

Condition of Confinement Inspection Worksheet
 (This document must be attached to each G-324A Detention Review Form)
This Form is to be used for Inspections of Facilities used over 72 Hours



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

5-11-09 update

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

Name <i>Tri-County Jail and Detention Center</i>
Address (Street and Name) <i>1026 Shawnee College Road</i>
City, State and Zip Code <i>Ullin, Illinois 62992</i>
County <i>Pulaski</i>
Name and Title of Chief Executive Officer (Warden/Superintendent/Facility) <div style="background-color: black; color: black;">(b)(6), (b)(7)(c)</div> <i>Warden</i>
Name and Title of Lead Compliance Inspector <div style="background-color: black; color: black;">(b)(6), (b)(7)(c)</div>
Date[s] of Review <i>From 2/22/11 to 2/24/11</i>
Type of Review <input checked="" type="checkbox"/> Headquarters <input type="checkbox"/> Operational <input type="checkbox"/> Special Assessment <input type="checkbox"/> Other

Introduction to the G324A Over 72hour Facility Detention Inspection Worksheets

What is “Performance-Based”?

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

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

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

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

Worksheet Overview

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

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

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

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

Worksheet Completion

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

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

Outcome Measures Completion

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

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

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Performance-Based National Detention Standards

Section I SAFETY

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

PART 1 – 1. EMERGENCY PLANS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. No Detainee or detainee groups exercise control or authority over other detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedure addresses.
2. Detainees are protected from: <ul style="list-style-type: none"> • Personal abuse • Corporal punishment • Personal injury • Disease • Property damage • Harassment from other detainees 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Staff is trained to identify signs of detainee unrest. <ul style="list-style-type: none"> • What type of training and how often? 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses this component. Staff is trained to identify signs of unrest in the detainee population. Training on emergency plans is conducted annually.
4. Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. There is a designated person or persons responsible for emergency plans and their implementation. Sufficient time is allotted to the person or group for development and implementation of the plans.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility policy clearly spells out which administrative staff will be responsible and where staff will be assigned and what their duties are.
6. Each emergency plan is assigned a number and is strictly accounted for. A list identifying the location of each emergency plan is maintained by the Chief of Security or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plans were inspected and found to be up to date. Location of plans was maintained by the facility Captain.
7. All staff receives training in the emergency plans during their orientation training as well as during their annual training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The General Section of the emergency plans discusses alternate routes to the facility for staff to use in the event the primary route is impassable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The plans address the following issues: <ul style="list-style-type: none"> • Confidentiality • Accountability (copies and storage locations) • Annual review procedures and schedule • Revisions 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Contingency plans include a comprehensive general section with procedures applicable to most emergency situations, including procedures for handling detainees with special needs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 1 – 1. EMERGENCY PLANS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Contingency plans include a procedure for notification of neighbors residing in close proximity to the facility.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility emergency plan does allow for such notifications.
12. The facility has cooperative contingency plans with applicable: <ul style="list-style-type: none"> • Local law enforcement agencies • State agencies • Federal agencies 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility emergency plans include agreements with local, state, and federal agencies.
13. The facility conducts mock emergency exercises with agencies or departments with which they share mutual aid agreements and Memoranda of Understandings. The exercises should test specific emergency plans to assess their effectiveness.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does not conduct mock emergency drills with other agencies.
14. All staff receives copies of the Facility Hostage policy and procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does not distribute this confidential plan to staff but is discussed in annual training.
15. Staff is trained to disregard instructions from hostages, regardless of rank. Within 24 hours after release, hostages are screened for medical and psychological effects.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This is part of the facility hostage plan training. Hostages are screened within 24 hours after release for medical and psychological effects.
16. The facility maintains a list of translator services in the event one is needed during a hostage crisis.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. A listing of translator services is available at the facility if needed and shared in training.
17. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Facility emergency plans include procedures for treatment during and after an incident.
18. The Food Service Department maintains at least 3-days' worth of emergency meals for staff and detainees.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does maintain a three-day supply of food on hand for staff and detainees.
19. Written plans illustrate locations of shut-off valves and switches for utilities (water, gas, electric).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Emergency plans reviewed illustrated locations and switches for all utilities serving the facility.

PART 1 – 1. EMERGENCY PLANS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
20. Written plans include a Staff Work Stoppage procedure. This procedure is available for limited supervisory review.				
21. (MANDATORY) Written procedures cover: <ul style="list-style-type: none"> • Work/Food Strike • Fire • Environmental Hazard • Detainee Transportation System Emergency • ICE-wide Lockdown • Staff Work Stoppage • Disturbances • Escapes • Bomb Threats • Adverse Weather • Internal Searches • Facility Evacuation • Detainee Transportation System Plan • Hostages (Internal) • Civil Disturbances 				All components are addressed in the facility Emergency Plan Manual.
22. The Emergency Plans specify a procedure for post-emergency debriefings and discussions.				

PART 1 – 1. EMERGENCY PLANS

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

A review of the facility Emergency Plan Manual and discussion with key administrative staff demonstrated that the facility policy and procedures are meeting this standard.

(b)(6), (b)(7)(c) / February 24, 2011
Signature / Date

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. (MANDATORY) The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility utilizes a chemical distribution system that ensures that chemicals are properly secured and are issued in a diluted form whenever possible.
2. Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each area of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. <ul style="list-style-type: none"> • The files list all storage areas, and include a plant diagram and legend. • The MSDSs and other information in the files are available to personnel managing the facility's safety program. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MSDS binders are available in all areas required by the standard. Each binder is complete with a list of all storage areas including the plant diagram and legend of where the storage areas are located. The facility's Fire Safety Manager maintains the MSDS files and has access to all the information in the binders.
4. All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures: <ul style="list-style-type: none"> • Wear personal protective equipment. • Report hazards and spills to the designated official. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The MSDS are readily accessible to staff and detainees in the work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> • Quantities are limited. • Detainees are trained. • Staff always supervises detainees using these substances. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cleaning chemicals in spray bottles are dispensed to the housing units in diluted form. The spray bottles are issued each morning and picked up after the sanitation of the unit is completed.
7. All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Lighting fixtures and electrical equipment are installed in storage rooms and other hazardous areas and meet the National Electrical Code requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. All toxic and caustic materials stored in their original containers in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Excess flammables, combustibles, and toxic liquids are disposed of properly in accordance with MSDS.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Staff directly supervise and account for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, for example, shoe dye. All such products are clearly labeled as such. "Accountability" includes issuing such products to detainees in the smallest workable quantities.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no products in use that contain methyl alcohol.
12. Every employee and detainee using flammable, toxic, or caustic materials receives advanced training, in accordance with OSHA standards, in their use, storage, and disposal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff receives advance chemical training during institution familiarization training and receives refresher training annually. Detainees receive chemical training during their job assignment orientation training.
13. (MANDATORY) The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association (NFPA) and the Occupational Safety and Health Administration (OSHA).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility appears to meet all applicable standards. The facility is inspected annually by the Office of the State of Illinois State Fire Marshal. The facility also receives annual OSHA evaluations through the Stericycle, Steri-Safe OSHA Compliance Program. The Stericycle program consists of the completion of a Mock OSHA Evaluation Checklist by a trained inspector.
14. A technically qualified staff member conducts fire and safety inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire and safety inspections are conducted by the Fire and Safety Manager, who has 26 years experience as a Fire Chief.
15. The Safety Office (or officer) maintains files of inspection reports, including corrective actions taken.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. (MANDATORY) The facility has an approved fire prevention, control, and evacuation plan.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a complete fire prevention, control and evacuation plan approved by the local fire authority.
17. The plan requires: <ul style="list-style-type: none"> • Monthly fire inspections. • Fire protection equipment strategically located throughout the facility. • Public posting of emergency plan with accessible building/room floor plans. • Exit signs and directional arrows. • An area-specific exit diagram conspicuously posted in the diagrammed area. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
18. Fire drills are conducted and documented quarterly in all facility locations including the administrative area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire drills are conducted quarterly in all areas of the facility.
19. A sanitation program covers barbering operations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The barbershop has the facilities and equipment necessary to meet sanitation requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Barber Shop is located in a former locker room that is equipped with the facilities and equipment necessary to meet the required sanitation standards.
21. The sanitation standards are conspicuously posted in the barbershop.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Written procedures regulate the handling and disposal of used needles and other sharp objects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy TCDC-4.005, titled Medical Sharps Disposal, provides the guidance for the handling and disposal of needles and sharps.
23. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The duty nurse is responsible for conducting inventories of all potential security risk items for their respective shift.
24. Standard cleaning practices include: <ul style="list-style-type: none"> • Using specified equipment; cleansers; disinfectants and detergents. • An established schedule of cleaning and follow-up inspections. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Spill kits are readily available.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spill kits are available in the control center, pod office, booking and the medical department.
26. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stericycle is contracted to dispose of infectious/bio-hazardous waste.
27. Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blood borne pathogen training is conducted during Institutional Familiarization Training and during Annual Refresher Training.
28. Do the methods for handling/disposing of refuse meet all regulatory requirements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. A Licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. <ul style="list-style-type: none"> • At least monthly. • The pest-control program includes preventive spraying for indigenous insects. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Piedmont Pest Control provides monthly inspections and preventative spraying for indigenous insects.

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
30. Drinking water and wastewater is routinely tested according to a fixed schedule.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	South Water Inc. provides water to the village of Ullin which in turn supplies water to the facility. South Water Inc. provides the facility with an annual report stating that the water meets the standards set forth by the Illinois E.P.A. and is safe to drink. Although South Water Inc. routinely tests the facility's drinking water, the wastewater is not tested.
31. Emergency power generators are tested at least every two weeks. <ul style="list-style-type: none"> • Other emergency systems and equipment receive testing at least quarterly. • Testing is followed-up with timely corrective actions (repairs and replacements). 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Testing of the emergency generator is conducted for one hour weekly. Corrective action is completed through a service agreement contract with Fabick-Catepillar.
32. The Facility appears clean and well maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Hazardous material storage rooms meet the security and structural requirements of the standard. Storage cabinets meet the physical requirements specified in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The hazardous material storage rooms meet the security and structural requirements of the standard. The room is equipped with spill containers, chemical spill kits and corrosive cabinets.
34. The Health Services Administrator has implemented a program supporting a high level of environmental sanitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35. The Health Services Administrator conducts medical-facility inspections daily. Each inspection includes noting the condition of floors, walls, windows, horizontal surfaces, and equipment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36. The assigned staff member shall: Conduct special investigations and comprehensive surveys of environmental health conditions, and provide advisory, consultative, inspection, and training services regarding environmental health conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Fire and Safety Manager is the individual responsible for the facility's environmental health program.
37. The assigned staff member is responsible for developing and implementing policies, procedures, and guidelines for the environmental health program. These guidelines are intended to evaluate and eliminate or control as necessary, sources of injuries and modes of transmission of agents or vectors of communicable diseases.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Fire and Safety Manager is the individual responsible for the facility's environmental health program.

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

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

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

The facility has very good controls of hazardous materials used within the facility. It was observed that all chemicals are properly inventoried, stored and issued as required by the standard. Cleaning chemicals used by detainees in the housing units are diluted and controlled through the daily issuance and collection of spray bottles. Chemicals utilized in food service and the laundry is issued through metered dispensing systems which are properly secured at the point of service. Proper personal protective equipment was available as required and MSDS binders were available in all locations where chemicals are utilized.

A review of the fire prevention, control and evacuation plan, fire drills, and the fire safety inspections indicates that the facility places a lot of emphasis on ensuring that the facility is well protected. All fire plans and emergency equipment inspections were completed as required.

Staff and detainees receive all training required by the PBNDS, and the training is documented and placed in the appropriate files.

The facility is inspected annually by the Office of the State of Illinois State Fire Marshal. The facility also receives annual OSHA evaluations through the Stericycle, Steri-Safe OSHA Compliance Program.

The drinking water is tested on a regular basis; however, the wastewater is not being tested as required. There are no products in use in this facility that contain methyl alcohol.

(b)(6), (b)(7)(c) / February 24, 2011
Signature / Date

PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Every transporting officer required to drive a commercial size vehicle has a valid Commercial Driver's License (CDL) issued by the state of employment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Records reviewed found transporting officers to have appropriate CDL license.
3. Supervisors maintain records for each vehicle operated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Documentation indicating annual inspection of vehicles and annual inspection in accordance with state statutes is available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Random vehicle records reviewed found appropriate inspections being conducted.
5. Documentation indicating safety repairs are completed immediately and vehicles are not used until they have been repaired and inspected is available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Officers use a checklist during every vehicle inspection. <ul style="list-style-type: none"> • Officers report deficiencies affecting operability. • Deficiencies are corrected before the vehicle goes back into service. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedures reviewed found vehicle checklists are being maintained.
7. Transporting officers: <ul style="list-style-type: none"> • Limit driving time to 10 hours in any 15 hour period when transporting detainees. • Drive only after eight consecutive off-duty hours. • Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours. • Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days. • During emergency conditions (including bad weather), officers may drive as long as necessary to reach a safe area—exceeding the 10-hour limit. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Two officers with valid Commercial Drivers Licenses, (CDL's) required in any vehicle transporting detainees. <ul style="list-style-type: none"> • When buses travel in tandem with detainees, there are two qualified officers per vehicle. • An unaccompanied driver transports an empty vehicle. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedures along with staff interviews verify that this component is being met.

PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. The transporting officer inspects the vehicle before the start of each detail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Officer inspection sheets as well as facility policy and procedures ensure that the component is being met.
10. Positive identification of all detainees being transported is confirmed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedure along with staff interviews confirm that this component is being met. Appropriate searches of detainees are being conducted.
12. The facility ensures that the number of detainees transported does not exceed the vehicle manufacturer's occupancy level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. All uniformed officers wear their issued body armor in accordance with the ICE Body Armor policy and/or applicable contract policy when transporting detainees.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Facility policy and procedures require the use of body armor.
14. The vehicle crew conducts a visual count once all passengers are on board and seated. • Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedures clearly address and the facility is using appropriate restraining equipment on transports.
16. Officers ensure that no one contacts the detainees. • One officer remains in the vehicle at all times when detainees are present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Meals are provided during long distance transfers. • The meals meet the minimum dietary standards, as identified by dieticians utilized by ICE.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no trips that last over six hours. Meals are not required to be provided on trips less than six hours.

PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>18. The vehicle crew inspects all Food Service meals before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.).</p> <ul style="list-style-type: none"> • Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative. • Basins, latrines, and drinking-water, containers, dispensers are cleaned and sanitized on a fixed schedule. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No meals are provided to detainees during transport.
<p>19. Vehicles have:</p> <ul style="list-style-type: none"> • Two-way radios. • Cellular telephones. • Equipment boxes stocked in accordance with the Use of Force Standard. • Equipment appropriate and necessary for transporting detainees with physical disabilities. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>20. The vehicles are clean and sanitary at all times.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>21. Personal property of a detainee transferring to another facility:</p> <ul style="list-style-type: none"> • Is inventoried. • Is inspected. • Accompanies the detainee. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses.
<p>22. The following contingencies are included in the written procedures for vehicle crews:</p> <ul style="list-style-type: none"> • Attack • Escape • Hostage-taking • Detainee sickness • Detainee death • Vehicle fire • Riot • Traffic accident • Mechanical problems • Natural disasters • Severe weather • Passenger list is not exclusively men or women or minors 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All contingencies as listed in the component are individually addressed in the facility policy.

PART 1 – 3. TRANSPORTATION (BY LAND)

Meets Standard Does Not Meet Standard N/A Repeat Finding

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

A review of facility vehicle files, staff interviews and facility policy and procedures demonstrate that the facility is meeting this ICE standard.

(b)(6) (b)(7)(C) / February 24, 2011
Signature / Date

Performance-Based National Detention Standards

Section II SECURITY

- 4 Admission and Release**
- 5 Classification System**
- 6 Contraband**
- 7 Facility Security and Control**
- 8 Funds and Personal Property**
- 9 Hold Rooms in Detention Facilities**
- 10 Key and Lock Control**
- 11 Population Counts**
- 12 Post Orders**
- 13 Searches of Detainees**
- 14 Sexual Abuse and Assault Prevention and Intervention**
- 15 Special Management Units**
- 16 Staff-Detainee Communication**
- 17 Tool Control**
- 18 Use of Force and Restraints**

PART 2 – 4. ADMISSION AND RELEASE

This Detention Standard protects the community, detainees, staff, volunteers, and contractors by ensuring secure and orderly operations when detainees are admitted to or released from a facility.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>1. Admission processing includes an orientation of the facility. The orientation includes; unacceptable activities and behavior, and corresponding sanctions. How to contact ICE. The availability of pro-bono legal services and how to pursue such services. Schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>IGSA's are only required to have an orientation that includes the detainee handbook. The other requirements of this component are only applicable to SPCs and CDFs. Practice at this facility is to provide every detainee a handbook, either in English or Spanish. As part of the orientation process, a video is shown to every detainee. The detainees also receive a copy of the ICE National Detainee Handbook, either in English or Spanish.</p>
<p>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.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>An initial screening takes place by trained correctional staff in the booking area, where both medical and psychological forms are completed. Results are referred to Medical Staff.</p>
<p>3. When available, accompanying documentation is used to identify and classify each new arrival. In SPCs and CDFs, new detainees shall remain segregated from the general population during the orientation and classification period.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The portion of this component requiring new detainees to be segregated from the general population during the orientation and classification period is specific to SPCs and CDFs. Practice at this facility is to place the detainees in a common area until staff can verify that the detainee has been classified. Classification takes place prior to admittance at the Broadview Processing Center located in Broadview, Illinois. Upon verification of classification, the detainees are then taken to their assigned housing unit.</p>
<p>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.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 4. ADMISSION AND RELEASE

This Detention Standard protects the community, detainees, staff, volunteers, and contractors by ensuring secure and orderly operations when detainees are admitted to or released from a facility.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
5. Detainees are subjected to a strip search only when reasonable suspicion has been established and not as routine policy. Non-criminal detainees are never subjected to a strip search but are patted down unless cause or reasonable suspicion has been established. All strip searches are documented on G-1025, or equivalent, with proper supervisory approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component that requires all strip searches to be documented on G-1025, or equivalent, with proper supervisory approval is specific to SPCs and CDFs. Practice at this facility is to only conduct strip searches for cause. When a strip search is conducted, it is documented.
6. The "Contraband" standard governs all personal property searches. IGSA's and CDFs use or have a similar contraband standard. Staff prepares a complete inventory of each detainee's possessions. The detainee receives a copy. All identity documents are inventoried and given to ICE staff for placement in the A-file. All funds and valuables are safeguarded in accordance with ICE Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Identity documents are placed in sealed bags prior to admittance and turned over to staff at the facility. The sealed bags are stored in the property room but never opened. If a bag is to be opened it is sent to ICE to remove the needed item.
7. Staff completes Form I-387 or similar form for CDFs and IGSA's for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. All releases are coordinated with ICE.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Practice at this facility is that all release paperwork is completed by ICE with the exception of file information.
10. Staff completes paperwork/forms for release as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Each detainee receives a receipt for personal property secured by the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The facility has a system to maintain accurate records and documentation for admission, orientation, and release.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. ICE staff enters all information pertaining to release, removal, or transfer of all detainees into the Enforce Alien Detention Module (EADM) within 8 hours of action.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE staff enters all information into the EADM.
14. All orientation material shall be provided in English, Spanish, and other language(s) as determined by the Field Office Director.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 4. ADMISSION AND RELEASE

Meets Standard
 Does Not Meet Standard
 N/A
 Repeat Finding

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

This inspector interviewed the Intake Sergeant and the Intake Officer; reviewed Policy 9.01, Detainee /Offender Admission and Release; reviewed several detainee files; toured the property room; and observed the entire booking process. Based on this information, this facility was found to meet the standard as it relates to Admission and Release.

(b)(6) (b)(7)c / February 24, 2011
nature / Date

PART 2 – 5. CLASSIFICATION SYSTEM

This Detention Standard protects the detainees, staff, contractors, volunteers, and the community from harm, and contributes to orderly facility operations, by requiring a formal classification process for managing and separating detainees that is based on verifiable and documented data.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. SPC and CDF facilities use the required Objective Classification System. IGSA's use an objective classification system or similar system for classifying detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring the facility use the required Objective Classification System is specific to SPCs and CDFs. Practice at this facility is that all new arrivals at the facility are classified prior to being sent to this facility by Broadview Processing Center. An objective system classifies the new arrivals into one of three levels with three being the highest classification. This facility verifies that a classification level was assigned and assigns the detainee to an appropriate housing unit.
2. The facility classification system includes: <ul style="list-style-type: none"> • Classifying detainees upon arrival. • Separating individuals who cannot be classified upon arrival from the general population. • The first-line supervisor or designated classification specialist reviews every classification decision. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are classified prior to arrival and the Intake Sergeant verifies that a classification level was assigned.
3. The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The classification is done prior to admittance but the Intake Sergeant/officer reviews the entire file to verify classification has occurred.
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 detainee classification.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the documents in the files finds information to be factual and reliable.
5. Housing assignments are based on classification-level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. A detainee's classification-level does not affect his or her recreation opportunities. Detainees recreate with persons of similar classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Detainee work assignments are based upon classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 5. CLASSIFICATION SYSTEM

This Detention Standard protects the detainees, staff, contractors, volunteers, and the community from harm, and contributes to orderly facility operations, by requiring a formal classification process for managing and separating detainees that is based on verifiable and documented data.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. The classification process includes reassessment/reclassification. The First Reassessment is to be completed 60 days to 90 days after the initial assessment. Subsequent reassessments are completed at 90 day to 120 day intervals. Special Reassessments are completed within 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring subsequent reassessments to be completed at 90 day to 120 day intervals is specific to SPCs and CDFs. Practice at this facility is to enable a review after 60 days and if a change is indicated, ICE will reclassify.
9. The classification system includes standard procedures for processing new arrivals' appeals. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component that indicates that only a designated supervisor or classification specialist to have the authority to reduce a classification-level on appeal is specific to SPCs and CDFs. ICE staff will make any reclassifications.
10. Classification appeals are resolved w/in 5 business days. Detainees are notified of the outcome within 10 business days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring classification appeals to be resolved in five business days is specific to SPCs and CDFs. Practice at this facility is to resolve and notify detainees within reasonable time limits.
11. Classification designations may be appealed to a higher authority such as the Facility Administrator or equivalent.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Practice at this facility is to let detainee appeal his classification through the facility Classification Supervisor.
12. The Detainee Handbook or equivalent for IGSA's explains the classification levels, with the conditions and restrictions applicable to each.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. In SPCs and CDFs detainees are assigned color-coded uniforms and IDs to reflect classification levels. In IGSA's a similar system is utilized for each level of classification.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring detainees to be assigned color-coded uniforms and IDs to reflect classification levels is specific to SPCs and CDFs. Practice at this facility requires the assignment of color-coded uniforms for the different classifications.

PART 2 – 5. CLASSIFICATION SYSTEM

Meets Standard Does Not Meet Standard N/A Repeat Finding

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

This inspector reviewed the facility and ICE handbooks, noted that the ICE detainees review an orientation video, reviewed classification paperwork in the detainee files, interviewed the intake sergeant/officer, and reviewed Facility Policy 10.01, Classification Procedure, which finds that the facility meets the standard in regards to Classification.

It should be noted that the classification process occurs prior to admittance to the facility at the Broadview Processing Center located in Broadview, Illinois.

