> CCCJW opened in 1991 and is owned by Contra Costa County and operated by the Contra Costa County Office of the Sheriff. The Office of Enforcement and Removal Operations (ERO) began housing detainees at CCCJW in 2010 pursuant to an Intergovernmental Service Agreement (IGSA), under the oversight of ERO’s Field Office Director (FOD) in San Francisco.

ERO staff members are not assigned to the facility. A Detention Services Manager is not assigned to the facility. A CCCJW Facility Commander is responsible for oversight of daily facility operations and is supported by (b) (7) personnel. Contra Costa County Health Services provides medical care, and CCCJW staff provides food services. The CCCJW is not contractually obligated to comply with the ICE Performance-Based National Detention Standards (PBNDS) 2011, Sexual Abuse and Assault Prevention and Intervention (SAAPI) standard, although it has made efforts to comply.<sup>4</sup> The facility held no accreditations at the time of inspection.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	318
Average ICE Detainee Population <sup>3</sup>	194
Male Detainee Population ( as of 7/26/2016)	146
Female Detainee Population (as of 7/26/2016)	55

### OVERALL FINDINGS

In January 2013, ODO conducted an inspection of the CCCJW under the National Detention Standards (NDS) 2000, reviewing the facility’s compliance with 17 standards and found the facility compliant with nine standards. There were a total of 17 deficiencies in the remaining eight standards.

Inspection Results	FY 2013 (NDS 2000)	FY 2016 (NDS 2000)
Standards Reviewed	17	15
Deficient Standards	8	9
Overall Number of Deficiencies	17	27
Corrective Action	0	3
Recommendation	0	1

In FY2016, ODO conducted an inspection of the CCCJW under the National Detention Standards (NDS 2000). ODO reviewed the facility’s compliance with 15 standards and found the facility compliant with six standards. ODO found 27 deficiencies in the remaining nine standards, one of which was a repeat deficiency. Finally, ODO identified two areas of concern, three instances where the facility initiated corrective action, and provided one recommendation.<sup>5</sup>

<sup>1</sup> Male and Female detainees with low, medium low, medium high, and high security classification levels are detained at the facility for longer than 72 hours.

<sup>2</sup> Data Source: ERO Facility List Report as of July 25, 2016.

<sup>3</sup> *Ibid.*

<sup>4</sup> The facility has a zero tolerance policy articulated in Contra Costa County’s Office of the Sheriff, Custody Services Bureau, Detention Division, Policy and Procedure 2.08.49, *Prison Rape Elimination Act (PREA)*. Facility staff, including volunteers and contractors, receive training in sexual assault and abuse prevention and intervention. The training curriculum specifically addresses the Prison Rape Elimination Act (PREA).

<sup>5</sup> Corrective actions, where immediately implemented, best practices and recommendations, as applicable, have been identified in the *Inspection Findings* section and annotated with a “C,” “BP,” or “R,” respectively.

## FINDINGS BY NDS 2000 MAJOR CATEGORIES

NDS 2000 STANDARDS INSPECTED <sup>6</sup>	DEFICIENCIES
<b>Part 1 – Detainee Services</b>	
Access to Legal Material	2
Admission and Release	1
Detainee Classification System	5
Detainee Grievance Procedures	0
Detainee Handbook	0
Food Service	2
Funds and Personal Property	1
Staff-Detainee Communication	0
Telephone Access	0
<b>Sub-Total</b>	<b>11</b>
<b>Part 2 – Security and Control</b>	
Environmental Health and Safety	2
Special Management Unit (Administrative)	6
Special Management Unit (Disciplinary)	4
Use of Force	4
<b>Sub-Total</b>	<b>16</b>
<b>Part 3 – Health Services</b>	
Medical Care	0
Suicide Prevention and Intervention	0
<b>Sub-Total</b>	<b>0</b>
<b>Total Deficiencies</b>	<b>27</b>

<sup>6</sup> For greater detail on ODO's findings, see the *Inspection Findings* section of this report.

