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 State Facility – IGSA ICE Contract Detention Facility

Name
Jefferson County Justice Center
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 of Lead Compliance Inspector
(b)(6), (b)(7)c
Date[s] of Review
From August 2 to August 4, 2011
Type of Review

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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.

A. Type of Facility Reviewe	d	Estimated Man d	ava Por Voor	•		
ICE Service Process		Estimated Man-days Per Year: 39,600				
ICE Contract Deten		39,000			······································	
	ital Service Agreement	G. Accreditation	n Cartificate	æ		
Z TOIS THE EGOVERNMENT	tui bei vice Agi cement	List all State or N			vad.	
B. Current Inspection		Elst all State of 14	ational Acci	cultation[s] receiv	veu.	
Type of Inspection		Check box if	facility has r	o accreditation[s	1	
Field Office HQ Inspe	ection		1001	o de or o drama o nijo		
Date[s] of Facility Review		H. Problems / C	Complaints (Copies must be	attached)	
August 2-4, 2011		The Facility is un	der Court Or	der or Class Acti	on Finding	
		Court Order		Class Action Ord		
C. Previous/Most Recent Fa	cility Review	The Facility has S	Significant L	tigation Pending		
Date[s] of Last Facility Review		☐ Major Litigati		Life/Safety Issue	s	
September 7-9, 2010		Check if Non	ıe.			
Previous Rating						
☐ Superior ☐ Good ☒ Acc	eptable Deficient At-Risk	I. Facility Hist	tory			
		Date Built				
D. Name and Location of Fa	ncility	2004				
Name		Date Last Remod	leled or Upgr	aded		
Jefferson County Justice Cer	iter	N/A				
Address (Street and Name)		Date New Constr	ruction / Bed	space Added		
911 Casey Avenue		N/A				
City, State and Zip Code		Future Constructi				
Mount Vernon, Illinois 6286	4	☐ Yes ⊠ No	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	73. 1		
County		Current Bed space	4	Bed space (# Ne		
Jefferson	stive Officer (Warden/OIC/Supt.)	249	Numb	er: N/A Date: N/	A	
(b)(6), (b)(7)c Sheriff	uive Officer (warden/OfC/Supt.)	J. Total Facilit	ty Populatio			
Telephone # (Include Area Cod	ia)	Total Facility Inta			*****	
618-b)(6), (b)(7)	10)	73,842	ake for previo	ous 12 months		
Field Office / Sub-Office (List	Office with oversight)	Total ICE Man-d	avs for Previ	ous 12 months		
Chicago, Illinois	o in o relaigney	32,816	w)	oud in literature		
Distance from Field Office		}				
253 miles		K. Classificatio	n Level (IC	E SPCs and CD	Fs Only)	
St.			L-		L-3	
E. ICE Information		Adult Male	0	0	0	
Name of LCI (Last Name, Titl	e and Duty Station)	Adult Female	0	0	0	
)(6), (b)(7 / LCI / MGT						
Name of Team Member / Title		L. Facility Capa	ecity			
b)(6), (b)(7) CI-Security / MGT			Rated	Operational	Emergency	
Name of Team Member / Title		Adult Male	225	225	275	
)(6), (b)(7 CI-Medical Care / I		Adult Female	24	24	24	
Name of Team Member / Title		Facility holds.	Juveniles Offe	enders 16 and olde	er as Adults	
5)(6), (b)(7) CI-Food Service / N		** * ** *** *** *** *** *** *** *** **				
Name of Team Member / Title		M. Average Dai				
o)(6), (b)(7) CI-Environmental	Health and Safety / MGT		IC		Other	
E CDE/ICS A Information C	hada.	Adult Male	100		80	
F. CDF/IGSA Information Contract Number	Date of Contract or IGSA	Adult Female	10	1	10	
DROIGSA-09-0008	November 25, 2008	N To allian Ca - C	Car T			
Basic Rates per Man-Day	110 YCHRUCI 23, 2008	N. Facility Staf	iing Level	[C		
\$60.30		Security:	/5\/-7\-	Support:		
Other Charges: (If None, Indic	eate N/A)		(b)(7)e			
Fransportation: \$ 51 per mi						



SIGNIFICANT INCIDENT SUMMARY WORKSHEET

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

Incidents	Description	Jan – Mar	Apr – Jun	Jul – Sept	Oct - Dec
Assault:	Types (Sexual ² , Physical, etc.)	1-P	1-P	1-P	0
Offenders on Offenders l	With Weapon	0	0	0	0
	Without Weapon	1	1	1	0
Assault:	Types (Sexual Physical, etc.)	0	1-P	1-P	0
Detainee on Staff	With Weapon	0	0	0	0
	Without Weapon	0	1	1	0
Number of Forced Moves, incl. Forced Cell moves ³		4	3	2	0
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		0	0	1	0
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	2-V	1-V	3-V	1-V
Restraints applied/used	Type (C=Chair, B=Bed, BB=Board, O=Other)	С	С	С	С
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	1	1	0
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	52	25	28	22
	# Resolved in favor of Offender/Detainee	11	6	14	6
Deaths	Reason (V=Violent, l≈Illness, S=Suicide, A=Attempted Suicide, O=Other)	0	0	0	0
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	46	38	48	33
	# Psychiatric Cases referred for Outside Care	0	0	0	0

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

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

Routine transportation of detainces/offenders is not considered "forced"

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



DHS/ICE DETENTION STANDARDS REVIEW SUMMARY REPORT

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

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

Department Of H	lomeland	Security	
Immigration and	Customs	Enforceme	ill



Detention Facility Inspection Form Facilities Used Over 72 hours

LCI REVIEW ASSURANCE STATEMENT

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

LEA	D COMPLIANCE INSPECTOR ()/
Lead Compliance Inspector: (Print Name)	Signapore /
(b)(6), (b)(7)c	(b)(6). (b)(7)c
Title & Duty Location	Date /
LCI, MGT	August 6, 2011
	Team Members
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
CY C. H. MCC	
(b)(6), (b)(7)c CI-Security, MGT	(b)(6), (b)(7)c CI-Medical Care, MGT
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
(b)(6), (b)(7)c CI-Food Service, MGT	(b)(6). (b)(7)c CI-Environmental Health and Safety, MGT
Recommended Rating:	orior .
	ptable
Defic	cient
☐ At-R	lisk

Comments:

There have been no escapes, attempted escapes, deaths or attempted suicides at this facility during the previous 12 months.

On 06-29-11, at approximately 7:10 PM, an incident occurred in 'E' Block (Housing Unit) with an ICE detainee who was refusing to lock up. After refusing orders, security staff restrained the detainee and placed him on the floor. Other security staff arrived to assist, and a Lieutenant ordered the detainee to stop resisting; however, he refused. The Lieutenant tased the detainee in the back. The detainee stopped resisting, was cuffed and taken to the medical unit for observation. It was not until after the incident was over that the staff realized he was an ICE detainee. This incident was reported to the Jail Administrator as well as ICE Field Office staff who investigated the incident.

The facility utilizes Tasers and only those staff who have received training are allowed to use them. Policy 5-507, Intermediate Weapons, prohibits the use of a taser on ICE detainees.

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.

COMPONENTS	YES	No	NA .	REMARKS
The facility provides a designated law library for detainee use.	×			The facility has a designated law library with three computers. The LexisNexis program is installed on each computer.
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 as the source for 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 law library contains three computers and pencils and paper are available upon request. Each computer is connected to a printer in the Control Center. Detainees may make copies of legal materials as needed. The computers also have a word processor so there is no need for typewriters.
In addition to the physical law library, detainees have access to the Lexus Nexus electronic law library.	\boxtimes			All three computers in the law library contain LexisNexis.
Where provided, the Lexus Nexus library is updated and is current.	\boxtimes			The LexisNexis program was last updated in June 2011
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.	×			·
There is a designated ICE or facility employee who inspects, updates, and maintains/replaces legal materials and equipment on a routine basis.	\boxtimes			The Jail Administrator and ICE Coordinator inspect, update and replace legal materials and equipment routinely.
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 get a minimum of five hours a week in the law library by submitting request slips when they need access. The request slips are sent to a Lieutenant who schedules the detainees to use the law library.
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.	\boxtimes			All requests made by detainees for material not currently in the law library are sent to ICE staff. ICE staff accommodates all detainee requests within five business days.
Detainees are permitted to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.				
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			If a detainee were to request access to more than English language law books, ICE would handle.
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			A detainee's excess legal material is stored in the personal property room. Detainees may access this stored material by making a request to do so.

ACCESS TO LE	EGAL N	MATER	IALS	
POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DET FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE	TAINEES E OPPOR	ACCESS	TO A L	AW LIBRARY, AND PROVIDE LEGAL MATERIALS, ARE LEGAL DOCUMENTS.
COMPONENTS	YES	No	NA	REMARKS
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.	⊠			The facility has a computer for use by detainees in Administrative Detention and Disciplinary Segregation. This computer is equipped with the current LexisNexis program. As of this date, no detainees have been denied access; however, any denial would be documented.
All denials of access to the law library fully documented.	\boxtimes			No ICE detainees have been denied access to the law library; however, all denials would be documented.
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	K-21		[

 \boxtimes

AT-RISK

REPEAT FINDING

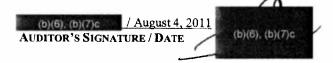
■ DEFICIENT

REMARKS:

to reprisals, retaliation, or penalties.

ACCEPTABLE

This inspector reviewed the facility policy and the law library logbook, observed the law library and interviewed the ICE Coordinator and several ICE detainees. The law library is in a room that is about 7' x 20' in size. It contains three computers which contain an updated version of the LexisNexis program. There is a chair for each computer. ICE detainees are allowed access to the law library a minimum of five hours per week and additional time is granted if requested. Detainees submit request slips to a Lieutenant who will schedule them for time in the law library. The detainee handbook describes how to access the law library and listed the number of hours per week a detainee is permitted to spend there. Interviews with detainees indicate they have sufficient access to the law library and the LexisNexis program. Based on this inspector's review, the facility was found to be in compliance with the standard.



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 pro bono legal services, and how to pursue such services; schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.				The section of the component that requires the following topics to be included in the detainee orientation is specific to SPCs or CDFs: Unacceptable activities and behavior and corresponding sanctions; how to contact ICE; the availability of pro bono legal services, and how to pursue such services; schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; and sick call procedures. The facility utilizes an orientation video as part of the in-processing of detainees. All of the topics listed in this component are addressed in orientation. Each detainee is issued a detainee handbook and a copy of the ICE National Detainee Handbook. Both handbooks are available in English and Spanish.
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			When a detainee is admitted to the facility, an officer asks a series of medical-related questions. Immediately after the intake process, detainees are screened by medical staff.
Each new arrival is classified according to criminal history and threat levels. Criminal history is provided for each detainee by the ICE field office.	\boxtimes			All ICE detainees are classified by ICE staff prior to being transferred to this facility.
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.	\boxtimes			
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			If an ICE detainee claims that s/he has lost or missing property, the ICE detainee fills out a request slip which is forwarded to ICE for review and handling.
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.	\boxtimes			

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		
All releases are properly coordinated with ICE using a Form I-203.			×	This component is only applicable for SPCs and CDF's. The facility uses the Form I-203, Order to Detain or Release, when releasing a detainee.		
Staff completes paperwork/forms for release as required.	\boxtimes					
ACCEPTABLE DEFICIENT] AT-R	usk	REPEAT FINDING		

This inspector reviewed the facility policy and forms, interviewed the ICE Coordinator and observed the booking area. Detainees are classified by ICE staff prior to arriving at the facility. The in-processing of detainees provides them with sufficient information about the facility. Detainees are medically screened upon arrival, appropriately searched and their personal property is handled in accordance with established procedures. Based on this inspector's review, the facility is found to be in compliance with the standard.

(b)(6). (b)(7)c / August 4, 2011 AUDITOR'S SIGNATURE / DATE (b)(6). (b)(7)c

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

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.	×			The facility uses an Objective Classification System; however, ICE detainees are classified by ICE prior to arriving at this facility.
The facility classification system includes: Classifying detainees upon arrival; Separating from the general population those individuals who cannot be classified upon arrival; and The first-line supervisor or designated classification specialist reviewing every classification decision.				Detainees are classified as: Level 1 (Low Security); Level 2 (Medium Security); and Level 3 (High Security).
The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	\boxtimes			ICE staff review work folders, A-files, criminal history and immigration reports to identify and classify new arrivals.
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.	\boxtimes			
Housing assignments are based on classification-level.	×			Level 1 detainees are never housed with Level 3 detainees. Level 2 detainees can be housed with either Level 1 or Level 3 detainees.
A detainee's classification-level does not affect his/her recreation opportunities. Detainees recreate with persons of similar classification designations.	Ø			
Detainee work assignments are based upon classification designations.				Only detainees classified as Level 1 or 2 are allowed to work.
The classification process includes reassessment/reclassification. At IGSA's, detainees may request reassessment 60 days after arrival.	\boxtimes			
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.	⊠			The portion of this component that states that a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal is specific to SPCs and CDFs. ICE detainees may appeal their classification assignments by filling out an ICE Request Slip and sending it to the ICE Coordinator. The request slip would then be forwarded to the ICE Field Office for action.
Classification appeals are resolved within five business days and detainees are notified of the outcome within 10 business days.			×	This component is only applicable for SPCs and CDFs. Classification appeals that are forwarded to ICE are resolved within five business days and the detainee is notified within 10 business days.
Classification designations may be appealed to a higher authority, such as the Warden or equivalent.			×	This component is only applicable for SPCs and CDFs. Classification designations may be appealed to ICE through the AFOD.
The Detainee Handbook or equivalent for IGSAs explains the classification levels, with the conditions and restrictions pplicable to each.	\boxtimes			
ACCEPTABLE DEFICIENT		AT-R	ISK	REPEAT FINDING

This inspector reviewed the facility policy and detention files, interviewed the ICE Coordinator and Deportation Officer and observed classification forms. All detainees are classified by ICE prior to their being transferred to this facility, and all reassessments/reclassifications are conducted by ICE staff. ICE detainee appeals are forwarded to ICE staff for review and determination. Based on this inspector's review, the facility is found to be in compliance with the standard.