(b)(6), (b)(7)(C) / February 24, 2011
nature / Date

PART 2 – 6. CONTRABAND

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility follows a written procedure for handling contraband. Staff inventories, holds, and reports it when necessary to the proper authority for action/possible seizure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requirement for staff to inventory, hold, and report contraband to the proper authority for action/possible seizure is specific to SPCs and CDFs. The facility does have policy and procedures for the holding of contraband to be turned over to proper authorities for action/possible seizure.
2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility has policy and procedure for retaining contraband for possible evidence in criminal prosecution.
3. Staff returns property not needed as evidence to the proper authority. Written procedures cover the return of such property.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does have procedures for returning evidence not needed to proper authorities.
4. Altered property is destroyed following documentation and using established procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Before confiscating religious items, the Facility Administrator or designated investigator contacts a religious authority.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility policy and procedures allow for the contact of a religious authority prior to confiscating religious items.
6. Staff follows written procedures when destroying hard contraband that is illegal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Hard contraband that is illegal (under criminal statutes) is retained and used for official use, e.g. training purposes. <ul style="list-style-type: none"> • If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use. • Soft Contraband is mailed to a third party or stored in accordance with the Detention Standard on Funds and Personal Property. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The sections of the component that requires hard contraband that is illegal (under criminal statutes) if retained, be secured when not in use and be used under specific written procedures is specific to SPCs and CDFs. The facility does inventory and secure hard contraband that is illegal and may be used in a criminal case. Handling of soft contraband is explained in local policy in accordance with standard.
8. Detainees receive notification of contraband rules and procedures in the Detainee Handbook and notified when property is identified and seized as contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 6. CONTRABAND

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. Facilities with Canine Units only use them for contraband detection.				This facility has policy that prevents the use of canines.

PART 2 – 6. CONTRABAND

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

A review of the facility policy and procedures on the handling of contraband clearly demonstrates that the requirements of the ICE PBNDs are being met. Staff interviews also demonstrated a clear understanding of the facility policy and procedure.

(b)(6), (b)(7)(C) February 24, 2011

Reviewer's Signature / Date

PART 2 – 7. FACILITY SECURITY AND CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility administrator or assistant administrator and department heads visit detainee living quarters and activity areas weekly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedures clearly address. Administrators and department heads document weekly visits to detainee living areas.
2. At least one male and one female staff are on duty where both males and females are housed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility does not normally house female detainees.
3. Comprehensive annual staffing analysis determines staffing needs and plans.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Annual staffing analysis is completed by the facility Captain.
4. Essential posts and positions are filled with qualified personnel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Every Control Center officer receives specialized training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Policy restricts staff access to the Control Center.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does restrict access to the Control Center.
7. Detainees do not have access to the Control Center.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Facility policy and procedure prohibits detainee access to the Control Center.
8. Communications are centralized in the Control Center.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility communications are centralized in the facility Control Center.
9. Facility security and safety will be monitored and coordinated by a secure, well-equipped, and continuously staffed control center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The Control Center maintain employee Personal Data Cards (Form G-74 or contract equivalent).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does keep Personal Data Cards on employees in the Control Center.
11. Recall lists include the current home telephone number of each employee. Phone numbers are updated as needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does keep current recall lists on employees in the facility Control Center to include home phone numbers.
12. Staff makes watch calls every half-hour between 6 PM and 6 AM.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does not make half-hour watch calls since security staff on duty during this time is under direct supervision of the Control Center.

PART 2 – 7. FACILITY SECURITY AND CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. Information about routine procedures, emergency situations, and unusual incidents will be continually recorded in permanent post logs and shift reports.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedure on inspections and log books address this component.
14. The front-entrance officer checks the ID of everyone entering or exiting the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Auditors were checked for ID, as well as other visitors received at the facility.
15. All visits officially recorded in a visitor logbook or electronically recorded.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The facility has a secure, color-coded visitor pass system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses a color-coded visitor pass system.
17. Officers monitor all vehicular traffic entering and leaving the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: <ul style="list-style-type: none"> • The driver's name • Company represented • Vehicle contents • Delivery date and time • Date and time out • Vehicle license number • Name of employee responsible for the vehicle during the facility visit 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not allow any delivery vehicles inside the facility security perimeter or into any sensitive area of the facility.
19. Officers thoroughly search each vehicle entering and leaving the facility.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The only vehicles entering the facility are law enforcement vehicles which are not searched.
20. The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. The front entrance has a sally-port type entrance, with interlocking electronic doors or grilles.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility operates a sally port type entrance at the main entrance to the facility.
22. The facility's perimeter will ensure that detainees remain within and that public access is denied without proper authorization.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. Written procedures govern searches of detainee housing units and personal areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Housing area searches occur at irregular times.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility security staff does conduct searches at irregular times.

PART 2 – 7. FACILITY SECURITY AND CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
25. Security officer posts located in or immediately adjacent to detainee living areas to permit officers to see or hear and respond promptly to emergency situations. Personal contact and interaction between staff and detainees is required and facilitated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. There are post orders for every security officer post.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. Detainee movement from one area to another area is controlled by staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainee movement in the facility is supervised.
28. Living areas are constructed to facilitate continuous staff observation of cell or room fronts, dayrooms, and recreation space.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. Every search of the SMU and other housing units is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedure cover all searches of housing units.
30. The SMU entrance has a sally port.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The SMU at this facility does not have a sally port.
31. All tools entering SMU will be inspected and inventoried by the SMU officer prior to entering the housing unit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> • Posts to be inspected • Required inspection forms • Frequency of inspections • Guidelines for checking security features • Procedures for reporting weak spots, inconsistencies, and other areas needing improvement 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IGSAs are only required to have a comprehensive security inspection policy. The bulleted sections of this component are only applicable to SPCs and CDFs. The facility does have a comprehensive security inspection policy in place based on a review of policy and inspection reports.
33. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Facility policy and procedure require daily inspections of assignments.
34. Documentation of security inspections is kept on file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Random files were reviewed in the Captain's office documenting various security inspections.
35. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Recurring problems that have not been corrected are reported to the facility Captain and Warden.
36. Tools being taken into the secure area of the facility are inspected and inventoried before entering and prior to departure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 7. FACILITY SECURITY AND CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
37. Storage and supply rooms; walls, light and plumbing fixtures, accesses, and drains, etc. undergo frequent, irregular searches. These searches are documented.				Random inspection reports were reviewed.
38. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.				
39. Daily procedures include: <ul style="list-style-type: none"> • Perimeter alarm system tests. • Physical checks of the perimeter fence. • Documenting the results. 				
40. Visitation areas receive frequent, irregular inspections.				Random inspection reports were reviewed with facility Captain. The facility is meeting this component in regards to inspections being conducted on irregular basis.
41. An officer is assigned responsibility for ensuring the security inspection process covers all areas of the facility.				
42. The Maintenance Supervisor and Chief of Security or equivalent make monthly fence checks.				Random reports covering the facility perimeter were reviewed. Monthly fence checks are being conducted.

FACILITY SECURITY AND CONTROL

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

The facility has a comprehensive security and control plan which is covered by various local policies. Numerous random reports and inspections forms were reviewed by this auditor with facility staff. This inspector finds the facility to be in compliance with this standard.

(b)(6), (b)(7)(c) / February 24, 2011

Reviewer's Signature / Date

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainee funds and valuables are properly separated and stored. Detainee funds and valuables are accessible to designated supervisor(s) only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Funds are separated, verified by two staff members, documented with receipts and issued to each detainee. The funds are then placed in a drop safe accessible to designated supervisors only. Valuables are separated, inventoried, verified by two staff members and documented on the facility's property form. All valuable property is secured with baggage in the facility's property room, which is only accessible to shift supervisors.
2. Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Staff search and itemize the baggage and personal property of arriving detainees, including funds and valuables, using a personal property inventory form that meets the ICE standard, in the presence of the detainee unless otherwise instructed by the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires that the property be inventoried in the presence of the detainee.
4. Two officers are present during the processing of detainee funds and valuables during admissions processing to the facility. Both officers verify funds and valuables.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Facility policy and practice requires the shift supervisor and booking officer witness and sign for funds and valuables.
5. <u>For IGSA's and CDFs, Is the facility using a personal property inventory form that meets the ICE standard?</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Staff gives the detainee the original inventory form, filing copies in the detainee's detention file and the personal property container.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The practice at this facility is that the inventory forms are maintained in the booking file and in the computerized database. Detainees do not receive a copy unless they request a copy.
7. Staff forwards an arriving detainee's medicine to the medical staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has 24-hour medical coverage. Medical staff is on site when booking staff are processing detainees. All medications are turned over to medical staff during intake.

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. Staff searches arriving detainees and their personal property for contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Property discrepancies are immediately reported to the Chief of Security or equivalent.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. At this facility the practice is that the shift supervisor is notified of any property discrepancies.
10. Staff follows written procedures when returning property to detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy outlines the procedures for returning property to detainees.
11. CDF/IGSA facility procedures for handling detainee property claims are similar to the ICE standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The facility attempts to notify an out-processed detainee that he/she left property in the facility. <ul style="list-style-type: none"> • By sending written notice to the detainee's last known address; via certified mail; • The notice states that the detainee has 30 days in which to claim the property, after which it will be considered abandoned. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In the event that property is found to be left in the facility, staff immediately forwards the property to ICE.
13. Staff obtains a forwarding address from each detainee.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ICE does not provide the facility with a forwarding address from each detainee.
14. It is standard procedure for two officers to be present when removing/documenting the removal of funds from a detainee's possession.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. At this facility the practice is that two staff members document the removal of funds from a detainee's possession.
15. Staff issue and maintain property receipts (G-589s) in numerical order.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility does not utilize G-589 receipts.
16. Staff complete and distribute the G-589 in accordance with the ICE standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility does not utilize G-589 receipts.
17. The processing officer records each G-589 issuance in a G-589 logbook. The record includes the initials and star numbers of receipting officers.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility does not utilize G-589 receipts. Copies of property forms are maintained in the booking files as well as electronically.

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
18. Staff tags large valuables with both a G-589 and an I-77.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility does not utilize G-589 receipts or I-77 tags. Large valuables are labeled with the detainee's booking sheet with picture identification and assigned the same bag number that corresponds to the property bag.
19. The supervisor verifies the accuracy of every G-589.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility does not utilize G-589 receipts.
20. The supervisor ensures that: <ul style="list-style-type: none"> • Detainee funds are, without exception, deposited into the cash box; • Every property envelope is sealed. • All sealed property envelopes are placed in the safe. • Large, valuable property is kept in the secured locked area. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. At this facility the practice is that staff ensures that funds are placed in the cash box, property envelopes are placed in the safe and that large valuables are secured.
21. Staff tags every baggage/facility container with an I-77, completed in accordance with the ICE standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. At this facility I-77 tags are not utilized. Staff utilizes numbered chits and the detainee booking form to identify bags.
22. Staff secures every container used to store property with a tamper-proof numbered strap.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. At this facility, the individual property bags are not secured with tamper proof straps. The property bags are closed with zippers and secured in the property room.
23. A logbook records detainee name, A-number/detainee-number, baggage-check/ I-77 number, security tie-strap number, property description, date issued and date returned.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. At this facility tie straps and I-77 numbers are not utilized. Property bag numbers are entered into the automated detainee booking system.
24. In SPCs, the Supervisory Immigration Enforcement Agent, accompanied by a detention staff member conducts a comprehensive weekly audit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. There are no property audits being conducted at this facility.

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
25. The Facility Administrator has established quarterly audits of baggage and non-valuable property as facility policy, the audits occur each quarter and audits are verified and entered in the log.				This component is only applicable for SPCs and CDFs. Quarterly audits are not being conducted at this facility.
26. The facility positively identifies every detainee being released or transferred.				This component is only applicable for SPCs and CDFs. The practice at this facility is that every detainee released from custody is positively identified. Intake documentation is maintained that has a thumbprint taken during intake and a second thumbprint taken during release.
27. Staff routinely informs supervisors of lost/damaged property claims. Claims are properly investigated and missing or damaged property claim reports are filed.				The section of this component requiring staff to routinely inform supervisors of lost/damaged property claims is specific to SPCs and CDFs. Staff informs supervisors of all property claims. Property claims are investigated and documented.
28. Every lost/damaged property report completed in accordance with the ICE standard on an I-387 (or equivalent). The Facility Administrator receives a copy and staff place the original in the detainee's A-file, retaining a copy in the detainee's detention file.				This component is only applicable for SPCs and CDFs. At this facility, property reports are documented on the I-387 form and filed in the detainee's detention file.

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

Approximately 70 percent of detainees at this facility are screened through the Broadview Processing Center. The Broadview Processing Center handles all of the detainee funds and property. Detainees coming from Broadview arrive with their funds, valuables and property secured in heat sealed Department of Homeland Security pouches. For the remainder of the detainees arriving from other facilities, the policies, procedures and practices at this facility are sufficient to ensure that detainee property is safeguarded and controlled. The processing of funds, valuables and non-valuable property is conducted according to standard and under conditions that enhance the security of detainee property.

(b)(6), (b)(7)(C) / February 24, 2011
Signature / Date

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The hold room is situated in a location within the secure perimeter.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility has no hold rooms.
2. The hold rooms are clean, in good repair, well ventilated, well lit, and all activating switches located outside the room.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The portion of this component requiring hold rooms be well ventilated, well lit, and that all activating switches are located outside the room is specific to SPCs and CDFs. They do not have hold rooms.
3. The hold rooms contain sufficient seating for the number of detainees held.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. They do not have hold rooms.
4. No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside hold rooms.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. They do not have hold rooms.
5. Hold room walls and ceilings are escape and tamper resistant.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility has no hold rooms.
6. Detainees are not held in hold rooms for more than 12 hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
7. Male and females detainees are segregated from each other at all times.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Facility does not house any female detainees.
8. Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Detainees are provided with personal hygiene items during booking but the facility does not have hold rooms.
9. If the hold room is not equipped with toilet facilities, an officer is posted within visual or audible range to allow detainees access to such on a regular basis.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
10. All detainees are given a pat down search for weapons or contraband before being placed in the hold room.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
11. When the last detainee has been removed, the hold room is inspected for the following: <ul style="list-style-type: none"> ▪ Cleaning. ▪ Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No hold rooms exist.

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>12. (MANDATORY) There is a written evacuation plan.</p> <ul style="list-style-type: none"> • There is a designated officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The section of this component requiring the written evacuation plan designate an officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency is specific to SPCs and CDFs. The facility has no hold rooms.
13. An appropriate emergency service is called immediately upon a determination that a medical emergency exists.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
<p>14. Single occupant hold rooms contain a minimum of 37 square feet (7 unencumbered square feet for the detainee, 5 square feet for a combination lavatory/toilet fixture, and 25 square feet for a wheelchair turn-around area).</p> <ul style="list-style-type: none"> ▪ If multiple-occupant hold rooms are used, there is an additional 7 unencumbered square feet for each additional detainee. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility has no hold rooms.
<p>15. <u>In SPCs designed after 1998</u> the hold rooms are equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They are:</p> <ul style="list-style-type: none"> ▪ Compliant with the American Disabilities Act. ▪ Small hold rooms (1 to 14 detainees) have at least one combi-unit. ▪ Large hold rooms (15 to 49 detainees) are provided with at least two combi-units. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility has no hold rooms.
16. <u>In SPCs designed after 1998</u> the hold rooms have floor drain(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility has no hold rooms.
17. <u>In SPCs designed after 1998</u> , the door to the hold room swings outward and the door complies with the specifications outlined in the standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility has no hold rooms.
18. Family units, persons of advanced age (over 70), females with children, and unaccompanied juvenile detainees (under the age of 18) are not placed in hold rooms.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
19. Minors (under 18) are confined apart from adults, except for immediate relatives or guardians.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
<p>20. Each detention facility maintains a detention log (manually or by computer) for each detainee placed in a hold cell.</p> <ul style="list-style-type: none"> ▪ The log includes the required information specified in the standard. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The portion of this component that requires the log to include the required information specified in the standard is specific to SPCs and CDFs. No hold rooms exist.

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
21. Officers provide a meal to any detainee detained in a hold room for more than six hours. <ul style="list-style-type: none"> ▪ Juveniles, babies and pregnant women have access to snacks, milk or juice. ▪ Meal are served to juveniles regardless of time in custody 				The facility has no hold rooms.
22. Any detainee with disabilities, including temporary disabilities, will be housed in a manner that provides for his or her safety and security.				The facility has no hold rooms.
23. The maximum occupancy for the hold room will be posted.				The facility has no hold rooms.
24. Before placing a detainee in a room, an officer shall observe each individual to screen for obvious mental or physical problems.				The facility has no hold rooms.
25. Staff does not permit detainees to smoke in a hold room.				The facility has no hold rooms.
26. Officers closely supervise hold rooms through direct supervision, to ensure: <ul style="list-style-type: none"> ▪ Continuous auditory monitoring, even when the hold room is not in the officer's direct line of sight, and ▪ Visual monitoring at irregular intervals at least every 15 minutes, each time recording in the detention log, the time and officer's printed name and any unusual behavior or complaints under "Comments." ▪ Constant surveillance of any detainee exhibiting signs of hostility, depression, or similar behaviors. 				The facility has no hold rooms.

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

The facility does not operate with hold rooms as described in the standard. The facility does receive detainees in small groups which they hold under direct supervision in a secure indoor recreation area. There are toilet and water facilities available to the detainees. The area they are held in is more than adequate for the number of detainees to be comfortably held. The intake process lasts for a couple of hours as described by the facility Captain. Any special needs such as medical requests are coordinated by the security staff that is providing direct supervision during the intake process.

(b)(6), (b)(7)(C) / February 24, 2011
Reviewer's Signature / Date

PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The security officer[s], or equivalent, has attended an approved locksmith training program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Two staff members have received locksmith training from Southern Steel and Folger Adams.
2. The security officer, or equivalent, has responsibility for all administrative duties and responsibilities relating to keys, locks etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The security officer, or equivalent, provides training to all employees in key and lock control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility staff receives training in key and lock control from the two trained facility staff members.
4. The security officer, or equivalent, maintains inventories of all keys, locks and locking devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Random inventories were reviewed and found to be accurate.
5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Facility policies and procedures address the issue of compromised keys and locks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy does address and explain this component as it relates to compromised keys and locks.
7. The security officer, or equivalent, develops policy and procedures to ensure safe combinations integrity.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No combination safes exist on grounds.
8. Only dead bolt or dead lock functions are used in detainee accessible areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Non-authorized locks (as specified in the Detention Standard) are not used in detainee accessible areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The facility does not use grand master keying systems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and interviews with locksmiths verify the facility does not use a grand master system.
11. All worn or discarded keys and locks cut up and properly disposed of.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy and interviews with facility locksmith verify the proper disposal of worn or discarded keys.
12. Padlocks and/or chains are not used on cell doors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to <ul style="list-style-type: none"> • Occupational Safety and Environmental Health Manual, Chapter 3 • National Fire Protection Association Life Safety Code 101. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The operational keyboard sufficient to accommodate all the facility key rings including keys in use is located in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inspection of facility keyboard found the board to be sufficient in size to accommodate facility needs.

PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
15. Procedures in place to ensure that key rings are: <ul style="list-style-type: none"> • Identifiable • Numbers of keys on the ring are cited? • Keys cannot be removed from issued key rings 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Random key rings were inspected and were found to be easily identifiable, the number of keys on ring was listed, and only a locksmith has approval to remove or add keys to a ring.
16. Emergency keys are available for all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency keys were inspected by this auditor. Inventories document keys are available for all areas of the facility.
17. The facility uses a key accountability system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Authorization is necessary to issue any restricted key.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Individual gun lockers are provided. <ul style="list-style-type: none"> • They are located in an area that permits constant officer observation. • In an area that does not allow detainee or public access. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gun lockers provided by the facility were inspected and found to be meeting the requirements of this component.
20. The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement for the keys to be physically counted daily is specific to SPCs and CDFs. The facility does have accountability policy and procedures in place.
21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> • Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. • When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. • Detainees are not permitted to handle keys assigned to staff. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted items in this component are only required for SPCs and CDFs. Facility policy and procedures require staff to adhere to all bulleted items in this component.
22. Locks and locking devices are continually inspected, maintained, and inventoried.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Component is being met via regular security inspections and the facility preventative maintenance program.
23. Each facility has the position of Security Officer. If not, a staff member appointed the collateral duties of security officer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. The designated key control officer is the only employee who is authorized to add or remove a key from a ring.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Facility policy and procedure ensures this component is being met.

PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
25. The splitting of key rings into separate rings is not authorized.				This component is only applicable for SPCs and CDFs. Facility policy and procedures ensure this component is being met in regards to the splitting of facility key rings.

PART 2 – 10. KEY AND LOCK CONTROL

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

The facility has a detailed policy and procedure for key and lock control that meets the ICE PBNDS. Additional review by this auditor found key ring inventories and staff were trained by the locksmiths, who have received approved locksmith training.

(b)(6) (b)(7)(C) / February 24, 2011
Reviewer's Signature / Date

PART 2 – 11. POPULATION COUNTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Staff conducts a formal count at least once each 8 hours (no less than three counts per day). At least one of these counts shall be a face to photo count.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Activities cease or are strictly controlled while a formal count is being conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does strictly control movement while counts are conducted.
3. There is a system for counting each detainee, including those who are outside the housing unit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does have a system for counting all detainees.
4. Formal counts in all units take place simultaneously.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does conduct formal counts simultaneously.
5. Officers do not allow detainee participation in the count.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does not allow detainees to participate in the count process.
6. A face-to-photo count follows each unsuccessful recount.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. A face-to-photo count does follow each unsuccessful recount.
7. Officers positively identify each detainee before counting him/her as present.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does conduct a face-to-photo count for positive identification once per day at the 10:00 p.m. count.
8. Written procedures cover informal and emergency counts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedure address emergency and informal counts.
9. The control officer (or other designated position) maintains an "out-count" record of all detainees temporarily out of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Security officers and any other staff with responsibilities for conducting counts are provided adequate initial and periodic training in count procedures, and that training is documented in each person's training folder.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility provides periodic training in count procedures which is documented in the employees training file.

PART 2 – 11. POPULATION COUNTS

Meets Standard
 Does Not Meet Standard
 N/A
 Repeat Finding

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

Facility count procedures were observed. Facility policy and procedure are meeting all aspects of this ICE standard. Interviews with line staff demonstrated that they were familiar with and understood the count procedure.