## INSPECTION PROCESS

Every fiscal year, ODO, a unit within U.S. Immigration and Customs Enforcement's (ICE) Office of Professional Responsibility (OPR), conducts compliance inspections at detention facilities in which detainees are accommodated for periods in excess of 72 hours and with an average daily population greater than ten to determine compliance with the ICE National Detention Standards (NDS) 2000, or the Performance-Based National Detention Standards (PBNDS) 2008 or 2011, as applicable.

During the compliance inspection, ODO reviews each facility's compliance with those detention standards that directly affect detainee health, safety, and/or well-being.<sup>7</sup> Any violation of written policy specifically linked to ICE detention standards, ICE policies, or operational procedures that ODO identifies is noted as a deficiency. ODO also highlights any deficiencies found involving those standards that ICE has designated under either the PBNDS 2008 or 2011, to be "priority components."<sup>8</sup> Priority components have been selected from across a range of detention standards based on their critical importance to facility security and/or the health and safety, legal rights, and quality of life of detainees in ICE custody.

Immediately following an inspection, ODO hosts a closeout briefing in person with both facility and ERO field office management to discuss their preliminary findings, which are summarized and provided to ERO in a preliminary findings report. Thereafter, ODO provides ERO with a final compliance inspection report to: (i) assist ERO in working with the facility to develop a corrective action plan to resolve identified deficiencies; and (ii) provide senior ICE and ERO leadership with an independent assessment of the overall state of ICE detention facilities. The reports enable senior agency leadership to make decisions on the most appropriate actions for individual detention facilities nationwide.

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<sup>7</sup> ODO reviews the facility's compliance with selected standards in their entirety.

<sup>8</sup> Priority components have not been identified for the NDS.

## DETAINEE RELATIONS

ODO interviewed 16 detainees, each of whom volunteered to participate. Four detainees made allegations of verbal abuse. The majority of detainees reported being satisfied with facility services, with the exception of the complaints below:

***Correspondence and Other Mail:*** Five detainees complained that their legal mail was not opened in their presence.

- **Action Taken:** ODO interviewed facility staff and found when incoming mail is clearly identified on the envelope as “legal” it is opened in the presence of the detainee. Additionally, ODO informed the facility Commander and ERO that legal mail shall be opened in the presence of the detainee.

***ICE National Detainee Handbook:*** Six detainees claimed they did not receive the ICE National Detainee Handbook.

- **Action Taken:** ODO interviewed ERO staff and determined ERO San Francisco Field Office or respective sub-office staff issues the ICE National Detainee Handbook to detainees when they are taken into custody. ODO was not able to confirm receipt of this handbook is documented.

***Detainee Handbook:*** Three detainees complained they did not receive the detainee handbook.

- **Action Taken:** ODO interviewed facility staff and found they do not issue the detainee handbook at the time of detainee admission; instead, facility staff provides the handbook upon detainee request. Facility staff initiated corrective action by issuing all detainees the detainee handbook.

***Food Service:*** One detainee complained that the meals he is served are not religious meals. Detainee claims that he does not receive any meat with his meals.

- **Action Taken:** ODO interviewed the Food Service Administrator and found the facility Chaplain approved religious meals for the detainee. ODO also confirmed that the common-fare meals (minus a meat product) constitute religious meals and have been reviewed and approved by a certified nutritionist. CCCJW staff conveyed this information to the detainee.

***Medical Care:*** One detainee complained that he has a bullet lodged in his right leg and cannot move his big toe.

- **Action Taken:** ODO reviewed the detainee’s medical record and found that the detainee was seen by the CCCJW’s medical doctor (MD) on July 22, 2016. The MD reviewed the detainee’s medical history and gave the detainee a physical. According to the detainee’s medical record, among the responsive actions taken to address his medical concerns, medical staff had already: requested outside medical records for additional information; re-assigned him to a bottom bunk; ordered x-rays and physical therapy for detainee, recommending that he be seen by an occupational therapist; prescribed Tylenol for discomfort; and scheduled a 28-day MD follow-up appointment.