(b)(6), (b)(7)c / August 4, 2011 AUDITOR'S SIGNATURE / DATE (b)(6), (b)(7)c

CORRESPONDENCE AND OTHER MAIL

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

COMPONENTS	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 portion of this component requiring correspondence rules to be posted in the housing unit or common area is specific to SPCs and CDFs. The rules for correspondence and other mail are posted in each living area and are included in the detainee handbook.
The facility provides key information in languages other than English; In the language(s) spoken by significant numbers of detainees. List any exceptions.	\boxtimes			Key information is provided in both English and Spanish. This was evident by the postings in the housing units. The detainee handbook is available in both English and Spanish as well.
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			
Staff does not read incoming general correspondence without the Warden's prior written approval.			\boxtimes	This component is only applicable for SPCs and CDFs. Staff does not read incoming general correspondence; however, do scan mail for key words that might alert them to illegal activity.
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.	×			The requirement for the detainee to be present is specific to SPCs and CDFs. Outgoing mail is only inspected when there is reason to believe there is a security issue or illegal activity taking place. Normally it is sealed, logged and sent out. The detainee is not present when outgoing mail is processed.
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 requirement for the official authorizing the rejection of incoming mail to send written notice to the sender is specific to SPCs and CDFs. The facility officer processing incoming mail can authorize its rejection and sends written notice to the addressee, but not to the sender.
The official authorizing censorship or rejection of outgoing mail rovides the detainee with signed written notice.	\boxtimes			

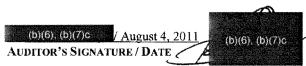
CORRESPONDENCE AND OTHER MAIL

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

COMPONENTS	YES	No	NA	REMARKS
Staff maintains a written record of every item removed from detainee mail.	\boxtimes			All incoming and outgoing mail is logged into the computer. Any time an item is removed from mail or mail is rejected, it is noted on this electronic log.
The Warden or equivalent monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	\boxtimes	П		
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.				Cash is not accepted through the mail. Any time cash is discovered in incoming mail, that mail is returned to the sender with a notice explaining why it is being returned.
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	П		When a detainee requests a copy of an identity document, the request is forwarded to ICE.
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	П		The facility's policy on Detainee Mail addresses the disposition of prohibited items found in detainee mail.
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			ICE detainees are allowed to purchase stamped envelopes through the commissary once each week.
The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	\boxtimes		П	
Acceptable Deficient] AT-R	ISK	REPEAT FINDING

REMARKS:

This inspector reviewed the facility policy and the mail log and interviewed the Assistant Jail Administrator. The rules for correspondence are posted in the living units and are also found in the detainee handbook, written in both English and Spanish. Mail is processed in accordance with the standard. Based on this inspector's review, the facility is found to be compliant with the standard.



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

COMPONENTS				
COMPONENTS	YES	No	NA	REMARKS
The detainee handbook is written in English and translated into				The detainee handbook is available in both
Spanish, or into the next most-prevalent Language(s).				English and Spanish.
The handbook is supplemented by the facility orientation video,	\boxtimes			An orientation video is available in both
where one is provided.				languages.
All staff members receive a handbook and training regarding the				After hire, correctional staff is required to
handbook contents.				complete basic training at the Illinois
	\boxtimes			Department of Corrections Training
				Academy. New staff receives training on the
				detainee handbook from the field training officer.
The handbook is revised as necessary and there are procedures				The facility currently issues separate detainee
in place for immediately communicating any revisions to staff				handbooks to ICE and non-ICE detainees,
and detainees.				written in both English and Spanish. The Jail
	5-71			Administrator and Facility ICE Coordinator
	\boxtimes			revise the handbook(s) as necessary and
				communicate any changes. The Jail
				Administrator indicated the ICE and non-ICE
				handbooks are to be consolidated.
There an annual review of the handbook by a designated	\boxtimes	П		The ICE coordinator provides annual reviews
committee or staff member.				of the handbook and amendments as needed.
The detainee handbook addresses the following issues:				
 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	\boxtimes			
detainee responsibilities. The handbook clearly outlines the methods for classification of				
detainees, explains each level, and explains the classification	\boxtimes		П	
appeals process.		<u> </u>		
The handbook states when a medical examination will be				Medical exams are conducted within 14 days
conducted.				of admission.
The handbook describes the facility, housing units, dayrooms,	K-21	()		
in-dorm activities, and special housing units.			Ш	
The handbook describes official count times and count				The detainee handbook addresses the
procedures; meal times and feeding procedures; procedures for				following issues: headcounts are conducted
medical or religious diets; smoking policy; clothing exchange				at 6 AM, 11:30 AM,5:30 PM and 10 PM;
schedules; and, if authorized, clothes washing and drying				meals are served at 6:30 AM, 11:30 AM and
procedures, and expected personal hygiene practices.				5:30 PM; medical and religious diets are
	\boxtimes		П	available upon request to/approval by the
			L	Medical Unit and/or the Food Services
				Administrator (FSA); no smoking allowed in
				the facility; a clothing exchange schedule; a
				commercial laundry at the facility for
				washing and drying; and expected personal hygiene practices.
The handbook describe times and procedures for obtaining				
disposable razors, and allows that detainees attending court will	\boxtimes		П	Razors are issued and retrieved daily for
be afforded the opportunity to shave first.	a	I	1i	inspection.
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DETAINEE HANDBOOK

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COMPONENTS	YES	No	NA	REMARKS
The handbook describes barber hours and hair cutting				The facility provides a barbershop and
restrictions.				charges ICE/non-ICE detainees \$15 per
				haircut.
The handbook describes the telephone policy; debit card				Three telephones are available in each
procedures; direct and free calls; locations of telephones; policy				housing unit. Detainees may call collect, or
when telephone demand is high; and policy and procedures for				use prepaid phone cards available from the
emergency phone calls.	\boxtimes			commissary kiosk system. Calls are limited
]		to 20 minutes per day. Consulate calls are not restricted. The Jail Administrator may
				review/approve a non-collect emergency
				phone call.
The handbook addresses religious programming.				
The handbook states times and procedures for commissary or				As indicated in the handbook, commissary
vending machine usage, where available.	\boxtimes			kiosks are located in each housing unit.
		1 🖳		Detainees may request large or small snack
	F-3			packs and/or phone cards.
The handbook describes the detainee voluntary work program.			<u> </u>	
The handbook describes the library location and hours of operation, and law library procedures and schedules.	\boxtimes			
The handbook describes attorney and regular visitation hours,				Attorney and regular visits are offered at the
policies, and procedures.	\boxtimes			same times: Thursdays, Saturdays and
			╽┕┙	Sundays from 10:30 AM to 2:30 PM and
				5:30 PM to 9:30 PM.
The handbook describes the facility contraband policy.	\boxtimes			
The handbook describes the facility visiting hours and schedule,	5-7			General visiting hours are on Thursdays,
and visiting rules and regulations.	\boxtimes			Saturdays and Sundays from 10:30 AM to
The handbook describes the correspondence policy and				2:30 PM and 5:30 PM to 9:30 PM.
procedures.				
The handbook describes the detainee disciplinary policy and				The handbook distinguishes between major
procedures, including:				and minor violations and subsequent
 Prohibited acts and severity scale sanctions; 	\boxtimes			sanctions. Major sanctions are limited to 15
 Time limits in the Disciplinary Process; and 		l		days loss of privileges and segregation and/or
Summary of the Disciplinary Process.				a loss of 30 days good time.
The grievance section of the handbook explains all steps in the	:			The bendless to see the Ut. 11
grievance process – Including:				The handbook encourages the "lowest level" (informal) method of resolution possible.
• Informal (if used) and formal grievance procedures;				The appeal process includes instructions for
• The appeals process;				filing a grievance with ICE, including the
• In CDF facilities: procedures for filing an appeal of a				OIG address and phone number. Staff and
grievance with ICE. • Staff/detainee availability to help during the grievance	\boxtimes			detainees are specifically allowed to assist in
process.				preparing a grievance. A statement in the
 Guarantee against staff retaliation for filing/pursuing a 				handbook addresses the prohibition of
grievance.				retaliation for filing a grievance. The
How to file a complaint about officer misconduct with				telephone number and address of the OIG is
the Department of Homeland Security.				included in the grievance procedure section.
The detainee handbook describes the medical sick call	\boxtimes			
procedures for general population and segregation.				
he handbook describes the facility recreation policy including:	g		_	
Outdoor recreation hours.			Ш	Only indoor recreation is offered.
 Indoor recreation hours. 		1		

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.							
COMPONENTS	YES	NO.	NA	REMARKS			
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			2			
□ ACCEPTABLE □ DEFICIENT	AT-RISK			REPEAT FINDING			

An ICE-specific facility handbook is provided in English and Spanish and is supported by an English and Spanish power point video narrated in both languages. An ICE National Detainee Handbook is also provided. The handbook adequately describes classification, health care, facility operations and services, the discipline and grievance policies, visiting and recreation.

The power point video is maintained on a cart and wheeled to the admissions area for detainee viewing. The handbook provides a thorough description of rights and responsibilities, rules and regulations and instructional information (i.e., how to initiate a marriage request).

(b)(6), (b)(7)c / August, 4, 2011 AUDITOR'S SIGNATURE / DATE

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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
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.	⊠			The Aramark Corporation assumed food service operations in March 2011. Since then, management responsibilities have been shared by designated Aramark managers. The current Supervisor has over 30 years of food service management experience and holds ServSafe and food sanitation certificates.
The Cook Supervisor is on duty on days when the FSA is off duty and vice versa.			⊠	This component is only applicable for SPCs and CDFs. Professional staff at the facility under the FSA includes a lead supervisor and four cook supervisors. A supervisor is available and on duty when the FSA is off 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			Food service employees complete the Aramark training program in kitchen basics and procedures including the ICE Food Service standard.
Knife cabinets close with an approved locking device, and the on-duty cook foreman maintains control of the key that locks the device.	X			Knives have been eliminated from the kitchen and substituted with dough cutters. A metal wall insert cabinet with locking doors has been installed in the FSA's office. Metal utensils have been shadow boarded.
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.			×	The section of this component requiring staff to monitor the condition of knives and dining utensils is specific to SPCs and CDFs. The condition of culinary equipment is monitored. Recipes have been developed to avoid foods which require sharp-edge cutting. Subsequently, knives have been eliminated from the kitchen in favor of less hazardous dough cutters. The ICE detainee workers are supervised. There are no non-ICE detainee food service workers.
When necessary, special procedures govern the handling of food items that pose a security threat.	\boxtimes			Spices and foods which may present a security threat are stored in a secured dry storage area.
Operating procedures include daily searches (shakedowns) of detainee work areas.	\boxtimes			
The FSA monitors staff implementation of the facility's population counts procedures. Staff is trained in count procedures.	×			Facility counts are conducted by security staff while food service staff monitors the process. However, the contractual food service staff participates in the same new employee orientation as security staff.
The detainees assigned to the food service department look neat and clean. Their clothing and grooming comply with the "Food Service" standard.	\boxtimes			
The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	\boxtimes			Detainee job descriptions and annual review documentation was observed.
The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	\boxtimes			A review of documented training supported that rules and procedures are addressed.

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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
During orientation and training session(s), the CS explains and demonstrates: • Safe work practices and methods; • Safety features of individual products/pieces of equipment; and • Training covers the safe handling of hazardous material[s] the detainees are likely to encounter in their work.	×			Each item in this component of the standard is addressed as part of orientation and training for the ICE detainee food service workers.
The Cook Supervisor documents all training in individual detainee detention files.	X			
Detainees at CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSAs are subject to local and state rules and regulations regarding detainee pay.				The requirement for detainees to be paid in accordance with the "Voluntary Work Program" standard is specific to SPCs and CDFs. In lieu of a monetary distribution to the ICE detainee's account, voluntary workers are paid in the form of phone cards for free phone calls and/or pizza. As an IGSA, the facility is subject to local and state rules governing detainee pay. Practices implemented by the facility are consistent with local and state rules. There are no non-ICE detainee workers.
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.	\boxtimes			A review of the menu cycle indicated two hot meals were scheduled every day. The hot meals are served at lunch and dinner.
For cafeteria style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.			\boxtimes	Meals are served in the housing areas at this facility.
The facility has a standard 35-day menu cycle. IGSAs use a 35 day or similar system for rotating meals.	\boxtimes			The section of this component requiring a 35-day menu cycle is specific to SPCs and CDFs. The facility maintains a 35-day menu cycle and the entrees vary throughout that cycle.
The FSA or facility considers the ethnic diversity of the facility's detainee population when developing menu cycles (Provide examples).	\boxtimes			The majority of ICE detainees are Hispanic. Subsequently, the menu cycle includes: Spanish rice; burritos; tacos; tostados; and so forth.
A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	\boxtimes			A registered dietician reviewed and approved the menu in February 2011.
The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	Ø			A program data base of nutritionally approved recipes is maintained by Aramark to direct proper menu preparation.
The Cook Foreman has the authority to change menu items if necessary. • If yes, documenting each substitution, along with its justification • With copy to FSA	\boxtimes			The standard requires the "Cook Supervisor or equivalent" as having this authority. The cook foreman is authorized to substitute two items per week on the menu. Each substitution is noted in the management log.
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.	⊠			The facility has no Chaplain. Religious diets are reviewed by the Health Care Unit (HCU) and the FSA. Religious diet requests are approved if medically appropriate.