(b)(6), (b)(7)(c) / February 24, 2011

Reviewer's Signature / Date

PART 2 – 12. POST ORDERS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Every fixed post has a set of Post Orders.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. In SPCs and CDFs, Post Orders are arranged in the required six-part folder format.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does not keep Post Orders in the six-part folder format, but they are kept in a secure area.
3. Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not use the six-part folder format in regards to Post Orders.
4. One individual or department is responsible for keeping all Post Orders current with revisions that take place between reviews.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility Captain is responsible for keeping Post Orders current.
5. Review, updating, and reissuing of Post Orders occurs regularly and at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The facility administrator authorizes all Post Order changes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility Warden signs off on all permanent changes.
7. The facility administrator has signed and dated the last page of every section.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility Warden has signed and dated all Post Orders.
8. A Post Orders master file is available to all staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Procedures keep Post Orders and logbooks secure from detainees at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Copies of the applicable Post Orders are retained at the post only if secure from detainee access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Supervisors ensure that officers understand the Post Orders, regardless of whether the assignment is temporary, permanent, or due to an emergency.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. In SPCs and CDFs, each time an officer receives a different post assignment, he or she is required to read, sign, and date those Post Orders to indicate he or she has read and understands them.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Each time an officer receives a different assignment, he or she does sign off on the new Post Order.
13. Anyone assigned to an armed post qualifies with the post weapons before assuming post duty.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Post Orders for armed posts, and for posts that control access to the institution perimeter, clearly state that: <ul style="list-style-type: none"> ▪ Any staff member who is taken hostage is considered to be under duress, and ▪ Any order issued by such a person, regardless of his or her position of authority, is to be disregarded. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 12. POST ORDERS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
15. Post Orders for armed posts provide instructions for escape attempts.				
16. The Post Orders for housing units track the daily event schedule.				This component is only applicable for SPCs and CDFs. The Post Orders for the housing units do track daily events.
17. Housing unit post officers record all detainee activity in a log. The Post Orders include instructions on maintaining the logbook.				This component is only applicable for SPCs and CDFs. The facility Post Orders does include instructions for maintaining the logbook.

PART 2 – 12. POST ORDERS

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

This auditor reviewed the facility Post Order policy as well as inspecting actual Post Orders out in the facility. Post Orders were found to be up to date and had been signed off on by the facility Warden. This auditor found recent sign off sheets by officers to be accurate and up to date. The facility is meeting this PBNDS standard.

(b)(6), (b)(7)(c) / February 24, 2011

Reviewer's Signature / Date

PART 2 – 13. SEARCHES OF DETAINEES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There are written policy and procedures governing searches of housing areas, work areas and of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 5.007, Control of Contraband, details all aspects of searching detainees and facility areas.
2. Written policy and procedures require staff to employ the least intrusive method of body search practicable, as indicated by the type of contraband and the method of suspected introduction or concealment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Practice and policy indicates that the search method is a progression of seriousness (i.e. start with a pat search, go to a strip search for cause, go to a cavity search using hospital staff if the strip search leads one to believe that contraband exists inside the person).
3. Written policy and procedures require staff to avoid unnecessary force during searches and to preserve the dignity of the detainee being searched, to the extent practicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Written policy and procedures require staff to leave a searched housing area, work area and detainee property in its original order, to the extent practicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees are pat searched and screened by metal detectors routinely to control contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Strip Searches are conducted only when there is reasonable belief or suspicion that contraband may be concealed on the person, or a good opportunity for concealment has occurred, and when properly authorized by a supervisor.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Strip searches are only conducted for cause.
7. Body cavity searches are conducted by designated health personnel only when authorized by the facility administrator (or acting administrator) on the basis of reasonable belief or suspicion that contraband may be concealed in or on the detainee's person.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Body cavity searches, if required, are conducted in a local hospital by medical personnel.
8. "Dry cells" are used for contraband detection only when there is reasonable belief of concealment, with proper authorization, and in accordance with required procedures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Contraband that may be evidence in connection with a violation of a criminal statute is preserved, inventoried, controlled, and stored so as to maintain and document the chain of custody.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Canines are not used in the presence of detainees	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Canines are not used at this facility.

PART 2 – 13. SEARCHES OF DETAINEES

Meets Standard
 Does Not Meet Standard
 N/A
 Repeat Finding

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

This inspector interviewed the intake sergeant; reviewed Policy 5.007, Control of Contraband; and interviewed the visiting officer to determine that the facility meets the standard relating to Searches of Detainees.

(b)(6), (b)(7)c / February 24, 2011
nature / Date

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a Sexual Abuse and Assault Prevention and Intervention Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility Policy 4.004, Sexual Abuse and Assault Prevention and Intervention addresses.
2. For SPCs and CDFs, the written policy and procedure has been approved by the Field Office Director.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Written policies and procedures at this facility are approved by the Warden.
3. Tracking statistics and reports are readily available for review by the inspectors.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. There has been no sexual abuse or assaults since the last inspection.
4. All staff is trained, during orientation and in annual refresher training, in the prevention and intervention areas required by the Detention Standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Orientation and annual training records were reviewed which indicated that staff is trained in issues of prevention and intervention of sexual abuse and sexual assault required by the standard.
5. Detainees are informed about the program in facility orientation and the detainee handbook (or equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are informed about the sexual abuse/assault program in the ICE National Detainee National Handbook.
6. The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	It was observed that Sexual Awareness Notices were posted in all housing units and in the booking area.
7. The Sexual Assault Awareness Information brochure is available for detainees. (Required in SPCs and CDFs.)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Information regarding sexual assault awareness information is found on the notices posted in the housing units.
8. Detainees are screened upon arrival for "high risk" sexual assaultive and sexual victimization potential and housed and counseled accordingly.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Upon review of booking documents, medical history questionnaire, medical screening and medical physical paperwork there was no evidence that detainees are screened upon arrival for "high risk" sexual assault and sexual victimization.
9. All incidents of sexual abuse or assault by a detainee on a detainee have been documented in the past year.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility reports no incidents of detainee on detainee sexual abuse or sexual assault since the last inspection.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. All incidents or allegations of sexual abuse or assault by staff on a detainee have been documented in the past year.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility reports no incidents of staff on detainee sexual abuse or sexual assault since the last inspection.
11. There is prompt and effective intervention when any detainee is sexually abused or assaulted and policy and procedures for required chain-of-command reporting.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is prompt and effective intervention when any detainee is sexually abused or assaulted per Facility Policy 4.004. Per facility policy, the shift supervisor will ensure that the Chief of Security, Warden, and the Health Services Administrator are notified and detainee will be referred to medical promptly for assessment of vulnerability and treatment needs.
12. When there is an alleged sexual assault, staff conduct a thorough investigation, gather and maintain evidence, and make referrals to appropriate law enforcement agencies for possible prosecution.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility Policy 4.004 states that the program coordinator will review all reports of sexually abusive behavior and determine the actions that need to be taken. There is a detailed aspect in this policy that describes the actions to be taken during the investigation.
13. When there is an alleged or proven sexual assault, the required notifications are promptly made.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When there is an alleged or proven sexual assault, the required notifications are outlined on the Sexual Assault Intervention Protocol form (Attachment 1) from Facility Policy 4.004.
14. Victims of sexual abuse or assault are referred to specialized community resources for treatment and gathering of evidence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are procedures in place to provide victims of sexual abuse or assault is referred to specialized community resources for treatment and gathering of evidence as outlined in the Sexual Assault Intervention Protocol (Attachment 1).
15. All records associated with claims of sexual abuse or assault is maintained, and such incidents are specifically logged and tracked by a designated staff coordinator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no claims of sexual abuse or assault at this facility. In discussion with correctional administrative staff, if there were such a claim made, all records would be specifically logged and tracked by a designated staff coordinator.

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION

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

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

There is a comprehensive policy and procedure on sexual abuse and assault prevention and intervention. In the event of a detainee claim of sexual abuse or assault, policies and procedures are in place to appropriately manage the detainee.

The facility reported that there have been no sexual abuse or assaults reported since the last inspection.

There was no evidence of detainee screening upon arrival for sexual abuse or assault by either correctional or medical staff.

Initial and annual staff training is documented in training files. Both correctional and medical staff was able to respond correctly when asked steps to take if a detainee reported a sexual abuse/assault.

(b)(6) (b)(7)c / February 24, 2011

Reviewer's Signature / Date

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Written policy and procedures are in place for special management units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. A detainee is placed in protective custody status in Administrative Segregation only when there is documentation that it is warranted and that no reasonable alternatives are available.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. A detainee will be placed in Disciplinary Segregation only after a finding by a Disciplinary Hearing Panel that the detainee is guilty of a prohibited act or rule violation classified at a "Greatest", "High", or "High-Moderate" level, as defined in the Detention Standard on Disciplinary System.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A detainee is only placed in Disciplinary Segregation if he is viewed as a security threat due to his behavior.
4. (MANDATORY) Health care personnel are immediately informed when a detainee is admitted to an SMU to provide assessment and review as indicated by health care protocols.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy clearly documents medical staff responsibility when a detainee is placed in SMU.
5. There are written policy and procedures to control and secure SMU entrances, contraband, tools, and food carts, in accordance with the Detention Standard on Facility Security and Control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The number of detainees confined to each cell or room does not exceed the capacity for which it was designed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal observation by this auditor during our inspection period found this component being met in regards to number of detainees in each cell.
7. Cells and rooms are well ventilated, adequately lit, appropriately heated and maintained in a sanitary condition at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Permanent housing logs are maintained in SMUs to record pertinent information on detainees upon admission to and release from the unit, and in which supervisory staff and other officials record their visits to the unit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Logs were reviewed in the housing units and in the facility Captain's office.
9. A permanent log is maintained in each SMU to record all activities concerning SMU detainees (meals served, recreation, visitors, etc.). In SPCs and CDFs, the SMU log records the detainee's name, A-number, housing location, date admitted, reasons for admission, tentative release date for detainees in Disciplinary Segregation, the authorizing official, and date released.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring the SMU log to have the detainee's name, A-number, housing location, date admitted, reasons for admission, tentative release date for detainees in Disciplinary Segregation, the authorizing official and the date released recorded is specific to SPCs and CDFs. The facility does keep detailed logs for all detainees in SMU concerning meals, visits, recreation, etc.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>10. In SPCs and CDFs, a separate log is maintained in the SMU that all persons visiting the unit must sign and record:</p> <ul style="list-style-type: none"> ▪ The time and date of the visit, and ▪ Any unusual activity or behavior of an individual detainee, with a follow-up memorandum sent through the facility administrator to the detainee's file. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>This component is only applicable for SPCs and CDFs. The facility does keep detailed logs documenting visits to SMU with times, dates and behavior of detainees.</p>
<p>11. A Special Management Housing Unit Record is maintained on each detainee in an SMU:</p> <ul style="list-style-type: none"> ▪ In SPCs form I-888 (Special Management Housing Unit Record) is prepared immediately upon the detainee's placement in the SMU. ▪ In CDFs and IGSA facilities form I-888 or a comparable form is used. <p>In SPCs and CDFs:</p> <ul style="list-style-type: none"> ▪ By the end of each shift, the special housing unit officer records: <ul style="list-style-type: none"> ○ Whether the detainee ate, showered, exercised, and took any medication, and ○ Any additional information, for example, if the detainee has a medical condition, has exhibited suicidal or assaultive behavior, etc. ▪ When a health care provider visits an SMU detainee, he or she signs that individual's record, and the housing officer initials the record after all medical visits are completed and no later than the end of the shift. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>IGSAs are only required to have a Special Management Housing Unit Record maintained on each detainee in the SMU, and this is to be recorded on an I-888 or comparable form. All the other bulleted items are only applicable to SPCs and CDFs. The facility does maintain SMU records documented on appropriate forms covering all bullet points identified in the component.</p>
<p>12. Upon a detainee's release from the SMU, the releasing officer attaches the entire housing unit record to the Administrative Segregation Order or Disciplinary Segregation Order and forwards it to the Supervisor for inclusion in the detainee's detention file.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>This component is only applicable for SPCs and CDFs. When a detainee is released from SMU, all of his SMU records are forwarded to be placed in the detainee's detention file.</p>
<p>13. There are written policy and procedures concerning the property detainees may retain in each type of segregation.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>14. There are written policy and procedures concerning privileges detainees may have in each type of segregation. (In Administrative Segregation, detainees generally receive the same general privileges as detainees in the general population, as is consistent with available resources and safety and security considerations.)</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The facility has clear policy and procedures regarding privileges for detainees while in SMU.</p>

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
15. Detainees in Administrative Segregation are provided opportunities to spend time outside their cells (over and above the required recreation periods), for such activities as socializing, watching TV, and playing board games and may be assigned to work details (for example, as orderlies in the SMU).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Detainees in SMUs are personally observed at least every 30 minutes in an irregular schedule and more often when warranted for some cases (violent, mentally disordered, bizarre behavior, suicidal).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inspection of SMU log books demonstrate that appropriate security time checks are being made on SMU detainees.
17. The shift supervisor sees each segregated detainee daily, including weekends and holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. The facility administrator (or designee) visits each SMU daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. A health care provider visits every detainee in an SMU at least three times a week, and detainees are provided any medications prescribed for them. In SPCs and CDFs, a nurse, doctor or other appropriate health care professional visits the SMU at least once each workday and questions each detainee to identify any medical problems or requests. Any action taken is documented in a separate logbook, and the medical visit is recorded on the detainee's SMU Housing Record (Form I-888).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IGSAs are only required to have a health care provider visit each detainee in the SMU at least three times per week, and detainees are provided any medications prescribed to them. Facility policy and practice found that health care staff is visiting the facility SMU twice a day, seven days a week.
20. Detainees in SMUs are provided three nutritionally adequate meals per day, ordinarily from the general population menu.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Detainees in SMUs may shave and shower three times weekly and receive other basic services (laundry, hair care, barbering, clothing, bedding, linen) on the same basis as the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and practice allow for showering and shaving, meeting requirements of this component.
22. Only for documented medical or mental health reasons are detainees denied such items as clothing, mattress, bedding, linens, or a pillow. If a detainee is so disturbed that he or she is likely to destroy clothing or bedding or create a disturbance risking harm to self or others, the medical department is notified immediately and a regimen of treatment and control instituted by the medical officer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. Detainees in an SMU may write and receive letters the same as the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in SMU have the same mail privileges as detainees in general population.
24. Detainees in an SMU ordinarily retain visiting privileges.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in SMU have the same visiting privileges as general population detainees.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
25. Adequate documentation was generated for any restricted or disallowed general visits for a detainee in an SMU who violated visiting rules or whose behavior indicated the detainee would be a threat to the security or good order of the visiting room in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. Adequate documentation was generated, for any restricted or disallowed general visitation for a detainee in Administrative Segregation status because the detainee was charged with, or committed, a prohibited act having to do with visiting guidelines or otherwise acted in a way that indicated the detainee would be a threat to the orderly operation or security of the visiting room in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. Under no circumstances is a detainee permitted to participate in general visitation while in restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. In SPCs and CDFs, detainees in protective custody and violent and disruptive detainees are not permitted to use the visitation room during normal visitation hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Detainees in protective custody or who are disruptive are not allowed to use the visiting area during normal visiting hours.
29. In SPCs and CDFs, violent and disruptive detainees are limited to non-contact visits and, in extreme cases, not permitted to visit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Policy allows for disruptive detainees to not be allowed to visit.
30. Ordinarily, detainees in SMUs are not denied legal visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy allows for detainees to have legal visits while in SMU.
31. There are policy and procedures for a situation where special security precautions for legal visitation have to be implemented and for advising legal service providers and assistants prior to their visits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Detainees in SMUs are allowed visits by members of the clergy, upon request; unless it is determined a visit presents a risk to safety, security, or orderly operations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility does allow visits from clergy for detainees in SMU.
33. Detainees in SMUs have access to reading materials, including religious materials. In SPCs and CDFs, the Recreation Specialist offers each detainee soft-bound, non-legal books on a rotating basis, provided no detainee has more than two books (excluding religious material) at any one time.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>34. Detainees in SMUs have access to legal materials, in accordance with the Detention Standard on Law Libraries and Legal Material. Detainees are permitted to retain a reasonable amount of personal legal material in the SMU, provided it does not create a safety, security and/or sanitation hazard.</p> <p>Detainee requests for access to legal material in their personal property are accommodated as soon as possible and always within 24 hours of a detainee's request.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>35. Detainees in Administrative Segregation or Disciplinary Segregation have the same law library access as the general population, unless compelling and documented security concerns require limitations.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy allows for detainees in SMU to have the same access to legal materials as general population detainees.
<p>36. Policy and procedures provide for legal material to be brought to individuals in Disciplinary Segregation under certain circumstances.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>37. Any denial of access to the law library is always:</p> <ul style="list-style-type: none"> ▪ Supported by compelling security concerns, ▪ For the shortest period required for security, and ▪ Fully documented in the SMU housing logbook. ▪ ICE/DRO is notified every time law library access is denied. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility has no records of detainees in SMU being denied access to the law library.
<p>38. Recreation for detainees in the SMU is separate from the general population.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy allows for recreation for detainees in SMU but separate from general population.
<p>39. The facility has policy and procedures to ensure detainees who must be kept apart never participate in activities in the same location at the same time. (For example, recreation for detainees in protective custody is separated from other detainees.)</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility has policy and practice for keeping detainees separated from other detainees who may cause harm to one another.
<p>40. Detainees in the SMU are offered at least one hour of recreation per day, scheduled at a reasonable time, at least five days per week. Where cover is not provided to mitigate inclement weather, detainees are provided weather-appropriate equipment and attire.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of recreation logs documented that detainees are afforded the opportunity for recreation at least five days per week.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>41. The recreation privilege is denied or suspended only if it would unreasonably endanger safety or security.</p> <p>Ordinarily, a detainee is denied recreation privileges only with the facility administrator's written authorization that documents why the detainee poses an unreasonable risk even when recreating alone. For an immediate safety or security situation, the shift supervisor may verbally authorize denial of an instance of recreation.</p> <p>When a detainee in an SMU is deprived of recreation (or any usual authorized items or activity), a report of the action is forwarded to the facility administrator.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>42. The case of a detainee denied recreation privileges is reviewed at least once each week, as part of the reviews required for all detainees in SMU status. The reviewer documents whether the detainee continues to pose a threat to self, others, or facility security and, if so, why.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If detainees are denied recreation privileges, their status must be reviewed at least once per week.
<p>43. Denial of recreation privileges for more than 15 days requires the concurrence of the facility administrator and the health authority. It is expected that such denials shall rarely occur, and only in extreme circumstances.</p> <p>The facility notifies ICE/DRO when a detainee is denied recreation privileges for more than 15 days.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy calls for the Warden's approval for all denials of detainee's recreation.
<p>44. Ordinarily, detainees in Administrative Segregation have telephone access similar to detainees in the general population, in a manner consistent with the special security and safety requirements of an SMU. Detainees in Disciplinary Segregation may be restricted from using telephones to make general calls as part of the disciplinary process; however, ordinarily, they are permitted to make direct and/or free and legal calls as described in the Detention Standard on Telephone Access, except for compelling and documented reasons of safety, security, and good order.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in SMU are allowed the same phone privileges as detainees in general population.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>45. Ordinarily, a written order is completed and approved by a supervisor before a detainee is placed in Administrative Segregation. If exigent circumstances make that impracticable, the order is prepared as soon as possible.</p> <p>A copy of the order is given to the detainee within 24 hours, unless delivery would jeopardize the safety, security, or orderly operation of the facility.</p> <p>If the segregation is for protective custody, the order states whether the detainee requested the segregation and whether the detainee requests a hearing.</p> <p>The order remains on file in the SMU until the detainee is released from the SMU, at which point the releasing officer records the date and time of release on the order and forwards it to the chief of security or supervisor for the detainee's detention file.</p> <p>(An Administrative Segregation Order is not required for a detainee awaiting removal, release, or transfer within 24 hours.)</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>46. There are implemented written procedures for the regular review of all detainees in Administrative Segregation.</p> <p>A supervisor conducts a review within 72 hours of the detainee's placement in Administrative Segregation to determine whether segregation is still warranted. The review includes an interview with the detainee, and a written record is made of the decision and the justification. In SPCs and CDFs, the Administrative Segregation Review Form (I-885) is used.</p> <p>If a detainee is segregated for the detainee's protection, but not at the detainee's request, continued detention requires the authorizing signature of the facility administrator or assistant facility administrator on the I-885.</p> <p>When a detainee has spent seven days in Administrative Segregation, and every week thereafter for the first 60 days and at least every 30 days thereafter, a supervisor conducts a similar review, including an interview with the detainee, and documents the decision and justification.</p> <p>A reviewing authority who concludes a detainee should be removed from Administrative Segregation, submits that recommendation to the facility administrator (or designee) for approval.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>An in-depth interview with facility Lieutenant responsible for the Administrative Segregation Unit demonstrated regular reviews are conducted.</p>

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
47. A copy of the decision and justification for each review is given to the detainee, unless, in exceptional circumstances, this provision would jeopardize security. The detainee is given an opportunity to appeal a review decision to a higher authority within the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48. After seven consecutive days in Administrative Segregation, the detainee may exercise the right to appeal to the facility administrator the conclusions and recommendations of any review conducted. The detainee may use any standard form of written communication (for example, detainee request form), to file the appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Random files were reviewed with documentation to support an appeal process is in place.
49. If a detainee has been in Administrative Segregation for more than 30 days and objects to this status, the facility administrator reviews the case to determine whether that status should continue, taking into account the views of the detainee. A written record is made of the decision and the justification. A similar review is done every 30 days thereafter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
50. When a detainee has been held in Administrative Segregation for more than 30 days, the facility administrator notifies the Field Office Director, who notifies the ICE/DRO Deputy Assistant Director, Detention Management Division.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of documentation and discussion with responsible facility staff demonstrated that ICE is notified.
51. When a detainee is held in Administrative Segregation for more than 60 days, the Field Office Director notifies, in writing, the Deputy Assistant Director, Detention Management Division, for consideration of whether it would be appropriate to transfer the detainee to a facility where he or she may be placed in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
52. A detainee is placed in Disciplinary Segregation only by order of the Institutional Disciplinary Panel (IDP), or equivalent, after a hearing in which the detainee has been found guilty of a prohibited act. The maximum of a 60 day sanction in Disciplinary Segregation for a violation associated with a single incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
53. After the first 30 days in Disciplinary Segregation, the facility administrator sends a written justification to the Field Office Director, who may decide to transfer the detainee to a facility where he or she could be placed in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An interview with facility Lieutenant responsible for SMU demonstrated that written justification is sent to ICE.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>54. Before a detainee is placed in Disciplinary Segregation, a written order is completed and signed by the chair of the IDP (or equivalent). A copy is given to the detainee within 24 hours (unless delivery would jeopardize safety, security, or the orderly operation of the facility).</p> <p>The IDP chairman (or equivalent) prepares the Disciplinary Segregation Order (I-883 or equivalent), detailing the reasons for Disciplinary Segregation and attaching all relevant documentation.</p> <p>When the detainee is released from the SMU, the releasing officer records the date and time of release on the Disciplinary Segregation Order, and forwards the completed order to the chief of security or supervisor for insertion into the detainee's detention file.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>55. The facility has implemented written procedures for the regular review of all Disciplinary Segregation cases.</p> <p>A supervisor interviews and reviews the status of each detainee in Disciplinary Segregation every seven days and documents his or her findings on a Disciplinary Segregation Review Form (I-887).</p> <p>At each formal review, the detainee is to be given a written copy of the reviewing officer's decision and the basis for this finding, unless institutional security would be compromised.</p> <p>The reviewer may recommend the detainee's early release upon finding that Disciplinary Segregation is no longer necessary to regulate the detainee's behavior. Early release and return to the general population requires approval of the facility administrator.</p> <p>All review documents are placed in the detainee's detention file.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>A detailed discussion with the facility Lieutenant and review of documentation demonstrated to this auditor that the facility has procedures in place for a regular review of Disciplinary Segregation cases.</p>

PART 2 – 15. SPECIAL MANAGEMENT UNITS

Meets Standard
 Does Not Meet Standard
 N/A
 Repeat Finding

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

A review of random documentation regarding Administration Segregation and Disciplinary Segregation demonstrated that the facility is meeting this standard. This auditor physically inspected the SMU and conducted detailed interviews with the Lieutenant in charge as well as assigned staff. Documentation was tracked from the time a detainee entered SMU until they were released from the unit.

