## **Department of Homeland Security**

Immigration and Customs Enforcement
Office of Detention and Removal Operations

## **Condition of Confinement Review Worksheet**

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

This Form to be used for Inspections of all Facilities Used Over 72 Hours



# ICE Detention Standards Review Worksheet

🔯 Local Jail – IGSA
Local Jail – IGSA
☐ ICE Contract Detention Facility
Name
Jefferson County Detention Facility
Address (Street and Name)
911 Casey Avenue
City, State and Zip Code
Mt. Vernon, Illinois 62864
County
Jefferson
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)
(b)(6), (b)(7)c Sheriff
Name and Title of Lead Compliance Inspector
(b)(6), (b)(7)c Lead Compliance Inspector, MGT of America
Date[s] of Review
September 7-9, 2010
Type of Review
Headquarters Operational Special Assessment Other

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

# SECTION I DETAINEE SERVICES STANDARDS

## ACCESS TO LEGAL MATERIALS

POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.

FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPO	RTUNITY	TO PREPA	RE LEGAL	DOCUMENTS.
COMPONENTS	YES	No	NA	REMARKS
The facility provides a designated law library for detainee use.	$\boxtimes$			
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.				The facility uses LexisNexis to provide Attachment A materials. Therefore, there is no requirement to post the listing of materials.
The library contains a sufficient number of chairs, is well lit, and is reasonably isolated from noisy areas.	$\boxtimes$			
The law library is adequately equipped with typewriters and/or computers, and has sufficient supplies for daily use by the detainees.				The facility provides supplies as needed to the detainee population. The computers have no word processing capabilities and the facility does not provide typewriters. There are four computers. Three in the law library area and one in the SMU for use by the detainees. However, the computers only provide access to LexisNexis.
In addition to the physical law library, detainees have access to the Lexus Nexus electronic law library.	$\boxtimes$			
Where provided, the Lexus Nexus library is updated and is current.	$\boxtimes$			
Outside persons and organizations are permitted to submit published legal material for inclusion in the legal library. Outside published material is forwarded and reviewed by ICE prior to inclusion.	$\boxtimes$			
There is a designated ICE or facility employee who inspects, updates, and maintains/replaces legal materials and equipment on a routine basis.	$\boxtimes$			
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.	$\boxtimes$			
Detainees may request materials not currently in the law library. Each request is reviewed and, where appropriate, an acquisition request is timely initiated. Requests for copies of court decisions are accommodated within $3-5$ business days.				Any requests are collected and forwarded to the ICE Field Office for review.
Detainees are permitted to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	$\boxtimes$			
Illiterate or non-English-speaking detainees without legal representation receive access to more than just English-language law books after indicating their need for help.	$\boxtimes$			
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.	$\boxtimes$			
Detainees housed in Administrative Detention and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.	⊠			
All denials of access to the law library fully documented.			$\boxtimes$	There have been no denials of access to the law library.

ACCESS TO LEGAL MATERIALS						
POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.						
COMPONENTS	YES	No	NA	REMARKS		
Facility staff informs ICE Management when a detainee or group of detainees is denied access to the law library or law materials.	$\boxtimes$					
Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	$\boxtimes$					
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING						

Detainees at the facility are provided adequate access to the law library and legal materials via the LexisNexis computers. Detainees do not have access to typewriters, but are provided with materials to prepare handwritten legal drafts.

/ September 9, 2010 AUDITOR'S SIGNATURE / DATE

ADMISSION AND RELEASE								
POLICY: ALL DETAINEES WILL BE ADMITTED AND RELEASED IN A MANNER THAT ENSURES THEIR HEALTH, SAFETY, AND WELFARE. THE ADMISSIONS PROCEDURE WILL, AMONG OTHER THINGS INCLUDE: MEDICAL SCREENING; A FILE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WILL BE INVENTORIED, DOCUMENTED, AND SAFEGUARDED AS NECESSARY.								
COMPONENTS	YES	No	NA	REMARKS				
In-processing includes an orientation of the facility. The orientation includes: Unacceptable activities and behavior, and corresponding sanctions; How to contact ICE; The availability of <i>pro bono</i> legal services, and how to pursue such services; schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.	⊠			In-processing includes an orientation of the facility. Although not required for an IGSA, the facility provides all of the information identified in this component during orientation as well as in the facility handbook which all detainees receive.				
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.	$\boxtimes$			Initial medical screenings are performed by security staff that have received specialized training.				
Each new arrival is classified according to criminal history and threat levels. Criminal history is provided for each detainee by the ICE field office.	×			Each ICE detainee at the facility is initially classified by ICE Field Office staff.				
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.	$\boxtimes$							
Detainees are stripped searched only when cause has been established and not as routine policy. Non-criminal detainees are not strip-searched but are patted down, unless reasonable suspicion is established.	×							
The "Contraband" standard governs all personal property searches. IGSAs/CDFs use or have a similar contraband standard. Staff prepares a complete inventory of each detainee's possessions. The detainee receives a copy.	$\boxtimes$							
Staff completes Form I-387 or similar form for CDFs and IGSAs for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	$\boxtimes$							
Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	$\boxtimes$							
The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE Detainees are not charged for these items.	⊠							
All releases are properly coordinated with ICE using a Form I-203.			$\boxtimes$	This component is specific to SPCs/CDFs. All releases from the facility are coordinated utilizing the Justice Prison Alien Transportation System (JPATS) list provided by the ICE Field Office.				

ICE detainees at the facility receive a brief orientation and are provided with a copy of the National Detainee Handbook as well as a facility handbook. Security staff conducts the initial medical screening. They have been trained by medical staff on the assessment tool and completion of forms. All ICE detainees are classified by ICE Field Office staff prior to arrival at the facility.

DEFICIENT

(b)(6), (b)(7)c / September 9, 2010 AUDITOR'S SIGNATURE / DATE

Staff completes paperwork/forms for release as required.

**ACCEPTABLE** 

 $\boxtimes$ 

AT-RISK

REPEAT FINDING

## CLASSIFICATION SYSTEM

POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES

FROM DETAINEES IN OTHER CATEGORIES				
COMPONENTS	YES	No	NA	REMARKS
The facility has a system for classifying detainees. In CDFs and IGSAs, an Objective Classification System or similar is used.	$\boxtimes$			The facility has a classification system. However, classification of all ICE detainees is completed by the ICE Field Office staff prior to arrival at the facility.
<ul> <li>The facility classification system includes:</li> <li>Classifying detainees upon arrival;</li> <li>Separating from the general population those individuals who cannot be classified upon arrival; and</li> <li>The first-line supervisor or designated classification specialist reviewing every classification decision.</li> </ul>				
The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.			⊠	The intake/processing officer reviews all information provided by the ICE Field Office. Classifications are completed by the ICE Field Office prior to arrival at the facility.
Staff uses only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/ unconfirmed reports may be filed but are not used to score detainees classifications.				
Housing assignments are based on classification-level.				
A detainee's classification-level does not affect his/her recreation opportunities. Detainees recreate with persons of similar classification designations.	$\boxtimes$			
Detainee work assignments are based upon classification designations.	$\boxtimes$			
The classification process includes reassessment/reclassification. At IGSA's, detainees may request reassessment 60 days after arrival.	×			Detainees may submit requests for reassessment to the ICE Field Office 60 days after arrival.  Detainees are notified of their right to request reassessment through information contained in the National Detainee Handbook.
Procedures exist for a detainee to appeal their classification assignment. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.				IGSAs are not required to designate a supervisor or classification specialist as having authority to reduce a classification-level on appeal. Detainees wishing to appeal their classification assignment must submit a written request to the ICE Field Office.
Classification appeals are resolved within five business days and detainees are notified of the outcome within 10 business days.			×	This component is specific to SPCs/CDFs.  Classification appeals at the facility are handled by the ICE Field Office.
Classification designations may be appealed to a higher authority, such as the Warden or equivalent.			⊠	This component is specific to SPCs/CDFs. All classification appeals at the facility are handled by the ICE Field Office.
The Detainee Handbook or equivalent for IGSAs explains the classification levels, with the conditions and restrictions applicable to each.	$\boxtimes$			
			AT-RI	SK REPEAT FINDING

All ICE detainees are initially classified by the ICE Field Office staff prior to arrival at the facility. Classification appeals and subsequent reviews are also handled by the ICE Field Office. The ICE classification designation is utilized by the facility to determine housing assignments, and as justification for any assignment to the voluntary work program. The classification level of a detainee does not affect his/her recreational opportunities.

(b)(6), (b)(7)c / September 9, 2010 AUDITOR'S SIGNATURE / DATE

## CORRESPONDENCE AND OTHER MAIL

POLICY: ALL FACILITIES WILL ENSURE THAT DETAINESS SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.

COMPONENTS	YES	No	NA	REMARKS
The rules for correspondence and other mail are posted in each housing or common area, or provided to each detainee via a detainee handbook.	$\boxtimes$			The rules for correspondence and other mail are provided to each detainee via the facility handbook. The requirement to post the correspondence rules in housing units or common areas is only required for SPCs/CDFs. However, the facility posts the rules in the detainee housing units.
The facility provides key information in languages other than English; In the language(s) spoken by significant numbers of detainees. List any exceptions.		$\boxtimes$		The facility provides some information in languages other than English, but the majority of postings are in English only.
Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	$\boxtimes$			
Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	$\boxtimes$			
Staff does not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized in writing by the Warden or equivalent for prevailing security reasons.		$\boxtimes$		Incoming general correspondence is routinely opened and inspected for contraband without the detainee being present.
Staff does not read incoming general correspondence without the Warden's prior written approval.			$\boxtimes$	This component is specific to SPCs/CDFs. Facility staff do not read incoming general correspondence without permission from the Jail Administrator.
Staff does not inspect incoming special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.	$\boxtimes$			
Staff is prohibited from reading or copying incoming special correspondence.	$\boxtimes$			
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.	$\boxtimes$			
Correspondence to a politician or to the media is processed as special correspondence and is not read or copied.	$\boxtimes$			
The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.				The facility official authorizing the rejection of incoming mail sends written notice to the sender. Although IGSAs are not required to send notice to the addressee, the facility also provides notice to the detainee.
The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	$\boxtimes$			
Staff maintains a written record of every item removed from detainee mail.	$\boxtimes$			
The Warden or equivalent monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	$\boxtimes$			

CORRESPONDENCE AND OTHER MAIL								
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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.	$\boxtimes$							
Original identity documents (e.g., passports, birth certificates) are immediately removed and forwarded to ICE staff for placement in A-files.	$\boxtimes$							
Staff provides the detainee a copy of his/her identity document(s) upon request.	$\boxtimes$							
Staff disposes of prohibited items found in detainee mail in accordance with the "Control and Disposition of Contraband" Standard or the similar prevailing policy in IGSAs.	$\boxtimes$							
Every indigent detainee has the opportunity to mail, at government expense, reasonable correspondence about a legal matter, in three one ounce letters per week and packages deemed necessary by ICE.	$\boxtimes$							
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.	$\boxtimes$							
The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	$\boxtimes$							
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING								

Mail is processed into and out of the facility within one business day of receipt. Incoming general correspondence is opened and inspected outside the presence of the detainee.

(b)(6) (b)(7)c / September 9, 2010 AUDITOR'S SIGNATURE / DATE

#### DETAINEE HANDBOOK

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

ETC. EVERT DETAINEE WILL RECEIVE A COPT OF THIS HANDBOOK			The second secon	
COMPONENTS	YES	No	NA	REMARKS
The detainee handbook is written in English and translated into Spanish, or into the next most-prevalent Language(s).	$\boxtimes$			The facility has an ICE detainee handbook written in English and Spanish.
The handbook is supplemented by the facility orientation			521	The facility does not have an orientation
video, where one is provided.			$\boxtimes$	video.
All staff members receive a handbook and training regarding	$\boxtimes$			
the handbook contents.				
The handbook is revised as necessary and there are procedures	<u>-</u>			
in place for immediately communicating any revisions to staff				The handbook was last revised in June 2010.
and detainees.				The 6-11/2
There an annual review of the handbook by a designated committee or staff member.	$\boxtimes$			The facilities command staff perform an annual review of the handbook.
The detainee handbook addresses the following issues:				aminual review of the nandbook.
Personal Items permitted to be retained by the detainee; and     Initial issue of clothes, bedding and personal hygiene items.	⊠			
The detainee handbook states in clear language the basic detainee responsibilities.	$\boxtimes$			
The handbook clearly outlines the methods for classification of				
detainees, explains each level, and explains the classification	$\boxtimes$			
appeals process.				
The handbook states when a medical examination will be	$\boxtimes$			
conducted.	*			
The handbook describes the facility, housing units, dayrooms, in-dorm activities, and special housing units.	$\boxtimes$			
The handbook describes official count times and count procedures; meal times and feeding procedures; procedures for medical or religious diets; smoking policy; clothing exchange schedules; and, if authorized, clothes washing and drying procedures, and expected personal hygiene practices.	$\boxtimes$			All items listed in the component are outlined in the handbook.
The handbook describe times and procedures for obtaining disposable razors, and allows that detainees attending court will be afforded the opportunity to shave first.	$\boxtimes$			
The handbook describes barber hours and hair cutting restrictions.		×		The information in the handbook describing haircutting procedures is incorrect.  Detainees are no longer charged for haircuts.  Detainees are allowed to give each other haircuts.
The handbook describes the telephone policy; debit card procedures; direct and free calls; locations of telephones; policy when telephone demand is high; and policy and procedures for emergency phone calls.	Ø			All items listed in the component are outlined in the handbook.
The handbook addresses religious programming.	$\boxtimes$			
The handbook states times and procedures for commissary or vending machine usage, where available.	$\boxtimes$			
The handbook describes the detainee voluntary work program.	$\boxtimes$			
The handbook describes the library location and hours of operation, and law library procedures and schedules.		$\boxtimes$		The handbook does not list information pertaining to the law library procedures, schedule, and hours of operation.
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DETAINE	HAND	воок	gr.				
POLICY: EVERY OIC WILL DEVELOP A SITE-SPECIFIC DETAINEE HANDBOOK TO SERVE AS AN OVERVIEW OF, AND GUIDE TO, THE DETENTION POLICIES, RULES, AND PROCEDURES IN EFFECT AT THE FACILITY. THE HANDBOOK WILL ALSO DESCRIBE THE SERVICES, PROGRAMS, AND OPPORTUNITIES AVAILABLE THROUGH VARIOUS SOURCES, INCLUDING THE FACILITY, ICE, PRIVATE ORGANIZATIONS, ETC. EVERY DETAINEE WILL RECEIVE A COPY OF THIS HANDBOOK UPON ADMISSION TO THE FACILITY.							
COMPONENTS	YES	No	NA	REMARKS			
The handbook describes attorney and regular visitation hours, policies, and procedures.  The handbook describes the facility contraband policy.							
The handbook describes the facility visiting hours and schedule, and visiting rules and regulations.	×						
The handbook describes the correspondence policy and procedures.							
The handbook describes the detainee disciplinary policy and procedures, including:  • Prohibited acts and severity scale sanctions;  • Time limits in the Disciplinary Process; and  • Summary of the Disciplinary Process.	$\boxtimes$			All items listed in this component are outlined in the handbook.			
<ul> <li>The grievance section of the handbook explains all steps in the grievance process – Including: <ul> <li>Informal (if used) and formal grievance procedures;</li> <li>The appeals process;</li> <li>In CDF facilities: procedures for filing an appeal of a grievance with ICE.</li> <li>Staff/detainee availability to help during the grievance process.</li> <li>Guarantee against staff retaliation for filing/pursuing a grievance.</li> <li>How to file a complaint about officer misconduct with the Department of Homeland Security.</li> </ul> </li> </ul>	⊠			All items listed in this component are outlined in the handbook.			
The detainee handbook describes the medical sick call procedures for general population and segregation.	$\boxtimes$						
<ul> <li>The handbook describes the facility recreation policy including:</li> <li>Outdoor recreation hours.</li> <li>Indoor recreation hours.</li> </ul>	$\boxtimes$			The facility does not have an outdoor recreation area.			
The handbook describes the detainee dress code for daily living; and work assignments.	$\boxtimes$						
The handbook specifies the rights and responsibilities of all detainees.	$\boxtimes$						
ACCEPTABLE DEFICIENT	П	AT-RI	SK	REPEAT FINDING			

Detainees are provided a facility ICE detainee handbook which serves as an overview of the rules, policies, and procedures of the facility. The handbook describes the services, programs, and opportunities available.