FOOD	CLD	VICE
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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
A common-fare menu available to detainees whose dietary				
requirements cannot be met on the main line.				Common-fare diets are prepared based upon
• Changes to the planned common-fare menu can be				a variation of the vegetarian/vegan diet menu.
made at the facility level;				The facility common-fare diet offers three
Hot entrees are offered three times a week;				hot entrees per week. Common-fare menus
• The common-fare menus satisfy nutritional				are reviewed by the HCU and the Aramark
recommended daily allowances (RDAs);	\boxtimes			Registered Dietician. Hot water is available
 Staff routinely provide hot water for instant beverages and foods; 				in the housing units. Meals are served on
o Common-fare meals are served with:				reusable plates with plastic sporks. A
Disposable plates and utensils.				separate area has been designated in the
Reusable plates and utensils.				kitchen for preparation of common-fare
• Staff use separate cutting boards, knives, spoons,				meals.
scoops, etc., to prepare the common-fare diet items.				
A supervisor at the command level must approve a detainee's	\boxtimes			
removal from the Common-Fare Program.				
The Warden, in conjunction with the chaplain and/or local				
religious leaders, provides the FSA a schedule of the ceremonial	\boxtimes			
meals for the following calendar year.				
The common-fare program accommodates detainees abstaining				Accommodations are made for detainees
from particular foods or fasting for religious purposes at				requesting special diets. On the date and
prescribed times of the year.				time of the inspection, meals were being
 Muslims fasting during Ramadan receive their meals after sundown. 				prepared for observance of Ramadan. Detainees identifying themselves as Jews are
Jews who observe Passover but do not participate in the	\boxtimes			provided a common-fare menu consistent
Common-Fare Program receive the same Kosher-for-				with the dietary requirements of Passover.
Passover meals as those who do participate.				Accommodations are made for detainees
Main-line offerings include one meatless meal (lunch)				requesting meatless meals for Ash
or dinner) on Ash Wednesday and Fridays during Lent.				Wednesday and Fridays during Lent.
The food service program addresses medical diets.	\boxtimes			
Satellite-feeding programs follow guidelines for proper	\boxtimes	П	П	
sanitation.				
Hot and cold foods are maintained at the prescribed, "safe"				On the date of inspection, hot and cold food
temperature(s) while being served.	\boxtimes	П	П	temperatures were taken. The hot food
				(beans) was measured at 201°F. The cold
All meals are provided in nutritionally adequate portions.	\boxtimes		П	food (salami) was measured at 35°F.
Food is not used to punish or reward detainees based upon				
behavior.	\boxtimes			
The food service staff instructs detainee volunteers on:				Documentation of training modules and
 Personal cleanliness and hygiene; 				records were reviewed. Training components
Sanitary techniques for preparing, storing, and serving				included instructional sessions on
food; and	\boxtimes			cleanliness/hygiene, sanitation, storage and
• The sanitary operation, care, and maintenance of				food serving. The ICE detainees are trained
equipment.		•		at each work station and on each piece of equipment as to proper sanitary operation,
				care and maintenance.
Everyone working in the food service department complies with		 		
food safety and sanitation requirements.	\boxtimes			

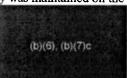
FOOD SERVICE								
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH								
THE HIGHEST SANITARY STANDARDS.								
COMPONENTS	YES	No	NA	REMARKS				
Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment. • Who conducts the inspections?	\boxtimes			Inspections are conducted daily and results are noted in the management log. The FSA and each cook supervisor conduct a monthly inspection by sampling a meal and noting the results in the management log.				
Equipment is inspected for compliance with health and safety codes and regulations. When was the most recent inspection? Which agency conducted the inspection?	\boxtimes			A food sanitation inspection was conducted on 06-21-11 by the Jefferson County Health Department. No violations were noted at the time of inspection.				
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.	\boxtimes							
Staff documents the results of every refrigerator/freezer temperature check.	⊠			On the date of this inspection the following temperature checks were observed: refrigerator temperatures at 34°F; and freezer temperatures at a range of one to four degrees.				
The cleaning schedule for each food service area is conspicuously posted.	\boxtimes			The cleaning schedule is posted outside the FSA's office.				
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	\boxtimes			Incoming food shipments are inspected by the FSA or cook foreman.				
Storage areas are locked when not in use.	\boxtimes							
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING								

The facility kitchen serves meals on a satellite basis. Portions are served on thermal trays, stacked and delivered to the housing units. Special diet trays are identified by detainee name and type of diet. Areas of the kitchen and storage rooms were clean and well organized. No evidence of pest or rodent infestation was noted. Kitchen workers were clean white uniforms, hair nets and plastic gloves. Boxes or food items were stored on shelves six inches from the floor and 18 inches from the ceiling.

Fire suppression equipment was observed over grills and in storage areas. Grills were clean and suppression equipment appeared operational. A health inspection was conducted in June 2011 with no violations noted. Dishes, trays and cleaning utensils undergo an initial wash, rinse and sanitizing prior to being placed on the dishwasher conveyer belt. Equipment is washed at 160°F and rinsed at 180°F.

Doors of storage areas were functional and locked when not in use. Personal protective equipment was available in the form of goggles, plastic gloves and an eyewash station had been installed over the hand wash basin. MSDS were available in the chemical store room and a running inventory was maintained on the store room door.

(b)(6) (b)(7)c / August 4, 2011 AUDITOR'S SIGNATURE / DATE



FUNDS AND PE	RSONA	AL PRO	PERT	Y
POLICY: ALL FACILITIES WILL IMPLEMENT PROCEDURES TO CONTR PROVIDE FOR THE SECURE STORAGE OF FUNDS, VALUABLES, BA RECEIPTING OF SURRENDERED PROPERTY; AND THE INITIAL AND R OTHER PROPERTY. STANDARD NA: (IGSA ONLY) CHECK THIS BOX IF ALL ICI BY THE ICE FIELD OFFICE OR SUB-OFFICE	AGGAGE EGULAR E detai	AND OT LY SCHI NEE FUR	THER PEEDULED	RSONAL PROPERTY; THE DOCUMENTATION AND INVENTORYING OF ALL FUNDS, VALUABLES, AND LUABLES AND PROPERTY ARE HANDLED ONLY
COMPONENTS	YES	No	NA	REMARKS
Detainee funds and valuables are properly separated, stored, and are accessible only by designated supervisor(s).	\boxtimes			Property is processed by admissions staff and stored in a secured area in fabric bags which are labeled with the detainee's name. Access to the secure area is limited to admissions staff.
Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.			\boxtimes	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			An itemized inventory is maintained online with copies provided to the detainee and placed in the detainee's file.
Staff forwards an arriving detainee's medication to the medical staff.	\boxtimes			Medication is immediately forwarded to the HCU.
Audits of baggage and non-valuable property occur each quarter and audits are logged and verified.			\boxtimes	This component is only applicable for SPCs and CDFs. Staff indicated audits are conducted on baggage and non-valuable property on a monthly basis. Results of the audits are validated and logged.
Two officers are present during the processing of detainee funds and valuables during in-processing to the facility. Both officers verify funds and valuables.				This component is only applicable for SPCs and CDFs. Two correctional officers are present during the processing of detainee funds. Funds are placed in a cash box noting the identity of the detainee owner. The business office collects funds from the cash box and issues a credit in the corresponding amount to the detainee's account.
Staff searches arriving detainees and their personal property for contraband.				This component is only applicable for SPCs and CDFs. Although detainees are searched by ICE prior to admission, staff conducts a pat down search to ensure all dangerous contraband is confiscated.
Staff procedures follow written policy for returning forgotten property to detainees.	\boxtimes			All forgotten property is forwarded to ICE.
Property discrepancies are immediately reported to the CDEO or Chief of Security.			\boxtimes	This component is only applicable for SPCs and CDFs. Property discrepancies are forwarded to the Jail Administrator. Discrepancies are reconciled and

 \boxtimes

Staff follows written procedures when returning property to

CDF/IGSA facility procedures for handling detainee property

claims are similar with the ICE standard.

detainees.

reimbursement is issued if appropriate.

FUNDS AND PE	RSONA	AL PRO	PERT	Y
POLICY: ALL FACILITIES WILL IMPLEMENT PROCEDURES TO CONTR PROVIDE FOR THE SECURE STORAGE OF FUNDS, VALUABLES, BARECEIPTING OF SURRENDERED PROPERTY; AND THE INITIAL AND ROTHER PROPERTY. STANDARD NA: (IGSA ONLY) CHECK THIS BOX IF ALL ICE BY THE ICE FIELD OFFICE OR SUB-OFFICE	aggage egular E detail	AND OT LY SCHI	THER PE EDULED VDS, VA	RSONAL PROPERTY; THE DOCUMENTATION AND INVENTORYING OF ALL FUNDS, VALUABLES, AND LUABLES AND PROPERTY ARE HANDLED ONLY
COMPONENTS	YES	No	NA	REMARKS
 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 only applicable for SPCs and CDFs. No attempt is made to contact the detainee by the facility. The ICE supervisor is notified and property is forwarded to the ICE office.
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 section of this component requiring written procedures for the disposal of abandoned property is specific to SPCs and CDFs. If abandoned property is determined to belong to a former ICE detainee, it is forwarded to the ICE office.
ACCEPTABLE □ DEFICIENT		AT-R	ISK	REPEAT FINDING

The facility has established procedures to collect detainee property and funds. Detainee funds are secured in a cash box, forwarded to the business office and credited to the detainee's account. General property is inventoried, bagged and stored in a secured area adjacent to admissions. Access to the property room is limited to admissions personnel. Abandoned property determined to belong to in ICE detainee is forwarded to the ICE office.

/ August 4, 2011 AUDITOR'S SIGNATURE / DATE

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

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.

OF A GRIEVANCE WILL NOT BE TOLERATED.							
COMPONENTS	YES	No	NA	REMARKS			
Written procedures provide for the informal resolution of oral grievances (Not mandatory). • If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff.	×			The detainee handbook notes grievances will be resolved orally if possible. An oral resolution may be addressed within five days of the incident.			
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			Written grievances are forwarded to the shift supervisor who provides a recommendation and forwards the grievance up the chain of command. The handbook and facility policy allow assistance from other detainees or facility staff in preparing a grievance.			
Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.		\boxtimes		Documentation was unavailable to demonstrate instruction on emergency grievances being a component of staff training. Facility staff is required to forward grievances submitted by ICE detainees to the field office without local review.			
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 were no cases of staff harassment or otherwise retaliating against a detainee who lodged a complaint.			
 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. 				The section of this component that requires "nuisance complaints" to be identified in the records and for staff to document nuisance complaints received but not filed is specific to SPCs and CDFs. Section 9-403 of facility policy requires the establishment and maintenance of a grievance log, which includes a column to designate grievances identified as "nuisance, petty, late or unfounded." No ICE detainee information was available in the log as such grievances are sent to the field office without local review.			
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	\boxtimes			Information is provided in the detainee handbook allowing ICE detainees to file a complaint about officer misconduct directly with the OIG, identifying the phone number and address.			
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING							

REMARKS:

The facility has established policy and procedure and maintains a working grievance process. A review of the grievance log indicates non-ICE detainee grievances are collected and reviewed with appropriate response on a timely basis. ICE grievances are collected by the local facility coordinator and forwarded to the ICE field office without local review. Adequate information is provided to ICE detainees for filing a grievance regarding staff misconduct. No information provided to indicate staff misconduct has occurred. A concern was noted that documentation was unavailable to demonstrate instruction on emergency grievances as a part of staff training.

August 4, 2011
AUDITOR'S SIGNATURE / DATE

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. **COMPONENTS** No YES NA REMARKS The Field Office is responsive to requests by attorneys and X П accredited representatives for group presentations. Upon receipt of concurrence by the Field Office Director, the facility or authorized ICE Field Office ensures timely and proper X П П notification to attorneys or accredited representatives. All materials that attorneys or accredited The facility follows policy and procedure when rejecting or representatives use in their presentations are requesting modifications to objectionable material provided or \boxtimes approved by ICE prior to being brought into presented by the attorney or accredited representative. the facility. The facility has not objected to any materials. Posters announcing presentations appear in common areas at Ø П \Box least 48 hours in advance and sign-up sheets are available and accessible. Any denials of detainees to attend a group Documentation is submitted and maintained when any detainee is presentation would be documented. No denied permission to attend a presentation and the reason(s) for \boxtimes \Box П detainees have ever been denied access to the denial. legal presentations. When the number of detainees allowed to attend a presentation is All group presentations are conducted by limited, the facility provides a sufficient number of presentations \boxtimes individual living units (i.e., one unit goes at a that all detainees signed up may attend. Detainees in segregation, unable to attend for security reasons, may request separate sessions with presenters. Such requests are \boxtimes П \Box documented. Interpreters are admitted when necessary to assist attorneys and \boxtimes \Box \Box other legal representatives. Presenters are afforded a minimum of one hour to make the \boxtimes 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 \boxtimes П П authorized 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 Group presenters would be notified by the the reasons for suspension are documented. The Headquarters FOD in writing if their privileges were \boxtimes П Office for Detention and Removal, Field Operations and suspended. No presenters for this facility Detention management Division, is notified when a group or have had their privileges suspended. individual is suspended from making presentations. The facility plays ICE-approved videotaped presentations on The facility would play ICE-approved \boxtimes legal rights at regular opportunities, at the request of outside П П videotapes if any were provided; however, organizations. none have been provided.

 \boxtimes

DEFICIENT

AT-RISK

A copy of the Group Legal Rights Presentation policy, including

attachments, is available to detainees upon request

ACCEPTABLE

If a detainee were to request a copy of the

would be contacted and one would be

REPEAT FINDING

provided.

Group Legal Rights Presentation policy, ICE

This inspector interviewed the facility's ICE Coordinator and a Deportation Officer. The National Immigration Justice Center is approved by the Chicago ICE Field Office to provide group presentations two or three times a year. These are coordinated through ICE and the facility. Presentations are conducted for each living unit. Postings announcing the presentations are placed in each living area 48 hours in advance for detainees to sign up. Based on this inspector's review, the facility is found to be in compliance with the standard.



ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS

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

COMPONENTS	YES	No	NA	REMARKS
The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, and towels. • The supply of these items exceeds the minimum required for the number of detainees.	\boxtimes			Facility policy allows exchange of clothing and linens three times per week. Based upon a review and observation of the clothing and linens room sufficient inventories are available to meet detainee requirements.
 All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive: One uniform shirt and one pair of uniform pants, or one jumpsuit; One pair of socks; One pair of underwear (Daily change); and One pair of facility-issued footwear. 				The bulleted items in this component are specific to SPCs and CDFs. Detainees are issued the following: one uniform jumpsuit; three pair socks; three pair underwear; and one pair footwear. As three exchanges are allowed each week, detainees have access to clean and presentable clothing.
Additional clothing is available for changing weather conditions, or as seasonally appropriate.	\boxtimes			As recreation is only available indoors, detainee access to the outside environment is limited to releases, transfers and court appearances. Temperature-appropriate clothing is issued when needed.
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.	⊠			The bulleted items in this component are specific to SPCs and CDFs. Vinyl covered mattresses are maintained in each cell and sanitized after the cell is vacated. The following items are issued: one blanket; two sheets; one pillow case; and one towel. All items may be exchanged when needed. Additional blankets may be issued based upon weather conditions.
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.	⊠			Socks and undergarments (issued in pairs of three) may be exchanged every three days. Outer garments may be exchanged twice weekly. Towels and pillowcases may be directly exchanged when necessary.
Food service detainee volunteer workers are permitted to exchange outer garments daily.				This component is only applicable for SPCs and CDFs. Food service workers are issued clean white tops and pants for work each day.
Volunteer detainee workers are permitted to exchange outer garments more frequently.				This component is only applicable for SPCs and CDFs. Volunteer workers are permitted to exchange outer garments and work clothes on a daily basis.
☐ ACCEPTABLE ☐ DEFICIENT	Γ] AT-R	usk	REPEAT FINDING

REMARKS:

Detainees are issued sufficient quantities of weather-appropriate clothing. Exchange frequency allows detainees to wear clean clothes at all times. Facility policy requires detainees to be fully dressed in clean clothing when out of their respective cells.