(b)(6), (b)(7)c / February 24, 2011
Signature / Date

PART 2 – 16. STAFF-DETAINEE COMMUNICATION

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The ICE/DRO Field Office Director ensures that weekly announced and unannounced visits occur.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A Deportation Officer is located within the facility approximately 75 percent of the time. Personnel from the Chicago Field Office are frequently at the facility and two ICE staff members visit the facility weekly to respond to any ICE issues.
2. Detention Staff and Deportation Staff conduct scheduled weekly visits with detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Scheduled visits are posted in ICE/DRO detainee housing areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Visiting ICE staff observes and note current climate and conditions of confinement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visiting ICE personnel log their activities at the facility, to include climate conditions.
5. ICE/DRO Detainee Request Forms are available for use by ICE/DRO detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE request forms were observed in the housing units.
6. The facility treats detainee correspondence to ICE/DRO staff as Special Correspondence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. A secure box is located in an accessible location for detainee's to place their Detainee Request Forms.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A secure box is not available in the cell pods; so any ICE requests are given to the officer, who pass it on to management for logging purposes and then passed to ICE staff for further disposition.
8. Only ICE staff are able to retrieve the contents of the secure box containing Detainee Request Forms,	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ICE staff receives all requests from facility staff.
9. ICE/DRO staff responds to a detainee request from a facility within 72 hours and document the response in a log.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The response log was reviewed and all issues concerning time frames were documented. The ICE supervisor from the Chicago Field Office who was at the facility to verify the request forms were handled appropriately indicated that approximately 97% of the requests were answered within appropriate time frames.
10. ICE/DRO detainees are notified in writing upon admission to the facility of their right to correspond with ICE/DRO staff regarding their case or conditions of confinement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Information is given in the handbooks and on the orientation video addressing the right to correspond with ICE.

PART 2 – 16. STAFF-DETAINEE COMMUNICATION

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. OIG Hotline Informational Posters are mounted in all appropriate common areas (recreation, dining, etc.) and, in SPCs and CDFs, in all housing areas.				
12. Daily telephone serviceability checks are documented in the housing unit logbook.				

PART 2 – 16. STAFF-DETAINEE COMMUNICATION

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

The Deportation Officer assigned to the facility, the Deportation Officer and the Deportation Supervisor from the Chicago Field were interviewed; and cell pod postings were reviewed, which finds the facility meets the standard regarding Staff -Detainee Communication.

(b)(6), (b)(7)(C) / February 24, 2011
nature / Date

PART 2-17. TOOL CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. (MANDATORY) There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has designated the facility plant manager as the tool control officer.
2. If the warehouse is located outside the secure perimeter, the warehouse receives all tool deliveries. If the warehouse is located inside the secure perimeter the facility administrator shall develop site-specific procedures, for example; storing tools at the rear sally port until picked up and receipted by the tool control officer. The tool control officer immediately places certain tools (band saw blades, files and all restricted tools) in secure storage.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. All tool deliveries are received outside the facility secure perimeter.
3. (MANDATORY) The use of tools, keys, medical equipment, and culinary equipment is controlled.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Direct observation by auditors found this component being met. Tools, keys, medical equipment and culinary equipment are being controlled via supervision while in use.
4. A metal or plastic chit is taken in exchange for all tools issued, and when a tool is issued from a shadow board the receipt chit shall be visible on the shadow board.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does use the metal chit system for checking tools out.
5. Tool inventories are required for: <ul style="list-style-type: none"> • Facility Maintenance Department • Medical Department • Food Service Department • Electronics Shop • Recreation Department • Armory 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inventories were accurate in four of the six bulleted areas listed. Two areas (recreation and electronics) do not have tools assigned.
6. Tool Inventories are conspicuously posted on all tool boards, tool boxes and tool kits.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Random checks by audit team found tool inventories to be accurate and in place.
7. The facility has a policy for the regular inventory of all tools. <ul style="list-style-type: none"> • The policy sets minimum time lines for physical inventory and all necessary documentation. • ICE facilities use AMIS bar code labels when required. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2-17. TOOL CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. The facility has a tool classification system. Tools are classified according to: <ul style="list-style-type: none"> • Restricted (dangerous/hazardous) • Non Restricted (non-hazardous). 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted portions of this component requiring tools be specifically classified as Restricted and Non Restricted is specific to SPCs and CDFs. The facility does have a classification system in place for hazardous and non-hazardous tools.
9. Department heads are responsible for implementing proper tool control procedures as described in the standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Facility policy does make department heads responsible for the implementation of tool control in their respective areas.
10. There are policies and procedures in place to ensure that all tools are properly marked and readily identifiable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. The facility has an approved tool storage system. <ul style="list-style-type: none"> • The system ensures that all stored tools are accountable. • Tools are stored on shadow boards in which the shadows resemble the tool. • Shadow boards have a white background. • Restricted tools are shadowed in red. • Non-restricted tools are shadowed in black. • Commonly used tools (tools that can be mounted) are stored in such a way that missing tools are readily noticed. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IGSAs are only required to have an approved tool storage system that ensures all stored tools are accountable and that commonly used tools (tools that can be mounted) are stored in a way that missing tools can easily be noticed. The facility does have an approved tool storage system in place. Shadow boards of respective colors are used for hazardous and non-hazardous tools. The system ensures accountability and a provision for the storage of commonly used tools.
12. Tools removed from service have their shadows removed from shadow boards.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility policy addresses the removal of tools from shadow boards.
13. Tools not adaptable to a shadow board are stored in a locked drawer or cabinet.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Facility policy allows for tools that cannot be shadowed.
14. Sterile packs are stored under lock and key.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Facility policy addresses the handling of sterile packs which are kept secured.

PART 2-17. TOOL CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
15. Each facility has procedures for the issuance of tools to staff and detainees.				This process for the issuance of tools to staff and detainees is outlined in detail in the facility policy.
16. There are policies and procedures to address the issue of lost tools. The policy and procedures include: <ul style="list-style-type: none"> • Verbal and written notification. • Procedures for detainee access. • Necessary documentation/review for all incidents of lost tools. 				
17. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.				
18. All private or contract repairs and maintenance workers under contract with ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility. The inventory is reviewed and verified prior to the contractor entering/departing the facility.				Facility policy and procedure addresses this component in detail. All tools are inventoried entering and leaving the facility.
19. Hoses longer than three feet in length are classified as a restricted tool.				This component is only applicable for SPCs and CDFs. The facility does classify hose over three feet in length as a restricted tool.
20. Scissors used for in-processing detainees are tethered to the furniture (e.g. table, counter, etc.) where they are used.				This component is only applicable for SPCs and CDFs. The only pair of scissors in the facility are in a shadowed secure drawer in the healthcare unit.

PART 2-17. TOOL CONTROL

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

Tool inventories and shadow boards checked throughout the facility found inventories and the shadow boards up-to-date and accurate. Tool control practice by staff throughout the facility is consistent with the facility policy and procedures. The facility is meeting this standard.

Reviewer's Signature / Date
 [Redacted Signature] / February 24, 2011

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. (MANDATORY) The facility has a Use of Force Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a comprehensive policy covering the Use of Force and Application of Restraints.
2. Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses.
3. When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, policy requires that staff must try to resolve the situation without resorting to force.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses.
4. Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The facility subscribes to the prescribed Confrontation Avoidance Procedures. • Ranking detention official, health professional, and others confer before every calculated use of force.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy on Use of Force and Application of Restraints addresses this issue of confrontation avoidance.
6. 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. • Under staff supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Only staff that has been properly trained is used in calculated use-of-force situations.
7. Staff members are trained in the performance of the Use-of-Force Team Technique.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. All use-of-force incidents are documented and reviewed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedure were reviewed. A review of documents for incidents was reviewed, and proper documentation for use of force situations was found on file.
9. All use of force incidents are properly documented and forwarded for review use of force documentation at a minimum, shall include the medical examination through the conclusion of the incident. All calculated uses of force incidents must be audio visually recorded in its entirety from the beginning of the incident to its conclusion. Any breaks in recording, e.g., dead batteries, tape exhausted, are fully explained on the video.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

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

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
17. When the Facility Administrator authorizes use of non-lethal weapons: <ul style="list-style-type: none"> • Medical staff 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. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Intermediate Force Weapons, when not in use are stored in areas where access is limited to authorized personnel and to which detainees have no access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. If Intermediate Force Weapons are stored in the Special Management Unit (SMU), they are stored and maintained the same as Class R tools.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> • Medical personnel are consulted 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no female detainees housed at this facility.
21. Protective gear is worn when restraining detainees with open cuts or wounds.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Staff documents every use of force, including what type of restraints was used during the incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy and use of force forms were reviewed. The facility is meeting component in regards to the proper documentation when restraints are used.
23. It is standard practice to review any use of force and the non-routine application of restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedure require all use of force incidents to be investigated.
24. All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. <ul style="list-style-type: none"> • Specialized training is given to officers ensuring they are certified in all devices approved for use. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. All staff authorized to use OC spray receive training not only in its use, but also in the decontamination of individuals exposed to it. This training must be documented in the staff training record.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. The use of canines is restricted to contraband detection purposes only.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility Warden reports that the facility does not use canines.
27. The officers are thoroughly trained in the use of soft and hard restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. <u>In SPCs</u> , the Use of Force form is used. In other facilities (IGSAs / CDFs) this form or its equivalent is used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement to use the "Use of Force Form" is specific to SPCs. The facility does use a local use of force form.

PART 2 – 18. USE OF FORCE AND RESTRAINTS

Meets Standard Does Not Meet Standard N/A Repeat Finding

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

This facility has a comprehensive policy covering the Use of Force and Restraints. A review of reports and the facility practices found this facility to be meeting this ICE standard. The facility reports that they do not use tasers and that OC or CS gas may be used if necessary. The facility reports that it does not currently use any canines. It is self-reported that in a post escape report in 2010 an Illinois Department of Corrections canine was used at the facility for search purposes. At this time there was a minor altercation between the canine and an ICE detainee which did not result in any serious injury.

(b)(6) (b)(7)(c) / February 24, 2011

Reviewer's Signature / Date

Performance-Based National Detention Standards

Section III ORDER

19 Disciplinary System

PART 3 – 19. DISCIPLINARY SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a comprehensive disciplinary system in place.
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Written rules prohibit staff from imposing or permitting the following sanctions: <ul style="list-style-type: none"> • corporal punishment • deviations from normal food service • clothing deprivation • bedding deprivation • denial of personal hygiene items • loss of correspondence privileges • deprivation of legal access and legal materials • deprivation of physical exercise 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees receive this information via an intake video and thru the detainee handbook which is provided in English and Spanish.
5. The following items are conspicuously posted in Spanish and English or other dominate languages used in the facility: <ul style="list-style-type: none"> • Rights and Responsibilities • Prohibited Acts • Disciplinary Severity Scale • Sanctions 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All bulleted items identified in this component are posted in the facility housing units in both English and Spanish.
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedure clearly addresses this component in regards to informal resolutions for minor rule infractions.
7. Incident Reports and Notice of Charges are promptly forwarded to the designated supervisor.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility policy ensures that all reports are promptly forwarded to the designated supervisor.
8. Incident Reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before investigations end.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 3 – 19. DISCIPLINARY SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. An intermediate disciplinary process is used to adjudicate minor infractions.				
10. A disciplinary panel (or equivalent in IGSA's) adjudicates infractions. The panel: <ul style="list-style-type: none"> • Conducts hearings on all charges and allegations referred by the UDC • Considers written reports, statements, physical evidence, and oral testimony • Hears pleadings by detainee and staff representative • Bases its findings on the preponderance of evidence • Imposes only authorized sanctions 				The facility has a Lieutenant assigned to hear all disciplinary cases.
11. A staff representative is available if requested for a detainee facing a disciplinary hearing				
12. The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.				
13. The duration of punishment set by the Facility Administrator, as recommended by the disciplinary panel does not exceed established sanctions. The maximum time in disciplinary segregation does not exceed 60 days for a single offense.				
14. Written procedures govern the handling of confidential-source information. Procedures include criteria for recognizing "substantial evidence".				Facility policy is very clear on how confidential source information is handled.
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.				

PART 3 – 19. DISCIPLINARY SYSTEM

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

A detailed review of the disciplinary process and sanctions found the facility has a comprehensive disciplinary process in place which meets this standard.

February 24, 2011

Reviewer's Signature / Date

Performance-Based National Detention Standards

Section IV CARE

20 Food Service

21 Hunger Strikes

22 Medical Care

23 Personal Hygiene

24 Suicide Prevention and Intervention

25 Terminal Illness, Advance Directives, and Death

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The food service program is under the direct supervision of a professionally trained and certified Food Service Administrator (FSA). The Responsibilities of cooks and cook foremen are in writing. The FSA determines the responsibilities of the Food Service Staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The Cook Foreman is on duty on days when the FSA is off duty and vice versa.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There is no Assistant Food Service Administrator (Cook Foreman) position at this facility. The Food Service Administrator is the only managerial staff in the food service department.
3. The FSA provides food service employees with training that specifically addresses detainee-related issues. In ICE Facilities this includes a review of the "Food Service" standard	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. (MANDATORY) Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device. Knives and keys are inventoried and stored in accordance with the Detention Standard on Tool Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Knives are not utilized in the food service department. Processing blades and other utensils that may present security concerns are properly maintained. Tools are inventoried, marked, shadowed and checked out accordingly.
5. All knives not in a secure cutting room are physically secured to the workstation and staff directly supervises detainees using knives at these workstations. Staff monitor the condition of knives and dining utensils	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring staff to monitor the condition of knives and dining utensils is specific to SPCs and CDFs. The practice at this facility is that staff monitors the condition of all utensils. Knives are not utilized in the food service department.
6. Special procedures (when necessary) govern the handling of food items that pose a security threat.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Operating procedures include daily searches (shakedowns) of detainee work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The FSA monitors staff implementation of the facility population count procedures. These procedures are in writing. Staff is trained in count procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The 12:00 p.m. count was observed on February 23, 2011. Food service staff, in conjunction with correctional staff, properly performed an out count in the food service department.

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. (MANDATORY) There is adequate health protection for all detainees and staff in the facility, and for all persons working in food service. Detainees and other persons working in food service are monitored each day for health and cleanliness by the food service supervisor or designee. Detainee clothing and grooming comply with the "Food Service" standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees and staff receive health screenings and are cleared to work food service prior to their assignment to the department. Detainees receive personal hygiene training and staff monitors their workers daily for outward signs of open sores and other visible health issues. Detainees working in the food service department are clothed in white uniforms and their grooming complies with the food service standard.
10. The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. During orientation and training session(s), the Cook Supervisor (CS) explains and demonstrates: <ul style="list-style-type: none"> • Safe work practices and methods. • Safety features of individual products/ pieces of equipment. • Training covers the safe handling of hazardous material[s] the detainee are likely to encounter in their work. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The Cook Foreman documents all training in individual detainee detention files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Detainees at SPCs and CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSA's are subject to local and State rules and regulations regarding detainee pay.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring detainees be paid in accordance with the "Voluntary Work Program" standard is specific to SPCs and CDFs. The practice at this facility is that detainee volunteers are paid in accordance with the Voluntary Work Program.
15. Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. For cafeteria-style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no cafeteria style operations at this facility. All feeding is accomplished through a satellite feeding program.

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
17. The facility has a standard 35-day menu cycle. IGSA's use a 35 day or similar system for rotating meals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring a 35-day menu cycle is specific to SPCs and CDFs. The practice at this facility is that they utilize a 35-day cycle menu for meal rotation.
18. (MANDATORY) A registered dietitian shall conduct a complete nutritional analysis that meets U.S. Recommended Daily Allowances (RDA), at least annually, of every master-cycle menu planned by the FSA. The dietitian must certify menus before they are incorporated into the food service program. If necessary, the FSA shall modify the menu in light of the nutritional analysis to ensure nutritional adequacy. The menu will need to be revised and re-certified by the registered dietitian in that event.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The food service menus have been analyzed using a computerized nutrition program. The menus are certified by the corporate dietitian before being incorporated into the food service program.
19. The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The Cook Foreman has the authority to change menu items if necessary. <ul style="list-style-type: none"> • If yes, documenting each substitution, along with its justification, with copy to the FSA 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is no Cook Foreman position at this facility; however, the Cook Supervisors have the authority to change the menu if necessary. All substitutions along with their justification are documented on a substitution log.
21. All staff and volunteers know and adhere to written "food preparation" procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. A Common Fare menu available to detainees, at no charge, whose dietary requirements cannot be met on the main. <ul style="list-style-type: none"> • Changes to the planned Common Fare menu can be made at the facility level. • Hot entrees are offered three times a week. • The Common Fare menus satisfy nutritional recommended daily allowances (RDAs). • Staff routinely provides hot water for instant beverages and foods. <ul style="list-style-type: none"> ○ Common Fare meals are served with: ○ Disposable plates and utensils. ○ Reusable plates and utensils. • Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the Common Fare diet items. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A Common Fare Program is available that meets all the bulleted requirements of this component.

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees requiring a religious diet are referred to the Food Service Administrator.
24. A supervisor at the command level must approve a detainee's removal from the Common Fare Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Captain is the staff member authorized to approve a detainee's removal from the Common Fare Program.
25. The Facility Administrator, in conjunction with the chaplain and/or local religious leaders provides the FSA a schedule of the ceremonial meals for the following calendar year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Food Service Administrator has a schedule of the ceremonial meals for the following year.
26. The Common Fare Program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. <ul style="list-style-type: none"> • Muslims fasting during Ramadan receive their meals after sundown. • Jews who observe Passover but do not participate in the Common Fare Program receive the same Kosher-for- Passover meals as those who do participate. • Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Common Fare Program is available to accommodate detainees abstaining from particular foods or fasting for religious purposes. The facility meets all of the bulleted requirements of this component.
27. The food service program addresses medical diets.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. Satellite-feeding programs follow guidelines for proper sanitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. Hot and cold foods are maintained at the prescribed, "safe" temperature(s) as served. See Detention Standard on Food Service for guidance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food temperatures observed during the feeding of the lunch meal on February 22, 2011, were all within the prescribed safe temperature zones. Food is plated, delivered and consumed well within the two hour time frame.
30. All meals provided in nutritionally adequate portions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	It was observed that the plated meal portions were consistent with the serving sizes listed on the nutritional analysis.
31. Food is not used to punish or reward detainees based upon behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. The food service staff instruct detainee volunteers on: <ul style="list-style-type: none"> • Personal cleanliness and hygiene; • Sanitary techniques for preparing, storing, and serving food, and; • The sanitary operation, care, and maintenance of equipment. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The food service orientation training includes instruction on personal cleanliness and hygiene, food handling techniques and the sanitary operation, care and maintenance of equipment.

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
33. Everyone working in the food service department complies with food safety and sanitation requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34. (MANDATORY) The facility implements written procedures for the administrative, medical, and/or dietary personnel conducting the weekly inspections of all food service areas, including dining, storage, equipment, and food-preparation areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A weekly sanitation inspection is conducted by dietary staff. The inspection includes all areas of the food service department.
35. Reports of discrepancies are forwarded to the Facility Administrator or designated department head and corrective action is scheduled and completed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36. (MANDATORY) Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal, in accordance with the Detention Standard on Food Service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The temperatures of the dish machine are observed and recorded during every meal.
37. (MANDATORY) Staff documents the results of every refrigerator/ freezer temperature check, in accordance with the Detention Standard on Food Service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The freezer and cooler temperatures are observed and documented twice daily.
38. The cleaning schedule for each food service area is conspicuously posted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39. Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40. Storage areas are locked when not in use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. Food service personnel conduct shakedowns along with detention staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42. <u>In SPCs only:</u> The ICE supervisor on duty ensures that ICE officers participate in dining room supervision.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs. There is no dining room at this facility.
43. Menus are certified by a registered dietitian prior to being incorporated into the Food Service Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. <u>In SPCs only:</u> the FSA prepares quarterly cost estimates for the Common Fare Program. This quarterly estimate is factored into the quarterly budget.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs. The food service budget is prepared annually. Cost estimates for the Common Fare Program are not included in the budget.
45. When required, only food service staff prepare the sack lunches for detainee transportation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Air curtains or comparable devices are used on outside doors where food is prepared, stored, or served to protect against insects and other rodents.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No air curtains are required as none of the doors in the food service food preparation or serving areas open to the outside.
47. Staff complies with the ICE requirements for "food receipt and storage.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
48. Stock inventory levels are monitored and adjusted to correct overage and shortage problems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49. Staff complies with all ICE Housekeeping, Storeroom/Refrigerator requirements. Identify and explain any shortcomings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
50. Dining room facilities and operating procedures will provide sufficient space and time for detainees to eat meals in a relatively relaxed, unregimented atmosphere.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There is no dining room at this facility. All meals are served via a satellite feeding system which delivers meals to the housing unit for consumption.
51. (MANDATORY) An independent, external source shall conduct annual inspections to ensure that the food service facilities and equipment meet governmental health and safety codes. Corrective action is taken on deficiencies, if any.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Southern Seven Health Department conducts three or four inspections annually. The last inspection was conducted on October 20, 2010. Corrective action is taken when necessary.
52. Personnel inspecting the food service department shall note needed corrective action(s), if any, in a written report to the Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Southern Seven Health Department report is routed through the Warden for review.
53. Only those toxic and caustic materials required for sanitary maintenance of the facility, equipment, and utensils shall be used in the food service department. Material Safety Data Sheets (MSDSs) will be maintained on all flammable, toxic, and caustic substances used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
54. (MANDATORY) The FSA is responsible for pest control in the food service department, including contracting the services of an outside exterminator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Monthly pest control within the food service department is provided through a contract with Piedmont Pest Control.

FOOD SERVICE

Meets Standard
 Does Not Meet Standard
 N/A
 Repeat Finding

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

The food service department consists of a Food Service Administrator and three Cook Supervisors. The detainee workforce is usually comprised of seven detainee workers per shift. ICE detainees are assigned to work in the kitchen and receive all the required training necessary for the assignment. All staff and detainees assigned to the kitchen have received pre-employment health screenings.

The Food Service Department is inspected annually by the Southern Seven Health Department and the facility dietary personnel conduct weekly inspections of all food service areas. Sanitation within the department was good during the review and the food appears to be well prepared. Meals are prepared in the kitchen and transported to the housing units for consumption by the detainee population. Food temperatures were found to be within the acceptable food temperature ranges and delivered and consumed well within the two hour time frame. All menus utilized in the food service department have been nutritionally analyzed by a computerized nutrition programmed and certified by a registered dietician prior to implementation.

Tool control within the department meets the requirements of the PBNDS on Tool Control. Detainee training within the department was extensive. Staff does an excellent job of ensuring that the detainees are properly trained in all areas required by the National Detention Standard on Food Service. Chemical control within the department was very good. Chemicals were properly secured and wherever possible, chemicals are distributed through metered dispensing equipment resulting in detainees handling only the diluted, non-hazardous cleaning solutions.

Due to the satellite feeding system, there are no dining room operations at the facility. There is also only one management position within the food service department which results in no food service management presence on the weekends. No air curtains are required within food service, as none of the doors in the food service department open to the outside.