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The food service program is under the direct supervision of a professionally trained and certified food service administrator. Responsibilities of cooks and cook foremen are in writing. The Food Service Administrator (FSA) determines the responsibilities of the Food Service Staff.		$\boxtimes$		The facility contracts with Consolidated Food Services for the food service program. There are five full-time employees and one part-time employee. The Food Service Administrator (FSA) does not have a Public Health Food Certificate. However, all other food service employees are certified.
The Cook Supervisor is on duty on days when the FSA is off duty and vice versa.			Ø	This component is not required of IGSAs.  However, the Cook Supervisor is on duty when the FSA is off duty and vice versa.
The FSA provides food service employees with training that specifically addresses detainee-related issues.  • In ICE Facilities this includes a review of the ICE "Food Service" standard			$\boxtimes$	Only civilian staff works in the food service program. The facility does not assign ICE detainees or non-ICE detainees to jobs in the food service area.
Knife cabinets close with an approved locking device, and the on-duty cook foreman maintains control of the key that locks the device.	$\boxtimes$			Facility Policy and Procedure 6-104, Food Service Tools, was reviewed.
All knives not in a secure cutting room are physically secured to the workstation and staff directly supervises detainees using knives at these workstations. Staff monitors the condition of knives and dining utensils.				There are no ICE detainees or non-ICE detainees assigned to work in the food service area. IGSAs are not required to have staff monitor the condition of knives and dining utensils; however, the facility does monitor these items.
When necessary, special procedures govern the handling of food items that pose a security threat.	$\boxtimes$			
Operating procedures include daily searches (shakedowns) of detainee work areas.			$\boxtimes$	There are no ICE detainees or non-ICE detainees assigned to work in the food service area.
The FSA monitors staff implementation of the facility's population counts procedures. Staff is trained in count procedures.			$\boxtimes$	There are no ICE detainees or non-ICE detainees assigned to work in the food service area.
The detainees assigned to the food service department look neat and clean. Their clothing and grooming comply with the "Food Service" standard.			×	There are no ICE detainees or non-ICE detainees assigned to work in the food service area.
The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.			×	There are no ICE detainees or non-ICE detainees assigned to work in the food service area.
The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.			⊠	There are no ICE detainees or non-ICE detainees assigned to work in the food service area.
<ul> <li>During orientation and training session(s), the CS explains and demonstrates:</li> <li>Safe work practices and methods;</li> <li>Safety features of individual products/pieces of equipment; and</li> <li>Training covers the safe handling of hazardous material[s] the detainees are likely to encounter in their work.</li> </ul>			⊠	There are no ICE detainees or non-ICE detainees assigned to work in the food service area.
The Cook Supervisor documents all training in individual detainee detention files.			$\boxtimes$	There are no ICE detainees or non-ICE detainees assigned to work in the food service area.
Detainees at CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at			$\boxtimes$	There are no ICE detainees or non-ICE detainees assigned to work in the food service

## FOOD SERVICE

POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.

COMPONENTS	YES	No	NA	REMARKS
IGSAs are subject to local and state rules and regulations regarding detainee pay.				area.
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.	Ø			The scheduled meal times at the facility are included in the facility handbook. The scheduled meal times are 6:00 AM, 11:00 AM and 5:00 PM.
For cafeteria style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.			$\boxtimes$	The facility does not have a cafeteria style operation.
The facility has a standard 35-day menu cycle. IGSAs use a 35 day or similar system for rotating meals.	$\boxtimes$			IGSAs are not required to have a 35-day menu cycle. However, the facility does utilize a 35-day menu cycle.
The FSA or facility considers the ethnic diversity of the facility's detainee population when developing menu cycles (Provide examples).	$\boxtimes$			The following food items were listed on the menu: Tortillas, Italian Pasta w/Meat Sauce. Tacos, Spanish Rice w/Meat, French Toast, and Meat Stroganoff.
A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	$\boxtimes$			Consolidated Food Service has a registered dietitian who conducts a complete nutritional analysis of every master-cycle menu.
The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	$\boxtimes$			Consolidated Food Service uses the Accu- Chef menu as a guide for the approved recipes.
All staff and volunteers know and adhere to written "food preparation" procedures.	$\boxtimes$			
Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	$\boxtimes$			
A common-fare menu available to detainees whose dietary requirements cannot be met on the main line.  Changes to the planned common-fare menu can be made at the facility level;  Hot entrees are offered three times a week;  The common-fare menus satisfy nutritional recommended daily allowances (RDAs);  Staff routinely provide hot water for instant beverages and foods;  Common-fare meals are served with:  Disposable plates and utensils.  Reusable plates and utensils.  Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items.	$\boxtimes$			The facility has a common-fare menu available to detainees whose dietary requirements cannot be met on the main line. The common-fare menu is coordinated with the medical staff or the chaplain's office.
A supervisor at the command level must approve a detainee's removal from the Common-Fare Program.	$\boxtimes$			
The Warden, in conjunction with the chaplain and/or local religious leaders, provides the FSA a schedule of the ceremonial meals for the following calendar year.	$\boxtimes$			

## FOOD SERVICE

POLICY: EVERY FACILITY WILL PROVIDE DETAINES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.

ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.	Vine	No	NA	Description
COMPONENTS	YES	No	NA	REMARKS
<ul> <li>The common-fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year.</li> <li>Muslims fasting during Ramadan receive their meals after sundown.</li> <li>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.</li> <li>Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent.</li> </ul>				
The food service program addresses medical diets.	$\boxtimes$			All medical diets are coordinated by the food service and medical staff.
Satellite-feeding programs follow guidelines for proper sanitation.			$\boxtimes$	The facility does not have a satellite-feeding program.
Hot and cold foods are maintained at the prescribed, "safe" temperature(s) while being served.	×			During this inspection, serving of the lunch and dinner meals was observed. All food was served at safe temperatures.
All meals are provided in nutritionally adequate portions.	$\boxtimes$			
Food is not used to punish or reward detainees based upon behavior.	$\boxtimes$			
<ul> <li>The food service staff instructs detainee volunteers on:</li> <li>Personal cleanliness and hygiene;</li> <li>Sanitary techniques for preparing, storing, and serving food; and</li> <li>The sanitary operation, care, and maintenance of equipment.</li> </ul>			⊠	There are no ICE detainees or non-ICE detainees assigned to work in the food service area.
Everyone working in the food service department complies with food safety and sanitation requirements.				
Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment.  • Who conducts the inspections?				Food service staff performs daily inspections of the food service areas. However, no documentation of the daily or weekly inspections was available at the time of this inspection.
Equipment is inspected for compliance with health and safety codes and regulations.  • When was the most recent inspection?  • Which agency conducted the inspection?	⊠			The Jefferson County Health Department last inspected the food service equipment on January 27, 2010.
Reports of discrepancies are forwarded to the Warden or designated department head, and corrective action is scheduled and completed.	$\boxtimes$			
Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal.		⊠		At the time of the inspection, standard procedures included checking temperatures of all dishwashing machines after each meal. However, the staff did not document the temperatures. Food service staff corrected this matter and began recording the temperatures the following day.
Staff documents the results of every refrigerator/freezer temperature check.	⊠			
The cleaning schedule for each food service area is conspicuously posted.	$\boxtimes$			

FOOD SERVICE  POLICY: EVERY FACILITY WILL PROVIDE DETAINES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.							
COMPONENTS	YES	No	NA	REMARKS			
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	×			Procedures include the documenting of all incoming food shipments for damage, contamination, and pest infestation. Staff provided supporting documentation.			
Storage areas are locked when not in use.	$\boxtimes$						
	☐ AT-RISK		-Risk	REPEAT FINDING			

The facility provides ICE detainees with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.

There are no ICE detainees or non-ICE detainees assigned to work in the food service area.

Several concerns were noted during the inspection regarding the overall food service operation. The Food Service Administrator (FSA) does not have a Public Health Food Certificate. There is a lack of documentation regarding the weekly inspections of the food preparation area and as well as other food service areas. At the time of the inspection, staff was not documenting the dishwasher temperatures. However, this concern was corrected prior to the end of the inspection.

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FUNDS AND PERSONAL PROPERTY						
POLICY: ALL FACILITIES WILL IMPLEMENT PROCEDURES TO CONTROL AND SAFEGUARD DETAINEES' PERSONAL PROPERTY. PROCEDURES WILL PROVIDE FOR THE SECURE STORAGE OF FUNDS, VALUABLES, BAGGAGE AND OTHER PERSONAL PROPERTY; THE DOCUMENTATION AND RECEIPTING OF SURRENDERED PROPERTY; AND THE INITIAL AND REGULARLY SCHEDULED INVENTORYING OF ALL FUNDS, VALUABLES, AND OTHER PROPERTY.  STANDARD 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	YES	No	NA	REMARKS		
Detainee funds and valuables are properly separated, stored, and are accessible only by designated supervisor(s).	$\boxtimes$			Facility policy and procedure, Sections 6-301/305, Detainee Property, was reviewed and complied with this component.		
Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.				The facility does not accept large valuables.		
Staff itemizes the baggage and personal property of arriving detainees (including funds and valuables). For IGSAs and CDFs, using a personal property inventory form that meets the ICE standard?	$\boxtimes$					
Staff forwards an arriving detainee's medication to the medical staff.	$\boxtimes$					
Audits of baggage and non-valuable property occur each quarter and audits are logged and verified.			$\boxtimes$	This component is not required of IGSAs. However, the facility performs weekly audits.		
Two officers are present during the processing of detainee funds and valuables during in-processing to the facility. Both officers verify funds and valuables.			$\boxtimes$	This component is not required of IGSAs. However, the facility does have two officers present during the processing of funds and property of ICE detainees.		
Staff searches arriving detainees and their personal property for contraband.			Ø	This component is not required of IGSAs. However, staff searches all arriving ICE detainees.		
Staff procedures follow written policy for returning forgotten property to detainees.	$\boxtimes$			The facility returns all forgotten property to ICE who then returns the property to the detainee.		
Property discrepancies are immediately reported to the CDEO or Chief of Security.			×	This component is not required of IGSAs. However, any discrepancy is reported to the shift supervisor.		
Staff follows written procedures when returning property to detainees.	$\boxtimes$					
CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.	$\boxtimes$					
The facility attempts to notify an out-processed detainee that he/she left property in the facility:  • By sending written notice to the detainee's last known address;  • Via certified mail; and  • The notice state that the detainee has 30 days in which to claim the property, after which it will be considered abandoned.				This component is not required of IGSAs. However, the facility does comply with the elements listed in this component.		
The facility disposes of abandoned property in accordance with written procedures.  • If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE.	⊠			The first sentence of this component is not required of IGSAs. However, the facility forwards abandoned property to ICE for processing.		
ACCEPTABLE DEFICIENT	AT-RI	SK		REPEAT FINDING		

The facility has policies and procedures in place to safe guard an ICE detainee's personal property.

#### DETAINEE GRIEVANCE PROCEDURES

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

COMPONENTS	YES	No	NA	REMARKS		
<ul> <li>Written procedures provide for the informal resolution of oral grievances (Not mandatory).</li> <li>If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff.</li> </ul>	$\boxtimes$			The facility handbook as well as facility policy and procedure, Detainee Grievances, 9-401/407, were reviewed.		
Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures.  • Detainees may seek help from other detainees or facility staff when preparing a grievance.  • Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary.	$\boxtimes$					
Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	$\boxtimes$					
There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodged a complaint:  • If yes, explain.		×		There are no documented cases of staff harassing or retaliating against a detainee for filing a grievance.		
Procedures include maintaining a Detainee Grievance Log.  If not, an alternative acceptable record keeping system is maintained.  "Nuisance complaints" are identified in the records.  For quality control purposes, staff document nuisance complaints received but not filed.	$\boxtimes$			The second and third bullet of this component are not required of IGSAs. The facility maintains a grievance log for three years. Nuisance complaints are identified in the grievance log.		
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	$\boxtimes$					
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING						

#### **REMARKS:**

The facility has developed and implemented policies and procedures which allow ICE detainees to file grievances and receive responses in a timely manner.

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#### GROUP LEGAL RIGHTS PRESENTATIONS POLICY: FACILITIES HOUSING ICE DETAINEES SHALL PERMIT AUTHORIZE PERSONS TO MAKE PRESENTATIONS TO GROUPS OF DETAINES FOR THE PURPOSE OF INFORMING THEM OF U.S. IMMIGRATION LAW AND PROCEDURES, CONSISTENT WITH THE SECURITY AND ORDERLY OPERATION OF EACH FACILITY. ICE ENCOURAGES SUCH PRESENTATIONS, WHICH INSTRUCT DETAINEES ABOUT THE IMMIGRATION SYSTEM AND THEIR RIGHTS AND OPTIONS WITHIN IT. 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. COMPONENTS No NA REMARKS YES There is one group approved by the ICE Field Office to enter the The Field Office is responsive to requests by attorneys and accredited $\boxtimes$ facility to facilitate group representatives for group presentations. presentations. Upon receipt of concurrence by the Field Office Director, the facility or authorized ICE Field Office ensures timely and proper notification $\boxtimes$ to attorneys or accredited representatives. The facility has a policy and procedure that complies with the requirements of this component. There have been no The facility follows policy and procedure when rejecting or requesting M denials or modifications made modifications to objectionable material provided or presented by the П attorney or accredited representative. by the facility in regard to objectionable materials provided or presented by the approved group. Posters announcing presentations appear in common areas at least 48 $\boxtimes$ П П hours in advance and sign-up sheets are available and accessible. Documentation is submitted and maintained when any detainee is No detainees have been denied $\Box$ П $\boxtimes$ denied permission to attend a presentation and the reason(s) for the permission to attend a presentation. denial. When the number of detainees allowed to attend a presentation is П limited, the facility provides a sufficient number of presentations so $\boxtimes$ П that all detainees signed up may attend. Detainees in segregation, unable to attend for security reasons, may request separate sessions with presenters. $\boxtimes$ Such requests are documented. Interpreters are admitted when necessary to assist attorneys and other $\boxtimes$ legal representatives. Presenters are afforded a minimum of one hour to make the M $\Box$ П presentation and to conduct a question-and-answer session. Staff permits presenters to distribute ICE-approved materials. X Presenters are permitted to meet with small groups of detainees to discuss their cases after the group presentation. ICE or authorized $\boxtimes$ detention staff is present but do not monitor conversations with legal providers. Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee; and the reasons for There have been no group suspension are documented. The Headquarters Office for Detention presenters that had their $\boxtimes$

X

П

 $\boxtimes$ 

П

privileges suspended.

outside organizations.

There have been no videotaped

presentations requested by

and Removal, Field Operations and Detention management Division,

is notified when a group or individual is suspended from making

The facility plays ICE-approved videotaped presentations on legal

A copy of the Group Legal Rights Presentation policy, including

rights at regular opportunities, at the request of outside organizations.

attachments, is available to detainees upon request

presentations.

GROUP LEGAL RIGHTS PRESENTATIONS					
POLICY: FACILITIES HOUSING ICE DETAINEES SHALL PERMIT AUTHORIZE PERSONS TO MAKE PRESENTATIONS TO GROUPS OF DETAINEES FOR THE PURPOSE OF INFORMING THEM OF U.S. IMMIGRATION LAW AND PROCEDURES, CONSISTENT WITH THE SECURITY AND ORDERLY OPERATION OF EACH FACILITY. ICE ENCOURAGES SUCH PRESENTATIONS, WHICH INSTRUCT DETAINEES ABOUT THE IMMIGRATION SYSTEM AND THEIR RIGHTS AND OPTIONS WITHIN IT.					
☐ 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.					
COMPONI	ENTS	YES	No	NA	REMARKS
□ ACCEPTABLE	□ DEFICIENT	☐ AT-RISK		□R	EPEAT FINDING

The National Immigrant Justice Center (NIJC) has been approved by the Chicago Field Office to provide group legal rights presentations at the facility. The presentations are conducted twice a year. A notice is posted immediately upon notification to the facility that the NIJC will be providing services. Detainees in the Special Management Unit who are unable to participate in the group presentation may request a separate session with the presenters.

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ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS						
POLICY: ICE REQUIRES THAT ALL FACILITIES HOUSING ICE DETAINEES EVERY ICE DETAINEE UPON ARRIVAL. FURTHER, FACILITIES SHALL PROVLINENS, AND TOWELS FOR AS LONG AS THEY REMAIN IN DETENTION.						
COMPONENTS	YES	No	NA	REMARKS		
<ul> <li>The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, and towels.</li> <li>The supply of these items exceeds the minimum required for the number of detainees.</li> </ul>	$\boxtimes$			The facility handbook and facility policy and procedures 6-405 and 406, Issuance and Exchange of Clothing, were reviewed and document compliance.		
<ul> <li>All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive:</li> <li>One uniform shirt and one pair of uniform pants, or one jumpsuit;</li> <li>One pair of socks;</li> <li>One pair of underwear (Daily change); and</li> <li>One pair of facility-issued footwear.</li> </ul>				IGSAs are not required to comply with the second sentence and all of the bulleted items. However, the facility ensures all ICE detainees are issued all the items listed in the component.		
Additional clothing is available for changing weather conditions, or as seasonally appropriate.	$\boxtimes$					
New detainees are issued clean bedding, linens, and towels. They receive at a minimum:  One mattress; One blanket; Two sheets; One pillowcase; One towel; and Additional blankets are issued based on local weather conditions.	×			IGSAs are not required to comply with the second sentence and all of the bulleted items. However, the facility ensures all ICE detainees are issued all the items listed in the component.		
Detainees assigned to special work areas are clothed in accordance with the requirements of the job.	$\boxtimes$					
Detainees are provided clean clothing, linen and towels.  Socks and undergarments - exchanged daily.  Outer garments - twice weekly.  Sheets - weekly.  Towels - weekly.  Pillowcases - weekly.						
Food service detainee volunteer workers are permitted to exchange outer garments daily.			$\boxtimes$	This component is not required of IGSAs. This facility does not have any ICE detainees or non-ICE detainees working in the food service area.		
Volunteer detainee workers are permitted to exchange outer garments more frequently.			$\boxtimes$	This component is not required of IGSAs. However, volunteer workers are allowed to exchange outer garments when dirty.		
ACCEPTABLE DEFICIENT	AT-RI	sk		REPEAT FINDING		

The facility has policies and procedures in place which provide ICE detainees with the adequate issuance and exchange of clothing, bedding, towels and linens.