**Medical Care:** One detainee complained he fell and hurt his right shoulder and continued to experience pain.

- Action Taken: According to his medical record, the detainee sought medical assistance in November 2015 due to a fall. Initial evaluation showed no fracture or dislocation; however, subsequent magnetic resonance imaging showed a torn ligament which was repaired via surgery in April 2016. Physical and occupational therapy was ordered post-surgery but had not been scheduled prior to ODO's inspection. Facility medical staff advised ODO they would check on the status of the therapy appointments.

**Medical Care:** One detainee complained his eyes continue to be red and itchy (after receiving medical assistance within the facility).

- Action Taken: ODO reviewed the detainee's medical file and found the detainee was scheduled for Nurse Sick Call (NSC) at the end of May but did not keep the appointment. In mid-June the detainee was seen by a Registered Nurse (RN) who discussed the detainee's case with an MD. The MD prescribed Zyrtec and Opcon-A eye drops. The detainee returned to NSC in mid-July and told the nurse the allergy medication and eye drops were ineffective. The MD changed the prescription from Zyrtec to Claritin. Per ODO's discussion with medical staff the detainee would be scheduled for another medical appointment.

**Telephone Access:** Two detainees claimed they were not allowed to make legal phone calls.

- Action Taken: ODO determined by reviewing the housing unit legal call logs that both detainees did in fact make several legal phone calls between July 18, 2016 and July 27, 2016. ODO also reviewed the facility handbook and found it contains instructions related to making legal phone calls.

**Staff-Detainee Communication:** Four detainees alleged staff members verbally abused them by yelling and swearing at them. Three detainees identified three different alleged staff-member abusers. The fourth detainee did not identify his abuser.

- Action Taken: Three detainees provided the name of their alleged abuser, times, and places where the abuse took place. The fourth detainee was afraid of retaliation and did not identify his abuser. ODO briefed the facility Commander, ERO Assistant Field Office Director (AFOD), and ODO leadership on the circumstances of each allegation of abuse. The detainees were advised of the procedures related to filing a grievance.

# INSPECTION FINDINGS

## DETAINEE SERVICES

### ACCESS TO LEGAL MATERIAL (ALM)

There are two law libraries; one law library for male detainees and one law library for female detainees. The male law library is in the facility's lending library, and the female law library is located in the female housing unit. The law libraries are well-lit and contain sufficient furnishings. The Lexis Nexis software is updated by ERO in both law libraries on a regular basis; however, facility policies and procedures governing access to legal material along with a list of the law library's holdings are not posted in the two law libraries (**Deficiency ALM-1**<sup>9</sup>).

The detainee handbook does not include information pertaining to the procedures for notifying a designated employee that law library material is missing or damaged (**Deficiency ALM-2**<sup>10</sup>).

### ADMISSION AND RELEASE (AR)

ODO reviewed 40 randomly selected detention files and interviewed 16 detainees and determined detainee handbooks are not issued to detainees upon admission to the facility; however, ODO interviewed facility staff and found detainees can receive a detainee handbook upon request (**Deficiency AR-1**<sup>11</sup>).

*Corrective Action:* Facility staff initiated corrective action during the inspection by issuing a detainee handbook to each detainee (**C-1**).

*Area of Concern:* ODO determined that the facility orientation video is produced only in the English language. According to the facility Commander, if a detainee does not speak or understand English, the language line is used for orientation. ODO's review of 40 randomly selected detention files found no documentation evidencing that English proficiency is evaluated, or orientation information was delivered by way of the language line.

### DETAINEE CLASSIFICATION SYSTEM (DCS)

ODO's review of 40 randomly selected detention files found all contained ICE Forms I-213, Record of Deportable/Inadmissible Alien, documenting the detainee's criminal history; however, none of the detention files contained an ICE Risk Classification Assessment form. Additionally,

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<sup>9</sup> "The detainee handbook or equivalent, shall provide detainees with the rules and procedures governing access to legal materials, including the following information.... These policies and procedures shall also be posted in the law library along with a list of the law library's holdings." See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(Q)(1-6).

<sup>10</sup> "The detainee handbook or equivalent, shall provide detainees with the rules and procedures governing access to legal materials, including the following information: the procedure for notifying a designated employee that library material is missing or damaged." See ICE NDS 2000, Standard, Access to Legal Material, Section (III)(Q)(6).