(b)(6), (b)(7)c / August 4, 2011 Auditor's Signature / Date (b)(6). (b)(7)c

MARRIA								
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			Mail boxes are maintained in each housing unit for ICE detainee requests. Requests for marriages are faxed to the Chicago field office and considered on a case-by-case basis.				
The Field Office Director reviews every marriage request rejected by a Warden/OIC or IGSA. Rejections are documented.	\boxtimes			Requests are not reviewed at the facility level prior to forwarding to the field office, where each request is reviewed by the FOD.				
It is standard practice to require a written request for permission to marry.	\boxtimes			Written requests to marry are required. A request is needed to verify the pending marriage with the intended spouse.				
The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	\boxtimes			The verification to marry is confirmed by the intended spouse.				
The Warden/OIC provides a written copy of his/her decision to the detainee and his/her legal representative.	\boxtimes			A written response of the decision by the field office staff is forwarded to the detainee.				
When permission is denied, the Warden/OIC states the basis for his/her decision.	\boxtimes			The rationale for denial of permission to marry is identified and detainee notification is provided.				
The Warden/OIC provides the detainee with a place and time to make wedding arrangements.	\boxtimes							
ACCEPTABLE DEFICIENT		AT-R	usk	REPEAT FINDING				

No marriages have been approved or denied during the past 12 months. Previous denials occurred due to immediate pending deportation which did not allow sufficient time for the marriage to be arranged. The majority of detainees placed at the facility have received a deportation hearing and are pending deportation. One request for marriage was received this year and remains pending.

(b)(6), (b)(7)c / August 4, 2011 AUDITOR'S SIGNATURE / DATE



NON-MEDICAL EMERGENCY ESCORTED TRIPS

POLICY: THE IMMIGRATION AND CUSTOMS ENFORCEMENT (ICE) MAY PROVIDE DETAINES 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 recognizes mother, father, brother, sister, spouse, child, step-parent, and foster parent as "immediate family".				
The IGSA facility notifies ICE of all detainee requests for non-medical escorts.				
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.				
Each escort includes at least two officers.				
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.				
Escort officers are precluded from accepting gifts/gratuities from a detainee, or detainee's relative or friend for any reason.				
 Escort officers ensure that detainees: Conduct themselves in a manner that does not bring discredit to the ICE; Do not violate federal, state, or local laws; Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants; Make no unauthorized phone calls; and Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return. Standard procedure requires the immediate return to the facility 				
of any detainee who violates trip rules.				
ACCEPTABLE DEFICIENT		AT-R	JSK	REPEAT FINDING

REMARKS:

All non-medical emergency trips are carried out by the Chicago Field Office. There were no non-medical escorted trips during the past 12 months.

(b)(6), (b)(7)c / August 4, 2011 AUDITOR'S SIGNATURE / DATE (b)(6), (b)(7)c

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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.

COMPONENTS	YES	No	NA	REMARKS
The facility has a recreation program and facility.	\boxtimes			The facility has indoor recreation only. A court approximately 25' x 50' is available for exercise or games. The area has windows for fresh air; however, does not meet the definition of an outdoor recreation structure.
A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.			\boxtimes	This component is only applicable for SPCs and CDFs. The facility has a bed capacity of less than 350 detainees and has not designated a recreational specialist. Security staff provides general oversight and maintenance of indoor recreational areas.
Regular maintenance keeps recreational facilities and equipment in good condition.	\boxtimes			
The recreational specialist or trained equivalent supervises detainee recreation workers.			\boxtimes	There are no ICE/non-ICE detainee recreation workers.
The recreational specialist or trainee equivalent oversees recreation programs for special housing units (SHU) and specialneeds detainees.	\boxtimes			Although the facility has no recreational specialist, recreation for these detainees is under the oversight of Central Control security staff via cameras.
Dayrooms offer sedentary activities, e.g., board games, cards, television.	\boxtimes			Cards and board games are available in housing units.
Outside activities are restricted to limited-contact sports.			\boxtimes	The facility has no outdoor recreation.
Each detainee has the opportunity to participate in daily recreation.	\boxtimes			
Detainees have access to recreation activities outside the housing units for at least one hour daily, 5 days a week.	\boxtimes			Detainees have access to recreation one hour per day, seven days per week.
Staff checks all items for damage and condition when equipment is returned.	\boxtimes			
Staff conducts searches of recreation areas before and after use.	\boxtimes			
All recreation areas under constant staff supervision.	\boxtimes			Recreation areas are monitored by staff in Central Control via closed circuit security cameras.
Supervising staff is equipped with radios.	\boxtimes			All security staff is equipped with radios.
The facility provides detainees in the SHU at least one hour of outdoor recreation time daily, five times per week.				This facility does not have outdoor recreation available. Detainees in disciplinary segregation are allowed out of their cells at least one hour per day, seven days per week.
Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his/her recreation privileges.	\boxtimes			Detainees receive a copy of the disciplinary officer's final decision.
Special programs or religious activities are available to detainees.	\boxtimes			
Volunteers are required to sign a waiver of liability before entering a secure portion of the facility where detainees are present.			⊠	This component is only applicable for SPCs and CDFs. Volunteer packets were reviewed and a waiver of liability was attached as part of the background investigation completed for each applicant.
Visitors, relatives or friends are not allowed to serve as volunteers.	П			This component is only applicable for SPCs and CDFs. Visitors, relatives, friends of detainees and persons previously incarcerated at the facility are prohibited from serving as volunteers.

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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.

COMPONENTS	YES	No	NA	REMARKS
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.	\boxtimes			Facility policy requires the detainee to submit his/her request in writing which is then forwarded to the ICE Field Office.
Case officers make written transfer recommendations about every six-month detainee to the OIC.	\boxtimes			Although the facility has no casework staff, periodic reviews regarding transfer recommendations are conducted by ICE Field Office staff.
The OIC documents all detainee-transfer decisions, whether yes or no.			\boxtimes	The facility has had no transfer requests within the past year.
The detainee's written decision for or against an offered transfer documented in his/her A-file.	\boxtimes			No written decisions have been made regarding transfer requests during the past year. However, should any decision be made, documentation would be filed in the A-file maintained in the field office.
Staff notifies the detainee's legal representative of his/her decision to accept/decline a transfer.	\boxtimes			No such decisions have been made; however, ICE staff would inform the detainee's legal representative of any such determination.
If no recreation is available, the ICE Districts routinely review transfer eligibility for all detainees after 60 days.	\boxtimes			ICE Detention and Deportation officers routinely monitor detainee status at the facility. Detainees whose stay exceeds 60 days at the facility are transferred.
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 letainee's ineligibility for transfer.	\boxtimes			As indicated detainees who have been at the facility in excess of 60 days receive a transfer initiated by ICE.
The detainee's legal representative is notified of the detainee's/OIC's decision.	\boxtimes			
☐ ACCEPTABLE ☐ DEFICIENT] AT-R	tisk	REPEAT FINDING

REMARKS:

Only indoor recreation is available at the facility. A small indoor court is provided for detainees who wish to exercise. Board and card games are available in housing units. Pull-up bars have been installed in each housing unit for physical exercise. General population housing is dormitory style and detainees may access the dayroom after morning inspection.

Most detainees at the facility have received a deportation hearing and are awaiting deportation. Regional ICE staff monitors each detainee's length of stay and transfer is initiated routinely by ICE after 60 days.

(b)(b) (b)(7) August 4, 2011
AUDITOR'S SIGNATURE / DATE

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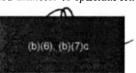
POLICY: FACILITIES WILL PROVIDE ICE DETAINEES OF ALL FAITHS WITH REASONABLE AND EQUITABLE OPPORTUNITIES TO PARTICIPATE IN THE PRACTICES OF THEIR FAITH, LIMITED ONLY BY THE CONSTRAINTS OF SAFETY, SECURITY, THE ORDERLY OPERATIONS OF THE FACILITY AND BUDGETARY CONSIDERATIONS.

COMPONENTS	YES	No	NA	REMARKS
Detainees are allowed to engage in religious services.	\boxtimes			A schedule of religious services is posted in each housing unit.
Space is available for detainees to conduct religious services.	×			If a sufficient number of detainees require religious services, the recreation room is available for the event.
The facility allows detainees to observe the major "holy days" of their religious faith. • List any exceptions.	\boxtimes			Major holy days are observed at the facility. No exceptions were noted.
 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 only applicable for SPCs and CDFs. At the time of inspection, the facility was observing Ramadan. Fasting requirements and common-fare meals were made available to the participant(s). Space is also available for Islam prayer services. The east wall of each housing unit is identified with an "E" to orient Muslims for daily prayer. Meals and services are prepared for participants of recognized religions and faiths throughout the year.
Each detainee is allowed religious items in his/her immediate possession.	\boxtimes			Detainees are allowed to keep a Bible, Koran or other approved spiritual guide.
Volunteer's credentials are checked and verified before allowing participation in detainee programs.				A background check is completed for each person serving as a religious volunteer.
Members of faiths not represented by clergy may conduct their own services within security allowances.				
Detainees in the Special Management Unit are allowed to participate in religious practices unless otherwise documented for the safety and security of the facility.				
□ ACCEPTABLE □ DEFICIENT] AT-R	lisk	REPEAT FINDING

REMARKS:

The facility has no full-time chaplain or volunteer coordinator. A part-time chaplain has been designated to recruit and initiate background checks on potential religious volunteers. Accommodations have been provided for individuals of various faiths to conduct services. In the absence of an ordained minister or spiritual leader, detainees may conduct services on their own.





DETAINEE TELEPHONE ACCESS							
POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT I	DETAINE	ES' REAS	ONABL	E AND EQUITABLE ACCESS TO TELEPHONES.			
COMPONENTS	YES	No	NA	REMARKS			
Detainees are allowed access to telephones during established facility waking hours.				Detainees have access to the telephones in their living units from 8 AM to 10 PM daily.			
Upon admittance, detainees are made aware of the facility's telephone access policy.	\boxtimes			Detainees are made aware of the facility's telephone policy during the orientation process.			
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 detainees in both English and Spanish.			
Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	\boxtimes			Telephones are provided at a ratio of one telephone for every eight detainees.			
Telephones are inspected regularly by facility staff to ensure that they are in good working order.			П	The facility's ICE Coordinator inspects the telephones once a week.			
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 reasonable degree of privacy for legal phone calls.	\boxtimes			If a detainee wants more privacy than available in the living units, s/he may submit a request slip to staff who would make arrangements for the call to be placed from an interview room.			
A procedure exists to assist a detainee who is having trouble placing a confidential call.	\boxtimes			If a detainee were having trouble placing a confidential call, s/he may contact staff who would make arrangements for the call to be placed from an interview room.			
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.							
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.				The OIG phone number for reporting abuse is programmed into the detainee phone system. The phone number was checked by this inspector and a live person was reached.			
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.	П		\boxtimes	The facility fully complies with the requirements of this component.			
No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".	\boxtimes						
Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.	\boxtimes			If a detainee requested to speak to an immediate family member detained in another facility, ICE would assist and verify the relationship. Facility staff would then make arrangements for the call to be made.			
Any telephone restrictions are documented.	\boxtimes		\square				
The facility has a system for taking and delivering emergency letainee telephone messages.				Facility policy, Emergency Messages to Detainees, describes the process of how emergency messages are delivered to detainees.			

DETAINEE TELEPHONE ACCESS							
POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.							
COMPONENTS Emergency phone call messages are immediately given to	YES 🖂	No	NA -	REMARKS			
detainees.			L				
Detainees are allowed to return emergency phone calls as soon as possible.	\boxtimes						
Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	\boxtimes						
Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	\boxtimes						
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.	\boxtimes						
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.	×			Notification that telephone calls may be monitored is posted on each detainee telephone. The notification is written in English and Spanish and is also included in the detainee handbook.			
☐ ACCEPTABLE ☐ DEFICIENT	☐ AT-RISK		ask	REPEAT FINDING			

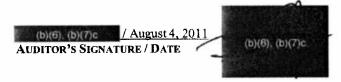
This inspector reviewed the facility's policy, interviewed the ICE Coordinator, checked postings in housing units, checked the OIG Hotline number and talked to detainees. The facility has a ratio of one phone for every eight detainees. The phones are routinely checked by facility and ICE staff. All required phone numbers were available to ICE detainees. The detainees that were interviewed voiced no problems with the phone system. Based on this inspector's review, the facility is found to be in compliance with the standard.

(b)(6), (b)(7)c / August 4, 2011 AUDITOR'S SIGNATURE / DATE

VISITATION POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS COMPONENTS YES No NA REMARKS There is a written visitation schedule and hours for general \boxtimes The visitation hours tailored to the detainee population and the \boxtimes demand for visitation. The visitation schedule and rules are available upon request. This information will The visitation schedule and rules are available to the public. \boxtimes П soon be available on the ICE internet website. The hours for all categories of visitation are posted in the \boxtimes П П visitation waiting area. A written copy of the rules regulating visitation and the hours of visitation is A written copy of the rules regulating visitation and the hours of \boxtimes П available upon request. This information will visitation is available to visitors. soon be available on the ICE internet website. A general visitation log is maintained. X The detainees are permitted to retain personal property items X П specified in the standard. A visitor's dress code is posted in the visitor's A visitor dress code is available to the public. \boxtimes waiting area and a copy is available upon request. All visitors are subject to a pat down search Visitors are searched and identified according to standard and must provide a valid picture ID (driver's \boxtimes П license, passport or other photo requirements. identification). Anyone under the age of 18 must be The requirement on visitation by minors is complied with. \boxtimes П accompanied by a parent or legal guardian in order to visit a detainee. At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, П П \boxtimes Minors are allowed to visit at this facility. within the first 30 days. After that time, on request, ICE considers a transfer, when П \boxtimes possible, to a facility that will allow minor visitation. At a Minors are allowed to visit at this facility. minimum, monthly visits are allowed. Detainees in special housing are afforded visitation. \boxtimes Legal visitation is available seven (7) days a week, including XП П holidays. On regular business days legal visitation hours are provide for a minimum of eight (8) hours per day, and a minimum of four \boxtimes hours per day on weekends and holidays. A detainee may continue a visit with a legal On regular business days, detainees are given the option of representative through a meal period. The continuing a meeting with a legal representative through a \boxtimes П П detainee will be provided a meal tray at the scheduled meal. conclusion of the visit. Private consultation rooms are available for attorney meetings. П There is a mechanism for the detainee and his/her representative \boxtimes to exchange documents. X There are written procedures governing detainee searches. When strip searches are required after every contact visit with a Strip searches are not required after every \boxtimes legal representative, the facility provides an option for noncontact visit. Detainees are pat searched. contact visits with legal representatives.