(b)(6), (b)(7)(c) / February 24, 2011
Signature / Date

PART 4 – 21. HUNGER STRIKES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. When a detainee has refused food or observed to have not eaten for 72 hours, it is standard practice for staff to refer him or her to the medical department.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Institution familiarization and annual refresher training discuss hunger strikes of detainees. Although there have been no detainees who have started a hunger strike, it is standard practice for staff to refer the detainee to the medical department upon notification or recognition of a hunger strike. This practice was described in interviews with both medical and correctional staff.
2. Facility immediately reports via the chain of command a hunger strike to ICE/DRO.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical supervisor stated that ICE and the facility administrator would be notified immediately if a detainee goes on a hunger strike.
3. The facility has established procedures to ensure staff respond immediately to a hunger strike.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The procedures established include moving the hunger strike detainee to the medical unit for housing, evaluation and treatment. At this time, the nursing supervisor, facility administrator, and ICE would be contacted and a hunger strike flow sheet would be initiated.
4. Policy and procedure require that staff isolate a hunger-striking detainee from other detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	It is practice that any hunger striking detainee is housed in the medical unit in a single occupancy cell.
5. Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	It is the practice that any hunger strike detainee is housed in the medical unit in a single occupancy cell.
6. Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff records a variety of information on the Facility "Hunger Strike Flow Sheet" that does include an area for detainee weight and vital signs on a daily basis.
7. The facility medical authority obtains a hunger strikers consent before medical treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written consents for medical treatment are obtained from the detainee upon arrival to the facility.

PART 4 – 21. HUNGER STRIKES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment, or two staff/provider signatures indicating detainee refusal to sign form.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees who refuse medical treatment are required to sign a "Refusal of Treatment" form. Common practice is that a medical staff member will counsel the detainee regarding the issues of refusing medical care and document that counseling event in the medical record progress notes.
9. Unless otherwise directed by the medical authority, staff delivers three meals per day to the detainee's room, regardless of the detainee's response to a verbally offered meal and document those meal offers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility "Hunger Strike Flow Sheet" records the three meals provided to the detainee, as well as the intake of each meal.
10. Staff maintains the hunger strikers supply of drinking water/other beverages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility flow sheet has an area for documentation of providing water every two hours while awake.
11. During a hunger strike, staff removes all food items from the hunger strikers living area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	It is common practice as revealed in interviews of medical and correctional staff that before a detainee is placed in a medical cell for the purpose of a hunger strike, that staff remove all food items and check the medical cell prior to housing the detainee in that cell.
12. Staff is directed to record the hunger strikers fluid intake and food consumption on the Hunger Strike Monitoring Form I-839 or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Although there have been no ICE detainees on a hunger strike, it was observed that the health service supervisor does have the I-839 form available.
13. The medical staff has written procedures for treating hunger strikers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are written procedures for the medical treatment of hunger strikers. These procedures include: notification of the medical department, medical supervisor, facility administrator, and ICE representative; the housing of the detainee in a single occupancy cell in the medical unit; the initiation of hunger strike flow sheet; and the referral to both the nurse practitioner and the Delta Center (for mental health evaluation).
14. Staff documents all treatment attempts in the medical record, including attempts to persuade the hunger striker by counseling him or her of the medical risks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All interactions, interventions, and counseling to the hunger striking inmate are recorded in the medical progress notes.

PART 4 – 21. HUNGER STRIKES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
15. All staff receives orientation and annual training on recognizing the signs of a hunger striker and on the procedures for referral for medical assessment. Medical staff receives training in hunger-strike evaluation and treatment and remain up-to-date on these techniques.				Orientation and annual training on hunger strikes is completed by the training officer. Further education is provided by the medical supervisor during the orientation phase for medical staff to include evaluation, treatment, and counseling of hunger strike detainees.

PART 4 – 21. HUNGER STRIKES

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

There have been no detainees on a hunger strike in the last 12 months.

All staff receives training regarding hunger striking detainees during orientation and on an annual basis.

The medical department has appropriate procedures in place to implement in the event of a hunger striking detainee.

In review of policy and procedure, and review of forms to be used, this facility has the procedures in place to deal with a detainee who goes on a hunger strike.

(b)(6), (b)(7)(c) / February 24, 2011

Reviewer's Signature / Date

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility operates a health care facility in compliance with state and local laws and guidelines.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 4.003, Facility Medical Services, states that medical care will be in compliance with Federal, State, and Local laws, national standards, policies and procedures, and accepted medical practice. Nursing staff licenses were checked and all are current and on file.
2. The facility's in-processing procedures of arriving detainees include medical screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees receive a medical screening upon arrival. This was observed in detainee medical records reviewed.
3. (MANDATORY) The essential positions needed to perform the health services mission and provide the required scope of services are described in a staffing plan that is reviewed at least annually by the health authority.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 3.001, Personnel Staffing, states that regular evaluation of staffing patterns will be conducted. Discussion with the nurse in charge of the medical department stated that the issue of staffing is discussed in both weekly and quarterly meetings. The medical unit currently has a day, evening, and night shift. The staffing on the day shift is one registered nurse, one licensed practical nurse and one medical technician. The evening shift consists of one registered nurse and two licensed practical nurses, and the night shift has one licensed practical nurse. There is a nurse practitioner who works four to five hours per week on Thursday. Both the registered nurse and nurse practitioner are on-call 24 hours a day, 7 days a week.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>4. (MANDATORY) Newly admitted detainees will be informed, orally and in writing (in a language they can understand), about how to access health services.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Newly admitted detainees are informed both orally and in writing about how to access health services. In the booking area it was observed that detainee handbooks were available in both English and Spanish and access to health services was outlined. It was also observed in medical records that the medical staff document that access to medical services has been provided both orally and in writing.</p>
<p>5. Detainees will have access to and receive specified 24-hour emergency medical, dental, and mental health services.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Detainees have access to and receive 24-hour emergency medical, dental and mental health services. The detainee handbook outlines how to access medical care on a routine and emergency basis. The medical supervisor registered nurse and the nurse practitioner are both on call 24 hours a day, 7 days a week. Union County Hospital is located approximately 15 miles away from the facility. Emergency services can be initiated by activating the 911 system.</p>
<p>6. New direct care staff will receive tuberculosis tests prior to their job assignment and periodically thereafter and will be offered the hepatitis B vaccine series.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>New direct care staff does receive tuberculosis tests prior to their job assignments as observed in a review of human resource department employee files. Employees at this facility are not offered the Hepatitis B vaccine prior to their job assignment. There was no documentation in employee files regarding Hepatitis B vaccine.</p>
<p>7. Health care services will be provided by trained and qualified personnel, whose duties are governed by job descriptions and who are properly licensed, certified, credentialed, and/or registered in compliance with applicable state and federal requirements.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Orientation training to new employees is conducted by the training officer at the facility. Orientation training to the medical unit is completed by the medical supervisor who is a registered nurse. Specific job descriptions and policy and procedures of the facility guide the training of new medical staff.</p>

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. The facility provides each detainee, upon admittance, a copy of the detainee handbook or equivalent, in which procedures for access to health care services are explained (in a language they can understand).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Based on observed practice, the detainee receives a copy of the detainee handbook upon admittance. Both English and Spanish versions of the facility detainee handbook and the ICE National Detainee handbook were observed in the booking area.
9. In SPCs and CDFs, medical personnel credentialing and verification complies with the standards established by the NCCHC and Joint Commission.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Credentialing of all licensed medical personnel is conducted prior to employment and records are maintained in the Human Resource Department of the facility.
10. Within 12 hours of arrival, all newly admitted detainees receive initial medical, dental and mental health screening by a health care provider or a detention officer specially trained to perform this function. <ul style="list-style-type: none">When screening is performed by a detention officer, the facility maintains documentation of the officer's special training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In reviewing medical record documentation it was found that all new arrivals to the facility received an initial medical, dental, and mental health screening by a member of the medical department,
11. (MANDATORY) If language difficulties prevent the health care provider/officer from sufficiently communicating with the detainee for purposes of completing the medical screening, the officer obtains translation assistance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is access to a translation service called "Language Line" that is available 24 hours a day, 7 days per week. In discussion with a registered nurse, this service has been accessed and used.
12. The facility has sufficient space and equipment to afford each detainee privacy when receiving health care.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has sufficient space and equipment to afford each detainee privacy when receiving health care. There are two examination rooms within the medical unit. The medical unit has an automated external defibrillator.
13. The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	It was observed that access to the medical department is restricted, with doors being controlled by control center or by limited access keys issued to medical staff.
14. The medical facility entrance includes a holding/waiting room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	It was observed that the medical unit does have a holding/waiting room.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
15. The medical facility's holding/waiting room under the direct supervision of custodial staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Whenever there are detainees in the medical unit, they are under the direct supervision of correctional staff as well as on camera that is monitored in Central Control.
16. Detainees in the holding/waiting room have access to a toilet and a drinking fountain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The detainees in the holding/waiting room in the medical unit do have access to a toilet and water, as observed on tour.
17. Medical records are kept apart from other files. They are: <ul style="list-style-type: none"> • Secured in a locked area within the medical unit. • With physical access restricted to authorized medical staff. • Procedurally, no copies made and placed in detainee files. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical records were observed to be in a locked room within the medical department. The only access to that room is by keys possessed by members of the medical staff. There are no medical records copied and placed in detainee files.
18. (MANDATORY) A signed and dated consent form is obtained from a detainee before medical treatment is administered.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A signed, dated consent form is obtained from a detainee before medical treatment is administered. In medical records that were reviewed, all records did have a signed and dated consent form.
19. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A form to authorize the release of confidential medical records to outside sources is available.
20. The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In discussion with the nursing supervisor, ICE notifies the medical department prior to release of a detainee. At that time a transfer form is completed.
21. A detainee's medical records will be transferred as appropriate. All detainees will be transferred with a copy of their transfer summary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees who are going to be transferred will have a transfer summary sent. This transfer summary will include current treatments, medical history, medication, pending specialist offsite visits, and copies of lab/X-ray studies.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
22. Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL."	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In discussion with the medical supervisor, all medical records and transfer summaries are sealed in an envelope containing the detainee's name and A-number and marked "Medical Confidential." Current medication, labeled with the detainees name will also be sent with the detainee.
23. Medical screening includes a Tuberculosis (TB) test.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of policy, practice, and detainee medical records, show all detainees receive a Tuberculosis test during the medical screening. Those detainees who had a new positive Tuberculosis screening test, or those with a history of a positive Tuberculosis screening test were given a Chest X-ray.
24. All detainees receive a mental-health screening upon arrival. It is conducted: <ul style="list-style-type: none"> • By a health care provider or specially trained officer; • Before a detainee's assignment to a housing unit. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of policy, practice, and detainee medical records, show all detainees receive a mental health screening upon arrival by a health care provider and or a correctional officer who has received training in mental health screening.
25. The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility health care provider promptly reviews any I-794 (or equivalent) forms needing medical attention. Chart reviews revealed that transfer sheets from other facilities were in the detainee's medical record, and that information had been reviewed and acknowledged.
26. (MANDATORY) Each facility's health care provider conducts a health appraisal and physical examination on each detainee within 14 days of arrival. If there is documentation of one within the previous 90 days, the facility health care provider may determine that a new appraisal is not required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of policy, practice, and detainee medical records, show health appraisals and physical examinations are conducted on each detainee within 14 days of arrival. These are completed by the registered nurse. Documentation of compliance was noted in review of medical records reviewed with an average of three days between arrival and physical examination taking place. All charts are reviewed by the nurse practitioner.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
27. Detainees in the Special Management Unit have access to the same level of health care as detainees in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Discussion with the health service supervisor and review of segregation logs show that the medical staff do Administrative Segregation rounds and document those rounds in the Administrative Segregation log for each detainee. Those records are placed in the detainee file.
28. Staff provides detainees with health- services (sick call) request slips daily, upon request. <ul style="list-style-type: none"> • Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population. • Service-request slips are delivered in a timely fashion to the health care provider. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blank sick call requests are available either in each housing unit or by request from the nurse on medication rounds. Detainees are instructed to return completed sick call requests in the locked boxes observed in housing units.
29. (MANDATORY) The facility has a written plan for the delivery of 24-hour emergency health care when no medical personnel are on duty at the facility, or when immediate outside medical attention is required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The policy and practice shows that the facility currently has 24-hour medical staff coverage. In the event that medical staff is not available for unforeseen reasons, the registered nurse is on-call 24 hours a days with contact number observed in the facility Emergency Plan manual.
30. The plan includes an on-call provider.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical staff has access to the nurse practitioner who is on-call 24 hours a day, 7 days a week.
31. The plan includes a list of telephone numbers for local ambulances and hospital services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The plan includes a list of telephone numbers for local ambulances and hospital services.
32. The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy and practice show that emergency health care is consistent with security and safety issues as described in the orientation training under "Safety Procedures."
33. (MANDATORY) Detention and health care personnel will be trained, at least annually, to respond to health-related situations within four minutes and to properly use first aid kits, available in designated areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy and practice show that detention and health care personnel will be trained during orientation and annually to respond to health-related situations as reviewed in the training curriculum and training records.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
34. Where staff is used to distribute medication, a health care provider properly trains these officers.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Correctional staff does not distribute medication, because 24-hour medical staff is present.
35. Pharmaceuticals and nonprescription medicines will be stored, inventoried, dispensed, and administered in accordance with sound standards and facility needs for safety and security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy and practice show pharmaceuticals and nonprescription medication will be stored, inventoried, dispensed, and administered in accordance with sound standards and facility needs for safety and security according to the Facility Policy 4.003. The pharmacy representative visits the facility monthly with the last visit being February 22, 2011. The narcotics are doubled locked, and counts with the nursing supervisor were correct. Counts of medication were completed for every shift, when records were reviewed.
36. (MANDATORY) Each facility has written policy and procedures for the management of pharmaceuticals that include: <ul style="list-style-type: none"> • A formulary of all prescription and nonprescription medicines stocked or routinely procured from outside sources. • A method for obtaining medicines not on the formulary. • Prescription practices, including requirements that medications are prescribed only when clinically indicated and that prescription are reviewed before being renewed. • Procurement, receipt, distribution, storage, dispensing, administration, and disposal of medications. • Secure storage and perpetual inventory of all controlled substances (DEA Schedule II-V), syringes, and needles. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All aspects of management of pharmaceuticals are written in the Facility Policy 4.003, Facility Medical Services. Policy and practice show that there is an approved formulary for medication and a method for obtaining medication not on the formulary. Prescription practices reveal by chart review that medication is only prescribed when there is supporting documentation why that medication is being prescribed. All aspects of procurement, distribution, storage, distribution, administration and disposal are overseen by the pharmacy representative who visits the facility monthly. Storage of the controlled substances, syringes, needles, and tools were documented in count sheets that were reviewed and found to be correct during a spot check.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>37. All pharmaceuticals are stored in a secure area with the following features:</p> <ul style="list-style-type: none"> • A secure perimeter; • Access limited to authorized medical staff (never detainees); • Solid walls from floor to ceiling and a solid ceiling; • A solid core entrance door with a high security lock (with no other access); and • A secure medication storage area. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>All pharmaceuticals are stored in a secure medical unit within a secure room with access limited to only medical staff. Upon inspection there are solid walls from floor to ceiling, a solid ceiling, a solid core entrance door with a high security lock, and camera surveillance of the medical unit that is monitored in Central Control. Medication is stored within the medication cart or a locked cabinet within a locked room.</p>
<p>38. In SPCs and CDFs, the pharmacy has a locking pass-through window.</p> <ul style="list-style-type: none"> • Administration and management in accordance with state and federal law. • Supervision by properly licensed personnel. • Administration of medications by personnel properly trained and under the supervision of the health services administrator, or equivalent. • Accountability for administering or distributing medications in a timely manner and according to physician orders. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The portion of this component requiring the pharmacy have a locking pass-through window is specific to SPCs and CDFs. The administration and management of medication is in accordance with state and federal law. Supervision is provided by licensed medical personnel and overseen by a pharmacist on a monthly basis. Administration of medication by licensed medical staff is trained by the nursing supervisor during orientation. The nursing supervisor reviews medical records to assure that medications are ordered and administered in a timely manner according to provider orders.</p>
<p>39. Distribution of medication is in accordance with specific instructions and procedures established by the health care provider. Written records of all medication given to detainees are maintained.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Distribution of medication is recorded on the detainee individual medication administration record. Licensed medical personnel are trained by the nursing supervisor during the orientation process. Medication administration records that were reviewed showed proper documentation to assure distribution of medication.</p>

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
40. Medication may not be delivered or administered by detainees. <ul style="list-style-type: none"> • In facilities that are medically staffed 24 hours a day, the health care provider distributes medication. • In facilities that are not medically staffed 24 hours a day, medication may be distributed by detention officers, who have received proper training by the health care provider, only when medication must be delivered at a specific time when medical staff is not on duty. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No medication may be delivered or administered by detainees. There is medical staff 24 hours a day, 7 days a week at this facility so no training to detention officers is required.
41. The facility maintains documentation of the training given any officer required to distribute medication, and the officer has available for reference the training syllabus or other guide or protocol provided by the health authority.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No medication is given by detention officers at this facility due to the presence of 24-hour licensed medical care, therefore detention officer training is not provided.
42. The Warden/Facility receives notification that a detainee that has special medical needs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Practice shows a special needs form is generated by the nursing supervisor that notifies the Warden of any detainee that has a special need. Any detainee with a special need would also be discussed in the Warden's weekly meeting with staff.
43. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If a detainee requires an examination, evaluation or treatment by an independent medical serve provider or expert, the procedure is to contact ICE for a referral for that needed service and upon authorization by ICE an appointment would be arranged. The nurse practitioner would review any treatment, medications, and recommendations from the independent medical provider and indicate the needed treatment.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>44. (MANDATORY) Each facility has a written plan (or plans) that address the management of infectious and communicable diseases, including prevention, education, identification, surveillance, immunization (when applicable), treatment, follow-up, isolation (when indicated), and reporting to local, state, and federal agencies. Plans include:</p> <ul style="list-style-type: none"> • Coordination with public health authorities; • Ongoing education for staff and detainees; • Control, treatment, and prevention strategies; • Protection of individual confidentiality; • Media relations; • Management of tuberculosis, hepatitis A, B, and C, HIV infection, avian influenza, and • Reporting communicable diseases to local and/or state health departments in accordance with local and state regulations. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The Facility Policy 4.001, Exposure Control Plan, addresses the management of infectious and communicable diseases. Policy and practice shows all detainees arriving at the facility receive a tuberculosis screening test, unless there is documentation that accompanies the detainee that this test has been done within the last 12 months. It was observed that information sheets and posters were in view of detainees regarding Tuberculosis and Avian influenza. As per conversation with nurse-in-charge, reportable diseases are reported. There is no negative pressure room available at this facility, so if there is a detainee with, or suspected of having a contagious disease requiring such isolation, the detainee would be transferred to an appropriate location after notifying ICE staff.</p>
<p>45. Detainees diagnosed with a communicable disease are isolated according to local medical operating procedures.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>It is the procedure to transfer any detainee with a diagnosed or suspected communicable disease to an appropriate facility for housing. There are no negative pressure rooms at this facility, yet there are two cells within the medical unit that could be used as isolation cells, provided the isolation is not airborne.</p>

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>46. All new arrivals receive TB screening in accordance with guidelines of the Centers for Disease Control (CDC). Unless a chest x-ray is the primary screening method, the PPD (mantoux method) is the primary screening method. (For a detainee on whom the PPD is contraindicated; a chest x-ray will be needed. Detainees not screened are housed separate from the general population.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Facility Policy 04.002, Management of Communicable Diseases, states that all detainees will receive a TB screening upon arrival unless there is written documentation from another facility with a result within the last 12 months. With a review of current charts, TB testing was provided to all new detainees unless they had a documented history of a positive TB reaction. Chest X-rays were completed within two days of arrival for those who either had a new positive TB test or a history of a positive TB tests. It was observed in chart reviews, that all detainees are screened for TB upon admission to this facility.</p>
<p>47. Detainees with symptoms suggestive of TB are placed in a negative pressure isolation room and promptly evaluated for TB disease. Detainees at facilities with no negative pressure isolation room are referred to an appropriate off-site facility.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>This facility does not have a negative pressure isolation room. Practice is, if a designee presents symptoms suggestive of TB, ICE will be notified immediately by the medical supervisor for transfer to an appropriate facility.</p>
<p>48. A transportation system will be available that ensures timely access to health care services that are only available outside the facility, including: prioritization of medical need, urgency (ambulance versus standard), and transfer of medical information.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Policy 5.011, Transportation, and practice show that there is a transportation system that ensures timely access to health care services that are outside the facility.</p>
<p>49. Detainee who requires close, chronic or convalescent medical supervision will be treated in accordance with a plan approved by licensed physician, physician assist, nurse practitioner, dentist, or mental health practitioner that includes directions to health care and other involved personnel.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The practice at this facility is to transfer detainees who require close or convalescent medical supervision to an appropriate facility after contacting ICE.</p>
<p>50. (MANDATORY) Female detainees have access to pregnancy testing and pregnancy management services that include routine high-risk prenatal care, addiction management, comprehensive counseling and assistance, nutrition, and postpartum follow-up.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>It is practice that female detainees do have access to pregnancy testing and pregnancy management. Upon identification of a pregnant detainee, that detainee is referred to the nurse practitioner for evaluation and treatment plan. Female ICE detainees are not routinely sent to this facility.</p>