<sup>11</sup> "Upon admission every detainee will receive a detainee handbook. It will fully describe all policies, procedures, and rules in effect at the facility, in accordance with the "Detainee Handbook" standard." See ICE NDS 2000, Standard, Admission and Release, Section (III)(K).



there was no documentation of the classification level determined using the Classification Assessment tool (**Deficiency DCS-1**<sup>12</sup>).

ODO reviewed 4 copies of the classification assessment forms provided by ERO staff and found that one detainee should have been classified as “high” due to a felony sexual assault conviction and was allowed to co-mingle with low-level detainees. ODO raised the issue with the Commander and ERO San Francisco AFOD. The AFOD indicated he would seek more appropriate housing for the detainee convicted of sexual assault (**Deficiency DCS-2**<sup>13</sup>).

Additionally, ODO reviewed 40 electronic classification assessments in the CCCJW’s Jail Management System and found no documentation the reviewing officer recommended changes in classification due to specific, articulable facts that surface after the detainee’s in-processing. ODO found no documentation that a supervisor reviewed the intake/processing officer’s classification files for accuracy and completeness (**Deficiency DCS-3**<sup>14</sup>).

*Recommendation:* (b) (5)

Procedures for appealing classification levels are not addressed in either the detainee handbook or facility policy (**Deficiency DCS-4**<sup>15</sup>). In addition, the detainee handbook does not explain classification levels (**Deficiency DCS-5**<sup>16</sup>).

#### **FOOD SERVICE (FS)**

ODO verified detainee kitchen workers received medical clearance to work in food service; however, there was no documentation of pre-employment medical examinations and clearances for 17 CCCJW food service staff (**Deficiency FS-1**<sup>17</sup>).

ODO verified the 35-day general cycle and common-fare menus were updated annually and certified by a registered dietician. However, the kosher menu was not certified by a registered dietician (**Deficiency FS-2**<sup>18</sup>).

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<sup>12</sup> “The officer will place all original paperwork relating to the detainee’s assessment and classification in his/her A-file (right side), with a copy placed in the detention file.” See ICE NDS 2000, Standard, Detainee Classification System, Section (III)(B).

<sup>13</sup> “All facilities shall ensure that detainees are housed according to their classification level....

1. Level 1 Classification a. May not be housed with Level 3 Detainees.” See NDS 2000, Standard, Detainee Classification System, Section (III)(E)(1)(a).

<sup>14</sup> “In all detention facilities, a supervisor will review the intake/processing officer’s classification files for accuracy and completeness. Among other things, the reviewing officer shall ensure that each detainee has been assigned to the appropriate housing unit.” See NDS 2000, Standard, Detainee Classification System, Section (III)(C).

<sup>15</sup> “All facility classification systems shall include procedures by which new arrivals can appeal their classification levels.” See NDS 2000, Standard, Detainee Classification System, Section (III)(H). **This is a repeat deficiency.**

<sup>16</sup> “The detainee handbook’s section on classification will include the following: An explanation of the classification levels, with the conditions and restrictions applicable to each.” See NDS 2000, Standard, Detainee Classification System, Section (III)(I)(1).

<sup>17</sup> “All food service personnel (both staff and detainee) shall receive a pre-employment medical examination. The purpose of this examination is to exclude those who have a communicable disease in any transmissible stage or condition.” See NDS 2000, Standard, Food Service, Section (III)(H)(3)(a).

<sup>18</sup> “A registered dietitian shall conduct a complete nutritional analysis of every master cycle menu planned by the FSA. Menus must be certified by the dietitian before implementation.” See NDS 2000, Standard, Food Service, Section (III)(D)(2).

*Corrective Action:* The facility initiated corrective action during the inspection. The kosher menu was certified as nutritionally adequate by a registered dietician (C-2).

## **FUNDS AND PERSONAL PROPERTY (F&PP)**

ODO reviewed the detainee handbook and confirmed it addresses procedures for obtaining personal identity documents; however, the detainee handbook does not address the storing or mailing of property which is not allowed in detainee possession or the procedures for filing a claim for lost or damaged property (**Deficiency F&PP-1<sup>19</sup>**).