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			
Prior to each visit, legal service providers and assistants are identified per the standard.	\boxtimes			Legal service providers are required to provide their bar card and a picture ID.			
The current list of <i>pro bono</i> legal organizations is posted in the detainee housing areas and other appropriate areas.	\boxtimes			The current list of pro bono legal organizations was not posted in the living units; however, was available in a packet which was hanging by the telephones.			
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.	\boxtimes						
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.	×			Facility policy enables a detainee who has been out of the facility for at least 90 days to come in and visit an ICE detainee, pursuant to Jail Administrator approval.			
Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	\boxtimes			If an ICE detainee requested to be examined by an independent medical service provider or an expert, that request would be sent to ICE. ICE staff would then make arrangements at the detainee's expense.			
□ ACCEPTABLE □ DEFICIENT		AT-R	tisk	REPEAT FINDING			

This inspector reviewed the facility policy and visitors' logs, interviewed the ICE Coordinator and Deportation Officer and observed postings and the non-contact visiting areas. The visiting room was very clean and was large enough to accommodate visits. Based on this inspector's review, the facility is found to be in compliance with the standard.



VOLUNTARY WORK PROGRAM

POLICY: IN EVERY FACILITY OFFERING A VOLUNTARY WORK PROGRAM, ICE DETAINES 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.

AND MOVE TO NEXT SECTION. COMPONENTS	YES	No	NA	REMARKS
Does the facility have a voluntary work program? • Do ICE detainees participate?				The facility operates a voluntary work program and allows ICE detainees to participate. ICE detainees were observed working in the kitchen and laundry and as housing unit porters. Non-ICE detainees do not have work assignments at this facility.
Detainee housekeeping meets neatness and cleanliness standards.				Mop buckets with mops, cleaning cloths, window and surface cleaners are provided to each housing unit every morning. Detainees are required to meet sanitation inspections each morning prior to participation in recreation activities or watching television.
Detainees have the opportunity to participate in special details, however, are never allowed to work outside the secure perimeter.				
Written procedures govern selection of detainees for the Voluntary Work Program.				
Where possible, physically and mentally challenged detainees participate in the program.	\boxtimes			Detainees are reviewed by the HCU prior to being assigned to a work detail.
The facility complies with work-hour requirements for detainees, not exceeding: • Eight hours a day and Forty hours a week.				This component is only applicable for SPCs and CDFs. Detainees are limited to an eight hour shift, five days per week.
Detainee volunteers generally work according to fixed schedule.	\boxtimes			
If a detainee is removed from a work detail, staff places the written justification for the action in the detainee's detention file.	\boxtimes			
Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.				
The voluntary work program meets: OSHA, NFPA, ACA standards				The section of this component that requires the voluntary work program to meet NFPA, and ACA standards is specific to SPCs and CDFs. Detainees are provided an orientation regarding expectations of the assignment as well as training in safety procedures required on equipment and environmental concerns. This training addresses OSHA, NFPA and ACA standards.
Medical staff screen and formally certify detainee food service volunteers. Before the assignment begins; and As a matter of written procedure	×			
Detainees receive safety equipment/ training sufficient for the assignment.	\boxtimes			Detainees are provided training in safety procedures required on equipment to be used and accident prevention.

VOLUNTARY	WORK	K PRO	GRAM	
POLICY: IN EVERY FACILITY OFFERING A VOLUNTARY WORK PROC MONEY BY PARTICIPATING. WHILE NOT LEGALLY REQUIRED, ICE A ADMINISTRATION (OSHA) PROTECTIONS. CHECK HERE IF ICE DETAINEES ARE NOT AUTHORIZED TO AND MOVE TO NEXT SECTION.	AFFORDS	DETAIN	IEE WOR	KERS BASIC OCCUPATIONAL SAFETY AND HEALTH
COMPONENTS	YES	No	NA	REMARKS
Proper procedure is followed when an ICE detainee is injured on the job.	\boxtimes			Detainees injured on work assignment(s) are routinely escorted to the HCU for examination of injuries. If required, the detainee is transported for emergency care. Incident reports describing the event are submitted to supervising staff and reviewed by the Jail Administrator.

The facility has established and maintains a detainee work program and ICE detainees are allowed to participate. Non-ICE detainees are not assigned to work details. ICE detainee workers are housed in the same unit, provided appropriate work clothing and are allowed to exchange the clothing necessary for their respective duties. Detainees are provided training in the proper use of equipment, chemicals, personal protective equipment and behavioral expectations. In lieu of monetary compensation, detainees receive reimbursement for their work efforts via food, phone cards or other non-monetary form.

☐ AT-RISK

REPEAT FINDING

(b)(6) (b)(7) ugust 4, 2011 Auditor's Signature / Days

ACCEPTABLE

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

■ DEFICIENT

SECTION II HEALTH SERVICES STANDARDS

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

COMPONENTS	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.				This component is only applicable for SPCs and CDFs. Written facility policy requires staff report a detainee who has refused food for 72 hours to the medical department.
CDFs and IGSAs immediately report a hunger strike to the ICE.	\boxtimes			Facility policy requires ICE to be notified immediately of any hunger striker.
The facility has established procedures to ensure staff respond immediately to a hunger strike.	×			Written facility policy provide procedures for facility staff to follow in the event of a hunger strike, and training records support staff has been trained on hunger strikes.
Policy and procedure require that staff isolate a hunger-striking detainee from other detainees. • If yes, in an observation room?	П		\boxtimes	This component is only applicable for SPCs and CDFs. Written facility policy requires placement in an observation room in the booking area.
Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.			\boxtimes	This component is only applicable for SPCs and CDFs. Medical personnel have the authority to place a hunger-striking detainee in an observation room.
Medical staff records the weight and vital signs of a hunger- striking detainee at least once every 24 hours.			\boxtimes	This component is only applicable for SPCs and CDFs. Written facility policy requires weight and vital signs to be recorded at least once every 24 hours.
The OIC of the facility obtains a hunger striker's consent before medical treatment.	×			Facility policy requires a "consent to treatment" be obtained prior to any treatment other than routine sick call.
A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.				This component is only applicable for SPCs and CDFs. Facility policy requires a "refusal of treatment" be obtained any time a detainee refuses a medical evaluation or recommended treatment.
During a hunger strike, staff document and provide the hunger- striking detainee three meals a day.			\boxtimes	This component is only applicable for SPCs and CDFs. Written facility policy provides compliance with this component.
Staff maintains the hunger striker's supply of drinking water/other beverages.			Ø	This component is only applicable for SPCs and CDFs. Written policy requires staff to maintain the hunger striker's supply of drinking water or other beverages.
During a hunger strike, staff removes all food items from the hunger striker's living area.				This component is only applicable for SPCs and CDFs. Written policy requires the removal of all food items from the hunger striker'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.			×	This component is only applicable for SPCs and CDFs. The facility utilizes a form similar to the Hunger Strike Monitoring Form I-839.
The medical staff has written procedures for treating hunger strikers.	\boxtimes			Either the physician or physician's assistant (PA) develops an individual treatment plan for each hunger striker.

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

COMPONENTS	YES	No	NA	REMARKS
Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.			\boxtimes	This component is only applicable for SPCs and CDFs. Written policy requires staff to document all treatment attempts, including attempts to persuade the hunger striker of the medical risks.
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.				All staff, including medical staff, receives training during new-employee orientation and annually.
□ ACCEPTABLE □ DEFICIENT	EFICIENT A1		lisk	REPEAT FINDING

REMARKS:

At the time of the review it was reported there had been one non-ICE detainee hunger strike, lasting 24 hours, in the last 12 months.

Staff receive training on the subject during new-employee orientation and annually thereafter. Detainees determined to be on a hunger strike are placed in a designated observation room in the booking area. Booking staff monitor the detainee and complete the documentation. Every 24 hours, medical staff documents the weight and vital signs of each detainee determined to be on a hunger strike. An individual treatment plan is developed by either the contractual physician or PA for any detainee on a hunger strike or terminating a hunger strike.

(b)(6), (b)(7)c / August 4, 2011 Auditor's Signature / Date

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

ACCESS TO MEDICAL CARE

POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL BEING OF ICE DETAINERS

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.				On-site medical staff, as well as the contractual physician and PA are either licensed or certified by the State to perform their job functions. Medications are received from a local licensed retail pharmacy.
The facility's in-processing procedures for arriving detainees include medical screening.				At the time of booking, booking staff conduct a screening which is immediately followed by a medical staff conducted screening.
All detainees have access to and receive medical care.				Detainees access sick call through a "request" system. Sick call is conducted daily, and a physician or PA is on-site two times a week.
The facility has access to a PHS/DIHS Managed Health Care Coordinator.	\boxtimes			The facility utilizes the MedPar internet system for submitting treatment requests.
The medical staff is large enough to provide, examine, and treat the facility's detainee population.				The medical staff consists of: a full-time Licensed Practical Nurse (LPN) nursing supervisor; one full-time Certified Nursing Assistant (CNA); two part-time CNAs; one part-time Emergency Medical Technician (EMT); plus a contractual physician; and PA.
The facility has sufficient space and equipment to afford detainee privacy when receiving health care.	\boxtimes			The facility HCU consists of two rooms. While small, the unit is appropriately equipped, and detainee privacy is provided when receiving health care.
The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.			\boxtimes	This component is only applicable for SPCs and CDFs. The medical unit is a restricted-access area which is monitored by Central Control staff and located within the confines of the secure perimeter.
The medical facility entrance includes a holding/waiting room.			\boxtimes	This component is only applicable for SPCs and CDFs. The medical unit has no holding/waiting room.
The medical facility's holding/waiting room is under the direct supervision of custodial staff.				This component is only applicable for SPCs and CDFs. The medical unit has no holding/waiting room. Detainees, in a group of no larger than four are escorted by two officers to the medical unit. Each individual detainee's medical issues are privately addressed. Once all four detainees have been evaluated, they are escorted back to their living area.
Detainees in the holding/waiting room have access to a drinking fountain.				This component is only applicable for SPCs and CDFs. There is no holding/waiting area associated with the medical unit; however, both drinking water and toilet facilities are available in the immediate vicinity outside the medical unit.

ACCESS TO MEDICAL	CA	RE
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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
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.	☒			Medical records are stored in a locked file cabinet behind two locked doors. Access to the doors and file cabinet is restricted to medical staff.
Pharmaceuticals are stored in a secure area.			\boxtimes	This component is only applicable for SPCs and CDFs. Pharmaceuticals are either stored in a locked medication cart or in locked cabinets within the medical unit and behind a locked door. Access to the locked door, cabinets and medication cart is restricted to medical staff.
 Medical screening includes a Tuberculosis (TB) test. Every arriving detainee receives a TB test during the admission process; Detainee's TB-screening does not occur more than one business day after his/her arrival at the facility; and Detainees not screened are housed separate from the general population. 				Medical screening does include TB screening by skin test and is conducted the same day as arrival to the facility.
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.				The portion of this component that requires a detainee to receive a mental health screening before being assigned to a housing unit is specific to SPCs and CDFs. Mental health screening is conducted by both booking officers and medical staff at the time of booking and prior to a detainee's assignment to a housing unit.
The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.				This component is only applicable for SPCs and CDFs. Intake screening forms completed by booking officers are immediately forwarded to medical staff. Additionally, medical staff conducts a separate medical/mental health screening immediately following the booking officer screening.
The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.				Pursuant to both policy and practice, detainees receive a physical examination, conducted by either a physician or PA well within the 14-day requirement.
Detainees in the Special Management Unit have access to health care services.				Detainees in the Special Management Unit (SMU) access health care services through the facility Sick Call Request system similar to general population detainees. Sick call is conducted daily. Additionally, medical staff is in the unit three times a day during medication administration, and two times a day medical staff goes door-to-door of each cell conducting wellness checks.

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
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.				The requirement for staff to provide detainees with health services (sick call) request slips daily, upon request and the request slips are available in languages other than English, including every language spoken by a sizeable number of the facility's detainee population is specific to SPCs and CDFs. Sick call request slips, written in both English and Spanish, are readily available to detainees in each living unit. Once completed, the detainee places the request directly into a locked box accessible only by medical staff. Medical staff retrieves the requests three times a day. According to facility administration, Spanish is the language spoken by 99% of the detainee population.
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.	\boxtimes			compliance with this component. Medical staff is on-duty daily from 7 AM to 12 midnight.
The plan includes an on-call provider.			\boxtimes	This component is only applicable for SPCs and CDFs. The Nursing Supervisor and contractual physician are on-call 24 hours a day, seven days a week.
The plan includes a list of telephone numbers for local ambulance and hospital services.				This component is only applicable for SPCs and CDFs. The facility utilizes the county 911 service for ambulance services. The community hospital, nursing supervisor and on-call physician telephone numbers are on file in Central Control.
The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.				This component is only applicable for SPCs and CDFs. Medical staff coordinates with security staff when there is a need for emergency medical services with outside transport to a community-based treatment center.
Detention staff is trained to respond to health-related emergencies within a 4-minute response time.	×			Written facility policy specifically addresses training to a "four-minute" response time for health-related emergencies.
Where staff is used to distribute medication, a health care provider properly trains these officers.		П		This component is only applicable for SPCs and CDFs. Only licensed or certified medical staff administer or distribute medication.
The medical unit keeps written records of medication that is distributed.				Each detainee receiving medication has a Medication Administration Record (MAR) where medical staff document each dose of medication administered or refused.
The Form I-819 (or IGSA equivalent) is used to notify the Warden/Facility of a detainee that has special medical needs.				This component is only applicable for SPCs and CDFs. Interviews with both the Nursing Supervisor and Sheriff indicated verbal notification is always provided which the Sheriff prefers.