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MARRIAGE REQUESTS						
POLICY: ALL DETAINEE MARRIAGE REQUESTS WILL RECEIVE CASE-BY-CASE CONSIDERATION FROM ICE MANAGEMENT.  COMPONENTS YES NO NA REMARKS						
The Field Office considers detainee marriage requests on a case-by-case basis.	$\boxtimes$			All marriage requests are forwarded to the Chicago Field Office for approval or denial.		
The Field Office Director reviews every marriage request rejected by a Warden/OIC or IGSA. Rejections are documented.			$\boxtimes$	The Facility Administrator does not reject or approve any marriage request.		
It is standard practice to require a written request for permission to marry.	$\boxtimes$					
The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	$\boxtimes$					
The Warden/OIC provides a written copy of his/her decision to the detainee and his/her legal representative.			×	The Chicago Field Office handles all marriage requests. All approvals/denials are forwarded to the ICE detainee.		
When permission is denied, the Warden/OIC states the basis for his/her decision.			×	If permission is denied, the Facility Administrator forwards the decision of the ICE Field Office to the detainee.		
The Warden/OIC provides the detainee with a place and time to make wedding arrangements.	$\boxtimes$			If the request is approved, the facility will provide a location for the marriage ceremony.		
□ ACCEPTABLE □ DEFICIENT □	AT-RISI	K		REPEAT FINDING		

The facility has policies and procedures in place for processing marriage requests of ICE detainees.

(b)(6) (b)(7)c / September 9, 2010 AUDITOR'S SIGNATURE / DATE

NON-MEDICAL EMERGENCY ESCORTED TRIPS					
POLICY: THE IMMIGRATION AND CUSTOMS ENFORCEMENT (ICE) MAY PROVIDE DETAINEES WITH STAFF-ESCORTED TRIPS INTO THE COMMUNITY FOR THE PURPOSE OF VISITING CRITICALLY ILL MEMBERS OF THE DETAINEE'S IMMEDIATE FAMILY, OR FOR ATTENDING FUNERALS.					
STANDARD N/A: 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	YES	No	NA	REMARKS	
The Field Office Director considers and approves, on a case-by-case basis, trips to an immediate family member's:  • Funeral; or • Deathbed				The facility has not received any requests for a non-medical emergency escorted trip. However, the facility may transport ICE detainees depending on the security precautions. Facility policy 4-700, Transportation of Detainees, dated 1-2009, describes the procedures for non-medical emergency escorted trips.	
The facility recognizes mother, father, brother, sister, spouse, child, step-parent, and foster parent as "immediate family".	$\boxtimes$				
The IGSA facility notifies ICE of all detainee requests for non-medical escorts.	$\boxtimes$			There have been no requests within the last 12 months.	
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.	$\boxtimes$				
Each escort includes at least two officers.	$\boxtimes$				
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.	⊠				
Escorting officers have the discretion to increase or decrease minimum restraints in accordance with written procedures and classification level of the detainee.	$\boxtimes$				
Escort officers are precluded from accepting gifts/gratuities from a detainee, or detainee's relative or friend for any reason.	$\boxtimes$				
<ul> <li>Escort officers ensure that detainees:</li> <li>Conduct themselves in a manner that does not bring discredit to the ICE;</li> <li>Do not violate federal, state, or local laws;</li> <li>Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants;</li> <li>Make no unauthorized phone calls; and</li> <li>Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return.</li> </ul>					
Standard procedure requires the immediate return to the facility of any detainee who violates trip rules.	$\boxtimes$				
□ ACCEPTABLE □ DEFICIENT □	AT-RISE	ζ		REPEAT FINDING	

The facility complies with the NDS regarding Non-Medical Escorted Trips.

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RECREATION  POLICY: IT IS ICE POLICY TO PROVIDE ACCESS TO RECREATIONAL PROGRAMS AND ACTIVITIES TO ALL ICE DETAINEES, TO THE EXTENT				
POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROT				
COMPONENTS	YES	No	NA	REMARKS
The facility has a recreation program and facility.				The facility handbook was reviewed and confirmed that a recreation program has been established.
A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.			⊠	This component is not required of IGSAs. The facility does not have a recreation specialist, and the detainee population is less than 350.
Regular maintenance keeps recreational facilities and equipment in good condition.				
The recreational specialist or trained equivalent supervises detained recreation workers.			$\boxtimes$	The facility does not have a recreational specialist.
The recreational specialist or trainee equivalent oversees recreation programs for special housing units (SHU) and special-needs detainees.				Security staff supervises recreational activities.
Dayrooms offer sedentary activities, e.g., board games, cards, television.				
Outside activities are restricted to limited-contact sports.			$\boxtimes$	The facility does not have an outdoor recreation area.
Each detainee has the opportunity to participate in daily recreation.				All ICE detainees are allowed at least one hour daily recreation.
Detainees have access to recreation activities outside the housing units for at least one hour daily, 5 days a week.	$\boxtimes$			All ICE detainees are allowed at least one hour recreation seven days a week.
Staff checks all items for damage and condition when equipment is returned.				The facility has no recreational equipment.
Staff conducts searches of recreation areas before and after use.	$\boxtimes$			Security staff regularly search the recreational area.
All recreation areas under constant staff supervision.	$\boxtimes$			
Supervising staff is equipped with radios.	X			
The facility provides detainees in the SHU at least one hour of outdoor recreation time daily, five times per week.		$\boxtimes$		The facility does not have an outdoor recreation area.
Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his/her recreation privileges.				
Special programs or religious activities are available to detainees.	$\boxtimes$	<u> </u>		
Volunteers are required to sign a waiver of liability before entering a secure portion of the facility where detainees are present.				This component is not required of IGSAs. However, the facility does require a waiver of liability be signed by volunteers prior to entry into the facility.
Visitors, relatives or friends are not allowed to serve as volunteers.			⊠	This component is not required of IGSAs. However, the facility does not allow visitors, relatives or friends to serve as volunteers.
☐ If outdoor recreation is offered, check this box. No further inform	nation is	required	when o	utdoor recreation is offered.
If the facility has no outside recreation, are detainees considered for transfer after six months?  • If yes, written procedures ensure timely review of all eligible detainees.	⊠			
Case officers make written transfer recommendations about every sixmonth detainee to the OIC.	$\boxtimes$			The facility does not have a case officer. All transfer requests are initiated by ICE staff.

RECREATION  POLICY: IT IS ICE POLICY TO PROVIDE ACCESS TO RECREATIONAL PROGRAMS AND ACTIVITIES TO ALL ICE DETAINEES, TO THE EXTENT POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTECT THEIR SAFETY AND WELFARE.					
The OIC documents all detainee-transfer decisions, whether yes or no.	$\boxtimes$			The facility documents all detainee transfer decisions.	
The detainee's written decision for or against an offered transfer documented in his/her A-file.	$\boxtimes$				
Staff notifies the detainee's legal representative of his/her decision to accept/decline a transfer.	$\boxtimes$			The detainees' legal representative would be notified of his/her decision to accept/decline a transfer.	
If no recreation is available, the ICE Districts routinely review transfer eligibility for all detainees after 60 days.	$\boxtimes$				
The A-file of every detainee who is held more than 60 days without access to recreation contains either a transfer-waiver signed by the detainee, or the OIC's written determination of the detainee's ineligibility for transfer.	⊠				
The detainee's legal representative is notified of the detainee's/OIC's decision.	$\boxtimes$				
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING					

The facility has policies and procedures in place which provide ICE detainees with access to recreational activities.

(b)(6), (b)(7)c / September 9, 2010 AUDITOR'S SIGNATURE / DATE

RELIGIOUS PRACTICES						
POLICY: FACILITIES WILL PROVIDE ICE DETAINEES OF ALL FAITHS WITH REASONABLE AND EQUITABLE OPPORTUNITIES TO PARTICIPATE IN THE PRACTICES OF THEIR FAITH, LIMITED ONLY BY THE CONSTRAINTS OF SAFETY, SECURITY, THE ORDERLY OPERATIONS OF THE FACILITY AND BUDGETARY CONSIDERATIONS.						
COMPONENTS	YES	No	NA	REMARKS		
Detainees are allowed to engage in religious services.	⊠			The facility handbook and facility policy and procedure 15-500/508, Religious Practices, were reviewed and indicate compliance.		
Space is available for detainees to conduct religious services.				The facility has an area for ICE detainees to conduct religious services.		
The facility allows detainees to observe the major "holy days" of their religious faith.  • List any exceptions.	$\boxtimes$					
The facility accommodates recognized holy-day observances by:  • Providing special meals, consistent with dietary restrictions;  • Honoring fasting requirements;  • Facilitating religious services; and  • Allowing activity restrictions.			$\boxtimes$	This component is not required of IGSAs. However, the facility does recognize holy-day observances, and provides for all requirements of this component.		
Each detainee is allowed religious items in his/her immediate possession.	$\boxtimes$					
Volunteer's credentials are checked and verified before allowing participation in detainee programs.	$\boxtimes$					
Members of faiths not represented by clergy may conduct their own services within security allowances.		$\boxtimes$		The facility allows only approved clergy to perform services.		
Detainees in the Special Management Unit are allowed to participate in religious practices unless otherwise documented for the safety and security of the facility.	⊠			Detainees in the Special Management Unit are allowed to participate in religious services unless there is a documented concern regarding the safety and security of the facility.		
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING						

The facility has policies and procedures in place which provide ICE detainees of all faiths with reasonable opportunities to participate and practice their faith.

DETAINEE TELEPHONE ACCESS							
POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DE	ETAINEES			AND EQUITABLE ACCESS TO TELEPHONES.			
COMPONENTS	YES	No	NA	REMARKS			
Detainees are allowed access to telephones during established facility waking hours.							
Upon admittance, detainees are made aware of the facility's telephone access policy.	$\boxtimes$			The facility telephone policy is included in the facility handbook as well as in postings in the detainee housing areas.			
Access rules are posted in housing units.	$\boxtimes$						
The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.		$\boxtimes$		Key information is provided to the detainee population in English.			
Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.							
Telephones are inspected regularly by facility staff to ensure that they are in good working order.	$\boxtimes$						
The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	$\boxtimes$						
The facility administration monitors repair progress and takes appropriate measures to ensure that required repairs are begun and completed timely.	$\boxtimes$						
Detainees are afforded a <i>reasonable degree of privacy</i> for legal phone calls.	$\boxtimes$						
A procedure exists to assist a detainee who is having trouble placing a confidential call.	$\boxtimes$						
The facility provides the detainees with the ability to make non-collect (special access) calls.	$\boxtimes$						
Special Access calls are at no charge to the detainees.	$\boxtimes$						
The OIG phone number for reporting abuse is programmed into the detainee phone system and the phone number was checked by the inspector during the review.	$\boxtimes$			The OIG number for reporting abuse is programmed into the detainee phone system. It was checked and was operable during the inspection.			
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.				The facility meets the requirement for access to the OIG.			
No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".							
Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.	$\boxtimes$			Requests are made to the facility ICE liaison for review.			
Any telephone restrictions are documented.			$\boxtimes$	There have been no documented cases of telephone restrictions.			
The facility has a system for taking and delivering emergency detainee telephone messages.	$\boxtimes$						
Emergency phone call messages are immediately given to detainees.	$\boxtimes$						
Detainees are allowed to return emergency phone calls as soon as possible.	☒						
Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	⊠						
Detainees in disciplinary segregation are allowed phone calls to	$\square$						

DETAINEE TELEPHONE ACCESS  POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.						
COMPONENTS	YES	No	NA	REMARKS		
consular/embassy officials.						
Detainees in disciplinary segregation are allowed phone calls for family emergencies.	$\boxtimes$					
Detainees in administrative detention and protective custody are afforded the same telephone privileges as those in general population.	×					
When detainee phone calls are monitored, notification is posted by detainee telephones that phone calls made by the detainees may be monitored. Special Access calls are not monitored.	$\boxtimes$			Detainee telephones are monitored and recorded. Postings were noted adjacent to all detainee telephones in the housing units. Notice is also included in the facility handbook.		
☐ ACCEPTABLE ☐ DEFICIENT		AT-RIS	К	REPEAT FINDING		

Detainees have access to telephones during established facility waking hours. Access rules are posted in the housing units, and are also included in the facility handbook. Telephones were checked during this inspection and found to be operable. The facility has policies addressing the handling of emergency telephone calls, and providing messages to the detainee when necessary.

VISITATION								
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.								
COMPONENTS	YES	No	NA	REMARKS				
There is a written visitation schedule and hours for general visitation.	$\boxtimes$							
The visitation hours tailored to the detainee population and the demand for visitation.	$\boxtimes$							
The visitation schedule and rules are available to the public.	$\boxtimes$			The facility visitation rules are posted in the entry foyer and visitor waiting area.				
The hours for all categories of visitation are posted in the visitation waiting area.	$\boxtimes$							
A written copy of the rules regulating visitation and the hours of visitation is available to visitors.	$\boxtimes$							
A general visitation log is maintained.	$\boxtimes$							
The detainees are permitted to retain personal property items specified in the standard.	$\boxtimes$							
A visitor dress code is available to the public.	$\boxtimes$			The visitor dress code is posted in the visitor waiting area.				
Visitors are searched and identified according to standard requirements.				Visitors are identified by staff prior to entry into the visiting area. Visitors are not searched since they are not allowed into a secure area of the facility. The facility utilizes a video visiting system and the detainee remains in the housing unit separate from the visitors. All social visits are noncontact.				
The requirement on visitation by minors is complied with.	$\boxtimes$							
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.			$\boxtimes$	Minors are allowed to visit at the facility.				
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.			$\boxtimes$	Minors are allowed to visit at the facility.				
Detainees in special housing are afforded visitation.	$\boxtimes$							
Legal visitation is available seven (7) days a week, including holidays.	$\boxtimes$							
On regular business days legal visitation hours are provide for a minimum of eight (8) hours per day, and a minimum of four hours per day on weekends and holidays.	$\boxtimes$							
On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	$\boxtimes$							
Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	$\boxtimes$							
There are written procedures governing detainee searches.				Facility policy #4-600, Searches, outlines the facility's procedures governing detainee searches.				
When strip searches are required after every contact visit with a legal representative, the facility provides an option for non-contact visits with legal representatives			⊠	Strip searches are not required after every contact visit with a legal representative.				

VISITATION							
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.							
Prior to each visit, legal service providers and assistants are identified per the standard.	$\boxtimes$						
The current list of <i>pro bono</i> legal organizations is posted in the detainee housing areas and other appropriate areas.	$\boxtimes$						
The decision to permit or deny a tour is not delegated below the level of Field Office Director.	$\boxtimes$						
Provisions for NGO visitation, as stated in the Detention Standards, are complied with.							
Law enforcement officials who request to visit with a detainee are referred to the ICE Field Office for approval.	$\boxtimes$						
Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the OIC or ICE Field Office.	$\boxtimes$						
Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.				Any request for examinations by an independent medical service provider or expert is forwarded to the ICE Field Office for review.			
□ ACCEPTABLE □ DEFICIENT		AT-RI	sk	REPEAT FINDING			

Detainees are allowed general visitation on a scheduled basis in accordance with the NDS. The schedule is posted in the housing units, and is available to the public in the visitor waiting area. The facility utilizes a video visiting system which requires the detainee and visitor to converse via a video monitor and telephone from different locations. The visitor dress code and visiting rules are prominently posted in the visitor waiting area and facility entry foyer.

VOLUNTARY WORK PROGRAM							
POLICY: IN EVERY FACILITY OFFERING A VOLUNTARY WORK PROGRAM, ICE DETAINEES WILL HAVE THE OPPORTUNITY TO WORK AND EARN MONEY BY PARTICIPATING. WHILE NOT LEGALLY REQUIRED, ICE AFFORDS DETAINEE WORKERS BASIC OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA) PROTECTIONS.							
☐ 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	YES	No	NA	REMARKS			
Does the facility have a voluntary work program?	$\boxtimes$						
Do ICE detainees participate?				In the men's housing unit the			
Detainee housekeeping meets neatness and cleanliness standards.		⊠		In the men's housing unit, the vents were blocked and light fixtures where covered with paper. In the female housing unit, the walls were covered with graffiti.			
Detainees have the opportunity to participate in special details, however, are never allowed to work outside the secure perimeter.	×			No ICE detainees work outside the secure perimeter.			
Written procedures govern selection of detainees for the Voluntary Work Program.	$\boxtimes$			The ICE detainee handbook provides information about the Voluntary Work Program.			
Where possible, physically and mentally challenged detainees participate in the program.	$\boxtimes$						
The facility complies with work-hour requirements for detainees, not exceeding:  • Eight hours a day and Forty hours a week.			×	This component is not required of IGSAs. However, the facility does not exceed the work-hour requirements for detainees.			
Detainee volunteers generally work according to fixed schedule.							
If a detainee is removed from a work detail, staff places the written justification for the action in the detainee's detention file.				If an ICE detainee is removed from a work detail, a written justification for the action is given to the detainee and a copy is placed in the detainee's detention file.			
Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	$\boxtimes$			Prior to an ICE detainee being allowed to work s/he must sign a Trustee Contract which outlines the responsibilities of the work program.			
The voluntary work program meets:  OSHA, NFPA, ACA standards	$\boxtimes$						
Medical staff screen and formally certify detainee food service volunteers.  Before the assignment begins; and As a matter of written procedure			×	There are no ICE detainees assigned to the food service area.			
Detainees receive safety equipment/ training sufficient for the assignment.	×						
Proper procedure is followed when an ICE detainee is injured on the job.	$\boxtimes$						
ACCEPTABLE DEFICIENT	AT-RISI	7		REPEAT FINDING			

The facility has a volunteer work program and ICE detainees are provided the opportunity to work and earn money by participating.