## **SECURITY AND CONTROL**

### **ENVIRONMENTAL HEALTH AND SAFETY (EH&S)**

ODO reviewed EH&S policy and procedures at CCCJW and determined the facility maintains high standards of cleanliness, sanitation, safe work practices, and control of hazardous materials and substances in accordance with the NDS EH&S standard.

Weekly fire/safety inspections are conducted by a team of management officials, including one individual who has extensive training in the area of fire safety; however, monthly maintenance safety inspections are not conducted (**Deficiency EH&S-1<sup>20</sup>**).

ODO reviewed fire drill reports and found the facility conducts multiple fire drills annually; however, the reports also show that emergency key drills are not included in each fire drill (**Deficiency EH&S-2<sup>21</sup>**).

*Corrective Action:* The facility initiated corrective action during the inspection by conducting a fire drill of all buildings, drawing the emergency keys, and unlocking one of the secured exit doors (C-3).

### **SPECIAL MANAGEMENT UNIT ADMINISTRATIVE SEGREGATION (SMU-AS)**

ODO reviewed the NDS SMU-AS standard at CCCJW to determine if the facility has procedures in place to temporarily segregate detainees for administrative reasons. ODO toured the facility, reviewed policy and available documentation, and interviewed the AFOD and facility Commander. The facility has not designated an area, room, or other location as an SMU-AS. As a result, the AFOD and Commander indicated only detainees classified as Low or Medium-Low, with no unmanaged medical or mental health issues, are cleared for transfer to CCCJW. They also stated that CCCJW does not accept other detainees for whom administrative segregation may be required. According to the AFOD and Commander, if a detainee held at CCCJW may

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<sup>19</sup> “The detainee handbook or equivalent shall notify the detainees of facility policies and procedures concerning personal property, including: ...3) The rules for storing or mailing property not allowed in their possession; ...5) The procedures for filing a claim for lost or damaged property.” See NDS 2000, Standard, Funds and Personal Property, Section (III)(J)(3)(5).

<sup>20</sup> “A qualified departmental staff member will conduct weekly fire and safety inspections; the maintenance (safety) staff will conduct monthly inspections. Written reports of the inspections will be forwarded to the OIC for review and, if necessary, corrective action determinations.” See NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(2).

<sup>21</sup> “Emergency-key drills will be included in each fire drill, and timed. Emergency keys will be drawn and used by the appropriate staff to unlock one set of emergency exit doors not in daily use.” See NDS 2000, Standard, Environmental Health and Safety, Section (III)(L)(4)(c).

require administrative segregation, ERO is notified, and the detainee is transferred within one to two hours. ODO learned, pending transfer, detainees typically remain secured in their rooms in the housing unit or may be moved to the intake area. No log of detainees transferred under these circumstances is maintained; therefore, ODO was unable to verify how quickly transfer occurs. ODO interviewed facility and ERO staff and found they believe they are exempt from the NDS SMU-AS standard because they do not acknowledge they have an SMU. ERO and CCCJW did not provide a waiver from ERO headquarters indicating any exemption related to segregation within the facility. CCCJW staff indicated they do not view their practices constitute segregation; however, detainees are separated from general population for administrative purposes. Specifically, pending a disciplinary hearing in cases where transfer is not arranged. Based on this practice, ODO finds requirements of the NDS SMU-AS standard apply. The following deficiencies are cited:

- The facility has not developed administrative segregation procedures consistent with the standard (**Deficiency SMU-AS-1<sup>22</sup>**).
- An order directing placement of a detainee in a cell for administrative reasons, including a pending disciplinary hearing, is not completed and issued (**Deficiency AS-2<sup>23</sup>**).
- The facility has not developed and implemented procedures for review of detainees placed in segregation (**Deficiency SMU-AS-3<sup>24</sup>**).
- Detainees placed in cells to await a disciplinary hearing do not receive the same general privileges as detainees in general population. Specifically, they are allowed out-of-cell time every other day for 70 minutes during which the detainee has access to the dayroom, telephones, recreation yard, and showers (**Deficiency SMU-AS-4<sup>25</sup>**).
- ODO interviewed facility staff and learned when a detainee is segregated, medical and supervisory personnel do not make rounds to cells; instead, facility staff only visits detainees in the cells upon detainee request (**Deficiency SMU-AS-5<sup>26</sup>**).
- Except for the 70 minute period every other day, staff report those detainees are not allowed out of their cells for any reason, including using the law library. In addition, they are not allowed to have legal materials brought to them (**Deficiency SMU-AS-6<sup>27</sup>**).