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			
A signed and dated consent form is obtained from a detainee before medical treatment is administered.	\boxtimes			A signed and dated "consent to treatment" form is obtained from each detainee at the time of booking.			
Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	\boxtimes			The facility utilizes its own "authorization of release of confidential medical records" form.			
The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	\boxtimes			The nursing supervisor report notice is generally received the day prior to the transfers.			
Detainee's medical records or a copy thereof, are available and transferred with the detainee.	\boxtimes			At the time of transfer, a "transfer summary" sheet is provided for each detainee.			
Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL".	\boxtimes			The "transfer summary" sheet is placed in a sealed envelope which is labeled with the detainee's name and A-number and marked in red "MEDICAL CONFIDENTIAL."			
ACCEPTABLE □ DEFICIENT		AT-R	lisk	REPEAT FINDING			

At the time of the inspection, it was reported there had been no deaths since the last review.

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Medical staff is on-duty from 7 AM to 12 midnight. During hours of non-coverage, the nursing supervisor and contractual physician are on-call 24 hours a day, seven days a week. The county 911 service is utilized for ambulance services. Medical unit staffing consists of: one full-time LPN nursing supervisor; one full-time CAN; two part-time CNAs; and one part-time EMT. A contractual physician is on-site two times a week, and a PA is on-site one time per week. When needed, a community dentist is utilized. The Good Samaritan's Hospital, located less than five minutes from the facility, is utilized for emergent and in-patient care.

A random review of 10 employees' training records indicated first aid, cardiopulmonary resuscitation (CPR), use of the automated external defibrillator (AED), suicide prevention and intervention and hunger strike training is current.

A random review of 20 ICE detainee medical records indicated intake screenings, TB screening and physical examinations were all conducted within the appropriate time frames. Observation of medication administration indicated appropriate detainee identification, documentation and "mouth checks" with security staff present. Additionally, detainees are required to initial on their MAR each time they receive their dose of medication. Observation of medical staff twice daily "wellness checks" in the SMU indicated a door-to-door visit with medical staff speaking to each detainee.

A random review of perpetual inventories specific to controlled medication, syringes and needles and tools indicated all were accurate with daily verification.

Random interviews with ICE detainees indicated medical staff is responsive to their sick call requests, and their medical issues are sufficiently addressed. ICE detainees reported housing unit environmental temperatures are generally comfortable. Detainees reported receiving recreation time but complained there is no outdoor recreation available. Additionally, more than one detainee complained about not receiving enough food.

Auditor's Signature / Date

SUICIDE PREVENTION AND INTERV	VENTION
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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 requires staff to be trained during new employee orientation and annually thereafter.
Training prepares staff to: Recognize potentially suicidal behavior; Refer potentially suicidal detainees, following facility procedures; and Understand and apply suicide-prevention techniques.				A review of the suicide prevention and intervention curriculum indicated compliance with this component.
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			At the time of booking, officers conduct a screening and immediately following, medical staff conducts a second screening.
Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.	\boxtimes			Facility policy addresses.
The facility has a designated isolation room for evaluation and treatment.	\boxtimes			A totally padded room in the booking area is utilized.
The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	\boxtimes			An inspection of the room indicated it does not contain any structures or smaller items that could be used in a suicide attempt.
Medical staff has approved the room for this purpose.	\boxtimes			According to the Nursing Supervisor, verbal approval has been provided.
Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes.	\boxtimes			Written facility policy requires 15-minute documentations for any detainee on suicidewatch status.
✓ ACCEPTABLE ☐ DEFICIENT		AT-R	lisk	REPEAT FINDING

REMARKS:

At the time of the inspection, it was reported there have been no suicides or attempted suicides in the previous 12 months.

All staff are required to receive training in suicide prevention and intervention during new-employee orientation and annually thereafter. A random review of 10 employee files indicated annual training has been provided this calendar year.

At the time of booking, security staff conducts a mental health screening which is immediately followed by a second mental health screening conducted by medical staff. These two screenings are conducted prior to a detainee's assignment to a living area. Detainees on suicide-watch status are placed in a designated padded isolation room, under direct and camera observation, in the booking area where 15-minute documentation is conducted. The facility has contracted with a community-based mental health treatment organization to provided both emergent and non-emergent on-site mental health intervention and treatment.

August 4, 2011
AUDITOR'S SIGNATURE / DATE



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TERMINAL ILLNESS, ADVA	NCED	DIREC	TIVES	AND DEATH
POLICY ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLINIURY, MEDICAL ADVANCED DIRECTIVES, AND DETAINEE DEATH PROVIDED TO ICE OFFICIALS, FAMILY MEMBERS AND OTHER INTERINIURED OR DEATH OF A DETAINEE OCCURS. IN ADDITION, THE POLOCCURS WHILE IN TRANSIT. CHECK THIS BOX IF THE FACILITY DOES NOT ACCEPT ICE DITHE APPROPRIATE BOX FOR THIS PORTION OF THE WORKSHEE RELATED NOTIFICATIONS.	H, TO IN ESTED PA LICY WIL ETAINE	ICLUDE ARTIES IN L COVER ES WHO	THE PRO THE EVI PROCEI	OCEDURES TO ENSURE PROPER NOTIFICATION IS ENT OF A DETAINEE BECOMING TERMINALLY ILL OR DURES TO BE TAKEN IF THE DEATH OF A DETAINEE VERELY OR TERMINALLY ILL. INDICATE NA IN
COMPONENTS	YES	No	NA	REMARKS
Detainees who are chronically or terminally ill are transferred to an appropriate offsite medical facility.	\boxtimes			Written facility policy details the procedure.
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.	\boxtimes			Notification of next of kin is an ICE responsibility. An interview with the regional ICE Deportation Officer verified this practice.
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.	\boxtimes			The facility has a detailed written policy addressing this issue.
The guidelines provide the detainee the opportunity to have a private attorney prepare the documents.	×			The policy allows for a detainee to have a private attorney prepare the Advanced Directive and Living Will.
There is a policy addressing "Do Not Resuscitate Orders"	☒			There is a written facility policy 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			The written facility policy states a detainee with a DNR order will receive maximal therapeutic efforts short of resuscitation.
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.	×			Both the Nursing Supervisor and the ICE Deportation Officer verified notification would be made through the ICE representative.
The facility has written procedures to address the issues of organ donation by detainees.	⊠			Written facility policy addresses organ donation by detainees.
The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.	☒			Written facility policy indicates the facility would notify ICE who would then notify family members and consulates.
The facility has a policy and procedure to address the death of a detainee while in transport.	\boxtimes			Written facility policy addresses the issue concerning the death of a detainee while in transport.
At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	\boxtimes			Detailed facility policy addresses this component.
In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures.				An interview with the ICE Deportation Officer indicated ICE would be responsible for scheduling an indigent's burial or making

 \boxtimes

arrangements with the Department of Veteran

No A-files are maintained at the facility. Any documentation needing to be included in the

A-file would be forwarded to the Chicago

Field Office where the A-files are

Affairs.

maintained.

local procedures.

placed in the subject's a-file.

If the detainee's is a U.S. military veteran, is the

Department of Veterans Affairs notified?

An original or certified copy of a detainee's death certificate is

TERMINAL ILLNESS, ADVA	NCED	DIREC	TIVES	, AND DEATH
POLICY ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLINIURY, MEDICAL ADVANCED DIRECTIVES, AND DETAINEE DEAT PROVIDED TO ICE OFFICIALS, FAMILY MEMBERS AND OTHER INTERINIURED OR DEATH OF A DETAINEE OCCURS. IN ADDITION, THE POLICE OCCURS WHILE IN TRANSIT. CHECK THIS BOX IF THE FACILITY DOES NOT ACCEPT ICE DITHE APPROPRIATE BOX FOR THIS PORTION OF THE WORKSHEE RELATED NOTIFICATIONS.	H, TO IN ESTED PA LICY WIL PETAINE	ICLUDE ARTIES IN L COVER ES WIIO	THE PROTEING PROCEING ARE SE	OCEDURES TO ENSURE PROPER NOTIFICATION IS ENT OF A DETAINEE BECOMING TERMINALLY ILL OR DURES TO BE TAKEN IF THE DEATH OF A DETAINEE VERELY OR TERMINALLY ILL. INDICATE NA IN
COMPONENTS	YES	No	NA.	REMARKS
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.				Detailed written facility policy addresses each of the bulleted items.
ICE staff follows established procedures to properly close the case of a deceased detainee.	Ø			An interview with the ICE Deportation Officer confirmed compliance with this component.
ACCEPTABLE DEFICIENT	٦	AT-R	lisk	REPEAT FINDING

At the time of the inspection, the Nursing Supervisor reported during the past year there had been no requests for an Advanced Directive/Living Will, DNR or organ donation.

The Jail Administrator and Nursing Supervisor both verified the facility would accept detainees who are severely or terminally ill. At the time of the inspection, the Nursing Supervisor reported there was no detainee determined to be severely or terminally ill. There are guidelines available to detainees for an Advanced Directive/Living Will, DNR and organ donation.

/ August 4, 2011 AUDITOR'S SIGNATURE / DATE

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

SECURITY AND CONTROL STANDARDS

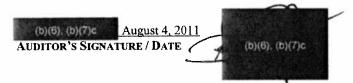
CONTRABAND

POLICY: ALL DETENTION FACILITIES WILL ENSURE THE PROPER HANDLING AND DISPOSAL OF ALL CONTRABAND. DOCUMENTATION OF CONTRABAND DESTRUCTION IS REQUIRED.

COMPONENTS	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.	⊠			The portion of this component that requires staff to inventory, hold and report contraband when necessary to the proper authority for action/possible seizure is specific to SPCs and CDFs. Upon discovery of contraband, the following procedures are followed: the Shift Supervisor is notified; a disciplinary report is written; the Sheriff's Office is notified; and the contraband turned over to a Deputy for criminal prosecution.
Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.				This component is only applicable for SPCs and CDFs. This 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.			\boxtimes	This component is only applicable for SPCs and CDFs. This inspector reviewed the facility policy which discusses the return of property not used as evidence.
Altered property is destroyed following documentation and using established procedures.			\boxtimes	This component is only applicable for SPCs and CDFs. Altered property is placed in the detainee's property or destroyed at the detainee's direction.
Before confiscating religious items, the OIC or designated investigator contacts a religious authority.			\boxtimes	This component is only applicable for SPCs and CDFs. The volunteer chaplain is contacted regarding confiscation of religious items.
Staff follows written procedures when destroying hard contraband that is illegal.	\boxtimes			The Sheriff's department is responsible 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.			×	This component is only applicable for SPCs and CDFs. Hard contraband is retained for official training purposes and secured in the Jail Administrator's office.
ACCEPTABLE DEFICIENT		AT-R	lisk	REPEAT FINDING

REMARKS:

This inspector reviewed facility policy and procedures, as well as contraband records, and interviewed staff to determine the facility demonstrates an acceptable level of compliance with the NDS.

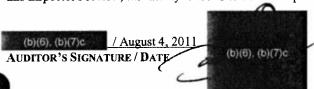


POLICY: EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY ICE DETAINEE BOOKED INTO THE FACILITY, EXCLUDING ONLY						
DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETE						
SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE	FACILIT	Y: CLAS	SIFICAT	ON SHEET, MEDICAL QUESTIONNAIRE, PROPERTY		
INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC.			·			
COMPONENTS	YES	No	NA	REMARKS		
A detention file is created for every new arrival whose stay will	\boxtimes					
exceed 24 hours.	<u> </u>					
The detainee detention file contains either originals or copies of						
documentation and forms generated during the admissions	\boxtimes					
process.						
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	\boxtimes					
detainee's stay						
Disciplinary forms/Segregation forms		ļ				
Grievances, complaints, and the disposition(s) of same			ļ			
The detention files are located and maintained in a secure area.				The portion of this component that requires		
If not, the cabinets are lockable and distribution of the keys is				detention files to be in lockable cabinets with		
limited to supervisors.				the keys limited to supervisors if the files are		
				not maintained in a secure area is specific to		
				SPCs and CDFs. Detention files are located		
	}			in the booking area. Files are maintained in lockable filing cabinets and only detention		
				staff has access to the keys.		
The detention file remains active during the detainee's stay.			 	starr has access to the keys.		
When the detainee is released from the facility, staff adds copies						
of completed release documents, the original closed-out receipts	\boxtimes					
for property and valuables, the original I-385 or equivalent, and	===					
other documentation.						
The officer closing the detention file makes a notation that the				Facility staff uses the release document to		
file is complete and ready to be archived.				show the file is closed and ready to be		
				archived.		
Staff makes copies and sends documents from the file when						
properly requested by supervisory personnel at the receiving	\boxtimes					
facility or office.			_			
Appropriate staff has access to the detention files, and other				Only authorized staff has access to detention		
departmental requests are accommodated by making a request				files. All files are reviewed in the booking		
for the file. Each file is properly logged out and in by a				area where they are stored; therefore, no log		
representative of the responsible department.		<u> </u>		is maintained.		
ACCEPTABLE DEFICIENT		AT-F	CISK	☐ REPEAT FINDING		

DETENTION FILES

REMARKS:

This inspector interviewed the ICE Coordinator, reviewed detention file and observed the booking area. All detention files reviewed contained the appropriate documents. Files are maintained in a secure area which can only be accessed by authorized staff. Based on this inspector's review, the facility is found to be in compliance with the standard.



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 has a written disciplinary system using progressive levels of reviews and appeals.				Facility policy states and the detainee handbook notes a well-defined progression of reviews and appeals.
The facility rules state that disciplinary action shall not be capricious or retaliatory.	\boxtimes			Facility policy states and the detainee handbook notes sanctions imposed will not be capricious or retaliatory.
Written rules prohibit staff from imposing or permitting the following sanctions:	\boxtimes			A review of facility policy found each bulleted item identified in this component to be addressed.
The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	\boxtimes			The detainee handbook contains a full description of the facility's rules of conduct and related disciplinary procedures.
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 requirement to post "Prohibited Acts", the "Disciplinary Severity Scale", and the "Sanctions" is specific to SPCs and CDFs. This inspector toured the detainee living areas and observed that all bulleted items are conspicuously posted in Spanish and English.
When minor rule violations or prohibited acts occur, informal resolutions are encouraged.			\boxtimes	This component is only applicable for SPCs and CDFs. Policy provides for the informal resolution of minor rule violations.
Incident reports and Notice of Charges are promptly forwarded to the designated supervisor.			X	This component is only applicable for SPCs and CDFs. Incident reports are forwarded to the shift supervisor to begin the disciplinary process.
Incident reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before an investigation ends.	×			
An intermediate disciplinary process is used to adjudicate minor infractions.	\boxtimes			Minor infractions are handled by security staff not involved in the rule violation.
A disciplinary panel (or equivalent in IGSAs) adjudicates infractions. The panel: • Conducts hearings on all charges and allegations referred by the UDC; • Considers written reports, statements, physical evidence, and oral testimony; • Hears pleadings by detainees and staff representatives; • Bases its findings on the preponderance of evidence; and • Imposes only authorized sanctions	⊠			The bulleted sections of this component are specific to SPCs and CDFs. The Disciplinary Board adjudicates rule violations. Facility policy is compliant with the bulleted points in this component.
A staff representative is available if requested for a detainee facing a disciplinary hearing.			⊠	This component is only applicable for SPCs and CDFs. Policy and the detainee handbook address the provision of staff representation, if requested.