(b)(6) (b)(7)c / September 9, 2010 AUDITOR'S SIGNATURE / DATE

# SECTION II HEALTH SERVICES STANDARDS

## HUNGER STRIKES

POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.

WILL STRIVE TO SUSTAIN THEIR LIVES.		SALENSIS		<b>公司等例在公司等的</b> 的特别的公司等
COMPONENTS	YES	No	NA	REMARKS
When a detainee has refused food for 72 hours, it is standard practice for staff to refer him/her to the medical department.			⊠	IGSAs are not required to refer a detainee who has refused food for 72 hours to the medical department. This facility refers the detainee to both the medical department and the Officer in Charge (OIC).
CDFs and IGSAs immediately report a hunger strike to the ICE.	$\boxtimes$			The OIC is responsible for reporting a hunger strike to ICE.
The facility has established procedures to ensure staff respond immediately to a hunger strike.	×			Facility Policy 5-214 and Health Care Management Policy 14-500 address this component.
Policy and procedure require that staff isolate a hunger-striking detainee from other detainees.  • If yes, in an observation room?			$\boxtimes$	IGSAs are not required to isolate a hunger striking detainee from other detainees. At this facility, a hunger striking detainee is placed on locked down status.
Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.			$\boxtimes$	In IGSAs, authorization to place a detainee in a special management unit or locked hospital room is not required. At this facility, medical staff determines the time when a hunger striking detainee is placed in a medical isolation cell.
Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.				At an IGSA, medical staff is not required to record the weight and vital signs of a hunger striking detainee at least once every 24 hours. At this facility, medical staff records the weight and vital signs at the onset of the hunger strike and at least once every 24 hours.
The OIC of the facility obtains a hunger striker's consent before medical treatment.	$\boxtimes$			Physical, mental health, and other medical procedures require the informed consent of the detainee.
A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.			$\boxtimes$	In IGSAs, detainees who reject medical evaluation or treatment are not required to sign a Refusal of Treatment form. At this facility, detainees are required to sign a Release of Responsibility form.
During a hunger strike, staff document and provide the hunger-striking detainee three meals a day.			$\boxtimes$	IGSAs are not required to document and provide the hunger striking detainee three meals a day. At this facility, the detainee is provided three meals per day.
Staff maintains the hunger striker's supply of drinking water/other beverages.				IGSAs are not required to maintain the hunger striker's supply of drinking water or other beverages. At this facility, staff provides an adequate supply of drinking water or other liquids.

HUNGER STRIKES						
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.						
During a hunger strike, staff removes all food items from the hunger striker's living area.			⊠	IGSAs are not required to remove all food items from the hunger striker's living area. At this facility, commissary food items are removed from the detainee's living area.		
Staff is directed to record the hunger striker's fluid intake and food consumption; Does staff always use Hunger Strike Monitoring Form I-839 or similar IGSA form.				IGSAs are not required to record the hunger striker's fluid intake and food consumption. At this facility, security staff records the food and fluid intake of each hunger striking detainee, and report that information to medical staff.		
The medical staff has written procedures for treating hunger strikers.	$\boxtimes$			The procedures are outlined in Health Care Management policy 14-500.		
Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.			×	IGSAs are not required to document all treatment attempts, including attempts to persuade the hunger striker of medical risks. Facility staff does make reasonable efforts to convince the detainee to accept treatment.		
Staff has received training in identification of hunger strikes. Medical staff receives early training in hunger-strike evaluation and treatment. Staff remains current in evaluation and treatment techniques.	$\boxtimes$			All staff is trained in hunger strike identification and treatment. Facility policy 5-214, Hunger/Medication Strike, addresses this component.		
□ ACCEPTABLE    □ DEFICIENT    □ AT-RISK    □ REPEAT FINDING						

There have been no hunger strikes at this facility since the last review.

Facility policy and procedure is comprehensive regarding the identification and treatment of hunger striking detainees.

/ September 9, 2010 AUDITOR'S SIGNATURE / DATE

## ACCESS TO MEDICAL CARE

POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR

THE GENERAL WELL-BEING OF ICE DETAINEES.							
COMPONENTS	YES	No	NA	REMARKS			
<u>Facilities</u> operate a health care facility in compliance with state and local laws and guidelines.	×			The facility operates in compliance with state of Illinois and local guidelines.			
The facility's in-processing procedures for arriving detainees include medical screening.	$\boxtimes$			All detainees receive medical screening during the booking process.			
All detainees have access to and receive medical care.	$\boxtimes$			Detainees are advised verbally during the orientation by medical staff of how to access medical care. This information is also included in the facility handbook.			
The facility has access to a PHS/DIHS Managed Health Care Coordinator.	$\boxtimes$			The Health Services Supervisor has access to a DIHS Managed Health Care Coordinator.			
The medical staff is large enough to provide, examine, and treat the facility's detainee population.	$\boxtimes$			The medical staff includes a licensed practical nurse (LPN) manager, four certified nursing assistants (CNAs), a physician's assistant and a physician.			
The facility has sufficient space and equipment to afford detainee privacy when receiving health care.	$\boxtimes$			The Health Service Unit is comprised of two offices. One is an office/exam room. The other is a storage/pharmaceutical room.			
The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.			$\boxtimes$	At an IGSA, the medical facility, or Health Service Unit (HSU), is not required to have its own restricted access area. At this facility, the HSU is in a restricted access area.			
The medical facility entrance includes a holding/waiting room.			$\boxtimes$	An IGSA is not required to include a holding/waiting room at the medical facility/ HSU entrance. This facility utilizes the storage room as a small waiting area.			
The medical facility's holding/waiting room is under the direct supervision of custodial staff.			$\boxtimes$	IGSAs are not required to have the holding/waiting room under the direct supervision of custodial staff. At this facility, the waiting area is under the direct supervision of security staff.			
Detainees in the holding/waiting room have access to a drinking fountain.			⊠	IGSAs are not required to provide access to a drinking fountain for detainees in the waiting room. At this facility, there is no drinking fountain in the holding/waiting area. However, detainees may request water which is provided from a sink in the room.			
Medical records are kept apart from other files. They are:     Secured in a locked area within the medical unit;     With physical access restricted to authorized medical staff; and     Procedurally, no copies made and placed in detainee files.	$\boxtimes$			The facility uses a paper medical record. Medical records are stored in locked file cabinets in a locked office with restricted access.			
Pharmaceuticals are stored in a secure area.			$\boxtimes$	IGSAs are not required to store pharmaceuticals in a secure area. At this facility, pharmaceuticals are stored in a locked medication cart in a locked office which has restricted access.			

ACCESS TO MEDICAL CARE							
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.							
<ul> <li>Medical screening includes a Tuberculosis (TB) test.</li> <li>Every arriving detainee receives a TB test during the admission process;</li> <li>Detainee's TB-screening does not occur more than one business day after his/her arrival at the facility; and</li> <li>Detainees not screened are housed separate from the general population.</li> </ul>	$\boxtimes$			Detainees receive tuberculosis testing in a timely manner.			
All detainees receive a mental-health screening upon arrival.  It is conducted:  By a health care provider or specially trained officer; and  Before a detainee's assignment to a housing unit.	⊠			IGSAs are not required to provide mental health screening to detainees before assignment to a housing unit. At this facility, detainees receive a mental health screening upon arrival during the booking process by a specially trained officer.			
The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.			⊠	IGSAs are not required to have the health care provider promptly review the medical screening results to identify detainees needing medical attention. At this facility, medical staff reviews the screening immediately, as clinically indicated, or the morning after admission.			
The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.	$\boxtimes$			All detainees receive a physical assessment within 14 days of admission.			
Detainees in the Special Management Unit have access to health care services.	$\boxtimes$			Medical personnel make rounds in the special management unit at least daily.			
Staff provides detainees with health services (sick call) request slips daily, upon request.  • Request slips are available in languages other than English, including every language spoken by a sizeable number of the facility's detainee population.  • Service-request slips are delivered in a timely fashion to the health care provider.	⊠			IGSAs are not required to provide detainees with health services (sick call) request slips daily, upon request; nor are they required to provide the request slips in languages other than English. This facility provides sick call request slips in English and Spanish. The slips are delivered and retrieved on a daily basis.			
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.				Health Care Policy 14-600 Administration of Treatment addresses this component.			
The plan includes an on-call provider.			×	While IGSAs are not required to have a plan including an on-call provider, this facility has a physician and a licensed practical nurse (LPN) on call 24 hours a day, seven days a week.			
The plan includes a list of telephone numbers for local ambulance and hospital services.			$\boxtimes$	While IGSAs are not required to have a plan which includes a list of telephone numbers for local ambulance and hospital services, this facility has a list for local ambulance and hospital services.			

ACCESS TO MEDICAL CARE  POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR						
THE GENERAL WELL-BEING OF ICE DETA		ACCRE	DITED/A	CCRED	TATION-WORTHY HEALTH PROGRAM FOR	
The plan includes procedures for facil- emergency health care consistent with s	ity staff to utilize this			⊠	IGSAs are not required to have a plan which includes procedures for facility staff to utilize emergency health care consistent with security and safety. Staff at this facility, do provide emergency health care consistent with security and safety.	
Detention staff is trained to response emergencies within a 4-minute response	e time.				Facility policy 3-300, Emergency Training, addresses this component. Staff is trained in first aid, cardiopulmonary resuscitation, and use of an automatic external defibrillator (AED).	
Where staff is used to distribute med provider properly trains these officers.	ication, a health care			$\boxtimes$	IGSAs are not required to train officers who distribute medication. At this facility officers are trained to distribute medication. However, that occurs rarely. Medical staff primarily distributes medications.	
The medical unit keeps written records distributed.		$\boxtimes$			Medical staff uses medication administration records to record distribution of medication.	
The Form I-819 (or IGSA equivalent) Warden/Facility of a detainee that has s					IGSAs are not required to use Form I-819 (or IGSA equivalent) to notify the Warden/Facility of a detainee that has special medical needs. This facility uses the booking screening form to notify the facility administration and medical staff of a detainee with special medical needs.	
A signed and dated consent form is ob before medical treatment is administere		$\boxtimes$			All detainees are required to sign consent to medical treatment which is included on the Detainee Medical Screening Form.	
Detainees use the I-813 (or IGSA equivelence of confidential medical records		$\boxtimes$			Health Care policy 14-802, Confidentiality, addresses this component.	
The facility health care provider is give to the release, transfer, or removal of a		$\boxtimes$			Medical staff reports that advance notice of transfers or discharges occurs which enables preparation of the appropriate transfer forms.	
Detainee's medical records or a copy and transferred with the detainee.	thereof, are available	$\boxtimes$			A copy of the medical record is transferred with the detainee.	
Medical records are placed in a seal container labeled with the detainee's na marked "MEDICAL CONFIDENTIAL	me and A-number and				Medical records are placed in sealed envelopes and labeled with the detainee's name and A-number and labeled confidential.	
ACCEPTABLE	■ DEFICIENT		AT-RIS	K	REPEAT FINDING	

The medical records of 18 of the 22 ICE detainees currently housed at the facility were reviewed. In all 18 records, medical and mental health screening on admission was documented, and timely tuberculosis testing had been completed. Consent to treatment and timely physical exams were documented in all 18 records. However, it should be noted that the current physical assessment form is brief. Medical staff is reviewing the form for possible revision.

The Health Service Unit, while small, is clean and organized and contains the necessary equipment. The facility owns two automatic external defibrillators (AEDs).

Medical personnel are on-site from 7 AM until 11 PM, seven days a week.

Medical screening is performed during the booking process by specially trained officers.

(b)(6), (b)(7)c / September 9, 2010 AUDITOR'S SIGNATURE / DATE

SUICIDE PREVENTION AND INTERVENTION							
POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.							
COMPONENTS	YES	No	NA	REMARKS			
Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.	$\boxtimes$			Facility policy 14-200, Suicide Prevention and Training, and Health Care policy 14-700, address this component.			
Training prepares staff to:							
<ul> <li>Recognize potentially suicidal behavior;</li> <li>Refer potentially suicidal detainees, following facility procedures; and</li> <li>Understand and apply suicide-prevention techniques.</li> </ul>	⊠			All staff receives training every 12 months on suicide prevention and intervention.			
A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process.  • Screening does not occur later than one working day after the detainee's arrival.	$\boxtimes$			Detainees are screened by specially trained officers during the admission/booking process.			
Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.	$\boxtimes$			Facility policy 14-200 and Health Care policy 14-700 address this component.			
The facility has a designated isolation room for evaluation and treatment.	$\boxtimes$			The designated isolation room is located in the booking area.			
The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	×			The room has padded walls and floors, a very high ceiling, and a one piece stainless toilet and sink.			
Medical staff has approved the room for this purpose.	$\boxtimes$			Medical staff has approved the room for this purpose.			
Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes.				A suicide watch detainee is observed by staff at least every 15 minutes.			
☐ ACCEPTABLE ☐ DEFICIENT	REPEAT FINDING						

There were no detainee suicides at the facility since the last review.

Jefferson County Comprehensive Services Incorporated (JCCSI) provides mental health services at the facility.

AUDITOR'S SIGNATURE / DATE

## TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

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

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.

AND RELATED NOTIFICATIONS.  COMPONENTS	YES	No	NA	REMARKS
Detainees who are chronically or terminally ill are transferred to an appropriate offsite medical facility.	×			This facility does not routinely accept terminally ill detainees. Should a detainee become terminally ill, s/he would be moved to a more appropriate health care setting.
The facility or appropriate ICE office promptly notifies the next of kin of the detainee's medical condition, to include:  • The detainee's location; and • The limitations placed on visiting.				The facility notifies the next of kin and the Chicago Field Office.
There are guidelines addressing the State Advanced Directive Form for Implementing Living Wills and Advanced Directives.  • The guidelines include instructions for detainees who wish to have a living will other than the generic form the DIHS provides or who wishes to appoint another to make advance decisions for him or her.	⊠			There are guidelines addressing the State Advance Directive Form for Implementing Living Wills and Advance Directives.
The guidelines provide the detainee the opportunity to have a private attorney prepare the documents.	⊠			Detainees may retain a private attorney at their own expense.
There is a policy addressing "Do Not Resuscitate Orders"		$\boxtimes$		At the time of the inspection, there was no policy language addressing Do Not Resuscitate (DNR) orders.
Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation?		$\boxtimes$		At the time of the inspection, there was no policy language addressing DNR orders.
The facility notifies the DIHS Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSAs, this notification is made through the local ICE representative.				At the time of the inspection, there was no policy language addressing DNR orders.
The facility has written procedures to address the issues of organ donation by detainees.				Organ donation is addressed in the State Advance Directive guidelines.
The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.	$\boxtimes$			Facility policy 5-217, Death of a Detainee, addresses this component.
The facility has a policy and procedure to address the death of a detainee while in transport.				Facility policy 4-707, Emergency Transportation Situations, addresses this component.

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH							
POLICY ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLICIES AND PROCEDURES ADDRESSING THE ISSUES OF TERMINAL ILLNESS OR INJURY, MEDICAL ADVANCED DIRECTIVES, AND DETAINEE DEATH, TO INCLUDE THE PROCEDURES TO ENSURE PROPER NOTIFICATION IS PROVIDED TO ICE OFFICIALS, FAMILY MEMBERS AND OTHER INTERESTED PARTIES IN THE EVENT OF A DETAINEE BECOMING TERMINALLY ILL OR INJURED OR DEATH OF A DETAINEE OCCURS. IN ADDITION, THE POLICY WILL COVER PROCEDURES TO BE TAKEN IF THE DEATH OF A DETAINEE OCCURS WHILE IN TRANSIT.  CHECK THIS BOX IF THE FACILITY DOES NOT ACCEPT ICE DETAINEES WHO ARE SEVERELY OR TERMINALLY ILL. INDICATE NAIN THE APPROPRIATE BOX FOR THIS PORTION OF THE WORKSHEET. ALWAYS COMPLETE ALL REFERENCES TO DETAINEE DEATH AND RELATED NOTIFICATIONS.							
COMPONENTS	YES	No	NA	REMARKS			
At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	⊠			Pursuant to an interview with the ICE Deportation Officer (DO), the ICE Chicago Field Office is notified in the event of a detainee's death and ICE procedures are followed.			
<ul> <li>In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures.</li> <li>If the detainee's is a U.S. military veteran, is the Department of Veterans Affairs notified?</li> </ul>	×			Pursuant to an interview with the Deportation Officer, the ICE Chicago Field Office initiates burial procedures and determines the detainee's U.S. military service.			
An original or certified copy of a detainee's death certificate is placed in the subject's a-file.	⊠			ICE procedures specify that the original death certificate be sent to the person who claimed the body. A certified copy is placed in the detainee's A-file.			
The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as:  • Performance of an autopsy;  • Who will perform the autopsy;  • Obtaining state approved death certificates; and  • Local transportation of the body.	$\boxtimes$			In the case of a death at the facility, the Sheriff and facility administrator are informed. The Sheriff notifies the next of kin and other interested parties.			
ICE staff follows established procedures to properly close the case of a deceased detainee.	$\boxtimes$			In addition to filing the death certificate, documentation of the death is made in the case comments.			