*Area of Concern:* When CCCJW requests transfer of detainees for non-medical or mental health reasons, the facility does not consistently provide documentation of the

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<sup>22</sup> “Administrative segregation is a non-punitive form of separation from the general population used when the continued presence of the detainee in the general population would pose a threat to self, staff, other detainees, property, or the security or orderly operation of the facility.” See NDS 2000, Standard, Special Management Unit (Administrative), Section (III)(A).

<sup>23</sup> “A written order shall be completed and approved by a supervisory officer before a detainee is placed in administrative segregation, except when exigent circumstances make this impracticable.” See NDS 2000, Standard, Special Management Unit (Administrative), Section (III)(B).

<sup>24</sup> “All facilities shall implement written procedures for the regular review of all administrative detention cases....” See NDS 2000, Standard, Special Management Unit (Administrative), Section (III)(C).

<sup>25</sup> “Detainees in administrative segregation shall receive the same general privileges as detainees in the general population, consistent with available resources and security considerations.” See NDS 2000, Standard, Special Management Unit (Administrative), Section (III)(D)(1).

<sup>26</sup> “A medical professional shall visit every detainee in administrative segregation at least three times a week. In addition to direct supervision afforded by the unit officer, the shift supervisor shall see each segregated detainee daily, including weekends and holidays.” See NDS 2000, Standard, Special Management Unit (Administrative), Section (III)(D)(12).

<sup>27</sup> “Detainees housed in administrative segregation shall have the same law library access as the general population, consistent with security, although the facility may establish a policy of upon-request-only access....” See NDS 2000, Standard, Special Management Unit (Administrative), Section (III)(D)(18).

reason for the request. According to the Commander, a transfer may occur too quickly to accomplish this notification. Absent documentation, the receiving facility may not have benefit of information requiring follow up and/or pertinent to housing assignments.

### **SPECIAL MANAGEMENT UNIT DISCIPLINARY SEGREGATION (SMU-DS)**

ODO reviewed the NDS SMU-DS standard at CCCJW to determine if the facility has procedures in place to segregate detainees for disciplinary reasons. ODO toured the facility, reviewed policies, procedures, documentation, interviewed facility staff, the Commander, and AFOD.

ODO was informed by the AFOD and Commander that CCCJW does not have an SMU-DS designated for detainees; further, ODO was informed that detainees requiring disciplinary segregation are not cleared for placement in CCCJW. ERO or CCCJW did not provide a waiver from ERO headquarters indicating any exemption related to segregation within the facility. If a detainee already housed at CCCJW requires disciplinary segregation, ERO is notified and transfer of the detainee is arranged. It is the position of the AFOD and the Commander that the NDS SMU-DS standard is not applicable to CCCJW for these reasons.

ODO interviewed facility staff and found CCCJW may segregate a detainee charged with committing a rule violation, in which case he or she is processed through the facility's disciplinary system. If found guilty, the detainee may be sanctioned with a term of what the facility calls "lockdown" in one of three cells within the housing unit. Lockdown involves detainee restriction to a cell for all but a 70 minute period every other day, during which the detainee has access to the dayroom, telephones, recreation yard, and showers. Except for the 70 minute period every other day, staff report detainees are not allowed to be out of their cells for any reason, including using the law library or afforded visitation. In addition, they are not allowed to have legal materials brought to them.

ODO learned that one detainee was placed on lockdown. The Disciplinary Hearing Report indicated he was sanctioned with ten days for hiding a razor under his mattress. The detainee also lost privileges for the term of the sanction.