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
51. (MANDATORY) Detainees with chronic conditions (such as hypertension and diabetes) will receive periodic care and treatment that includes monitoring of medications, laboratory testing, and chronic care clinics, and others will be scheduled for periodic routine medical examinations, as determined by the health authority	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Discussion with the medical supervisor and practice shows detainees with chronic conditions receive periodic care and treatment that includes monitoring medication, laboratory testing, and detainee monitoring as determined by the nurse practitioner. The frequency of examinations is determined by the follow-up visit ordered by the nurse practitioner.
52. The Facility Administrator, or other designated staff will be notified in writing of any detainees whose special medical or mental health needs requiring special consideration in such matters as housing, transfer, or transportation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Discussion with the medical supervisor and practice show that the nursing supervisor will notify the facility administrator or other designated staff in writing of any detainees with special medical or mental health needs via a special needs form and through weekly meetings.
53. Detainees will have access to emergency and specified routine dental care provided under direction and supervision of a licensed dentist.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Discussion with the medical supervisor and practice shows that detainees do have access to emergency and routine dental care under the direction of a licensed dentist who is located offsite. These visits to the dentist occur routinely twice a week with up to four detainees going to each visit at a time.
54. (MANDATORY) Detainees with mental health problems will be referred to a mental health provider as needed for detection, diagnosis, treatment, and stabilization to prevent psychiatric deterioration while confined.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Discussion with medical supervisor and practice show that detainees with mental health problems will be referred to a mental health provider. This provider, Delta Center, is available 24 hours a day, 7 days a week. Once notified, a Delta Center representative will come to the facility to evaluate the detainee. Based on the evaluations and recommendations, a treatment plan will be initiated for that detainee.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
55. Crisis intervention services are available for detainees who experience acute mental health episodes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Discussion with medical supervisor and practice show crisis intervention services are available for detainees who experience acute mental health episodes via an outside agency, Delta Center.
56. Medical and mental health interviews, examinations, and procedures will be conducted in settings that respect detainees' privacy, and female detainees will be provided female escorts for health care by male health care providers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	By observation, there are two examination rooms within the medical unit that provide detainee privacy. There are a limited number of female detainees at this facility (none for ICE); yet female escorts will be provided for health care by a male health care provider.
57. (MANDATORY) Any detainee referred for mental health treatment receives a comprehensive evaluation by a licensed mental health provider within 14 days of the referral.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 4-003, Facility Medical Services, and practice show any detainee referred for mental health treatment receives a comprehensive evaluation by a licensed mental health provider within 14 days of the referral, a representative of Delta Center. If medication is needed, arrangements will be made for that detainee to see a psychiatric provider offsite.
58. (MANDATORY) Restraints for medical or mental health purposes may be authorized only by a qualified medical or mental health provider, after reaching the conclusion that less restrictive measures are not successful. The facility has written procedures that specify: <ul style="list-style-type: none"> • The conditions under which restraints may be applied; • The types of restraints to be used; • How a detainee in restraints is to be monitored; • The length of time restraints are to be applied; • Requirements for documentation, including efforts to use less restrictive alternatives; and • After-incident review. • The medical authority or mental health provider completes a Post-Restraints Observation Report form DIHS-867 or similar form. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 4.003, Facility Medical Services, Policy 5.006, Use of Force and Application of Restraints, and practice show that there have been no detainees requiring restraints of mental health or medical reasons in the last 12 months.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>59. (MANDATORY) Involuntary administration of psychotropic medications to detainees complies with applicable laws and regulations and the authorizing physician or psychiatrist will:</p> <ul style="list-style-type: none"> • Specify the duration of therapy; • Obtain an order authorizing the administration of the drug from a Federal District Court. • Document that less restrictive intervention options have been exercised without success; • Detail how the medication is to be administered; • Monitor the detainee for adverse reactions and side effects; and • Prepare treatment plans for less restrictive alternatives as soon as possible. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Policy 4.003, Facility Medical Services, and practice show there have been no detainees requiring involuntary administration of psychotropic medication in the last year.</p>
<p>60. An initial dental screening exam should be performed within 14 days of the detainee's arrival. If no on-site dentist is available, the initial dental screening may be performed by a physician, physician's assistant, nurse practitioner or trained RN.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>A dental screening is being performed by licensed medical staff, yet there is no documentation that these staff members have been trained by a dentist. Training has not been done per discussion with the health service supervisor.</p>
<p>61. In each detention facility, the designated health authority and Facility Administrator determines the contents, number, location(s), use protocols, and procedures for monthly inspections of first aid kits.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Discussion with the health service supervisor and observation of practice shows the inspection of first aid kits is done by the nursing supervisor on a monthly basis, whereas a breakaway lock is replaced on the kit after inspection.</p>
<p>62. An automatic external defibrillator should be available for use at the facility.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Observation and discussion with the health service supervisor shows the facility does have an automatic external defibrillator which is stored in a locked supply room, inside the emergency response bag in the medical unit. Maintenance and testing of unit is done by the medical staff.</p>
<p>63. If a detainee refuses treatment, ICE/DRO will be consulted in determining whether forced treatment will be administered, except in emergency circumstances, in which case, ICE/DRO will be notified as soon as possible.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Discussion with the health service supervisor and practice show that the nursing supervisor will advise ICE for any detainee who refuses medical treatment. A signed refusal of treatment form will also be obtained from the detainee.</p>

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
64. In SPCs and CDFs, the Facility Administrator and health services administrator will meet at least quarterly and include other facility and medical staff as appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility does conduct meetings quarterly with the nursing supervisor and the facility administrator to discuss various topics, trends, and issues.
65. (MANDATORY) Biohazardous waste will be managed and medical and dental equipment decontaminated in accordance with sound medical standards and compliance with applicable local, state, and federal regulations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy and practice show biohazardous waste is managed in accordance with sound medical standards and compliance with applicable local, state, and federal regulations. The company used for biohazard waste is Stericycle. Invoice records from Stericycle were reviewed. It was observed that there are labeled biohazard containers and closets, and labeled sharps containers for syringes and needles.
66. (MANDATORY) The health authority will implement a system of internal review and quality assurance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In discussion with the medical supervisor there is a system of internal review and quality assurance. There are random medical record reviews performed by the medical supervisor. The pharmacist does do monthly inspections related to medication issues. The compliance officer stated that assigned sergeants are assigned to review the medical standards for compliance. The review for last year was reviewed and a re-evaluation is scheduled for April 2011.

PART 4 – 22. MEDICAL CARE

Meets Standard
 Does Not Meet Standard
 N/A
 Repeat Finding

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

This facility is not contracted solely with a medical provider. The entire facility (medical and correctional departments) is contracted with Paladin Eastside Psychological, Inc.

This facility now has 24-hour nursing coverage, using a day, evening, and night shift. Both the medical supervisor and the nurse practitioner are on-call 24 hours a day, 7 days a week.

After reviewing policies, procedures, medical records, medical flow sheets, and discussion with medical and correctional staff, the medical department was found to run efficiently and within the standards of care.

There were no complaints by detainees voiced to the inspection team during this inspection.

Detainees are being screened by both correctional staff and medical staff upon arrival to determine if the detainee has any medical,

mental health or dental issues that need immediate attention.

Dental, mental health, and specialty care clinics are done off-site with contracts with the Delta Center (for mental health), Cairo Community Health Dental (for dental services), and various other providers for specialty care.

On-site medical services are provided within a secure area within the secure parameter. There are two examination rooms providing confidentiality and privacy for detainees, a supply room, a medical record room, toilet for detainees, and two detainee observation/holding cells.

Medical records are locked in a secure room with limited access restricted to medical staff.

Training of the medical staff is shared between the facility training officer and the medical supervisor. Many aspects are covered in the training such as safety procedures, hunger strikes, suicide prevention, and standard precautions.

The medical supervisor trains all medical staff members on medical unit-specific procedures such as medication administration, narcotic and sharps counts, and medical record documentation.

Medical charts were reviewed and compliance found for all charts related to officer screening, medical screening, and detainee consents for treatment, Tuberculosis screening, mental health evaluation, and physicals within 14 days of arrival.

(b)(6), (b)(7)(c) / February 24, 2011

Reviewer's Signature / Date

PART 4 – 23. PERSONAL HYGIENE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There is a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items. The supply of these items exceeds the minimum required for the number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 12.002, Hygiene/Sanitation, and practice show compliance with the components of the standard.
2. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive, at a minimum: <ul style="list-style-type: none"> • One uniform shirt and one pair of uniform pants or one jumpsuit. • One pair of socks. • One pair of underwear (daily change). • One pair of facility-issued footwear. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted items in this component are only applicable to SPCs and CDFs. Policy 12.002 and practice show all detainees are issued two uniforms, two pair of socks, two t-shirts, two pair of briefs as outlined in the facility detainee handbook.
3. Additional clothing is available for changing weather conditions and as is seasonally appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The component is only applicable for SPCs and CDFs. It is policy and practice that outer clothing will be provided and exchanged at least twice weekly.
4. New detainees are issued clean bedding, linens and towels, at a minimum: <ul style="list-style-type: none"> • One mattress • One blanket • Two sheets • One pillow • One pillowcase • One towel • Additional blankets, based on local weather conditions. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted items in this component are only applicable to SPCs and CDFs. Policy and practice show all detainees are issued one mattress, one blanket (two blankets during the winter months), one towel, and one sheet as outlined in the facility detainee handbook.
5. The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE detainees are not charged for these items.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy and practice show all detainees are initially issued one comb, one toothbrush, two toothpaste, two rolls of toilet paper, and two bars of soap as outlined in the facility detainee handbook. Hygiene items will be replenished on Tuesday and Friday of each week or as needed.

PART 4 – 23. PERSONAL HYGIENE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>6. Toilet facilities are:</p> <ul style="list-style-type: none"> • Clean • Adequate in number and can be used without staff assistance 24 hours per day when detainees are confined in their cells or sleeping areas. <p>ACA Expected Practice 4-ALDF-4B-08 requires that toilets be provided at a minimum ratio of one for every 12 male detainees or one for every 8 female detainees. For males, urinals may be substituted for up to one-half of the toilets.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>All toilet facilities are clean and adequate in number. The breakdown of dorm occupancy to toilet ratio is: A,B,C dorms capacity-50/toilets-5 D, F dorm capacity-24/toilets-24 E dorm capacity-12/toilets-2</p>
<p>7. Bathing facilities are:</p> <ul style="list-style-type: none"> • Clean • Operable with temperatures between 100 and 120 degrees Fahrenheit. <p>ACA Expected Practice 4-ALDF-4B-08 requires one washbasin for every 12 detainees. ACA Expected Practice 4-ALDF-4B-09 requires a minimum ratio of one shower for every 12 detainees.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Bathing facilities are clean and temperatures are recorded between 100 and 120 degrees. The breakdown of dorm occupancy to showers ratio is: A,B,C dorms capacity-50/shower-5 D, F dorm capacity-24/shower-3 E dorm capacity-12/shower-2</p>
<p>8. Detainees with disabilities are provided adequate facilities, support, and assistance needed for self-care and personal hygiene.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>There is a cell within the D dorm which is equipped for disabled detainees that has railing supports by the toilet.</p>
<p>9. Detainees are provided clean clothing, linen and towels.</p> <ul style="list-style-type: none"> • Socks and undergarments - daily. • Outer garments - twice weekly. • Sheets - weekly. • Towels - weekly. • Pillowcases - weekly. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>It is policy and practice that socks and undergarments are cleaned daily; outer garments are cleaned twice weekly' and sheets, towels, and pillowcases weekly.</p>
<p>10. Food service detainee volunteer workers are permitted to exchange outer garments daily.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>This component is only applicable for SPCs and CDFs. Per Facility Policy 12.001, Laundry Services, and practice detainees assigned to work areas shall be clothed in accordance with the requirements of the job and clothing is exchanged daily.</p>
<p>11. Volunteer detainee workers are permitted to exchanges of outer garments more frequently.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>This component is only applicable for SPCs and CDFs. Policy and practice show that detainee workers are permitted to exchange outer garments more frequently.</p>

PART 4 – 23. PERSONAL HYGIENE

Meets Standard Does Not Meet Standard N/A Repeat Finding

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

Upon inspection of the laundry, it was found neat and clutter-free.

Detainees receive clothing and personal hygiene items as outlined in the facility procedure.

Detainees were observed in clean uniforms, and other detainees were observed making personal hygiene packs and cleaning housing units.

(b)(6), (b)(7)c / February 24, 2011

Reviewer's Signature / Date

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a written suicide prevention and intervention program approved and signed by the health authority and Facility Administrator and reviewed annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility Policy is 4.006, Suicide Prevention and Intervention, approved November 2010, addresses.
2. At a minimum, the Program shall include procedures to address: <ul style="list-style-type: none"> • Intake screening and referral requirements; • The identification and supervision of suicide-prone detainees; • Staff training requirements; • The management and reporting of suicidal incidents, suicide watches, and deaths; • Provision of safe housing for suicidal detainees; • Debriefing of any suicides and suicide attempts by administrative, security, and health services staff; • Guidelines for returning a previously suicidal detainee to a facility's general population, upon written authorization of the clinical director. • Reporting guidelines for facility personnel when suspected suicidal behavior is observed; and Written procedures for the proper handling of detainees who exhibit suicidal behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy and practice show correctional and medical staff are trained on the suicide prevention and intervention program during initial orientation and on an annual basis. The curriculum includes recognizing verbal and behavioral clues that indicate potential suicide; demographic, cultural, and precipitating factors of suicidal behavior; responding to suicidal and depressed detainees; effective communication between correctional and medical staff; necessary referral procedures; constant observation and suicide watch procedures; follow-up monitoring of detainee; reporting; and written documentation.
3. Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation and annual training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and training records reflect suicide prevention training occurs during orientation and on an annual basis.
4. Training prepares staff to: <ul style="list-style-type: none"> • Effective methods for identifying the warning signs and symptoms of impending suicidal behavior, • Demographic, cultural, and precipitating factors of suicidal behavior, • Responding to suicidal and depressed detainees, • Effective communication between correctional and health care personnel, • Necessary referral procedures, • Housing observation and suicide-watch level procedures, • Follow-up monitoring of detainees who have already attempted suicide, and • Reporting and written documentation procedures. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Based on the curriculum of the suicide prevention training all areas of this standard are discussed.

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
5. A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process. <ul style="list-style-type: none"> • Screening does not occur later than one working day after the detainee's arrival. • Documentation exists that "specially trained officers" have completed training in accordance with a syllabus approved by the medical authority. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training records reflect proper training of both correctional and medical staff. A review of medical records showed that all detainees were screened upon arrival to facility, and no detainees received screening later than one working day after arrival.
6. Written procedures contain when and how to refer at-risk detainees to medical staff and procedures are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility Policy 04.006, Suicide Prevention and Intervention, and practice shows written procedures on how and when to refer at-risk detainees to medical.
7. Written procedures include returning a previously suicidal detainee to the general population, upon written authorization of the clinical director or appropriate health care professional.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility Policy 04.006 and practice show written procedures that state the mental health professional assessing the detainee/offender on 'suicide watch' will initiate a treatment plan and follow-up until the detainee/offender should no longer be considered at risk. At that time, the mental health professional may direct the health service administrator to discontinue the 'suicide watch.' Follow-ups with mental health professional will continue.
8. The facility has a designated isolation room for evaluation and treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The designated isolation room for evaluation and treatment is within the medical department. When a detainee is place in an observation cell on a suicide watch there will be a correctional officer posted in the medical unit for the duration of the watch. There is also 24-hour camera monitoring.
9. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt as seen by observation.
10. Medical staff have approved the room for this purpose.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical supervisor has approved the room for this purpose.

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Staff observes and document the status of a suicide-watch detainee at least once every 15 minutes/constant observation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When a detainee is placed on suicide watch, a log will be maintained by the correctional officer documenting the status of that detainee at least once every 15 minutes/constant observation. This form is than filed in the detainee file.
12. At facilities with twenty-four-hour medical staff, observation of imminently suicidal detainees by medical or detention staff shall occur no less than every 15 minutes. The Clinical Director (CD) may recommend constant direct supervision. If a detainee is clinically evaluated and determined to be at risk for suicide, medical staff shall document the status of the detainee in the medical record at least every two hours, unless otherwise directed by the CD.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If the detainee is clinically evaluated and determined to be at risk for suicide, medical staff shall document the status of the detainee at least every two hours and make arrangements for transfer to an appropriate psychiatric facility.
13. In CDFs or IGSAs, and/or at facilities where there is not twenty-four hour medical staff, the facility administrator shall report to ICE/DRO any detainee who has been identified as suicidal. ICE/DRO, shall consult with the CD or designated medical authority for immediate evaluation (with constant observation until evaluation), or for transfer to a local psychiatric facility or emergency room by ambulance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There is 24-hour medical staff at this facility.
14. Every completed suicide and serious suicide attempt shall be subject to a mortality review process. A critical incident debriefing shall be provided to all affected staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical supervisor stated that a mortality review would be done on every completed and serious suicide attempt. A critical incident debriefing will be provided to all staff and detainees.

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

Meets Standard
 Does Not Meet Standard
 N/A
 Repeat Finding

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

The facility is in compliance with the standard regarding suicide prevention and intervention. Training for both correctional and medical staff is conducted at orientation and then on an annual basis.

There have been no ICE detainee suicide attempts or suicide completions since the last inspection.

There was one County inmate who voiced suicidal thoughts with no attempt who was referred to the outside mental health agency and counseling/treatment was provided. There were no further mental health issues with this detainee.

The facility screens detainees upon arrival and refers detainees identified as 'at risk' to the medical department for further evaluation and treatment.

If the facility staff or the outside mental health staff determine that this detainee is at risk for suicide, the detainee will be transferred to an appropriate facility to address the mental health issues.

Reviewer's Signature / Date

PART 4 – 25. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH				
<p>This Detention Standard ensures that each facility's continuum of health care services addresses terminal illness, fatal injury, and advance directives and provides specific guidance in the event of a detainee's death.</p> <p><input type="checkbox"/> Check this box if the facility does not accept ICE detainees who are severely or terminally ill. Indicate NA in the appropriate box for this portion of the worksheet. ALWAYS complete all references to detainee death and related notifications.</p>				
Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees, who are chronically or terminally ill, are transferred to an appropriate off-site medical facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility Policy 4.005, Terminal Illness, Advanced Directives & Death, outlines the criteria for detainee transfer for medical reasons.
2. The facility or appropriate ICE office promptly notifies the next-of-kin of the detainee's: medical condition. <ul style="list-style-type: none"> The detainee's location. The visiting hours and rules at that location. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In conversation with the ICE representative on site, he verified that ICE would notify detainee's next-of-kin regarding medical conditions.
3. There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives. <ul style="list-style-type: none"> These guidelines include instructions for detainees who wish to have a living will. These guidelines provide the detainee the opportunity to have a private attorney prepare the documents, at the detainee's expense. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility Policy 4.005 states the facility shall use the State Advance Directive form for implementing Living Wills and Advanced Directives and be prepared by the detainee's attorney at the detainee's expense.
4. There is a policy addressing "Do Not Resuscitate Orders"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility Policy 4.005 addresses "Do Not Resuscitate Orders."
5. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy states that maximum therapeutic efforts, short of resuscitation will be provided.
6. The facility notifies ICE/DRO Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSA's, this notification is made through the local ICE representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Conversation with the medical supervisor indicates ICE would be contacted regarding any detainee with a "Do Not Resuscitate" order.
7. The facility has written procedures to address the issues of organ donation by detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility Policy 4.005 addresses organ donation.
8. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in custody.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility Policy 4.005 states ICE officials will be notified when a detainee dies in custody.
9. The facility has a policy and procedure to address the death of a detainee while in transport.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 4.005 addresses death of a detainee death during transport.

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 4.005 and conversation with ICE representative on site during the inspection, finds the releasing of detainee's remains will be a collaborative effort between the facility and ICE.
11. In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. • If the detainee is a U.S. military veteran, the Department of Veterans Affairs notified.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As per the conversation with the ICE representative on site during this inspection, ICE would take charge of the detainee's remains.
12. An original or certified copy of a detainee's death certificate is placed in the subject's A-File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As per the conversation with the ICE representative on site during this inspection, ICE would obtain the original or copy of the detainee's death certificate and place it in the A-file.
13. The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as; • Performance of an autopsy. • Person(s) to perform the autopsy. • Obtaining State approved death certificates. • Local transportation of the body.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The policy and procedure regarding autopsy, death certificates, and transportation of the detainee's body are written in Facility Policy 4.005. As per the conversation with the ICE representative on site during this inspection, obtaining death certificates and transportation of the detainee's body would be a responsibility of ICE.
14. ICE staff follows established procedures to properly close the case of a deceased detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As per the conversation with the ICE representative on site during this inspection, ICE has established procedures to close the case of a deceased detainee.

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

Meets Standard Does Not Meet Standard N/A Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*
There have been no ICE detainee deaths since the last inspection.

Facility policies and procedures are in place, and there is collaboration between the facility and ICE representatives to properly handle a detainee death.

(b)(6), (b)(7)(c) / February 24, 2011

Reviewer's Signature / Date

Performance-Based National Detention Standards

Section V ACTIVITIES

- 26 Correspondence and Other Mail**
- 27 Escorted Trips for Non-Medical Emergencies**
- 28 Marriage Requests**
- 29 Recreation**
- 30 Religious Practices**
- 31 Telephone Access**
- 32 Visitation**
- 33 Voluntary Work Program**

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has written policy and procedures concerning correspondence and other mail. The rules for correspondence and other mail are posted in each housing or common area or provided to each detainee via a detainee handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement for correspondence rules to be posted in each housing or common area is specific to SPCs and CDFs. Practice at this facility is to adhere to Policy 14.001 which outlines mail and correspondence procedures at the facility.
2. The facility provides key information in English, Spanish, and other languages spoken by a significant number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The mail policy is explained in the detainee handbook, in English or Spanish.
3. Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Staff maintains a logbook-recording acceptance of priority, priority overnight, and certified mail delivered to the facility for a detainee.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Practice at this facility is to keep a log of all special mail arriving at the facility.
6. 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 Facility Administrator or equivalent for prevailing security reasons.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All incoming mail is opened and inspected prior to delivery according to policy and the handbook. The OIC has authorized this practice in writing.
7. Staff does not read incoming general correspondence without the Facility Administrator's prior approval.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Practice at this facility is to read some of the mail for security reasons.
8. Staff does not inspect incoming Special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Staff is prohibited from reading or copying incoming and outgoing Special Correspondence without the detainee present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per policy staff can read incoming special mail only in the presence of the detainee.
10. 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement to inspect outgoing mail without the detainee present is specific to SPCs and CDFs. Practice at this facility is to inspect mail when there is a cause, and the detainee doesn't need to be present.

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Correspondence to a politician or to the media is processed as Special Correspondence and is not read or copied.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement to notify the sender of rejected incoming mail is specific to SPCs and CDFs. Practice at this facility is to notify the addressee only.
13. The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Staff maintains a written record of every item removed from detainee mail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. The Facility Administrator or designee monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Illegal contraband is handled per the Contraband policy.
16. The procedure for safeguarding cash removed from a detainee protects the detainee from loss of funds and theft. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Original identity documents (for example, passports, and birth certificates) are immediately removed and forwarded to ICE staff for placement in the A-files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE is given any original identity documents received in the mail.
18. Staff provides the detainee a copy of his or her identity document(s) upon request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	On an as-needed basis, i.e. legal issues, staff may provide detainee a copy of identity documents.
19. Staff disposes of prohibited items found in detainee mail in accordance with the Detention Standard on "Contraband".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Every indigent detainee has the opportunity to mail, at government expense: At least five pieces of special correspondence per week; Three one ounce letters per week; Packages deemed necessary by ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. The facility has a system for detainees to purchase stamps and for mailing all Special Correspondence and a minimum of 5 pieces of general correspondence per week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. SMU detainees have the same correspondence privileges as general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Detainees have access to outside publications.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

Meets Standard Does Not Meet Standard N/A Repeat Finding

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

This inspector interviewed the reception desk staff person who plays a role in mail processing, the Intake officer who has a role in processing mail, and the Contract Compliance Officer. Based on these interviews and review of policies and procedures, the facility was found to meet the standard in regard to Correspondence and Mail.

(b)(6), (b)(7)(C) / February 24, 2011

Reviewer's Signature / Date

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

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

Standard NA: Check this box if all ICE Non-Medical Emergency Escorted Trips are handled only by the ICE Field Office or Sub-Office in control of the detainee case.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Field Office Director considers and approves, on a case-by-case basis, trips to an immediate family member's: <ul style="list-style-type: none"> • Funeral • Deathbed 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The facility recognizes as "immediate family member" a parent (including stepparent or foster parent), brother, sister, child, and spouse (including common-law spouse).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The CDF/IGSA facility notifies ICE of all detainee requests for non-medical escorts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The detainee's Deportation Officer reviews the file before forwarding a detainee's request, with recommendation, to the approving official. Each recommendation addresses the individual's suitability for travel, e.g., the kind of supervision required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees who require overnight housing are placed in approved IGSA facilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Each escort detail includes at least two officers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The detainee remains under constant, direct visual supervision of escorting staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Escorting officers report unexpected situations to the originating facility as a matter of procedure and the ranking supervisor on duty has the authority to issue instructions for completion of the trip.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Escorting officers have the discretion to increase or decrease minimum restraints in accordance with written instruction, procedures and classification level of the detainee.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Escort officers do not accept gifts/gratuities from a detainee, detainee's relative or friend for any reason.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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

Standard NA: Check this box if all ICE Non-Medical Emergency Escorted Trips are handled only by the ICE Field Office or Sub-Office in control of the detainee case.