There were no detainee deaths at this facility since the last inspection.

**ACCEPTABLE** 

Terminally or chronically ill ICE detainees are not usually accepted at this facility. By policy, a terminally or chronically ill ICE detainee would be transferred to a more appropriate health care facility.

☐ AT-RISK

☐ REPEAT FINDING

■ DEFICIENT

While there are guidelines addressing Advance Directives, there is no policy language addressing Do Not Resuscitate Orders.

AUDITOR'S SIGNATURE / DATE

# SECTION III SECURITY AND CONTROL STANDARDS

CONTRABA	ND		CONTRABAND					
POLICY: ALL DETENTION FACILITIES WILL ENSURE THE PROPER HANDLIN	NG AND DI	SPOSAL C	OF ALL C	ONTRABAND, DOCUMENTATION OF				
CONTRABAND DESTRUCTION IS REQUIRED.	YES	No	NA	REMARKS				
The facility follows a written procedure for handling illegal contraband. Staff inventory, hold, and report it when necessary to the proper authority for action/possible seizure.				Facility policy 4-609, Disposition of Contraband, dated 7-15-2009, addresses the handling of illegal contraband. Although not required by IGSA's, staff do inventory, hold, and report illegal contraband when necessary to the proper authority for action/possible seizure.				
Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.			⊠	This component is only required by SPC's/CDF's. The facility does not have a policy regarding contraband that is government property.				
Staff returns property not needed as evidence to the proper authority.  Written procedures cover the return of such property.				This component is only required by SPC's/CDF's. The facility policy requires the return of property not needed as evidence to the proper authority,				
Altered property is destroyed following documentation and using established procedures.				This component is only required by SPC's/CDF's. The facility has no policy or procedures regarding destroying altered property.				
Before confiscating religious items, the OIC or designated investigator contacts a religious authority.			⊠	This component is only required by SPC's/CDF's. The facility has no policy on confiscating religious items.				
Staff follows written procedures when destroying hard contraband that is illegal.	⊠			Facility policy 4-609, Disposition of Property, dated 7-15-2009, provides procedures for destroying hard contraband that is illegal.				
Hard contraband that is illegal (under criminal statutes) may be retained and used for official use, e.g. training purposes.  If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use.			$\boxtimes$	This component is only required by SPC's/CDF's. The facility maintains hard contraband for official use and has procedures addressing this process.				
□ ACCEPTABLE □ DEFICIENT □	] AT-RISK	ζ.		REPEAT FINDING				

The facility complies with the NDS regarding Contraband.

(b)(6) (b)(7)c / September 9, 2009 AUDITOR'S SIGNATURE / DATE

DETENTION FILES									
POLICY: EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY ICE DETAINEE BOOKED INTO THE FACILITY, EXCLUDING ONLY DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETENTION FILE WILL CONTAIN COPIES AND, IN SOME CASES, THE ORIGINAL OF SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE FACILITY: CLASSIFICATION SHEET, MEDICAL QUESTIONNAIRE, PROPERTY INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC.									
COMPONENTS	YES	No	NA	REMARKS					
A detention file is created for every new arrival whose stay will exceed 24 hours.	Ø			Detention files are created and maintained for all ICE detainees received at the facility.					
The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	$\boxtimes$								
The detainee's detention file also contains documents generated during the detainee's custody.  • Special requests  • Any G-589s and/or I-77s closed-out during the detainee's stay  • Disciplinary forms/Segregation forms  • Grievances, complaints, and the disposition(s) of same	$\boxtimes$								
The detention files are located and maintained in a secure area. If not, the cabinets are lockable and distribution of the keys is limited to supervisors.	×			Detention files are located and maintained in a secure area. Although IGSAs are not required to maintain lockable cabinets, the facility secures all detention files in lockable cabinets with access limited to detention staff.					
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.	×								
The officer closing the detention file makes a notation that the file is complete and ready to be archived.	$\boxtimes$								
Staff makes copies and sends documents from the file when properly requested by supervisory personnel at the receiving facility or office.	$\boxtimes$								
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.	$\boxtimes$								
ACCEPTABLE DESICIENT		.Risk		PEDEAT FINDING					

Detention files are developed and maintained for all detainees immediately upon intake. The files are maintained in a secure area which is under constant supervision.

/ September 9, 2010 AUDITOR'S SIGNATURE / DATE

## DISCIPLINARY POLICY

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

COMPLIANCE WITH FACILITY RULES AND REGULATIONS.	MENTEN IN		A CONTRACT	
COMPONENTS	YES	No	NA	REMARKS
The facility has a written disciplinary system using progressive levels of reviews and appeals.				Facility policy 11-100, Detainee Rules and Discipline, dated January 2009, describes a disciplinary system that uses progressive levels of reviews and appeals.
The facility rules state that disciplinary action shall not be capricious or retaliatory.	$\boxtimes$			The facility handbook provides that disciplinary action shall not be capricious or retaliatory.
Written rules prohibit staff from imposing or permitting the following sanctions:		⊠		The facility's written rules do not prohibit staff from imposing or permitting the sanctions listed in this component.
The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	⊠			The rules of conduct, sanctions, and procedures are included in the facility handbook and are provided verbally to detainees during the intake process by the booking officer.
The following items are conspicuously posted in Spanish and English, and other dominate languages used in the facility:  Rights and Responsibilities Prohibited Acts Disciplinary Severity Scale Sanctions		$\boxtimes$		The Rights and Responsibilities poster displayed in the detainee housing units is in English only. Although not required by IGSA's, the Prohibited Acts, Disciplinary Severity Scale, and Sanctions are also posted.
When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	$\boxtimes$			
Incident reports and Notice of Charges are promptly forwarded to the designated supervisor.	$\boxtimes$			
Incident reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before an investigation ends.	$\boxtimes$			
An intermediate disciplinary process is used to adjudicate minor infractions.	$\boxtimes$			
<ul> <li>A disciplinary panel (or equivalent in IGSAs) adjudicates infractions. The panel:         <ul> <li>Conducts hearings on all charges and allegations referred by the UDC;</li> <li>Considers written reports, statements, physical evidence, and oral testimony;</li> <li>Hears pleadings by detainees and staff representatives;</li> <li>Bases its findings on the preponderance of evidence; and</li> <li>Imposes only authorized sanctions</li> </ul> </li> </ul>	⊠			The facility has a two person panel which adjudicates infractions. Although not required by IGSA's, the facility also adheres to all of the other requirements of this component.
A staff representative is available if requested for a detainee facing a disciplinary hearing.			$\boxtimes$	This component is only required by SPC's/CDF's. The facility provides a staff representative, if requested by a detainee.

DISCIPLINARY POLICY						
POLICY: ALL FACILITIES HOUSING ICE DETAINEES ARE AUTHORIZED TO IMPOSE DISCIPLINE ON DETAINEES WHOSE BEHAVIOR IS NOT IN COMPLIANCE WITH FACILITY RULES AND REGULATIONS.						
COMPONENTS	YES	No	NA	REMARKS		
The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	$\boxtimes$					
The duration of punishment set by the OIC, as recommended by the disciplinary panel, does not exceed established sanctions. The maximum time in disciplinary segregation is limited to 60 days for a single offense.	⊠			The maximum sanction for disciplinary segregation is limited to 15 days for a single offense.		
Written procedures govern the handling of confidential-informant information. Standards include criteria for recognizing "substantial evidence"		$\boxtimes$		The facility has no procedures for the handling of confidential-informant information.		
All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	$\boxtimes$					
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING						

The Rights and Responsibilities poster is displayed in the detainee housing units in English only. The facility's written rules do not prohibit staff from imposing or permitting corporal punishment, deviations from normal food service, loss of correspondence privileges, and deprivation of physical exercise. The facility has no procedures for the handling of confidential-informant information.

AUDITOR'S SIGNATURE / DATE

## **EMERGENCY (CONTINGENCY) PLANS**

POLICY ALL FACILITIES HOLDING ICE DETAINEES WILL RESPOND TO EMERGENCIES WITH A PREDETERMINED STANDARDIZED PLAN TO MINIMIZE THE HARMING OF HUMAN LIFE AND THE DESTRUCTION OF PROPERTY. IT IS RECOMMENDED THAT SPCS AND CDFS ENTER INTO AGREEMENT, VIA MEMORANDUM OF UNDERSTANDING (MOU), WITH FEDERAL, LOCAL AND STATE AGENCIES TO ASSIST IN TIMES OF EMERGENCY.

EMERGENCI.			No. of the last of	
COMPONENTS	YES	No	NA	REMARKS
Policy precludes detainees or detainee groups from exercising control or authority over other detainees.	⊠			Facility policy 5-100, Emergency Management System, dated January 2009, precludes detainees or detainee groups from exercising control or authority over other detainees.
Detainees are protected from:				
<ul> <li>Personal abuse</li> <li>Corporal punishment</li> <li>Personal injury</li> <li>Disease</li> <li>Property damage</li> <li>Harassment from other detainees</li> </ul>	⊠			
Staff is trained to identify signs of detainee unrest.				Staff receives Mental Health
What type of training and how often?	$\boxtimes$			and Suicide Prevention training on an annual basis.
Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Officer In Charge (OIC)	$\boxtimes$			
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.	$\boxtimes$			
The plans address the following issues:				
Contingency plans include a comprehensive general section with procedures applicable to most emergency situations.	$\boxtimes$			
The facility has cooperative contingency plans with applicable:  • Local law enforcement agencies  • State agencies  • Federal agencies			×	This component is only required for SPC's/CDF's. The facility has cooperative contingency plans with applicable local law enforcement, state, and federal agencies.
All staff receives copies of Hostage Situation Management policy and procedures.			$\boxtimes$	This component is only required for SPC's/CDF's. The facility has distributed copies of the Hostage Plan to all staff.
Staff is trained to disregard instructions from hostages, regardless of rank. Within 24 hours after release, hostages are screened for medical and psychological effects.				This component is only required for SPC's/CDF's. Facility staff has been trained to disregard instructions from hostages. According to policy, hostages would be screened for medical and psychological effects upon release.

## **EMERGENCY (CONTINGENCY) PLANS**

POLICY ALL FACILITIES HOLDING ICE DETAINEES WILL RESPOND TO EMERGENCIES WITH A PREDETERMINED STANDARDIZED PLAN TO MINIMIZE THE HARMING OF HUMAN LIFE AND THE DESTRUCTION OF PROPERTY. IT IS RECOMMENDED THAT SPCS AND CDFS ENTER INTO AGREEMENT, VIA MEMORANDUM OF UNDERSTANDING (MOU), WITH FEDERAL, LOCAL AND STATE AGENCIES TO ASSIST IN TIMES OF EMERGENCY.

COMPONENTS	YES	No	NA	REMARKS
Emergency plans include emergency medical treatment for staff and detainees during and after an incident.				This component is only required for SPC's/CDF's. The facility emergency plans require emergency medical treatment for staff and detainees during and after an incident.
Food service maintains at least 3 days' worth of emergency meals for staff and detainees.			×	This component is only required for SPC's/CDF's. The facility's Food Service Department does not maintain at least 3 day's worth of emergency meals for staff and detainees.
Written plans identify locations of shut-off valves and switches for all utilities (water, gas, electric).			$\boxtimes$	This component is only required for SPC's/CDF's. The emergency plans include the locations of shut-off valves and switches for all utilities.
Written procedures cover:  Work/Food Strike  Disturbances Escapes Bomb Threats Adverse Weather Internal Searches Facility Evacuation Detainee Transportation System Plan Internal Hostages Civil Disturbances		$\boxtimes$		The facility emergency plans do not include a procedure for Adverse Weather.
☐ ACCEPTABLE ☐ DEFICIENT ☐	AT-RISK			REPEAT FINDING

## REMARKS:

The facility emergency plans do not include a procedure for Adverse Weather.

AUDITOR'S SIGNATURE / DATE

## ENVIRONMENTAL HEALTH AND SAFETY

POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS. AND SAFE-HANDLING PROCEDURES

INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES				
COMPONENTS	YES	No	NA	REMARKS
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	$\boxtimes$			
Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.		×		None of the areas in the facility maintained constant inventories of all flammable, toxic, and caustic substances at the time of the inspection.
<ul> <li>The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used.</li> <li>The files list all storage areas, and include a plant diagram and legend.</li> <li>The MSDSs and other information in the files are available to personnel managing the facility's safety program.</li> </ul>	⊠			
All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They:  • Wear personal protective equipment; and • Report hazards and spills to the designated official.	$\boxtimes$			
The MSDSs are readily accessible to staff and detainees in work areas.	×			At the time of the initial inspection, the Food Service Department and the Control Center where the barber supplies are stored, did not have MSDSs readily accessible to staff and detainees. Prior to the inspection team leaving the facility, MSDSs were made available in both areas.
Hazardous materials are always issued under proper supervision.  • Quantities are limited; and • Staff always supervises detainees using these substances.	$\boxtimes$			
All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.		$\boxtimes$		Clipperside liquid was not stored nor inventoried correctly.
Lighting fixtures and electrical equipment installed in storage rooms and other hazardous areas meet National Electrical Code requirements.	$\boxtimes$			
The facility has sufficient ventilation, and provides and ensures clean air exchanges throughout all buildings.	$\boxtimes$			
Vents return vents, and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility.		$\boxtimes$		In the ICE housing unit, vents were blocked with napkins and paper covered the light fixtures. However, prior to the inspection team departing, these areas were cleared of the obstructions.
Living units are maintained at appropriate temperatures in accordance with industry standards. (68 to 74 degrees in the winter and 72 to 78 degrees in the summer.)	$\boxtimes$			
Shower and sink water temperatures do not exceed the industry standard of 120 degrees.	$\boxtimes$			
All toxic and caustic materials are stored in their original containers in a secure area.	$\boxtimes$			

## ENVIRONMENTAL HEALTH AND SAFETY

POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES

INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES	A CONTRACTOR	ALC: NO.	NUMBER OF STREET	
COMPONENTS	YES	No	NA	REMARKS
Excess flammables, combustibles, and toxic liquids are disposed of properly and in accordance with MSDSs.	$\boxtimes$			
Staff directly supervise and account for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, e.g., shoe dye. All such products are clearly labeled. "Accountability" includes issuing such products to detainees in the smallest workable quantities.			⊠	The facility does not use methyl alcohol.
Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.	$\boxtimes$			
The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association and the Occupational Safety and Health Administration (OSHA).	⊠			
A technically qualified officer conducts the fire and safety inspections.				The Maintenance Department arranges for Premier Fire and Security, Inc. to perform fire and safety inspections on a quarterly basis. Quarterly inspections were performed in December 2009, March 2010 and July 2010. However, the facility has not designated a technically qualified officer to conduct fire and safety inspections.
The Safety Office (or officer) maintains files of inspection reports.	⊠			The Maintenance Department and the Assistant Jail Commander maintain files of all fire and safety inspection reports.
The facility has an approved fire prevention, control, and evacuation plan.	$\boxtimes$			The Fire Prevention, Protection and Suppression Plan 5-202, dated fiscal year 2009, was reviewed. The facility's fire plan was approved by the Fire Chief and Assistant Fire Chief of Mt. Vernon, IL.
<ul> <li>The plan requires:</li> <li>Monthly fire inspections;</li> <li>Fire protection equipment strategically located throughout the facility;</li> <li>Public posting of emergency plans with accessible building/room floor plans;</li> <li>Exit signs and directional arrows; and</li> <li>An area-specific exit diagram conspicuously posted in the diagrammed area.</li> </ul>		$\boxtimes$		The facility does not conduct or document monthly fire inspections. Additionally, the fire extinguishers had not been checked monthly to ensure they are functional. The facility fulfills all requirements of this component.
Fire drills are conducted and documented monthly.				The facility did not have documentation that monthly fire drills were conducted for October, November of 2009, or January, February, March and May 2010.