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.	⊠			The Disciplinary Board may postpone or continue a hearing for a reasonable period and good cause. The reason for any delay is documented in the record and approved by the Jail Administrator.		
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.	\boxtimes			Detainees may be placed in disciplinary segregation for a period not to exceed 60 days.		
Written procedures govern the handling of confidential- informant information. Standards include criteria for recognizing "substantial evidence"		×		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-R	RISK	REPEAT FINDING		

A review of the disciplinary process found it to be fair and impartial and in accordance with this standard. A review of several hearing packets indicates decisions are made based on the disciplinary report, physical evidence and witness statements relating to the incident. Detainees may appeal the findings or sanctions to the Jail Administrator within five days of notification of the written decision.

The only concern noted was the lack of facility policy dealing with the handling of confidential-informant information.

(b)(6), (b)(7)c / August 4, 2011 Auditor's Signature / Date (b)(6), (b)(7)c

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
Policy precludes detainees or detainee groups from exercising control or authority over other detainees.	\boxtimes		П	The facility policy states "no detainee or detainee group shall exercise control or authority over other detainees."
Detainees are protected from: Personal abuse Corporal punishment Personal injury Disease Property damage Harassment from other detainees				Facility policy states and the detainee handbook notes these protections.
Staff is trained to identify signs of detainee unrest. • What type of training and how often?	⊠			This inspector reviewed the training module and interviewed the training officer who advised they teach staff to identify signs of detainee unrest through the Mental Health policy, Suicide Prevention training and Interpersonal Communication. This training is provided annually.
Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Officer In Charge (OIC)	\boxtimes			This information is communicated to the Jail Administrator daily by shift supervisor's report.
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.				
The plans address the following issues: Confidentiality Accountability (copies and storage locations) Annual review procedures and schedule Revisions	\boxtimes			The 'General Emergency Guidelines' section in the emergency plans addresses.
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 applicable for SPCs and CDFs. Contingency plans are in place with local, state and federal law enforcement agencies.
All staff receives copies of Hostage Situation Management policy and procedures.				This component is only applicable for SPCs and CDFs. Staff is provided with hostage situation protocols.
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 applicable for SPCs and CDFs. The facility policy and hostage training provides staff with guidelines if taken hostage. Orders from hostage takers are disregarded regardless of rank. All hostages are screened by medical and mental health staff immediately upon release.
Emergency plans include emergency medical treatment for staff and detainees during and after an incident.			\boxtimes	This component is only applicable for SPCs and CDFs. The facility policy requires prompt medical treatment for staff and detainees as required by the component.

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		
Food service maintains at least 3 days' worth of emergency meals for staff and detainees.			\boxtimes	This component is only applicable for SPCs and CDFs. The food service department maintains a 12-week emergency food supply.		
Written plans identify locations of shut-off valves and switches for all utilities (water, gas, electric).			\boxtimes	This component is only applicable for SPCs and CDFs. The facility has an illustration of the location of emergency shut-off valves and switches. This information is maintained in Central Control and in Booking.		
Written procedures cover: Work/Food Strike Disturbances Escapes Bomb Threats Adverse Weather Internal Searches Facility Evacuation Detaince Transportation System Plan		×		Facility emergency plans do not include procedures for: work/food strike; adverse weather; internal searches; and civil disturbance. The facility developed written procedures during the course of this inspection.		

Internal Hostages Civil Disturbances

ACCEPTABLE

The facility has the required emergency plans in place. Memorandums of agreement are in place with local, state and federal law enforcement agencies to assist in emergency situations. The Shift Supervisor may implement emergency response plans in the event conditions threaten the safety of detainees, staff or the public. Staff is trained in emergency procedures.

AT-RISK

REPEAT FINDING

■ DEFICIENT

The facility emergency plans program did not address procedures for work/food strike, adverse weather, internal searches, and civil disturbance (this was corrected during the inspection).



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.

SAFE-HANDLING PROCEDURES		······································		
COMPONENTS	YES	No	NA	REMARKS
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials. Constant inventories are maintained for all flammable, toxic, and				Toxic and caustic materials were secured in a central closet with limited staff access. Cleaning materials distributed to housing units are limited to non-toxic, environmentally safe liquids. Running inventory sheets are located in each
caustic substances used/stored in each section of the facility.				cleaning closet to identify quantities of substances used.
 The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. The files list all storage areas, and include a plant diagram and legend. The MSDSs and other information in the files are available to personnel managing the facility's safety program. 				Each storage area contained an MSDS binder with appropriate chemical sheets. The master MSDS binder identified all substances used and storage areas with the necessary diagram and legend. Binders were available to all staff.
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			Personal protective equipment was located throughout the facility. Staff were observed wearing protective equipment. The incident reporting policy requires the reporting of hazardous spills to supervisory staff.
The MSDSs are readily accessible to staff and detainees in work areas.	\boxtimes			
 Hazardous materials are always issued under proper supervision. Quantities are limited; and Staff always supervises detainees using these substances. 	⊠			Non-toxic cleaning liquids are issued to housing units daily in 500 ml spray bottles. The two fluids are glass cleaner and a general purpose surface cleaner. Cleaning activities are supervised in housing units under direct observation by Central Control staff. Cleaning in other areas of the facility is directly supervised by staff. Cleaning supplies are removed from units after morning inspection.
All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	\boxtimes			
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		П	
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			Living units were toured and the air felt comfortable and fresh throughout.
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			

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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.			×	No methyl alcohol is stored or used in the facility.
Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.	⊠			Policy 6-103 requires training for detainees and staff who may handle hazardous materials in accordance with OSHA standards.
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).	\boxtimes			
A technically qualified officer conducts the fire and safety inspections.	⊠			Fire inspections are conducted by a private contractor, Premier Fire Services of Paducah, Kentucky. The contractor has the required licenses and certifications by the State of Kentucky to perform such services. The maintenance supervisor is responsible for conducting safety inspections. This individual has received Hazmat and OSHA training and is Safety Clean certified.
The Safety Office (or officer) maintains files of inspection reports.	\boxtimes			Safety inspection logs were reviewed and verified periodic inspections.
The facility has an approved fire prevention, control, and evacuation plan.	\boxtimes			The facility fire prevention and control plans have been approved by the Fire Chief of Mt. Vernon, Illinois.
 The plan requires: Monthly fire inspections; Fire protection equipment strategically located throughout the facility; Public posting of emergency plans with accessible building/room floor plans; Exit signs and directional arrows; and An area-specific exit diagram conspicuously posted in the diagrammed area. 		\boxtimes		Fire inspections are conducted on a quarterly, as opposed to a monthly, basis by the contractor used by the facility. Fire protection and suppression equipment (water sprinklers and fire extinguishers) are located throughout the facility. Pull-down fire alarm initiators are located in all areas. Emergency plans and area specific exit diagrams are posted. Lighted "EXIT" signs are mounted above exits. Red directional arrow exit signs are painted approximately one foot above the floor directing people to crawl toward an exit.
Fire drills are conducted and documented monthly.	Ø			Monthly documented random fire drill logs were reviewed.
A sanitation program covers barbering operations.	\boxtimes			
The barber shop has the facilities and equipment necessary to meet sanitation requirements.	\boxtimes			The barbershop has been designated in the admissions area and contains a sink for cleaning barber utensils.
The sanitation standards are conspicuously posted in the barbershop.	\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

COMPONENTS	YES	No	NA	REMARKS
Written procedures regulate the handling and disposal of used needles and other sharp objects.	\boxtimes			Policy 6-105, Medical Instruments, governs the storage, use and disposal of needles and sharps.
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.	\boxtimes			Mop buckets, cleansers and utensils are issued to housing units each morning. A cleaning schedule is posted in each housing unit and cleaning activities are conducted each morning followed by staff inspections.
The facility follows standard cleaning procedures.	\boxtimes			
Spill kits are readily available.	\boxtimes			Spill kits were identified in functional service areas in the facility.
A licensed medical waste contractor disposes of infectious/bio-hazardous waste.				Medical waste is taken to Good Samaritan Hospital for disposal.
Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	\boxtimes			Staff receives training on facility policy which includes a section on body fluids and blood borne pathogens.
Do the methods for handling/disposing of refuse meet all regulatory requirements?	\boxtimes			
A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. • At least monthly. • The pest-control program includes preventative spraying for indigenous insects.				The facility contracts with Terminix to conduct monthly interior and exterior preventive insect/vermin spraying. Rodent boxes were placed in various areas of the facility.
Drinking water and wastewater is routinely tested according to a fixed schedule.				Drinking water tests were conducted by the City of Mt.Vernon on 10-21-10. The final report indicated Environmental Protection Agency (EPA) and State health standards were met. Water and wastewater treatment is conducted by the City of Mt. Vernon, Illinois.
Other emergency systems and equipment receive testing at least quarterly. Testing is followed-up with timely corrective actions (repairs and replacements).				The emergency power generator self-tests each Tuesday morning and runs for 90 minutes. The test is documented in a log in Central Control. Staff monitors generator performance while running. Corrective action is taken if issues are indicated.
□ ACCEPTABLE □ DEFICIENT] AT-F	Risk	REPEAT FINDING

The facility, constructed of concrete block, was built and opened in 2004. Casement doors and windows were noted. Administrative areas were one story while detainee housing units were dormitory style with bed areas on an upper and lower level. Each general population housing unit contained 12 bunk beds for a total of 24 beds. Beds were of metal construction and mounted to walls separating bed areas. The SMU maintained a capacity of 12 beds and solid automated locking doors are mounted on each cell entrance.

Fire suppression and response equipment is located throughout the facility. Fire drills are being conducted and documented monthly. AEDs were wall mounted in high traffic areas. Floors were clean and walls painted. General cleanliness was observed throughout.

A concern was noted that fire inspections are being conducted quarterly versus monthly.



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.

MEDICAL TREATMENT, INTRA-PACIETT MOVEMENT, OR OTHER TR				
COMPONENTS	YES	No	NA	REMARKS
The hold rooms are situated within the secure perimeter.			\boxtimes	This component is only applicable for SPCs and CDFs. Hold rooms are located within the secure perimeter.
The hold rooms are well ventilated well lighted, and all activating switches are located outside the room.			⊠	This component is only applicable for SPCs and CDFs. Hold rooms are well lit, properly ventilated and equipped with activating utility switches located outside the room.
The hold rooms contain sufficient seating for the number of detainees held.	П		\boxtimes	This component is only applicable for SPCs and CDFs. Hold rooms have seating for the rated occupancy.
Bunks, cots, beds, or other related make-shift sleeping apparatus are precluded from use inside hold rooms.		П	\boxtimes	This component is only applicable for SPCs and CDFs. Sleeping apparatus is not used inside detainees hold rooms.
The walls and ceilings of the hold rooms are tamper and escape proof.			\boxtimes	This component is only applicable for SPCs and CDFs. The walls and ceilings are constructed of steel and concrete.
Individuals are not held in hold rooms for more than 12 hours.	Ø			Detainees are held in hold rooms no longer than two hours.
Male and females are segregated from each other.				
Detainees under the age of 18 are not held with adult detainees.				The facility does not house detainees under the age of 18.
Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	\boxtimes			
in older facilities, officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.				The facility was built in 2004. Officers are stationed within visual and audible range of all hold rooms. Toilet facilities are located within the hold room.
All detainees are given a pat down search for weapons or contraband before being placed in the room.	\boxtimes			
Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring.). • Hold rooms are irregularly monitored every 15 minutes. • Unusual behavior or complaints are noted.	\boxtimes			Hold rooms are in close proximity to booking staff. Visual monitoring is constant and hold rooms are equipped with camera surveillance. Hold rooms are scanned every 15 minutes using the 'Security Pro Scanning System' to account for detainee's well-being. Rounds and documentation occur in a manner consistent with this component.
When the last detainee has been removed from the hold room, it is given a thorough inspection.				
There is a written evacuation plan that includes a designated officer to remove detainees from hold rooms in case of fire and/or building evacuation.				The section of this component that requires for the evacuation plan to include a designated officer to remove detainees from hold rooms in case of fire and/or building evacuation is specific to SPCs and CDFs. The facility evacuation plan addresses procedures for removing detainees during an emergency, and evacuation plan signage is posted. Two booking staff members are assigned to this area and both are designated to remove detainees from the area in the event evacuation becomes necessary.

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.					
COMPONENTS	YES	No	NA	REMARKS	
An appropriate emergency service is called immediately upon a determination that a medical emergency may exist.	\boxtimes				
ACCEPTABLE DEFICIENT		AT-R	tisk	REPEAT FINDING	

Based on a review of policy and procedure, inspections of the booking area and hold rooms, a review of post orders and evacuation plan and interviews with staff and detainees, the facility was found to demonstrate an acceptable level of compliance with this standard.