ODO finds that imposition of sanctions involving restriction to a cell, and loss of privileges constitutes disciplinary segregation, and requirements of the NDS SMU-DS standard apply. The following deficiencies are noted:

ODO interviewed the facility Commander CCCJW who indicated the facility does not consider its lockdown practices disciplinary segregation; therefore, there are no written procedures directly applicable for the regular review of all disciplinary segregation cases (**Deficiency SMU-DS-1<sup>28</sup>**).

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<sup>28</sup> "All facilities shall implement written procedures for the regular review of all disciplinary segregation cases...." See NDS 2000, Standard, Special Management Unit (Disciplinary), Section (III)(C).

ODO interviewed the housing unit deputy who stated the privileges lost by the detainee on lockdown included visits (**Deficiency-SMU DS-2<sup>29</sup>**) and access to legal materials (**Deficiency SMU DS-3<sup>30</sup>**).

ODO interviewed facility staff, and learned when a detainee is placed on lockdown; medical and supervisory personnel do not make rounds to the lockdown area, instead staff only visit detainees in the cells upon request by the detainee (**Deficiency SMU-DS-4<sup>31</sup>**).

## USE OF FORCE (UOF)

ODO's review of facility UOF policy found the policy addresses confrontation avoidance, the continuum of UOF measures, and UOF in special circumstances; however, the policy does not describe the responsibilities for maintaining and regular testing, of video cameras (**Deficiency UOF-1<sup>32</sup>**).

During the review of one UOF incident, ODO found no evidence of medical record documentation showing medical staff examined the detainee after the use of force ended. Specifically, there was no documentation showing treatment of injuries or that decontamination procedures were followed (**Deficiency UOF-2<sup>33</sup>**).

After a UOF incident which involved 16 detainees and the use of oleoresin capsicum spray, the facility failed to report the incident to the ERO San Francisco Field Office (**Deficiency UOF-3<sup>34</sup>**).

Following UOF incidents, reports are reviewed by facility staff; however, there is no after action review of the incident by a team, adherence to timeframes for completion, and signature of the Officer in Charge affirming review and the appropriateness of the UOF. In addition, there is no evidence or documentation that ERO approved the facility's protocols for review of UOF incidents (**Deficiency UOF-4<sup>35</sup>**).

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<sup>29</sup> "The facility shall follow the 'Visitation' standard in setting visitation rules for detainees in disciplinary segregation. As a rule, a detainee retains visiting privileges while in disciplinary segregation. The determining factor is the reason for which the detainee is being disciplined." See NDS 2000, Standard, Special Management Unit (Disciplinary), (III)(D)(17).

<sup>30</sup> "Access to legal and non-legal reading material shall be as follows: c. Requests for access to legal material shall be accommodated as soon as possible, but in no case more than 24 hours after receipt of the initial detainee request to retrieve documents, except for documented security reasons. e. When developing the schedule for law library-access, the OIC will set aside blocks of time for the detainees in disciplinary segregation." See NDS 2000, Standard, Special Management Unit (Disciplinary), (III)(D)(15)(c)(e).

<sup>31</sup> "A medical professional shall visit every detainee in administrative segregation at least three times a week. In addition to direct supervision afforded by the unit officer, the shift supervisor shall see each detainee daily, including weekends and holidays." See NDS 2000, Standard, Special Management Unit (Disciplinary), (III)(D)(16).

<sup>32</sup> "The OIC shall designate responsibility for maintaining the video camera(s) and other video equipment." See NDS 2000, Standard, Use of Force, Section (III)(A)(4)(I).

<sup>33</sup> "After any use of force or forcible application of restraints, medical personnel shall examine the detainee, immediately treating any injuries. The medical services provided shall be documented." See NDS 2000, Standard, Use of Force, Section (III)(G)(2).

<sup>34</sup> "INS requires that all incidents of use of force be documented and forwarded to INS for review." See NDS 2000, Standard, Use of Force, Section (III)(A)(2)(b).

<sup>35</sup> "Written procedures shall govern the use-of-force incident review, whether calculated or immediate, and the application of restraints. INS shall review and approve all After Action Review procedures." See NDS 2000, Standard, Use of Force, Section (III)(K).