## ENVIRONMENTAL HEALTH AND SAFETY

POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES

COMPONENTS	YES	No	NA	REMARKS
A sanitation program covers barbering operations.		$\boxtimes$		The facilities sanitation program does not address the barbering operation.
The barber shop has the facilities and equipment necessary to meet sanitation requirements.		⊠		Inmates are allowed to cut each other's hair. The facility provides a room for the detainees to cut hair. The facility assigns hair clippers to one detainee and once s/he has completed a haircut, an officer is contacted. The officer cleans the clippers with clipperside.
The sanitation standards are conspicuously posted in the barbershop.				Sanitation standards are posted in English and Spanish in the designated barbershop area.
Written procedures regulate the handling and disposal of used needles and other sharp objects.				No written procedures could be found that regulates the disposal of used needles and other sharp objects. However, prior to the audit team departing the facility, the medical unit began development of a Disposal of Sharps and Biohazards policy which regulates the handling and disposal of used needles and other sharp objects.
All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	$\boxtimes$			
Standard cleaning practices include:  • Using specified equipment; cleansers; disinfectants and detergents.  • An established schedule of cleaning and follow-up inspections.				Officers and shift commanders perform daily inspections.
The facility follows standard cleaning procedures.	$\boxtimes$			
Spill kits are readily available.	$\boxtimes$			Facility Policy and Procedure 2- 307, Exposures was reviewed and complies.
A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	⊠			The facility's maintenance staff removes infectious/bio-hazardous waste from the facility. The waste is taken to the St. Mary's Good Samaritan Hospital where it is disposed.
Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	$\boxtimes$			
Do the methods for handling/disposing of refuse meet all regulatory requirements?	$\boxtimes$			The facility contracts with Kenny's Trash Service for the disposal of refuse.

POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES						
COMPONENTS	YES	No	NA	REMARKS		
<ul> <li>A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin.</li> <li>At least monthly.</li> <li>The pest-control program includes preventative spraying for indigenous insects.</li> </ul>	⊠			The facility contracts with Terminix Pest Control. The pest-control program includes preventive spraying for indigenous insects. The Maintenance Department maintains the monthly inspection reports.		
Drinking water and wastewater is routinely tested according to a fixed schedule.	$\boxtimes$			Water is provided to the facility by the city.		
Emergency power generators are tested at least every two weeks.     Other emergency systems and equipment receive testing at least quarterly.     Testing is followed-up with timely corrective actions (repairs and replacements).	⊠			The maintenance staff tests the generators at least every two weeks. Other emergency systems and equipment receive testing at least quarterly. All corrective actions are performed and documented by the maintenance staff.		
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING						

The facility has policies and procedures in place for the control of toxics, flammables and caustic materials. However, at the time of the inspection, facility staff was not adhering to the established procedures.

There are a number of issues and concerns regarding the facility's environmental health and safety program including not maintaining constant toxic, flammable and caustic inventories. The Food Service Department does not maintain a listing of MSDSs for toxic materials. The barbershop operation does not maintain a listing of MSDSs of toxic materials. Vents and light fixtures were covered and obstructed with debris during the time of the inspection. Fire extinguishers had not been checked monthly, and some monthly fire inspections were not completed. During six months of the past year, the facility did not perform monthly fire drills. The facility lacked a written policy for the disposal of needles and other sharp objects.

/ September 9, 2010 AUDITOR'S SIGNATURE / DATE

#### HOLD ROOMS IN DETENTION FACILITIES POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS, MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSING INTO OR OUT OF THE FACILITY. YES No NA REMARKS COMPONENTS This component is only required The hold rooms are situated within the secure perimeter. of SPC's/CDF's. The hold $\boxtimes$ rooms are located within the secure perimeter of the facility. This component is only required The hold rooms are well ventilated well lighted, and all activating of SPC's/CDF's. The hold switches are located outside the room. rooms are well ventilated, well П $\boxtimes$ lighted, and all activating switches are located outside the room. This component is only required The hold rooms contain sufficient seating for the number of detainees of SPC's/CDF's. The hold held. rooms have sufficient seating П $\boxtimes$ for the number of detainees held. This component is only required Bunks, cots, beds, or other related make-shift sleeping apparatus are of SPC's/CDF's. The hold precluded from use inside hold rooms. $\boxtimes$ rooms contain a toilet and cement bench. The walls and ceilings of the hold rooms are tamper and escape This component is only required of SPC's/CDF's. The walls and proof. X ceilings of the hold rooms are tamper and escape proof. Detainees are held in hold Individuals are not held in hold rooms for more than 12 hours. 冈 П rooms no longer than 2 hours. X П Male and females are segregated from each other. The facility does not receive Detainees under the age of 18 are not held with adult detainees. $\boxtimes$ detainees under the age of 18. Detainees are provided with basic personal hygiene items such as $\boxtimes$ П water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes. The facility was built in 2004. In older facilities, officers are within visual or audible range to allow $\boxtimes$ Toilet facilities are located detainees access to toilet facilities on a regular basis. П within the hold room. All detainees are given a pat down search for weapons or contraband П $\boxtimes$ before being placed in the room. Officers closely supervise the detention hold rooms using direct Hold rooms are irregularly monitored every 30 minutes, not supervision (Irregular visual monitoring.). $\boxtimes$ every 15 minutes as required by Hold rooms are irregularly monitored every 15 minutes. the NDS. Unusual behavior or complaints are noted. When the last detainee has been removed from the hold room, it is $\boxtimes$ П П given a thorough inspection. Facility policy 5-202, Fire Plan, There is a written evacuation plan that includes a designated officer dated January 2009, describes $\boxtimes$ П to remove detainees from hold rooms in case of fire and/or building the evacuation plan. evacuation. An appropriate emergency service is called immediately upon a $\boxtimes$ П determination that a medical emergency may exist. REPEAT FINDING ☐ DEFICIENT AT-RISK ACCEPTABLE

Overall, the facility complies with the NDS regarding Hold Rooms in Detention Facilities with one exception. Hold rooms are irregularly monitored every 30 minutes, not every 15 minutes as required by the NDS.

(b)(6), (b)(7)c / September 9, 2010 AUDITOR'S SIGNATURE / DATE

## KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)

POLICY IT IS THE POLICY OF THE ICE SERVICE TO MAINTAIN AN EFFICIENT SYSTEM FOR THE USE, ACCOUNTABILITY AND MAINTENANCE OF ALL KEYS AND LOCKS.

COMPONENTS	YES	No	NA	REMARKS
The security officer[s], or equivalent in IGSAs, has attended an approved locksmith training program.	⊠			The Maintenance Supervisor has attended an approved locksmith training program.
The security officer, or equivalent in IGSAs, has responsibly for all administrative duties and responsibilities relating to keys, locks etc.	$\boxtimes$			
The security officer, or equivalent in IGSAs, provides training to employees in key control.		$\boxtimes$		The Maintenance Supervisor does not provide key control training.
The security officer, or equivalent in IGSAs, maintains inventories of all keys, locks and locking devices.	$\boxtimes$			
The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.		×		The facility lacked documentation regarding a preventive maintenance program.
Facility policies and procedures address the issue of compromised keys and locks.	$\boxtimes$			Facility policy 4-503 & 504, Hard Keys, addresses the procedures for compromised keys and locks.
The security officer, or equivalent in IGSAs, develops policy and procedures to ensure safe combinations integrity.	$\boxtimes$			
Only dead bolt or dead lock functions are used in detainee accessible areas.	$\boxtimes$			
Only authorized locks (as specified in the Detention Standard) are used in detainee accessible areas.	$\boxtimes$			
Grand master keying systems are prohibited.	$\boxtimes$			The facility has no grand master keys or keying systems.
All worn or discarded keys and locks are cut up and properly disposed of.	$\boxtimes$			
Padlocks and/or chains are prohibited from use on cell doors.	$\boxtimes$			
The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to:  Occupational Safety and Environmental Health Manual, Ch. 3;  National Fire Protection Association Life Safety Code 101.				
The operational keyboard is sufficient to accommodate all the facility key rings, including keys in use, and is located in a secure area.		×		The facility has no operational keyboard. Staff is permanently assigned keys and key fobs, and they are allowed to take them home.
Procedures are in place to ensure that key rings are:  Identifiable; The numbers of keys are cited; and Keys cannot be removed.	$\boxtimes$			
Emergency keys are available for all areas of the facility.	$\boxtimes$			The facility emergency keys are stored in the Jail Administrator's office in a secured cabinet.

## KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)

POLICY IT IS THE POLICY OF THE ICE SERVICE TO MAINTAIN AN EFFICIENT SYSTEM FOR THE USE, ACCOUNTABILITY AND MAINTENANCE OF ALL KEYS AND LOCKS.

COMPONENTS	YES	No	NA	REMARKS			
The facilities use a key accountability system.				The facility currently issues and assigns hard keys and key fobs to facility staff. The staff maintains control of these keys, and is allowed to take them home at the completion of their respective shift. The key fob allows entrance into the facility. However, the key fob does not allow staff to exit the facility. The facility has the ability to deactivate an assigned key fob that is lost or stolen. Staff does not possess master keys or keys to the housing units.			
Authorization is necessary to issue any restricted key.	$\boxtimes$			Authorization for restricted keys must be approved a shift commander or above.			
<ul> <li>Individual gun lockers are provided.</li> <li>They are located in an area that permits constant officer observation.</li> <li>In an area that does not allow detainee or public access.</li> </ul>				Gun lockers are located within the sally port entrance of the facility.			
The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.				Hard keys are counted on each shift to ensure accountability. Although not required by IGSAs, the facility physically counts the keys stored at the facility daily.			
All staff members are trained and held responsible for adhering to proper procedures for the handling of keys.  • Issued keys are returned immediately in the event an employee inadvertently carries a key ring home.  • When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified.  • Detainees are not permitted to handle keys assigned to staff.				The three bulleted areas are not required for IGSAs. Employees receive key control training during orientation and sign a roster after completion of the training. Staff is permanently issued hard keys and key fobs which they are allowed to take home. Other keys including those permitting access to the housing units are issued to staff at the beginning of their shift, and are to be returned at the end of the shift. If the housing unit keys are inadvertently carried home, the keys are immediately returned. 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.			
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING							

The maintenance officer does not provide key control training. The facility has no documented preventive maintenance program. The facility has no operational keyboard.

(b)(6), (b)(7)c / September 9, 2010 AUDITOR'S SIGNATURE / DATE

POPULATION C	COUNTS						
POLICY: ALL DETENTION FACILITIES SHALL ENSURE AROUND-THE-CLOCK ACCOUNTABILITY FOR ALL DETAINEES. THIS REQUIRES THAT THEY CONDUCT AT LEAST ONE FORMAL COUNT OF THE DETAINEE POPULATION PER SHIFT, WITH ADDITIONAL FORMAL AND INFORMAL COUNTS CONDUCTED AS NECESSARY.							
COMPONENTS	YES	No	NA	REMARKS			
Staff conduct a formal count at least once each shift.	$\boxtimes$			The facility conducts counts at 6 AM, 11:30 AM, 5:30 PM, and 10:00PM.			
Activities cease or are strictly controlled while a formal count is being conducted.			$\boxtimes$	This component is only required by SPC's/CDF's. The facility ceases activities during formal counts.			
Certain operations cease during formal counts.			$\boxtimes$	This component is only required by SPC's/CDF's. All movement and activities cease during formal counts.			
All movement ceases for the duration of a formal count.			$\boxtimes$	This component is only required by SPC's/CDF's. All movement ceases for the duration of all formal counts.			
Formal counts in all units take place simultaneously.			⊠	This component is only required by SPC's/CDF's. Formal counts in the housing units do not take place simultaneously. The count process includes one officer going to each unit and conducting the count while meals are being served. No other officers assist in the count.			
Detainee participation in counts is prohibited.				This component is only required by SPC's/CDF's. The facility does not allow detainees to participate in counts.			
A face-to-photo count follows each unsuccessful recount.				This component is only required by SPC's/CDF's. The facility does not have procedures in place for a recount.			
Officers positively identify each detainee before counting him/her as present.				This component is only required by SPC's/CDF's. The officer conducting the count has a picture of each detainee which can be checked for positive identification.			
Written procedures cover informal and emergency counts.  • They are followed during informal counts and emergencies.	$\boxtimes$						
The control officer (or other designated position) maintains an out - count record of all detainees temporarily leaving the facility.	×			An electronic log maintained in the booking area is used to record detainees temporarily leaving the facility.			
This training is documented in each officer's training folder.	$\boxtimes$						
□ ACCEPTABLE □ DEFICIENT □	AT-RI	SK		REPEAT FINDING			

The facility meets complies with the NDS regarding Population Counts.

(b)(6), (b)(7)c September 9, 2010 AUDITOR'S SIGNATURE / DATE

## POST ORDERS

POLICY: ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR CARRYING OUT THEIR DUTIES. THIS GUIDANCE INCLUDES THE POST ORDERS ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST ANNUALLY, AND GIVEN TO EACH OFFICER UPON ASSIGNMENT TO THAT POST.

TO THAT POST.	A COUNTY			
COMPONENTS	YES	No	NA	REMARKS
Every fixed post has a set of post orders.	$\boxtimes$			Post orders are located in the housing units, Control Center, and booking area.
Each set contains the latest inserts (emergency memoranda, etc.) and revisions.			⊠	This component is only required for SPCs/CDFs. The post orders were recently updated and contained all the latest revisions.
One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.	$\boxtimes$			The Assistant Jail Administrator is responsible for keeping all post orders current with any revisions between reviews.
The IGSA maintains a complete set (central file) of post orders.	$\boxtimes$			A central file of post orders is maintained in the Assistant Jail Administrator's office.
The central file is accessible to all staff.			$\boxtimes$	This component is only required for SPCs/CDFs. The central post order file is accessible to all staff.
The OIC or Contract / IGSA equivalent initiates/authorizes all post-order changes.			×	This component is only required for SPCs/CDFs. The Sheriff authorizes all post order changes.
The OIC or Contract / IGSA equivalent has signed and dated the last page of every section.			⊠	This component is only required for SPCs/CDFs. The last page of each post order section was not signed. The Sheriff signs one cover memo approving the post orders.
A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.	$\boxtimes$			The facility reviews and/or updates the post orders annually.
Procedures keep post orders and logbooks secure from detainees at all times.			$\boxtimes$	This component is only required for SPCs/CDFs. Post orders are kept secure from detainees at all times.
Every armed-post officer qualifies with the post weapon(s) before assuming post duty.			⊠	This component is only required for SPCs/CDFs. The facility's transportation officers have all qualified with weapons and read the post order.
Armed-post post orders provide instructions for escape attempts.	$\boxtimes$			
The post orders for housing units track the event schedule.	$\boxtimes$			
Housing-unit post officers record all detainee activity in a log. The post order includes instructions on maintaining the logbook.			⊠	This component is only required for SPCs/CDFs. The control officer's post orders include instructions on maintaining the logbook for detainee activity.
☐ ACCEPTABLE ☐ DEFICIENT ☐	] AT-Risi	ζ.		REPEAT FINDING

Overall, the facility complies with the NDS regarding Post Orders.

(b)(6), (b)(7)c / September 9, 2010 AUDITOR'S SIGNATURE / DATE

## SECURITY INSPECTIONS

POLICY: POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHERE SPECIAL SECURITY PROCEDURES MUST BE FOLLOWED, WILL BE RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNDING IN FACILITY OPERATIONS.