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

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

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

Interviews with the facility Captain and ICE officer indicate the facility does not conduct trips for non-medical emergencies.

(b)(6) (b)(7)(c) / February 24 2011
 Signature / Date

PART 5 – 28. MARRIAGE REQUESTS

This Detention Standard ensures that each marriage request from an ICE/DRO detainee receives a case-by-case review and based on internal guidelines for approval of such requests.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Field Office Director or Facility Administrator considers detainee marriage requests on a case-by-case basis.				Facility policy requires that all marriage requests must be forwarded to ICE for approval or denial.
2. The Field Office Director reviews every marriage request rejected by a Facility Administrator or IGSA. Rejections are documented.				The ICE Field Office receives every request for marriage.
3. It is standard practice to require a written request for permission to marry.				
4. The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.				
5. The Facility Administrator provides a written copy of his or her decision to the detainee and his or her legal representative.				The ICE Field Office executes all notifications to detainees on the approval or denial of marriage requests.
6. When permission is denied, the Facility Administrator states the basis for his or her decision along with instructions on how the detainee can file an appeal.				The ICE Field Office executes all notifications to detainees on the approval or denial of marriage requests.
7. The Facility Administrator provides the detainee with a place and time to make wedding arrangements.				
8. The detainee handbook explains the marriage request process.				The process explaining the marriage request procedures is delineated in the ICE National Detainee Handbook that detainees receive in addition to the facility handbook.
9. <u>In SPCs</u> the Facility Administrator or highest ranking ICE official on-site is the only officer authorized to approve a request to marry.				This component is only applicable for SPCs and CDFs. The ICE Field Office authorizes all marriage requests.

PART 5 – 28. MARRIAGE REQUESTS

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

The facility's policy requires that staff forward all detainee requests for marriage to ICE. The ICE Field Office will make the decision and execute all notifications according to standard. There has only been one request for marriage at this facility within the last 12 months; however, there have been no marriage ceremonies conducted.

(b)(6), (b)(7)(C) / February 24, 2011
Signature / Date

PART 5 - 29. RECREATION

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Facility provides: <ul style="list-style-type: none"> • An indoor recreation program. • An outdoor recreation program. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. There is no recreation specialist at this facility. The facility has a 234-bed capacity. The facility's practice is to have pod officers supervise the recreation activities.
3. Regular maintenance keeps recreational facilities and equipment in good condition.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The recreational specialist or trained equivalent supervises detainee recreation workers.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no detainees assigned to the recreation program.
5. The recreational specialist or trainee equivalent oversees recreation programs for Special Management Unit and special-needs detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Television, board games and playing cards are available for leisure activities in the housing pods.
7. Outside activities are restricted to limited-contact sports.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Outside activities are limited to basketball and cardio-vascular exercises.
8. Each detainee has the opportunity to participate in daily recreation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees have the opportunity to recreate seven days per week.
9. Detainees have access to recreation activities outside the housing units for at least one hour daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are offered outside recreation for one hour, seven days per week.
10. Staff checks all items for damage and condition when equipment is returned.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Staff conducts searches of recreation areas before and after use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Recreation areas are under constant staff supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees utilizing the outdoor recreation facility are supervised by staff manning an armed post. Detainees recreating in the housing pod are supervised via the pod officer and closed circuit television.
13. Supervising staff are equipped with radios.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 - 29. RECREATION

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

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

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

PART 5 - 29. RECREATION

Meets Standard Does Not Meet Standard N/A Repeat Finding

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

The facility provides ICE detainees opportunities to participate in the recreation program. This includes both indoor and outdoor recreation. This inspector finds the facility meets the standard concerning Recreation.

(b)(6), (b)(7)(c) / February 24, 2011
Signature / Date

PART 5 – 30. RELIGIOUS PRACTICES

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

Components	Meets Standards	Does Not Meet Standards	N/A	Remarks
1. Detainees are allowed to engage in religious services. When available, these services are provided in major languages spoken within the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility provides detainees the opportunity to engage in religious services. The facility utilizes the services of two volunteer clergy that provide services on Tuesdays and Wednesdays. The remote location of this facility presents challenges to the facility in obtaining a variety of clergy for the different religions that could possibly manifest themselves at this facility. The majority of the facility's population is Christian and can be accommodated with the current volunteer clergy.
2. Space is available for detainees to participate in religious services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Religious services are held in the indoor exercise yard.
3. The facility allows detainees to observe the major "holy days" of their religious faith. • List any exceptions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ramadan is observed annually at this facility.
4. The facility accommodates recognized holy-day observances by: • Providing special meals, consistent with dietary restrictions. • Honoring fasting requirements. • Facilitating religious services. • Allowing activity restrictions.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The practice at this facility is to accommodate recognized holy day observances by providing special meals, allowing fasting, holding special services and allowing activity restrictions as appropriate.
5. Each detainee is allowed religious items in his/her immediate possession; refer to the Funds and Personal Property Standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Volunteer's credentials are checked and verified before allowing participation in detainee programs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Members of faiths not represented by clergy may request to present their own services within security allowances.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees whose faith is not represented by clergy are allowed to request to hold their own services.
8. Detainees in the Special Management Unit may participate in religious practices unless otherwise documented for the safety and security of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

RELIGIOUS PRACTICES

Meets Standard Does Not Meet Standard N/A Repeat Finding

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

Detainees at the facility are allowed to pursue the practice of their religious faith. Volunteer clergy are utilized to provide religious services to the detainees in the indoor recreation area. Detainees are authorized to retain personal religious items within security allowances and the facility accommodates the religious dietary needs of the detainee population.

The remote location of this facility presents challenges to the facility in obtaining a variety of clergy for the different religions that could possible manifest themselves at this facility. The majority of the facility's population is Christian and can be accommodated with the current volunteer clergy.

(b)(6), (b)(7)c / February 24, 2011
Signature / Date

PART 5 – 31. TELEPHONE ACCESS

This Detention Standard ensures that detainees may maintain ties with their families and others in the community by providing them reasonable and equitable access to telephone services.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees are allowed to access to telephones during established facility waking hours, including access to TTY devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phones are turned on at 9:00 a.m. every day and turned off at 10:00 a.m.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Upon admittance the detainees are given two different handbooks, both explaining the phone process in detail. The detainee also is able to read the phone procedures at every phone. The procedures are posted on the wall at every phone location.
3. Notification explaining the facilities telephone policy is in the Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Access rules, including updated telephone and consulate number, are posted in housing units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handbooks and policies are in English and Spanish.
6. Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The ratio of phones to detainees is 1:12.
7. Telephones are inspected daily by facility staff to ensure that they are in good working order.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phones are inspected by Pod Officers daily, inspected by the maintenance supervisor weekly and by ICE staff weekly.
8. Telephones are located a reasonable distance from televisions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phones that do not work are promptly reported to the maintenance supervisor who in turn notifies Secures, the private provider of services.
10. The facility administration monitors repair progress and takes appropriate measures to ensure that the required repairs are begun and completed timely.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is the responsibility of the Maintenance Supervisor.
11. Detainees are afforded a reasonable degree of privacy for legal phone calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. A procedure exists to assist a detainee who is having trouble placing a confidential call.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The facility provides the detainees with the ability to make non-collect (special access) calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Special Access calls are at no charge to the detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 31. TELEPHONE ACCESS

This Detention Standard ensures that detainees may maintain ties with their families and others in the community by providing them reasonable and equitable access to telephone services.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
15. In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility meets this component.
16. No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. All telephone restrictions are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The only restriction would be time. If a detainee was placed in Segregation status, telephone restrictions would be documented.
19. The facility has a system for taking and delivering emergency detainee telephone messages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Phone call messages are given to detainees as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Detainees are allowed to return emergency phone calls as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phones are located in the segregation unit and available to detainees.
23. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Detainees in disciplinary segregation are allowed phone calls for family emergencies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Detainees in administrative segregation and protective custody are afforded the same telephone privileges as those in general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are afforded with the same privileges, with one exception, that would be time allowed for calls.
26. When detainee phone calls are monitored, notification is posted by detainee telephones, including a recorded message on the phone system, that phone calls made by the detainees may be monitored. Special Access calls are not monitored.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. The OIG phone number for reporting abuse is programmed into the detainee phone system. The reviewer must verify that the number is operable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector placed the call and reached the OIG with no problems.
28. The Field Office Director has assigned ICE staff to check and report on the serviceability of facility phones. This is documented on a weekly basis	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE personnel are at the facility weekly from Chicago/St. Louis to check serviceability of the phones.

PART 5 – 31. TELEPHONE ACCESS

Meets Standard Does Not Meet Standard N/A Repeat Finding

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

This inspector interviewed the plant manager and ICE personnel, reviewed the facility policy and the handbook, toured the cell pods, reviewed the postings in the pods, and tested the OIG number which were all found to meet the standard relating to Telephone Access.

(b)(6), (b)(7)c / February 24, 2011

Reviewer's Signature / Date

PART 5 – 32. VISITATION

This Detention Standard ensures that detainees will be able to maintain ties through visitation with their families, the community, legal representatives, and consular officials, within the constraints of safety, security, and good order.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There is a written visitation procedure, schedule, and hours for general visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is a visitation policy, handbooks in English and Spanish, postings at the entrance of the facility, and postings in the cell pods which all explain in detail the visiting process.
2. The visitation hours are tailored to the detainee population and the demand for visitation. The minimum duration for a visit is 30 minutes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are allowed one hour a week for family visits.
3. The visitation schedule and rules are available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The hours for all categories of visitation are posted in the visitation waiting area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. A written copy of the rules regulating visitation and the hours of visitation is available to visitors in English, Spanish, and other major languages spoken in the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. A general visitation log is maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The log is maintained at the entrance to the institution.
7. Detainees are permitted to retain authorized personal property items specified in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. A visitor dress code is available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The dress code is posted at the entrance to the institution.
9. Visitors are searched and identified according to standard requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visitors are logged in, searched by wand, searched by detector and possibly pat searched.
10. The requirement on visitation by minors is complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, within the first 30 days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Minors are allowed to visit at this facility.
12. After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Minors are allowed to visit at this facility.
13. Anytime a visit is denied, to either a general population detainee or SMU detainee, the denial is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The only visitation denial occurs as a result of disciplinary action and that is documented in the detainee file.
14. Detainees in special housing are afforded visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Legal visitation is available seven (7) days a week, including holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visitation for legal reasons can be accomplished 24 hours a day.

PART 5 – 32. VISITATION

This Detention Standard ensures that detainees will be able to maintain ties through visitation with their families, the community, legal representatives, and consular officials, within the constraints of safety, security, and good order.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
16. On regular business days legal visitation hours provide for a minimum of eight (8) hours per day and a minimum of four hours per day on weekends and holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. There are written procedures governing detainee searches.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility policy concerning controlling contraband details searches.
20. Legal representatives and assistants are subject to a non-intrusive search – such as a pat-down search of the person or a search of the person’s belongings - at any time for the purpose of ascertaining the presence of contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Per the Standard, prior to each visit, legal service providers and assistants are identified.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility posts pro bono legal organizations throughout the facility.
23. SPCs and CDFs shall submit written requests for tours from domestic or international organizations and associated with detention issues to the appropriate Field Office Director for approval.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Practice at this facility is to submit any such requests to ICE for further disposition.
24. Provisions for NGO visitation as stated in the Detention Standards are complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Law enforcement officials, requesting to visit with a detainee, are referred to the ICE Facility Administrator for approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE is informed and makes a decision concerning the interview.
26. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the Facility Administrator or ICE Field Office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 32. VISITATION

Meets Standard
 Does Not Meet Standard
 N/A
 Repeat Finding

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

This inspector interviewed the contract compliance officer, the Warden, the Captain and the Front Lobby Officer; reviewed the visiting procedures, handbook, and institutional postings; and inspected the visiting room which finds the facility meets the standard dealing with Visitation.

(b)(6), (b)(7)(c) / February 24, 2011
nature / Date

PART 5 – 33. VOLUNTARY WORK PROGRAM

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a voluntary work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Detainee housekeeping meets acceptable levels of neatness, cleanliness and sanitation standards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. At IGSA's detainees are never allowed to work outside the secure perimeter. SPCs and CDFs detainees classified as level 1 have the opportunity to participate in special details outside the secure perimeter under direct supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring detainees classified as level 1 have the opportunity to participate in special details outside the secure perimeter under direct supervision is specific to SPCs and CDFs. The practice at this facility is that no detainees work outside the secure perimeter of the facility.
4. Written procedures govern selection of detainees for the Voluntary Work Program. • The same procedures apply for replacement workers as for "new" workers. • Staff follows written procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy delineates the procedures used to govern the Voluntary Work Program.
5. Where possible, physically and mentally challenged detainees participate in the program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The facility complies with work-hour requirements for detainees, not exceeding: • Eight hours a day. • Forty hours a week.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility's practice is that detainee work assignments do not exceed eight hours a day, 40 hours per week.
7. Detainee volunteers ordinarily work according to a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. If a detainee is removed from a work detail, staff places the written justification for the action in the detainee's detention file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The voluntary work program meets: • OSHA standards • NFPA standards • ACA standards	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility appears to meet all OSHA, NFPA, and ACA standards.

PART 5 – 33. VOLUNTARY WORK PROGRAM

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

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

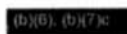
Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Medical staff screen and formally certifies detainee food service volunteers; <ul style="list-style-type: none"> • Before the assignment begins • As a matter of written procedure 				Food service detainees are properly screened for medical conditions that would preclude them from working in the food service department. Facility policy requires that the screening is conducted prior to being assigned to the food service department.
12. Detainees receive safety equipment/ training sufficient for the assignment				
13. Proper procedure is followed when an ICE detainee is injured on the job.				If a detainee is injured on the job, medical care will be provided if necessary. An incident report will be written and filed in the detention file and ICE will be notified.

PART 5 – 33. VOLUNTARY WORK PROGRAM

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

The facility provides detainees an opportunity to work and earn money through the Volunteer Work Program. Detainees are protected from handling hazardous materials and work with diluted chemicals in most instances. Chemicals are dispensed through metered distribution systems and detainees are properly trained in hazardous communication. Food service detainees are properly screened for medical conditions that would preclude them from working in the food service department. Safety training sufficient for the job is conducted as required. Work schedules are generally fixed and consist of eight hour days culminating in a 40-hour work week,

 / February 24, 2011
Signature / Date

Performance-Based National Detention Standards

Section VI JUSTICE

- 34 Detainee Handbook**
- 35 Grievance System**
- 36 Law Libraries and Legal Material**
- 37 Legal Rights Group Presentations**

PART 6 - 34. DETAINEE HANDBOOK

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a detainee handbook. Each detainee receives a copy of the local handbook and the ICE National Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are issued a facility handbook along with a copy of the ICE National Detainee Handbook. Copies of each handbook are available in English and Spanish language versions. It is a requirement that detainees sign a receipt for the handbooks.
2. The detainee handbook is written in English and translated into Spanish, and other languages spoken by significant numbers of detainees in that facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. A procedure for requesting interpretive services for essential communication has been developed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Orientation materials are read to detainees who cannot read, or they are provided the material via audio or video recordings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The handbook supplements the facility orientation video where one is provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Although the facility utilizes a video relating to the ICE detention process, it does not show a facility-specific orientation video.
6. The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. There is an annual review of the handbook by a designated committee or staff member.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a committee comprised of the Compliance Officer, Captain and Warden that meets annually to conduct a review of the facility handbook.
8. The detainee handbook address the following issues: <ul style="list-style-type: none"> • Personal Items permitted to be retained by the detainee. • Initial issue of clothes, bedding and personal hygiene items. • How to access care. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The detainee handbook states in clear language basic detainee responsibilities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. The handbook states when a medical examination will be conducted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 - 34. DETAINEE HANDBOOK

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. The handbook describes the facility, housing units, dayrooms, In-dorm activities and special management units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The handbook describes: official count times and count procedures, meal times, feeding procedures, procedures for medical or religious diets, smoking policy, clothing exchange schedules and if authorized, clothes washing and drying procedures and expected personal hygiene practices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The handbook describes times and procedures for obtaining disposable razors and explains that detainees attending court will be afforded the opportunity to shave first.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. The handbook describes barber hours and hair cutting restrictions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility handbook describes the barber hours and procedures.
16. The handbook describes; the telephone policy, debit card procedures, direct and frees calls; locations of telephones; policy when telephone demand is high; and policy and procedures for emergency phone calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. The handbook addresses religious programming.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. The handbook states times and procedures for commissary or vending machine usage. (where available)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are no vending machines in the facility for use by the detainee population.
19. The handbook describes the detainee voluntary work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The handbook describes the library location and hours of operation and law library procedures and schedules.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. The handbook describes: attorney and regular visitation hours, policies, and procedures, location of the list of pro bono legal organizations; group legal rights presentations schedule and sign up procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The handbook/supplement provides local ICE contact information.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. The handbook describes the facility contraband policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. The handbook describes the facility visiting hours and schedule and visiting rules and regulations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. The handbook describes the correspondence policy and procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 - 34. DETAINEE HANDBOOK

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
26. The handbook describes the detainee disciplinary policy and procedures, including: <ul style="list-style-type: none"> • Prohibited acts and severity scale sanctions. • Time limits in the Disciplinary Process. • Summary of Disciplinary Process. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility handbook describes the disciplinary policy and procedures to include prohibited acts and severity scale sanctions, time limits in the disciplinary process and the summary of the disciplinary process.
27. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> • Informal (if used) and formal grievance procedures; • The appeals process; • In CDFs procedures for filing an appeal of a grievance with ICE. • Staff/detainee availability to help during the grievance process. • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Homeland Security. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The specific portion of this component requiring procedures for filing an appeal of a grievance with ICE is specific to CDFs. At this facility, the practice is that detainees are allowed to file an appeal of a grievance to ICE staff.
28. The handbook describes the medical sick call procedures for general population and segregation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. The handbook describes the facility recreation policy including: <ul style="list-style-type: none"> • Outdoor recreation hours. • Indoor recreation hours. • In dorm leisure activities. • Rules for television viewing. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30. The handbook describes the detainee dress code for daily living; and work assignments and the meaning of color-coded uniforms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. The handbook specifies the rights and responsibilities of all detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Detainees are required to sign for the handbook to ensure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Orientation materials are provided to illiterate detainees either orally or via audio/video tapes in a language they can understand.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff will read the orientation materials to detainees who are illiterate. The facility has bi-lingual staff that can present the information in Spanish if necessary.

PART 6 - 34. DETAINEE HANDBOOK

Meets Standard Does Not Meet Standard N/A Repeat Finding

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

Upon admission, every ICE detainee receives a copy of the facility handbook and a copy of the ICE National Detainee Handbook. Both handbooks are available in English or Spanish.

The facility handbook is comprehensive in describing the facility's rules, programs, procedures and requirements for the detainees during their detention. The handbook accurately describes the programs offered by the facility, ICE and outside groups.

(b)(6) (b)(7)(c) / February 24, 2011
Signature / Date

PART 6 – 35. GRIEVANCE SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees are informed about the facility's informal and formal grievance system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Both the ICE National Detainee Handbook and the facility handbook apprise detainees of the availability of the grievance system.
2. The admissions process includes providing each new arrival with a copy of the detainee handbook (or equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation of the booking area revealed that English and Spanish versions of the ICE National Detainee Handbook and the facility handbook are available and issued to detainees during intake.
3. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> • Informal and formal grievance procedures; • The appeals process and step-by-step procedures; • Staff/detainee availability to help during the grievance process • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Justice. • How to file an emergency grievance. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Written procedures provide for the informal resolution of oral grievances (Not mandatory). If yes, the detainee has up to five days within which to make his or her concern known to a member of the staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility provides for and encourages the use of informal resolutions. The facility allows the detainee five days to file a formal grievance after the incident or informal grievance outcome.
5. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. <ul style="list-style-type: none"> • Detainees may seek help from other detainees or facility staff when preparing a grievance. • Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees have access to the formal grievance process and are afforded the opportunity to seek help from staff and/or other detainees when preparing a grievance. Staff is also available to provide assistance to illiterate, disabled or non-English speaking detainees.
6. Facility has written procedures for identifying and handling a time-sensitive emergency grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff receives training on how to identify emergency grievances and is instructed to immediately report them to the facility's Officer in Charge.

PART 6 – 35. GRIEVANCE SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. Staff shall not harass, discipline, punish or otherwise retaliate against a detainee who files a complaint or grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Procedures include maintaining a Detainee Grievance Log. <ul style="list-style-type: none"> • If not, an alternative acceptable record keeping system is maintained. • "Nuisance complains" are identified in the records. • For quality control purposes, staff document nuisance complaints received but not filed. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A manual, hard copy grievance log is maintained by the facility Captain. No complaints are considered "nuisance" complaints. All complaints are filed and identified in the log.
10. If a detainee who establishes a pattern of filing nuisance complaints or otherwise abusing the grievance system, the Facility Administrator may authorize staff to refuse to process subsequent complaints. This authority may not be delegated, even to an acting Facility Administrator.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility processes all grievances regardless of whether the complaint could be considered a nuisance complaint.
11. Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Informal resolution of a written grievance is documented in the detainee's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All grievances are processed in written form and filed in the detainee detention file, even if it was rectified in an informal manner.
13. Staff complies with the requirement to report allegations of officer misconduct to a supervisor or higher-level official in his or her chain of command, and/or to ICE/DRO Office of Professional Responsibility and/or the DHS Inspector General.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. <u>In SPCs and CDFs</u> , when a Detainee does not accept the grievance committee's decision, he/she files an appeal with the ICE Facility Administrator. <ul style="list-style-type: none"> • In all facilities written procedures cover detainee appeals and are included in the detainee handbook 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of the component requiring a detainee to file an appeal with the ICE Facility Administrator when he/she does not accept the grievance committee's decision is specific to SPCs and CDFs. The facility does allow detainees to file an appeal of a grievance decision to ICE.
15. <u>In SPCs/CDFs</u> , the detainee has a reasonable timeframe after the incident or informal-grievance outcome to file a formal grievance.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The practice at this facility is to allow the detainee five days to file a formal grievance after the incident or informal grievance outcome.

PART 6 – 35. GRIEVANCE SYSTEM

Meets Standard Does Not Meet Standard N/A Repeat Finding

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

The facility has developed and implemented policies and procedures for addressing detainee grievances in a timely manner. The facility has policy in place to expedite emergency grievances and staff is required to forward any grievance that includes officer misconduct to ICE. The facility processes all grievances regardless of whether the complaint could be considered a nuisance complaint.