BE RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUND				
COMPONENTS	YES	No	NA	REMARKS
The facility has a comprehensive security inspection policy. The policy specifies:  • Posts to be inspected; • Required inspection forms; • Frequency of inspections; • Guidelines for checking security features; and • Procedures for reporting weak spots, inconsistencies, and other areas needing improvement				Facility policy 6-203, Preventative Maintenance, dated January 2009, addresses the security inspection policy as required in this component. Although not required for IGSAs, the complies with the first two bulleted requirements. Additionally, facility policy includes the frequency of inspections; Guidelines for checking security features; and Procedures for reporting weak spots, inconsistencies, and other areas needing improvement.
Every officer is required to conduct a security check of his/her assigned area. The results are documented.			$\boxtimes$	This component is only required for SPCs/CDFs. All officers are required to conduct security checks of his/her assigned areas and document the results.
Documentation of security inspections is kept on file.			$\boxtimes$	This component is only required for SPCs/CDFs. Documentation of security inspections is maintained on file in the Assistant Jail Administrator's office.
Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.			⊠	This component is only required for SPC's/CDF's. The policy dictates that recurring problems and failure to take corrective action are reported to the appropriate manager.
The front-entrance officer checks the ID of everyone entering or exiting the facility.			⊠	The facility does not have a front entrance officer. During detainee visiting hours, an officer is assigned to the visiting room to check in visitors. The facility requires an officer to check the ID's of each person entering the facility including attorneys making legal visits.
All visits are officially recorded in a visitor logbook or electronically recorded.			⊠	This component is only required for SPC's/CDF's. All visits are officially recorded in a visitor logbook or electronically recorded.
The facility has a secure visitor pass system.	$\boxtimes$			
Every Control Center officer receives specialized training.	$\boxtimes$			Every control officer receives one week of training with a field training officer prior to being assigned to the Control Center.
The Control Center is staffed around the clock.		- -	⊢井	
Policy restricts staff access to the Control Center.		⊢⊨		
Detainees are restricted from access to the Control Center.	$\boxtimes$	<u> </u>		

#### SECURITY INSPECTIONS POLICY: POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHERE SPECIAL SECURITY PROCEDURES MUST BE FOLLOWED, WILL BE RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNDING IN FACILITY OPERATIONS. No REMARKS YES NA COMPONENTS Communications are centralized in the Control Center. $\boxtimes$ Officers monitor all vehicular traffic entering and leaving the facility. M П The facility maintains a log of all incoming and departing vehicles to This component is only required sensitive areas of the facility. Each entry contains: for CDFs/SPCs. The facility maintains a log of all incoming The driver's name; and departing vehicles, which Company represented; includes the drivers name, Vehicle contents; $\boxtimes$ delivery date & time, time out, Delivery date and time; and vehicle license number. Date and time out: The log does not include the Vehicle license number; and company represented and name Name of employee responsible for the vehicle during the visit of employee responsible for the vehicle during the visit. This component is only required Officers thoroughly search each vehicle entering and leaving the for CDFs/SPCs. The facility facility. searches all vendors entering X and leaving the facility. Law П enforcement vehicles are not searched when entering or leaving the facility. Facility policy 4-600, The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components. Contraband/Searches, dated July 15, 2009, addresses the $\boxtimes$ procedures for preventing the introduction of contraband into the facility. This component is only required Tools being taken into the secure area of the facility are inventoried for CDFs/SPCs. Tools being before entering and prior to departure. brought into the secure areas of П $\Box$ $\boxtimes$ the facility are inventoried before entering and prior to departure. 冈 The SMU entrance has a sally port. Facility policy 4-607, Searches, Written procedures govern searches of detainee housing units and dated July 15, 2009, addresses personal areas. $\bowtie$ П the procedures governing the search of detainee housing units and personal areas. This component is only required Housing area searches occur at irregular times. by SPCs/CDFs. The facility $\boxtimes$ П conducts random and unscheduled searches of the housing units. $\boxtimes$ Every search of the SMU and other housing units is documented. Storage and supply rooms, walls, light and plumbing fixtures, accesses, and drains, etc., undergo frequent, irregular searches. These $\boxtimes$ $\Box$ П searches are documented. Walls, fences, and exits, including exterior windows, are inspected for X $\Box$ defects once each shift. Daily procedures include: The facility has no perimeter Perimeter alarm system tests; alarm system and/or perimeter $\boxtimes$ П $\Box$ Physical checks of the perimeter fence; and fences.

Documenting the results.

Visitation areas receive frequent, irregular inspections.

	SECURIT	Y INSPECTIONS			
POLICY: POST ASSIGNMENTS IN THE					ES MUST BE FOLLOWED, WILL
COMPON		YES	No	NA	REMARKS
<b>△</b> ACCEPTABLE	□ DEFICIENT	☐ AT-RISK		REPI	EAT FINDING

The facility complies with the NDS regarding Security Inspections.

(b)(6) (b)(7) September 9, 2010 AUDITOR'S SIGNATURE / DATE

## SPECIAL MANAGEMENT UNIT (SMU) (ADMINISTRATIVE SEGREGATION)

POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINESS ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINESS BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).

COMPONENTS	YES	No	NA	REMARKS
The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation.  • Detainees are placed in the SMU (administrative) in accordance with written criteria.				Facility policy 10-100, Detainee Classification, dated January 2009, and the facility handbook address a detainee's placement in administrative segregation.
In exigent circumstances, staff may place a detainee in the SMU (administrative) before a written order has been approved.  • A copy of the order given to the detainee within 24 hours.	⊠			
<ul> <li>The OIC (or equivalent) regularly reviews the status of detainees in administrative detention.</li> <li>A supervisory officer conducts a review within 72 hours of the detainee's placement in the SMU (administrative).</li> </ul>			⊠	This component is only required for SPCs/CDFs. The Assistant Jail Administrator regularly reviews the status of detainees in administrative segregation. A review is also conducted within 72 hours of the placement of a detainee in administrative segregation.
A supervisory officer conducts another review after the detainee has spent seven days in administrative segregation, and:  • Every week thereafter for the first month; and • Every 30 days after the first month. • Does each review include an interview with the detainee? • Is a written record made of the decision and the justification?				This component is only required for SPCs/CDFs. The facility has no policy requiring a review of a detainee spending seven days in administrative segregation. The facility does not have a written record of a detainee spending more than seven days in administrative segregation.
The detainee is given a copy of the decision and justification for each review.  • The detainee is given an opportunity to appeal the reviewer's decision to someone else in the facility.			$\boxtimes$	This component is only required by SPCs/CDFs. Detainees are given a copy of the decision and justification for review.
The OIC (or equivalent) routinely notifies the Field Office Director (or staff officer in charge of IGSAs) any time a detainee's stay in administrative detention exceeds 30 days.  • Upon notification that the detainee's administrative segregation has exceeded 60 days, the FD forwards written notice to HQ Field Operations Branch Chief for DRO.			⊠	This component is only required by SPCs/CDFs. The facility has no record of a detainee remaining in administrative segregation exceeding 30 days.
<ul> <li>The OIC or equivalent) reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU.</li> <li>A written record is made of the decision and the justification.</li> <li>The detainee receives a copy of this record.</li> </ul>			⊠	This component is only required of SPCs/CDFs. The facility has no record of a detainee remaining in administrative segregation exceeding 30 days.
The detainee is given the right to appeal to the OIC (or equivalent) the conclusions and recommendations of any review conducted after the detainee have remained in administrative segregation for seven consecutive days.				This component is only required of SPCs/CDFs. Facility staff indicated the detainee would be allowed a right of appeal after remaining in administrative segregation for seven consecutive days.

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"SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION] STANDARD).							
COMPONENTS	YES	No	NA	REMARKS			
Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	$\boxtimes$						
The SMU is:							
Well ventilated;							
Adequately lighted;	$\boxtimes$						
Appropriately heated; and			<u></u>				
Maintained in a sanitary condition.							
All cells are equipped with beds.	6.3			The facility's segregation beds			
<ul> <li>Every bed is securely fastened to the floor or wall.</li> </ul>	$\boxtimes$			are fastened to the wall.			
The number of detainees in any cell does not exceed the occupancy							
limit.							
When occupancy exceeds recommended capacity, do basic	$\boxtimes$		Г				
living standards decline?							
Do criteria for objectively assessing living standards exist?  If you are the private included in the private area of the private and the private area of the private area.							
If yes, are the criteria included in the written procedures?  The second distribution the second distribution to the second distribution to the second distribution to the second distribution.				C			
The segregated detainees have the same opportunities to exchange/launder clothing, bedding, and linen as detainees in the				Segregated detainees are given the same opportunity as the			
general population.	$\boxtimes$			general population to exchange			
Solicial population.		لسا		and launder clothing, bedding,			
				and linen the same.			
Detainees receive three nutritious meals per day, from the general				Detainees are provided three			
population's menu of the day.	$\boxtimes$	🗇		nutritious meals a day and			
<ul><li>Do detainees eat only with disposable utensils?</li></ul>				disposable utensils are used.			
Is food ever used as punishment?				Food is not used as punishment.			
Each detainee maintains a normal level of personal hygiene in the				l			
SMU.	57			Detainees are provided an			
The detainees have the opportunity to shower and shave at least three times a week.	$\square$			opportunity to shower and shave			
least three times a week.  If not, explain.				daily.			
The detainees are provided:							
Barbering services;							
Recreation privileges in accordance with the "Detainee"			i				
Recreation" standard;							
Non-legal reading material;							
Religious material;	$\boxtimes$						
• The same correspondence privileges as detainees in the			Ė				
general population;							
• Telephone access similar to that of the general population;							
and							
Personal legal material.							
A health care professional visits every detainee at least three times a				Health care staff visit			
week.	$\boxtimes$			administrative segregation daily, and shift supervisors visit the			
The shift supervisor visits each detainee daily.  Weekends and helidays.				unit on each shift.			
Weekends and holidays.  Procedures comply with the "Visitation" standard.				unit on cach smit.			
The detainee retains visiting privileges; and	$\boxtimes$	П					
The detailine retains visiting privileges, and     The visiting room is available during normal visiting hours.	K-7						
Visits from clergy are allowed.	$\boxtimes$	П					
	الشسكا						

## SPECIAL MANAGEMENT UNIT (SMU) (ADMINISTRATIVE SEGREGATION)

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COMPONENTS	YES	No	NA	REMARKS			
<ul> <li>Detainees have the same law-library access as the general population.</li> <li>Are they required to use the law library ∑Separately, or ∑As a group?</li> <li>Are legal materials brought to them?</li> </ul>	$\boxtimes$						
The SMU maintains a permanent log of detainee-related activity, e.g., meals served, recreation, visitors etc.	$\boxtimes$			The Control Center maintains a permanent log of all detainee activity.			
<ul> <li>SPC procedures include completing the SMU Housing Record (I-888) immediately upon a detainee's placement in the SMU.</li> <li>Staff completes the form at the end of each shift.</li> <li>CDFs and IGSA facilities use Form I-888 (or local equivalent).</li> </ul>	⊠			The first sentence and first bullet are not required for IGSAs. A local form is completed for each detainee immediately upon placement in administrative segregation.			
<ul> <li>Staff record whether the detainee ate, showered, exercised, and took any applicable medication during every shift.</li> <li>Staff logs record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc;</li> <li>The medical officer/health care professional signs each individual's record during each visit; and</li> <li>The housing officer initials the record when all detainee services are completed or at the end of the shift.</li> </ul>				This component is only required for SPCs/CDFs. However, the complies with all of the areas identified in this component.			
A new record is created for each week the detainee is in Administrative Segregation.  • The weekly records are retained in the SMU until the detainee's return to the general population.				This component is only required for SPCs/CDFs. The facility creates a new record for each week the detainee is housed in administrative segregation. The records are retained in the SMU until the detainee returns to general population.			
□ Acceptable    □ Deficient    □ At-Risk    □ Repeat Finding							

## REMARKS:

The facility complies with the NDS regarding Administrative Segregation.

AUDITOR'S SIGNATURE / DATE

## SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION)

POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION: THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.

SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISC	CIPLINARY	REASONS		
COMPONENTS	YES	No	NA	REMARKS
Officers placing detainees in disciplinary segregation follow written procedures.	×			The facility handbook and post orders address the procedure for placing detainees in disciplinary segregation.
The sanctions for violations committed during one incident are limited to 60 days.				The facility's sanction for violations committed during one incident is limited to 15 days.
<ul> <li>A completed Disciplinary Segregation Order accompanies the detainee into the SMU.</li> <li>The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation.</li> </ul>	⊠			The facility completes a local disciplinary segregation order when placing a detainee in SMU. The detainee is given a copy of the order during the next shift.
Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at set intervals.  • After each formal review, the detainee receives a written copy of the decision and supporting reasons.	⊠			Although not required of IGSAs, each detainee housed in disciplinary SMU is given a copy of the formal review conducted, including the decision and supporting justification.
The conditions of confinement in the SMU are proportional to the amount of control necessary to protect detainees and staff.	$\boxtimes$			
Detainees in disciplinary segregation have fewer privileges than those housed in administrative segregation.	$\boxtimes$			
<ul> <li>Living conditions in disciplinary SMUs remain the same regardless of behavior.</li> <li>If no, does staff prepare written documentation for this action?</li> <li>Does the OIC sign to indicate approval.</li> </ul>	⊠			
Every detainee in disciplinary segregation receives the same humane treatment, regardless of offense.	$\boxtimes$			
The quarters used for segregation are:  • Well-ventilated.  • Adequately lighted.  • Appropriately heated.  • Maintained in a sanitary condition.				
All cells are equipped with beds that are securely fastened to the floor or wall of the cell.	$\boxtimes$			All SMU beds are securely fastened to the wall.
The number of detainees confined to each cell or room is limited to the number for which the space was designate.  • Does the OIC approve excess occupancy on a temporary basis?	$\boxtimes$			
When a detainee is segregated without clothing, mattress, blanket, or pillow (in a dry cell setting), a justification is made and the decision is reviewed each shift. Items are returned as soon as it is safe.	⊠			
Detainees in the SMU have the same opportunities to exchange clothing, bedding, etc., as other detainees.	$\boxtimes$			Detainees are provided the same opportunity to exchange clothing as other detainees.

## SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION)

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SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISC				
COMPONENTS	YES	No	NA	REMARKS
Detainees in the SMU receive three nutritious meals per day, selected from the Food Service's menu of the day.	$\boxtimes$			Food is not used as punishment.
Food is not used as punishment.				1
Detainees are allowed to maintain a normal level of personal				Detainees are provided an
hygiene, including the opportunity to shower and shave at least three	$\boxtimes$			opportunity to shower and shave
times/week.	_		-	daily.
Detainees receive, unless documented as a threat to security:				
Barbering services;				
Recreation privileges;				
Other-than-legal reading material;	$\square$			
Religious material;				
<ul> <li>The same correspondence privileges as other detainees; and</li> </ul>				
Personal legal material.				
When phone access is limited by number or type of calls, the				
following areas are exempt:				
Calls about the detainee's immigration case or other legal				
matters;	$\boxtimes$			
<ul> <li>Calls to consular/embassy officials; and</li> </ul>				
Calls during family emergencies (as determined by the				
OIC/Warden).				
A health care professional visits every detainee in disciplinary				Health care staff visit
segregation every week day.	$\boxtimes$			segregation daily and shift
The shift supervisor visits each segregated detainee daily			-	supervisors visit the unit on
Weekends and holidays.				each shift.
SMU detainees are allowed visitors, in accordance with the	$\boxtimes$			
"Visitation" standard.				
SMU detainees receive legal visits, as provided in the "Visitation"				
standard.  • Legal service providers are notified of security concerns				
arising before a visit.				
Visits from clergy are allowed.				
The clergy member is given the option of visiting/not				
visiting the segregated detainee.	$\boxtimes$			
Violent/uncooperative detainees are denied access to				
religious services when safety and security would otherwise			:	
be affected.  SMU detainees have law library access.				
Tri 1 4/ 2 14 Construction and the last				
Violent/uncooperative detainees retain access to the law library unless adjudicated a security threat in writing.				
Legal material brought to individuals in the SMU on a case-	$\boxtimes$			
by-case basis.				
Staff documents every incident of denied access to the law				
library.				
All detainee-related activities are documented, e.g. meals served,				The Control Center maintains a
recreation activities, visitors, etc.	$\boxtimes$			permanent log of all detainee
				activity.

#### SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION) POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS REMARKS YES NA COMPONENTS No The SPC's, the Special Management Housing Unit Record (I-888or This component is only required equivalent), is prepared as soon as the detainee is placed in the SMU. for SPCs/CDFs. Upon placement of a detainee in All I-888s are filled out by the end of each shift. $\boxtimes$ disciplinary segregation, facility The CDF/IGSA facility use Form. staff completes a local form to I-888 (or equivalent local form). document the placement. This component is only required SMU staff record whether the detainee ate, showered, exercised, took for SPC's/CDF's. The facility medication, etc. records if the detainee ate, Details about the detainee logged, e.g., a medical condition, showered, exercised, and took suicidal/violent behavior, etc. any applicable medication The health care official sign individual records after each during every shift. The facility also logs medical information The housing officer initials the record when all detainee $\boxtimes$ and health care professional services are completed or at the end of the shift. visits. The facility creates a A new record is created weekly for each detainee in the new record for each week the detainee is in segregation and The SMU retains these records until the detainee leaves the the records are retained in the SMU. SMU until the detainee returns to general population.

AT-RISK

REPEAT FINDING

### REMARKS:

The facility complies with the NDS regarding Disciplinary Segregation.

DEFICIENT

AUDITOR'S SIGNATURE / DATE

**ACCEPTABLE** 

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## TOOL CONTROL

POLICY: IT IS THE POLICY OF ALL FACILITIES THAT ALL EMPLOYEES SHALL BE RESPONSIBLE FOR COMPLYING WITH THE TOOL CONTROL POLICY. THE MAINTENANCE SUPERVISOR SHALL MAINTAIN A COMPUTER GENERATED OR TYPEWRITTEN MASTER INVENTORY LIST OF TOOLS AND EQUIPMENT AND THE LOCATION IN WHICH TOOLS ARE STORED. THESE INVENTORIES SHALL BE CURRENT, FILED AND READILY AVAILABLE FOR TOOL INVENTORY AND ACCOUNTABILITY DURING AN AUDIT.