(b)(6), (b)(7)(c) / February 24, 2011
Signature / Date

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility provides a designated law library for detainee use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a designated law library. The library has a collection of law books pertaining to immigration law and also has a current Lexis/Nexis software program with a printer.
2. The law library contains all materials listed in the "Access to Legal Materials" Standard, Attachment A. The listing of materials is posted in the law library. <ul style="list-style-type: none"> In lieu of/ or in addition to the physical law library, ICE detainees have access to the Lexus Nexus electronic law library. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. If the Lexis/Nexis CD-ROM service alternative is used for the publications in Attachment A, the facility provides detainees sufficient: <ul style="list-style-type: none"> Operable computers and printers, in sufficient numbers in order to provide access Photocopiers, and Supplies for both. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Lexis/Nexis program is available to detainees and the program was current.
4. The library contains a sufficient number of chairs, is well lit and is reasonably isolated from noisy areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The law library is isolated and well lit.
5. The law library is adequately equipped with typewriters, computers or both and has sufficient supplies for daily use by the detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Detainees are provided with the means to save legal work in a private electronic format for future use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are able to print case law as displayed in Lexis/Nexis. If documents are needed, the request goes through ICE for disposition.
7. The facility subscribes to updating services where applicable and legal materials requiring updates are current.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All updates are provided by ICE as they become available.
8. Outside persons and organizations are permitted to submit published legal material for inclusion in the legal library. Outside published material is forwarded and reviewed by the ICE prior to inclusion.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. There is a designated ICE or facility employee who inspects, updates, and maintain/replace legal material and equipment on a routine basis. The designee properly disposes outdated supplements and replaces damaged or missing material promptly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Access to the law library is granted five days a week. Additional time can be approved upon request.

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Detainees may request material not currently in the law library. Each request is reviewed and where appropriate an acquisition request is initiated and timely pursued. Request for copies of court decisions are accommodated within 3 – 5 business days.				
12. The facility permits detainees to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.				
13. Staff ensures that illiterate or non-English-speaking detainees without legal representation receive more than access to English-language law books after indicating their need for help.				
14. Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.				
15. Detainees housed in Administrative Segregation and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.				
16. All denials of access to the law library fully documented.				The facility did not have any denials for the law library in the last year.
17. Facility staff informs ICE Management when a detainee or group of detainees is denied access to the law library or law materials.				
18. Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.				
19. Indigent detainees are provided with free envelopes and stamps to mail related to legal matters.				

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

The Maintenance Program Supervisor responsible for maintaining the legal program equipment was interviewed as well as the assigned Deportation Officer who provides inspections of the Lexis/Nexis program. The policy pertaining to law libraries; the handbooks, and the orientation provided by ICE were reviewed and the law library and equipment were inspected which were all found to meet the standard regarding Law Libraries and Legal Materials.

(b)(6), (b)(7)(C) / February 24, 2011
nature Date

PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<input type="checkbox"/> Check here if No Group Presentations were conducted within the past 12 months. Mark Standard as Acceptable overall and continue on with next portion of worksheet.				
1. The Field Office is responsive to requests by attorneys and accredited representatives for group presentations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Southern Illinois University law school is involved at the facility and come in monthly to present a "Know Your Rights" program.
2. Upon receipt of concurrence by the Field Office Director, the facility or authorized ICE/DRO Field Office ensures proper notification to attorneys or accredited representatives in a timely manner.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No rejections were on file for the last year.
4. Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Postings were observed in all housing pods. The detainees know that SIU comes in the second Tuesday of every month.
5. Detainees have access to group presentations on immigration law, procedures and detainee options. Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No record of denials was found for the last year.
6. When the number of detainees allowed to attend a presentation is limited, the facility allows a sufficient number of presentations so that all detainees signed up may attend.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Detainees in segregation, unable to attend for security reasons may request separate sessions with presenters. Such requests are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Interpreters are admitted when necessary to assist attorneys and other legal representatives.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	According to staff, almost all of the presenters speak fluent Spanish.
9. Presenters are afforded a minimum of one hour to make the presentation and additional time to conduct a question-and-answer session.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Most sessions last up to four hours.
10. Staff permits presenters to distribute ICE/DRO-approved materials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An actual manual is presented at each session.
11. The facility permits presenters to meet with small groups of detainees to discuss their cases after the group presentation. ICE/DRO or authorized detention staff is present but do not monitor conversations with legal providers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
Check here if No Group Presentations were conducted within the past 12 months. Mark Standard as Acceptable overall and continue on with next portion of worksheet.				
12. Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee, and the reasons for suspension are documented. The Headquarters Office for Detention and Removal, Field Operations and Detention management Division is notified when a group or individual is suspended from making presentations.				No denials were logged in the last year.
13. The facility plays ICE/DRO-approved videotaped presentations on legal rights, at regular opportunities at the request of outside organizations.				ICE has provided an orientation video concerning detainee rights. Every detainee watches and signs a form confirming they viewed the video.
14. A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request				
15. The facility maintains equipment for viewing approved electronically formatted presentations.				

PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

This inspector interviewed the contract compliance officer, the Warden, and the Captain; reviewed the policy; reviewed the brochure "Know Your Rights;" and watched the orientation video, which leads this inspector to believe that the facility meets the standard regarding Legal Rights Group Presentations.

(b)(6), (b)(7)(C) / February 24, 2011
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Section VII ADMINISTRATION & MANAGEMENT

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

PART 7 – 38. DETENTION FILES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. A Detention File is created for every new arrival whose stay will exceed 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A file is started on every detainee upon arrival.
2. The detainee Detention File contains either originals or copies of documentation and forms generated during the admissions process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The detainee's Detention File also contains documents generated during the detainee's custody. <ul style="list-style-type: none"> • Special requests • Any G-589s and/or I-77s or IGSA equivalent, closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has only two places where files are maintained at the facility. One location (booking) stores and maintains all active files. The second location is an archival room, used when a file is closed out. Documents generated in the other parts of the facility are sent to booking for filing.
4. The Detention Files are located and maintained in a secured area. If not the cabinets are lockable and distribution of the keys is limited to supervisors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring detention files be in lockable cabinets and the key distribution to be limited to supervisors if the files are not located in a secure area is specific to SPCs and CDFs. Practice at this facility is to maintain locked cabinets with limited access in the booking area.
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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The officer closing the Detention File makes a notation that the file is complete and ready to be archived.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A notation is not made but the appropriate papers are signed and completed.
7. Staff make copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This practice is illustrated in issues concerning missing property, behavior etc.
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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Only authorized staff on a need-to-know basis are allowed access to the files. The files are never removed from the booking area.
9. Electronic record-keeping systems and data are protected from unauthorized access.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Files are not kept electronically.

PART 7 – 38. DETENTION FILES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. Unless release of information is required by statute or regulation, a detainee must sign a release-of-information consent form prior to the release of any information, and a copy of the form is maintained in the detainee's Detention File.				
11. Electronic data on individual detainees is subject to the same Privacy Act regulations as the contents of traditional paper Detention Files and A-files.				Data is not kept electronically.
12. The Facility Administrator or staff designate ensures that necessary equipment and supplies, including copier and copier supplies are available; all equipment is maintained in good working order and that equipment has the capacity to handle the volume of work.				
13. The Detention Operations Supervisor or equivalent can direct certain documents be added to a detainee's detention File.				
14. Archived files are purged after six years by shredding or burning.				This facility maintains records for six years.
15. Field Offices maintains detention files on detainees housed in IGSA Facilities as needed. These files are maintained for a minimum of 18 months.				

PART 7 – 38. DETENTION FILES

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

This inspector toured the record keeping area, reviewed detention files, interviewed the Intake Sergeant, and reviewed the Admissions and Release policy which leads this inspector to believe that the facility meets the standard concerning Detention Files.

(b)(6), (b)(7)(c) / February 24, 2011
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PART 7 - 39. NEWS MEDIA INTERVIEWS AND TOURS

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

Components	Meets Standards	Does Not Meet Standards	N/A	Remarks
1. The ICE/DRO Field Office Director approved all interviews by reporters, other news media representatives, academics and others not covered by the Detention Standard on Visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All media requests go through ICE Field Office in Chicago. The ICE public relations staff approves the interview and notifies the facility. The facility then arranges the interview based on security considerations.
2. All personal interviews are documented with the News Interview Authorization form (or equivalent) and filed in the detainee's A-file with a copy in the facility's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The Field Office Director consulted with Headquarters before deciding to allow an interview with a detainee who was the center of a controversy, or special interest, or high profile case.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Signed released forms are obtained and retained in the detainee's a-file from any media representatives who photographed or recorded any detainee in any way that would individually identify him or her.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. All press pools are organized according to the procedures in the Detention Standard. <ul style="list-style-type: none"> • A press pool may be established when the Field Office Director and facility administrator determine that the volume of interview requests warrants such action. • All media representatives with pending or requested, tours, or visits were notified that, effective immediately and until further notice, all media representatives must comply with the press pool guidelines established by the Field Office Director. • All material generated from such a press pool is made available to all news media, without right of first publication or broadcast. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 7 - 39. NEWS MEDIA INTERVIEWS AND TOURS

Meets Standard
 Does Not Meet Standard
 N/A
 Repeat Finding

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

This inspector interviewed the Warden, Contract Compliance Monitor, ICE Deportation Officer, and the Captain and reviewed the facility policy and procedures, which leads this inspector to believe that the facility meets the standard concerning News Media Interviews and Tours.

In the last year a media request was denied by ICE and the facility. The reason it was denied was that the media wanted to interview multiple detainees in a housing pod together. The denial was based on security concerns.

(b)(6), (b)(7)(c) / February 24, 2011
nature / Date

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility conducts appropriate orientation, initial training, and annual training for all staff, contractors, and volunteers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a comprehensive training program for all staff, contractors and volunteers. To simplify the monitoring of the training program, all staff receives all the courses identified in the PBNDS regardless of their class of employment or the frequency of contact with detainees.
2. The amount and content of training is consistent with the duties and function of each individual and the degree of direct supervision that individual receives.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility exceeds the amount and content of required training for some staff. Each individual in both the Institutional Familiarization Class (initial training) and the Annual Refresher Training (ongoing training) receive the maximum required training.
3. At least one qualified individual with specialized training for the position coordinates and oversees the staff development and training program. At a minimum, full-time training personnel complete a 40-hour training-for-trainers course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Training Coordinator has far exceeded the required 40 hours of "Training for Trainers" courses. The coordinator has approximately 200 hours of training in the area of employee development.
4. Training is governed and guided by a training plan that is reviewed and approved annually by the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. An accurate and complete record is maintained of all formal training activities in: <ul style="list-style-type: none"> • Individual training folders, • Other training records systems, and/or • Electronic systems. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Individual training files are maintained for all staff.

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>6. Each new employee, contractor, and volunteer is provided an orientation prior to assuming duties. While tailored specifically for staff, contractors, and volunteers, the orientation programs include, at a minimum:</p> <ul style="list-style-type: none"> • Working conditions • Cultural diversity/understanding staff & detainees • Code of ethics • Personnel policy manual • Employees' rights and responsibilities • Drug-free Workplace • Health-related emergencies • Signs of Suicide risk and precautions • Suicide prevention and intervention • Hunger strikes • Use of Force • Keys and Locks • Overview of the criminal justice system • Tour of the facility • Facility goals and objectives • Facility organization • Staff rules and regulations • Sexual harassment/sexual misconduct awareness • Personnel policies • Program overview • Orientation and training on detainee handbook and detainee rights. • Requirement of special-needs detainees. • National Detention Standards 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>All employees, contractors and volunteers are provided an orientation course prior to assuming their duties. The orientation course covers course requirements identified in the PBNDS.</p>

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
7. Clerical/support employees who have minimal detainee contact receive a minimum of: <ul style="list-style-type: none"> • Working conditions • Cultural diversity/understanding staff & detainees • Code of ethics • Personnel policy manual • Employees' rights and responsibilities • Overview of the criminal justice system • Tour of the facility • Facility goals and objectives • Facility organization • Staff rules and regulations • Sexual harassment/sexual misconduct awareness • Personnel policies • Program overview • National Detention Standards. • Key and Lock Control. • Suicide risk and prevention. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	To simplify the monitoring of the training program, all staff receives the courses identified in the PBNDS regardless of their class of employment or the frequency of contact with detainees.

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>8. Professional and support employees (including contractors) who have regular or daily detainee contact will receive training on the following subjects, at a minimum:</p> <ul style="list-style-type: none"> • Security procedures and regulations • Code of Ethics • Health-related emergencies • Drug-free workplace • Supervision of detainees • Signs of suicide risk and hunger strike • Suicide precautions • Use-of-force regulations and tactics • Report writing • Detainee rules and regulations • Key control • Rights and responsibilities of detainees • Safety procedures • Emergency plan and procedures • Interpersonal relations • Social/cultural lifestyles of the detainee population • Cultural diversity/understanding staff & detainees • Communication skills • Cardiopulmonary resuscitation (CPR)/First aid • Counseling techniques • Sexual harassment/sexual misconduct awareness. • National Detention Standards. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>To simplify the monitoring of the training program, all staff receives all the courses identified in the PBNDS, regardless of their classification or the frequency of contact with detainees.</p>

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>9. Full-time health care employees receive at least 40 hours of formal orientation before undertaking their assignments. At a minimum, the orientation program includes:</p> <ul style="list-style-type: none"> • The purpose, goals, policies and procedures for the facility and parent agency security and contraband regulations • Key control; appropriate conduct with detainees • Responsibilities and rights of employees • Standard precautions • Occupational exposure • Personal protective equipment • Bio-hazardous waste disposal • Overview of the detention operations. • National Detention Standards. • Medical grievance procedures and protocol. • Requirement for special needs detainees. • Code of Ethics • Drug free workplace • Hostage situations and staff conduct if taken hostage. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>To simplify the monitoring of the training program, all staff receives all the courses identified in the PBNDS, regardless of their classification or the frequency of contact with detainees.</p>

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>10. Security personnel (including contractors) will receive training on the following subjects, at a minimum:</p> <ul style="list-style-type: none"> • Security procedures and regulations • Supervision of detainees • Searches of detainees, housing units, and work areas • Signs of suicide risk, precaution, prevention and intervention. • Code of Ethics • Health-related emergencies • Drug-free workplace • Suicide precautions • Self-defense techniques • Use-of-force regulations and tactics • Report writing • Detainee rules and regulations • Key control • Rights and responsibilities of detainees • Safety procedures • Emergency plans and procedures • Interpersonal relations • Social/cultural lifestyles of the detainee population • Cultural diversity/understanding staff & detainees • Communication skills • Cardiopulmonary resuscitation (CPR)/first aid • Counseling techniques • Sexual abuse/assault awareness • National Detention Standards. 	☒	☐	☐	<p>To simplify the monitoring of the training program, all staff receives all the courses identified in the PBNDS, regardless of their classification or the frequency of contact with detainees.</p>
<p>11. Situation Response Teams (SRTs) receive:</p> <ul style="list-style-type: none"> • Specialized training before undertaking their assignments. 	☒	☐	☐	
<p>12. Facility management and supervisory staff receive:</p> <ul style="list-style-type: none"> • Management and Supervisory training 	☒	☐	☐	
<p>13. (MANDATORY) Personnel authorized to use firearms receive training that covers their use, safety, and care and constraints on their use -- before being assigned to a post involving their possible use.</p>	☒	☐	☐	<p>Personnel authorized to use firearms, receives firearms training before being assigned any post requiring their use.</p>

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
14. (MANDATORY) All personnel authorized to use firearms demonstrate competency in their use at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires that all staff that has been trained in the use of firearms must demonstrate their firearms competency annually.
15. (MANDATORY) Personnel authorized to use chemical agents receive training in the use of chemical agents and in the treatment of individuals exposed to a chemical agent before being assigned to a post involving their possible use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires that all staff authorized to use chemical agents be trained in their use prior to being assigned to a post requiring their possible use.
16. All staff receives orientation and annual training on the facility's drug-free workplace program. Typical contents are: <ul style="list-style-type: none"> • Staff, contractors, and volunteers prohibited from: • Using illegal drugs. • Possessing illegal drugs except in the authorized performance of official duties. • Procedures to be used to ensure compliance. • Opportunities available for treatment and/or counseling for drug abuse. • Penalties for violation of the policy. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff receives pre-service and on-going training on the facility's drug free workplace program. Staff receives the initial training during their Institution Familiarization Training. Annual Refresher Training is conducted annually. The training covers all topics required by the PBNDS.
17. New staff is required to acknowledge in writing that they have reviewed and understand the facility's drug-free workplace program, and a copy of the signed acknowledgement is maintained in that person's personnel file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. All staff is trained during orientation and annually thereafter, regarding the facility's code of ethics. Typical contents are: <ul style="list-style-type: none"> • Staff, contractors, and volunteers prohibited from: • Using their official positions to secure privileges for themselves or others. • Engaging in activities that constitute a conflict of interest. • Accepting any gift or gratuity from, or engaging in personal business transactions with a detainee or a detainee's immediate family. • Acceptable behavior in the areas of campaigning, lobbying or political activities. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff receives pre-service and in-service training on the facility's code of ethics. Staff receives the initial training during their Institution Familiarization Training. Annual Refresher Training is conducted annually. The training covers all topics required by the PBNDS.
19. New staff are required to acknowledge in writing that they have reviewed and understand facility work rules, ethics, regulations, conditions of employment, and related documents, and a copy of the signed acknowledgement is maintained in that person's personnel file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>20. (MANDATORY) All staff in frequent contact with detainees is trained at least annually to respond to health-related emergencies within four minutes. The training is provided by a responsible medical authority in cooperation with the facility administrator and includes:</p> <ul style="list-style-type: none"> • Recognizing of signs of potential health emergencies and the required responses. • Administering first aid and cardiopulmonary resuscitation (CPR). • Obtaining emergency medical assistance through the facility plan and its required procedures. • Recognizing signs and symptoms of mental illness, suicide risk, retardation, and chemical dependency. • The facility's established plan and procedures for providing emergency medical care including, when required, the safe and secure transfer of detainees for appropriate hospital or other medical services, including by ambulance when indicated. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The training on health-related emergencies is conducted by medical staff. The training is provided in both the Institution Familiarization Training and during Annual Refresher Training. The training covers all topics required by the PBNS.</p>
<p>21. All staff in frequent contact with detainees are trained at least annually on the facility's Sexual Abuse and Assault Prevention and Intervention Program, to include:</p> <ul style="list-style-type: none"> • Understanding that sexual abuse or assault is never an acceptable consequence of detention. • Recognizing housing or other situations where sexual abuse or assault may occur. • Recognizing the physical, behavioral, and emotional signs of sexual abuse or assault and ways to prevent such occurrences. • Knowing how to report knowledge or suspicion of sexual abuse or assault and make intervention referrals in the facility's program. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>All staff receives Prison Rape Elimination Act (PREA) training. The training is provided during both the Institution Familiarization Training and during Annual Refresher Training. The training covers all topics required by the PBNS.</p>

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>22. (MANDATORY) All staff in frequent contact with detainees are trained at least annually on the facility's Suicide Prevention and Intervention Program, to include:</p> <ul style="list-style-type: none"> • Identifying the warning signs and symptoms of impending suicidal behavior, • Demographic, cultural, and precipitating factors of suicidal behavior, • Responding to suicidal and depressed detainees, • Communication between correctional and health care personnel, • Referral procedures, • Housing observation and suicide-watch level procedures, and • Follow-up monitoring of detainees who have attempted suicide. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff is trained in pre-service and on-going training on the facility's suicide prevention and intervention program. The training covers all topics required by the PBNDs.
<p>23. All staff is trained during orientation and annually to recognize the signs of a hunger strike and on the procedures for referral for medical assessment.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>24. All staff is trained in proper procedures for the care and handling of keys. Orientation training shall be accomplished before staff is issued keys, and key control shall be among the topics covered in annual training. Ordinarily, such training is done by the Security Officer or Key Control Officer.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff receives key control training provided by the security officer. The training is provided during both the Institution Familiarization Training and during Annual Refresher Training. The training covers all topics required by the PBNDs.

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
25. Through ongoing (at least annual) training, all detention facility staff is made aware of their responsibilities to control situations involving aggressive detainees. At a minimum, training shall include: <ul style="list-style-type: none"> • The requirements of this Detention Standard • The use of force continuum • Communication techniques • Cultural diversity • Dealing with the mentally ill • Confrontation-avoidance techniques • Approved methods of self-defense • Force cell-move techniques • Communicable diseases, particularly precautions to be taken for use of force • Application of restraints (progressive and hard) • Reporting procedures. 				All staff receives training on handling aggressive detainees. The training covers all the courses required by the PBNDS.
26. Employees are encouraged to continue their education and professional development through incentives such as salary enhancement, reimbursement of costs, and administrative leave.				Staff is encouraged to take ACA correspondence courses.

PART 7 – 40. STAFF TRAINING


Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

The staff training department has a comprehensive training program. The facility conducts pre-service training during the Institution Familiarization Training course and regular on-going training during the Annual Refresher Training course. All staff receives the same training. In addition, all staff is trained in all the subject matter required by the PBNDS on Staff Training. The Training Manager is well qualified with specialized "training for trainers" training.

Individual training files are maintained for all staff. Personnel authorized to use firearms receive training prior to being assigned to a post requiring firearms and are required to demonstrate firearms competency on an annual basis. Staff authorized to use chemicals, receive training in the use of chemicals and the treatment of individuals exposed to chemicals before being assigned to a post involving their possible use.

All staff is trained at least annually in health-related emergencies and suicide prevention and intervention

 / February 24, 2011
Signature / Date

PART 7 - 41. TRANSFER OF DETAINEES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. When a detainee is represented by legal counsel or a legal representative, and a G-28 has been filed, the representative of record is notified by the detainee's Deportation Officer within 24 hours of transfer. <ul style="list-style-type: none"> • The notification is recorded in the detainee's file • When the A-File is not available, notification is noted within ENFORCE. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Notification includes the reason for the transfer and the location of the new facility,	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff makes the appropriate notifications.
3. The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	For security reasons details are not given.
4. The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is accomplished in the ICE Field Office located in Chicago.
5. Facility policy mandates that: <ul style="list-style-type: none"> • Times and transfer plans are never discussed with the detainee prior to transfer. • The detainee is not notified of the transfer until immediately prior to departing the facility. • The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The detainee is provided with a completed Detainee Transfer Notification Form.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The notification form is provided to detainee regarding any transfer information.
7. Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. For medical transfers: <ul style="list-style-type: none"> • The Division of Immigration Health Services (DIHS) Medical Director or designee approves the transfer. • Medical transfers are coordinated through the local ICE/DRO office. • A medical transfer summary is completed and accompanies the detainee. • Detainee is issued a minimum of 7 days worth of prescription medications. 	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Medical transfers are approved through the Field Office in Chicago by appropriate ICE Personnel. Transfers are rare at this facility because they are screened prior to arrival at the facility.
9. Detainees are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number and the envelope is marked Medical Confidential.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 7 - 41. TRANSFER OF DETAINEES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. For medical transfers, transporting officers receive instructions regarding medical issues.				Transporting Officers are instructed to use general precautions on all detainees.
11. Detainee's funds, valuables and property are returned and transferred with the detainee to his or her new location.				Detainee funds and valuables are placed in a sealed bag, and the bag accompanies the detainee everywhere they go. Facility staff never opens the sealed bags.
12. Transfer and documentary procedures outlined in Section C and D are followed.				
13. Indigent detainees unable to make a telephone call at their new location are able to make a telephone call at the government's expense within 12 hours of arrival.				Calls for indigent detainees are arranged by ICE personnel.
14. Meals are provided when transfers occur during normally schedule meal times.				It is six hours to Chicago and meals are provided.
15. An A-File or work folder accompanies the detainee when transferred to a different Field Office or sub-office.				
16. A-Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.				

PART 7 - 41. TRANSFER OF DETAINEES

Meets Standard	Does Not Meet Standard	N/A	Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*

This inspector interviewed the Deportation Officer from Chicago and the Deportation Officer assigned to the facility and reviewed the files of several detainees. This inspector believes that this facility meets the standard as it relates to Transfer of Detainees.

(b)(6), (b)(7)(C) / February 24, 2011
nature / Date