COMPONENTS	YES	No	NA	REMARKS
There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	⊠			The maintenance supervisor is responsible for the tool control procedures and has developed an inspection system. Facility policy 6-100, Tool Control/Hazardous Materials, dated 1-2009, describes the tool control procedures.
Department heads are responsible for implementing this standard in their departments.			$\boxtimes$	This component is only required for SPC's/CDF's. Section supervisors and department heads are responsible for implementing the tool control procedures in their areas.
Tool inventories are required for the:				
<ul> <li>Maintenance Department;</li> <li>Medial Department;</li> <li>Food Service Department;</li> <li>Electronics Shop;</li> <li>Recreation Department; and</li> <li>Armory.</li> </ul>		$\boxtimes$		The Food Service Department had no tool inventory at the time of the inspection.
<ul> <li>The facility has a policy for the regular inventory of all tools.</li> <li>The policy sets minimum time lines for physical inventory and all necessary documentation.</li> <li>ICE facilities use AMIS bar code labels when required.</li> </ul>	$\boxtimes$			
The facility has a tool classification system. Tools are classified according to:  • Restricted (dangerous/hazardous); and • Non-Restricted (non-hazardous).	$\boxtimes$			The facility has a tool classification system. Although not required for IGSAs, the facility classifies tools as restricted and non-restricted.
Department heads are responsible for implementing tool-control procedures.			×	This component is only required for SPCs/CDFs. Department heads are required to implement tool control procedures.
The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable.				Facility policy 6-100, Tool Control/Hazardous Materials, dated January 2009, addresses the procedure for marking and making all tools readily identifiable. Tools are marked with a double backslash (//), and stored on tool shadow boards.
The facility has an approved tool storage system.  The system ensures that all stored tools are accountable. Commonly used tools (tools that can be mounted) are stored in such a way that missing tool is readily notice.				Facility tools are stored on a tool shadow board.
Each facility has procedures for the issuance of tools to staff and detainees.	$\boxtimes$			The facility does not issue tools to detainees.

TOOL CONTROL						
POLICY: IT IS THE POLICY OF ALL FACILITIES THAT ALL EMPLOYEES SHALL POLICY. THE MAINTENANCE SUPERVISOR SHALL MAINTAIN A COMPUTE TOOLS AND EQUIPMENT AND THE LOCATION IN WHICH TOOLS ARE STOREADILY AVAILABLE FOR TOOL INVENTORY AND ACCOUNTABILITY DURING	R GENERA ORED. TH	TED OR T	YPEWRI	TEN MASTER INVENTORY LIST OF		
COMPONENTS	YES	No	NA	REMARKS		
The facility has policies and procedures to address the issue of lost tools. The policy and procedures include:  • Verbal and written notification;  • Procedures for detainee access; and  • Necessary documentation/review for all incidents of lost tools.		⊠		At the time of the inspection, the facility did not have a procedure in place to address lost tools.		
Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	$\boxtimes$					
All private or contract repairs and maintenance workers under contract to ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility.	$\boxtimes$					
□ ACCEPTABLE    □ DEFICIENT    □ AT-RISK    □ REPEAT FINDING						

(b)(6) (b)(7)c September 9, 2010 AUDITOR'S SIGNATURE / DATE

## TRANSPORTATION (LAND TRANSPORTATION)

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

DETAINEES. STANDARDS HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER THE SUPERVISION OF EXPERIENCED AND TRAINED DETENTION ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL.							
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	YES	No	NA	REMARKS			
Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	$\boxtimes$						
Every transporting officer required to drive a commercial size bus has a valid Commercial Driver's License (CDL) issued by the state of employment.			Ø	The facility has no commercial size buses.			
Supervisors maintain records for each vehicle operator.	$\boxtimes$			A vehicle operator log is maintained for each assigned driver.			
Officers use a checklist during every vehicle inspection.  Officers report deficiencies affecting operability; and  Deficiencies are corrected before the vehicle goes back into service.	×			Each transportation vehicle has a vehicle inspection checklist that is completed by the assigned staff prior to using the vehicle. If the vehicle has deficiencies, they are corrected prior to the vehicle going back into service.			
<ul> <li>Transporting officers:</li> <li>Limit driving time to 10 hours in any 15 hour period;</li> <li>Drive only after eight consecutive off-duty hours;</li> <li>Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours;</li> <li>Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days;</li> <li>During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a safe area—exceeding the 10-hour limit.</li> </ul>		⊠		The facility has completed numerous trips within the last 12 months that exceed the 10 hour driving time. It should be noted that the facility received direction from ICE to transport detainees during each of these trips and a record documenting the transportation request is on file. Compliance with all bulleted requirements occurred.			
<ul> <li>Two officers with valid CDLs required in any bus transporting detainees.</li> <li>When buses travel in tandem with detainees, there are two qualified officers per vehicle.</li> <li>An unaccompanied driver may transport an empty vehicle.</li> </ul>				The facility has no commercial size buses.			
Before the start of each detail, the vehicle is thoroughly searched.				A log is maintained in each vehicle documenting a search prior to the start of each transport.			
Positive identification of all detainees being transported is confirmed.	$\boxtimes$						
All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.	$\boxtimes$						
The facility ensures that the number of detainees transported does not exceed the vehicles manufacturer's occupancy level.	$\boxtimes$						
Protective vests are provided to all transporting officers.				This component is only required for SPCs/CDFs. The facility provides vests for all transporting officers.			

## TRANSPORTATION (LAND TRANSPORTATION)

POLICY: THE IMMIGRATION AND NATURALIZATION SERVICE WILL TAKE ALL NECESSARY PRECAUTIONS TO PROTECT THE LIVES,

SAFETY, AND WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND DETAINEES. STANDARDS HAVE BEEN ESTABLISHED FOR PROFESSIONAL AND TRAINED DETENTION ENFORCEMENT OFFICERS OR AUTHORIZED CON	TRANSPOR	RTATION	UNDER T	
STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS IN CONTROL OF THE DETAINEE CASE.			No sie i	CE FIELD OFFICE OR SUB-OFFICE
COMPONENTS	YES	No	NA	REMARKS
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.	$\boxtimes$			
Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.				Facility policy 5-402, Use of Restraints During Transports, dated 1-2009, addresses the use of restraining equipment on transportation vehicles.
Officers ensure that no one contacts the detainees.  • One officer remains in the vehicle at all times when detainees are present.	$\boxtimes$			
Meals are provided during long distance transfers.  • The meals meet the minimum dietary standards, as identified by dieticians utilized by ICE.	$\boxtimes$			
The vehicle crew inspects all Food Service pickups before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.).  • Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative;  • Basins, latrines, and drinking-water containers/dispensers are cleaned and sanitized on a fixed schedule.				
Vehicles have:      Two-way radios;     Cellular telephones; and     Equipment boxes stocked in accordance with the Use of Force Standard.				The facility has two vans and two squad cars for the transportation of detainees. All four vehicles are equipped in accordance with the requirements of this component.
The vehicles are clean and sanitary at all times.	$\boxtimes$			
Personal property of a detainee transferring to another facility is:  Inventoried; Inspected; and Accompanies the detainee.	$\boxtimes$			

TRANSPORTA (LAND TRANSPORT	Contract Con			
POLICY: THE IMMIGRATION AND NATURALIZATION SERVICE WILL TA SAFETY, AND WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND DETAINEES. STANDARDS HAVE BEEN ESTABLISHED FOR PROFESSIONAL AND TRAINED DETENTION ENFORCEMENT OFFICERS OR AUTHORIZED CON	THOSE IN	ICE CU	UNDER T	DURING THE TRANSPORTATION OF
☐ STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS IN CONTROL OF THE DETAINEE CASE.	HANDLEI	ONLY B	Y THE IC	E FIELD OFFICE OR SUB-OFFICE
COMPONENTS	YES	No	NA	REMARKS
The following contingencies are included in the written procedures for vehicle crews:				The facility has no contingency plan or written procedures for Severe Weather.
□ Acceptable  □ Deficient □	AT-RISI	K		REPEAT FINDING

The facility has no contingency plan or written procedures for severe weather.

AUDITOR'S SIGNATURE / DATE

## USE OF FORCE

POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:

COMPONENTS	YES	No	NA	REMARKS
Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	⊠			Facility policy 5-500 & 5-506, Use of Force, dated January 2009, provides the procedure for staff to respond to an immediate-use-of-force situation without a supervisor's presence or direction.
When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, officers must try to resolve the situation without resorting to force.	$\boxtimes$			
Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	$\boxtimes$			Facility policy 5-500, Use of Force, dated January 2009, indicates that calculated rather than immediate use of force is feasible in most cases.
The facility subscribes to the prescribed Confrontation Avoidance Procedures.  • Ranking detention official, health professional, and others confer before every calculated use of force.	⊠			
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.		$\boxtimes$		The facility does not use the Use-of-Force Team Technique. The facility uses any available, properly trained staff member if a detainee needs to be forcibly moved and/or restrained.
Staff members are trained in the performance of the Use-of-Force Team Technique.		$\boxtimes$		The facility does not train staff on the Use- of-Force Team Technique.
All use-of-force incidents are documented and reviewed.	$\boxtimes$			All use-of-force incidents are documented and reviewed by the shift supervisor.
Staff:  Do not use force as punishment;  Attempt to gain the detainee's voluntary cooperation before resorting to force;  Use only as much force as necessary to control the detainee; and  Use restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical.				
Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.			$\boxtimes$	The facility does not use medication for restraint purposes.
Use-of-Force Team follows written procedures that attempt to prevent injury and exposure to communicable disease(s).	$\boxtimes$			Staff follows written procedure to prevent injury and exposure to communicable diseases.

## USE OF FORCE

POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:

COMPONENTS	YES	No	NA	REMARKS		
Standard procedures associated with using four-point restraints include:  • Soft restraints (e.g., vinyl); • Dressing the detainee appropriately for the temperature; • A bed, mattress, and blanket/sheet; • Checking the detainee at least every 15 minutes; • Logging each check; • Turning the bed-restrained detainee often enough to prevent soreness or stiffness; • Medical evaluation of the restrained detainee twice per eight-hour shift; and • When qualified medical staff is not immediately	YES	No	NA	The facility uses a restraint chair when appropriate.		
available, staff position the detainee "face-up".						
The shift supervisor monitors the detainee's position/condition every two hours.  • He/she allows the detainee to use the rest room at these times under safeguards.	$\boxtimes$					
All detainee checks are logged.	$\boxtimes$					
In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	$\boxtimes$					
<ul> <li>When the OIC authorizes use of non-lethal weapons:</li> <li>Medical staff is consulted before staff use pepper spray/non-lethal weapons.</li> <li>Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized.</li> </ul>		$\boxtimes$		Medical staff is not consulted before the use of pepper spray/non-lethal weapons. Medical staff does not review the detainee's medical file before the use of a non-lethal weapon is authorized.		
Special precautions are taken when restraining pregnant detainees.  • Medical personnel are consulted	$\boxtimes$			Facility policy 5-400, Restraints, dated 1-2009, addresses special precautions for restraining pregnant detainees.		
Protective gear is worn when restraining detainees with open cuts or wounds.	$\boxtimes$					
Staff documents every use of force and/or non-routine application of restraints.	$\boxtimes$			Staff use a local incident report form when reporting use of force/and or non-routine application of restraints.		
It is standard practice to review any use of force and the non-routine application of restraints.	$\boxtimes$					
All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees.  • Specialized training is given and Officers are certified in all devices they use.	$\boxtimes$					
In SPCs, is the Use of Force form is used? In other facilities (IGSAs / CDFs) is this form or its equivalent used?	$\boxtimes$			IGSAs are not required to use the Use of Force form. At this facility, a local incident report form is used for use of force incidents.		
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING						

The facility uses model X-26 Tasers, which are assigned to all properly trained staff.

Facility staff did not adhere to established procedures for the use of the Taser in one incident in the past year. The facility's Use of Force policy states that "the use of an impact weapon on an ICE detainee is prohibited." During the past 12 months, the facility had one (1) incident involving the use of a Taser on an ICE detainee. The incident violated facility policy. An investigation occurred, and it was determined that the use of the Taser was deemed an appropriate use of force.

(b)(6), (b)(7)c / September 9, 2010 AUDITOR'S SIGNATURE / DATE

#### STAFF DETAINEE COMMUNICATIONS POLICY: PROCEDURES MUST BE IN PLACE TO ALLOW FOR FORMAL AND INFORMAL CONTACT BETWEEN KEY FACILITY STAFF AND ICE STAFF AND ICE DETAINEE AND TO PERMIT DETAINEES TO MAKE WRITTEN REQUESTS TO ICE STAFF AND RECEIVE AN ANSWER IN AN ACCEPTABLE TIME FRAME. COMPONENTS YES No NA REMARKS The ICE Field Office Director ensures that weekly announced and The ICE Field Office Director unannounced visits occur at the IGSA. ensures that announced and unannounced visits occur at the $\boxtimes$ $\Box$ facility. Although weekly visits are not required at an IGSA, the Field Office ensures that weekly visits occur. Detention and Deportation Staff conduct scheduled weekly visits with $\boxtimes$ detainees held in the IGSA. Scheduled visits are posted in ICE detainee areas. Scheduled ICE visits are $\boxtimes$ prominently posted in the detainee housing units. Visiting staff observe and note current climate and conditions of $\boxtimes$ confinement at each IGSA. ICE information request Forms are available at the IGSA for use by ICE request forms were ICE detainees. $\boxtimes$ available in the detainee housing units. The IGSA treats detainee correspondence to ICE staff as Special $\boxtimes$ Correspondence. ICE staff responds to a detainee request from an IGSA within 72 $\boxtimes$ ICE detainees are notified in writing upon admission to the facility of ICE detainees receive the their right to correspond with ICE staff regarding their case or National Detainee Handbook conditions of confinement. and the facility handbook which

### REMARKS:

ICE Detention and Deportation staff conducts weekly inspections of the Jefferson County Detention Facility. Scheduled visits of ICE staff are posted in the detainee living areas. Detainee requests to ICE are treated as special correspondence, and are faxed to the Chicago Field Office immediately upon receipt.

■ DEFICIENT

 $\boxtimes$ 

☐ AT-RISK

П

address the detainees' right to correspond with ICE staff regarding their case or conditions of confinement.

☐ REPEAT FINDING

(b)(6) (b)(7) / September 9, 2010 AUDITOR'S SIGNATURE / DATE

**ACCEPTABLE** 

## DETAINEE TRANSFER STANDARD

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

THE IMMIGRATION COOK! PROCEEDINGS ARE TAKING PLACE.				
COMPONENTS	YES	No	NA	REMARKS
<ul> <li>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.</li> <li>The notification is recorded in the detainee's file; and</li> <li>When the A File is not available, notification is noted within DACS</li> </ul>	⊠			
Notification includes the reason for the transfer and the location of the new facility.	$\boxtimes$			
The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	$\boxtimes$			
The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	$\boxtimes$			
<ul> <li>Facility policy mandates that:</li> <li>Times and transfer plans are never discussed with the detainee prior to transfer;</li> <li>The detainee is not notified of the transfer until immediately prior to departing the facility; and</li> <li>The detainee is not permitted to make any phone calls or have contact with any detainee in the general population.</li> </ul>	$\boxtimes$			Facility policy #4-700, Transportation of Detainees, mandates that times and transfer plans are never discussed with the detainee. The detainee is not notified of the transfer until immediately prior to departing the facility, and the detainee is not permitted to make any phone calls or have contact with any detainee in general population.
The detainee is provided with a completed Detainee Transfer Notification Form.	⊠			The detainee is provided with a completed Detainee Transfer Notification Form, which s/he signs indicating receipt.
Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	$\boxtimes$			
<ul> <li>For medical transfers:</li> <li>The Detainee Immigration Health Service (or IGSA) (DIHS) Medical Director or designee approves the transfer;</li> <li>Medical transfers are coordinated through the local ICE office; and</li> <li>A medical transfer summary is completed and accompanies the detainee.</li> </ul>			×	There have been no medical transfers from the facility.
Detainees in ICE facilities having DIHS staff and medical care are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number, and the envelope is marked Medical Confidential.			$\boxtimes$	There have been no medical transfers from the facility.
For medical transfers, transporting officers receive instructions regarding medical issues.			$\boxtimes$	There have been no medical transfers from the facility.
Detainee's funds, valuables, and property are returned and transferred with the detainee to his/her new location.	$\boxtimes$			
Transfer and documentary procedures outlined in Section C and D are followed.	$\boxtimes$			
Meals are provided when transfers occur during normally schedule meal times.	$\boxtimes$			

DETAINEE TRANSFEI	RSTAND	ARD					
POLICY: ICE WILL MAKE ALL NECESSARY NOTIFICATIONS WHEN A DETAY VIA THE JUSTICE PRISONER ALIEN TRANSPORTATION SYSTEM (JPATS WHETHER TO TRANSFER A DETAINEE, ICE WILL TAKE INTO CONSIDERAL IMMIGRATION COURT. IN SUCH CASES, THE FIELD OFFICE DIRECTOR WE PROCESS, WHETHER THE DETAINEE'S ATTORNEY IS LOCATED WITHIN RETHE IMMIGRATION COURT PROCEEDINGS ARE TAKING PLACE.	S), ICE WATION WHI	ILL ADHE THER THE DER THE	ERE TO J	PATS PROTOCOLS. IN DECIDING NEE IS REPRESENTED BEFORE THE EE'S STAGE WITHIN THE REMOVAL			
COMPONENTS	YES	No	NA	REMARKS			
An A File or work folder accompanies the detainee when transferred to a different field office or sub-office.	$\boxtimes$						
Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.							
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING							

The ICE Deportation Officer assigned to the facility and facility staff indicated that if a G-28 is on file, any detainee legal representative listed is notified by the ICE staff when the detainee is transferred. Notations are made in the detainee's file and transferred to the receiving facility.

/ September 9, 2010 AUDITOR'S SIGNATURE / DATE