(b)(6), (b)(7)c / August 4, 2011 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 facility 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 facility ICE Coordinator is responsible for key and lock control.
	The security officer, or equivalent in IGSAs, provides training to employees in key control.	\boxtimes			The ICE Coordinator provides key control training during pre-service training. Key control training is also conducted at the academy.
	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.	\boxtimes			Preventive maintenance is conducted monthly and documented in a Preventive Maintenance Log.
	Facility policies and procedures address the issue of compromised keys and locks.	\boxtimes			
	The security officer, or equivalent in IGSAs, develops policy and procedures to ensure safe combinations integrity.			\boxtimes	The facility does not have a combination safe.
	Only dead bolt or dead lock functions are used in detainee accessible areas.	\boxtimes			
Į	Only authorized locks (as specified in the Detention Standard) are used in detainee accessible areas.	\boxtimes			
	Grand master keying systems are prohibited.	\boxtimes			There is no grand master system whereby one key opens all doors within the facility.
	All worn or discarded keys and locks are cut up and properly disposed of.	\boxtimes			Broken or damaged keys and locks are disposed off-site in a burn pit.
	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.	\boxtimes			The operational keyboard is located in the Control Center and accommodates general issued keys, key fobs and emergency keys.
	Procedures are in place to ensure that key rings are: Identifiable; The numbers of keys are cited; and Keys cannot be removed.	\boxtimes			Key rings have a serial number, rings are tack-welded, and the number of keys on the key ring is cited on a metal chit (located on the ring).
	Emergency keys are available for all areas of the facility.	\boxtimes			Emergency keys are stored in the Jail Administrator's office in a secured metal cabinet with a prison lock and also in the Control Center.
	The facilities use a key accountability system.	\boxtimes			The facility utilizes a chit system. Issued and returned keys are documented in a Control Center logbook.
1	Authorization is necessary to issue any restricted key.	\boxtimes			

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
 Individual gun lockers are provided. They are located in an area that permits constant officer observation. In an area that does not allow detainee or public access. 				Individual gun lockers are located within the sally port next to booking where they are under constant observation and are inaccessible to detainees and the public.
The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	\boxtimes			The requirement for keys to be physically counted daily is specific to SPCs and CDFs. Keys are physically counted once each shift and documented in the Jail Management System (JMS).
 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 bulleted sections of the component are specific to SPCs and CDFs. Key control training is conducted during pre-service training and at the academy.
☐ ACCEPTABLE ☐ DEFICIENT		AT-R	isk	REPEAT FINDING

REMARKS:

The facility has an effective Key Control program which is in compliance with the standard. All changes affecting the key inventory must be authorized by the Key Control Officer or Jail Administrator. The operational keyboard has hooks and labels to accommodate each key ring assigned to that space and key issuance and return is documented by the Control Center officer.

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POPULATION 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			Formal counts are conducted at: 6'AM; 11 AM; 5:30 PM and 10 PM.
Activities cease or are strictly controlled while a formal count is being conducted.				This component is only applicable for SPCs and CDFs. Routine movement ceases during count; however, non-ICE detainees were observed moving food trays to the housing units with staff supervision.
Certain operations cease during formal counts.				This component is only applicable for SPCs and CDFs. Observations of the 11 AM headcount on 08-03-11 found no operations occurring during that time.
All movement ceases for the duration of a formal count.				This component is only applicable for SPCs and CDFs. Movement is not allowed during formal count and remains suspended until the count is cleared.
Formal counts in all units take place simultaneously.				This component is only applicable for SPCs and CDFs. Formal counts in the housing units do not take place simultaneously. The count process requires one officer going to each unit and conducting the count while meals are being served. No other officers assist in the headcount.
Detainee participation in counts is prohibited.			\boxtimes	This component is only applicable for SPCs and CDFs. Detainees are not allowed to participate in count procedures.
A face-to-photo count follows each unsuccessful recount.			\boxtimes	This component is only applicable for SPCs and CDFs. The facility does not have procedures in place for a recount.
Officers positively identify each detained before counting him/her as present.				This component is only applicable for SPCs and CDFs. The officer conducting the count has a daily roster with detainees' pictures. A picture is used to positively identify each detainee.
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.	×			The JMS computer database in booking is used to record detainees temporarily leaving the facility.
This training is documented in each officer's training folder.	\boxtimes			
☐ ACCEPTABLE ☐ DEFICIENT] AT-R	RISK	REPEAT FINDING

REMARKS:

The facility policy and procedures ensures 24-hour-a-day accountability that includes a formal headcount. Upon completion of the headcount, the officer conducting the count takes the count sheet to the Booking Room Officer to be reconciled with the total count provided by the JMS. The Jail Administrator will verify the total count prior to clearing the count. Observations were made of the count conducted at 11 AM on 08-03-11, which cleared within one hour and 30 minutes with 182 ICE/non-ICE detainees present.

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POST ORDERS					
POLICY: ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST AN					
COMPONENTS	YES	No	NA	REMARKS	
Every fixed post has a set of post orders.	\boxtimes			There are 13 listed post areas in the facility, and each area has a set of post orders.	
Each set contains the latest inserts (emergency memoranda, etc.) and revisions.			\boxtimes	This component is only applicable for SPCs and CDFs. The post orders reviewed 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 conducting an annual review and updating post orders.	
The IGSA maintains a complete set (central file) of post orders.	\boxtimes			A complete set 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 applicable for SPCs and CDFs. Post orders are available to all staff.	
The OIC or Contract / IGSA equivalent initiates/authorizes all post-order changes.			\boxtimes	This component is only applicable for SPCs and CDFs. Post Orders are authorized by the Jail Administrator.	
The OIC or Contract/IGSA equivalent has signed and dated the last page of every section.			\boxtimes	This component is only applicable for SPCs and CDFs. The last page of each section of the post orders was not signed or dated.	
A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.	×				
Procedures keep post orders and logbooks secure from detainees at all times.				This component is only applicable for SPCs and CDFs. Post orders and logbooks are secured in Central Control, booking and outside of the housing units.	
Every armed-post officer qualifies with the post weapon(s) before assuming post duty.				This component is only applicable for SPCs and CDFs. The facility's transportation officers are required to qualify annually with the post weapons and a certificate of qualification is issued and maintained in their personnel file.	

 \boxtimes

AT-RISK

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 \boxtimes

This component is only applicable for SPCs and CDFs. All post orders reviewed detail a

daily routine (event schedule) to be followed

This component is only applicable for SPCs

and CDFs. Post Orders provide detailed

instructions on maintenance of logbooks. Detainee activity is recorded in the JMS.

REPEAT FINDING

by the assigned officers.

REMARKS:

Post Orders have been established, are current and properly authorized by the Jail Administrator. Post orders reviewed by this inspector reflect a document that provides pertinent information for staff members assigned and does so in compliance with the standard.

■ DEFICIENT

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Armed-post post orders provide instructions for escape attempts. The post orders for housing units track the event schedule.

Housing-unit post officers record all detainee activity in a log.

The post order includes instructions on maintaining the logbook.

ACCEPTABLE

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.

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	⊠			The portion of the component that requires the security inspection policy to specify the posts to be inspected and the required inspection forms is specific to SPCs and CDFs. Policies regarding security are comprehensive and address all bulleted items listed in this component.
Every officer is required to conduct a security check of his/her assigned area. The results are documented.			⊠	This component is only applicable for SPCs and CDFs. Each shift supervisor is responsible for conducting security inspections of all areas of the facility. Results of these inspections are documented on daily housing unit security inspection forms.
Documentation of security inspections is kept on file.			×	This component is only applicable for SPCs and CDFs. Security inspection forms on file were reviewed for the past 60 days.
Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.			⊠	This component is only applicable for SPCs and CDFs. Shift supervisors and Control Center staff ensure maintenance request forms are completed and follow-up with the maintenance supervisor is made when necessary corrective action is not taken.
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 area to check in visitors. The facility requires an officer to check the identification of each person entering the facility including official visitors and attorney's making legal visits.
All visits are officially recorded in a visitor logbook or electronically recorded.	\boxtimes			All visits are recorded in a visitor logbook.
The facility has a secure visitor pass system.	\boxtimes			The facility has a color-coded visitor's pass system.
Every Control Center officer receives specialized training.	\boxtimes			Each Control Center 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.			\boxtimes	This component is only applicable for SPCs and CDFs. The Control Center is staffed 24 hours a day, seven days a week.
Policy restricts staff access to the Control Center.			⊠	This component is only applicable for SPCs and CDFs. Control Center post orders and policy restrict access to authorized staff.
Detainees are restricted from access to the Control Center.			\boxtimes	This component is only applicable for SPCs and CDFs. ICE/non-ICE detainees are not allowed in the Control Center.
Communications are centralized in the Control Center.			×	This component is only applicable for SPCs and CDFs. Communication and emergency systems are monitored and controlled in the Control Center.

SECURITY	INSPI	ECTIO	NS				
POLICY: POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHERE SPECIAL SECURITY PROCEDURES MUST BE FOLLOWED, WILL BE RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNDING IN FACILITY OPERATIONS.							
COMPONENTS	YES	No	NA	REMARKS			
Officers monitor all vehicular traffic entering and leaving the facility.	⊠			The monitoring of departing vehicular traffic is only applicable at an SPC and CDF. Incoming and outgoing vehicular traffic is monitored via surveillance cameras by Control Center staff.			
The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: • The driver's name; • Company represented; • Vehicle contents; • Delivery date and time; • Date and time out; • Vehicle license number; and • Name of employee responsible for the vehicle during the visit			\boxtimes	This component is only applicable for SPCs and CDFs. A log of all incoming and outgoing vehicles is maintained. The log contains all bulleted items listed in this component.			
Officers thoroughly search each vehicle entering and leaving the facility.			\boxtimes	The requirement for officers to thoroughly search vehicles entering and leaving the facility is specific to SPCs and CDFs. Vehicles entering and leaving the sally port are not searched.			
The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	\boxtimes						
Tools being taken into the secure area of the facility are inventoried before entering and prior to departure.				This component is only applicable for SPCs and CDFs. Tools inventory logs are maintained in the front lobby for tools coming inside and departing the secure perimeter of the facility.			
The SMU entrance has a sally port.	\boxtimes						
Written procedures govern searches of detainee housing units and personal areas.	\boxtimes						
Housing area searches occur at irregular times.				This component is only applicable for SPCs and CDFs. Housing unit logs indicated irregular searches are conducted.			
Every search of the SMU and other housing units is documented.	\boxtimes						
Storage and supply rooms, walls, light and plumbing fixtures, accesses, and drains, etc., undergo frequent, irregular searches. These searches are documented.	\boxtimes						
Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	\boxtimes						
Daily procedures include: • Perimeter alarm system tests; • Physical checks of the perimeter fence; and • Documenting the results.				The facility has no perimeter alarm system and/or perimeter fence. The Relief Officer conducts security checks of the perimeter areas twice each shift and results are documented on the perimeter security inspection form.			
Visitation areas receive frequent, irregular inspections.	\boxtimes						

■ DEFICIENT

ACCEPTABLE

AT-RISK

REPEAT FINDING

A systematic method of visual inspections of all areas of the facility has been established to ensure security is not compromised. The facility has numerous security cameras within the facility and cameras are also affixed to the outside of the building. All visitors entering the facility are required to produce valid photo identification before access is granted and they are given a visitor's pass. The facility policy and procedures, observations and a review of security documentation find the facility to be in compliance with the standard.

AUDITOR'S SIGNATURE / DATE

/ August 4, 2011

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SPECIAL MANAGEMENT UNIT (SMU) (ADMINISTRATIVE SEGREGATION)

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

1	[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.	\boxtimes			Facility policy addresses and the detainee handbook notes the criteria for placing detainees 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.	\boxtimes			Detainees placed in administrative segregation are given a copy of an Administrative Segregation order.
000000000000000000000000000000000000000	 The OIC (or equivalent) regularly reviews the status of detainees in administrative detention. A supervisory officer conducts a review within 72 hours of the detainee's placement in the SMU (administrative). 			\boxtimes	This component is only applicable for SPCs and CDFs. The Assistant Jail Administrator conducts reviews within 72 hours.
	 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 applicable for SPCs and CDFs. The facility has no policy requiring a review of a detainee spending seven days in administrative. The facility does not have written record of a detainee's having spent 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 applicable for SPCs and CDFs. Detainees are provided with a copy of the review. Appeals of the review decision may be submitted to the Jail Administrator.
	 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. 			\boxtimes	This component is only applicable for SPCs and CDFs. The facility has no record of a detainee remaining in administrative segregation in excess of 30 days. In the event a detainee is housed in administrative segregation for more than 30 days, or surpassing 60 days, ICE would be notified. ICE would transfer the detainee to another facility and place in general population.
	 The OIC or equivalent) reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU. A written record is made of the decision and the justification. The detainee receives a copy of this record. 			\boxtimes	This component is only applicable for SPCs and CDFs. The facility has no record of a detainee remaining in administrative segregation in excess of 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.			\boxtimes	This component is only applicable for SPCs and CDFs. Facility staff confirmed detainees would be allowed the right to appeal to the shift supervisor or Assistant Jail Administrator.
	Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	Ø			

SPECIAL MANAGEMENT UNIT (SMU) (ADMINISTRATIVE SEGREGATION)

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

[DISCIPLINAR'I SECRECIATION] STANDARD).	1 - 7 -	T 57	T	T
COMPONENTS	YES	No	NA	REMARKS
The SMU is:				
Well ventilated;	5-3			
Adequately lighted;				
Appropriately heated; and				
Maintained in a sanitary condition.				
All cells are equipped with beds.	\boxtimes			SMU beds are constructed of steel and
 Every bed is securely fastened to the floor or wall. 				secured to the floor and wall.
The number of detainees in any cell does not exceed the				
occupancy limit.				
When occupancy exceeds recommended capacity, do				All SMU cells are double bunked and do not
basic living standards decline?	\boxtimes		ln	exceed capacity. There were no ICE
Do criteria for objectively assessing living standards				detainees housed in the SMU at the time of
exist?				the inspection.
If yes, are the criteria included in the written	Ì			
procedures?				
The segregated detainees have the same opportunities to				
exchange/launder clothing, bedding, and linen as detainees in the	\boxtimes			Clothing and bedding are exchanged three
general population.				times a week.
Detainees receive three nutritious meals per day, from the				Meals are appropriately provided to detainees
general population's menu of the day.				from the general population menu of the day.
Do detainees eat only with disposable utensils?	\boxtimes	l —	l —	According to facility staff, food is never
 Is food ever used as punishment? 				used as punishment. Facility policy does not
•				address any alternative meal service (i.e.,
				food loaf).
Each detainee maintains a normal level of personal hygiene in				
the SMU.				Detailed to the second
The detainees have the opportunity to shower and	\boxtimes			Detainees are afforded the opportunity to
shave at least three times a week.				shower and shave daily.
If not, explain.				
The detainees are provided:				
Barbering services;				
Recreation privileges in accordance with the "Detainee"				
Recreation" standard;				
Non-legal reading material;				
Religious material;	\boxtimes	П	lп	Detainees are provided with all bulleted
The same correspondence privileges as detainees in the			l —	items listed in this component.
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 week.		,		A health care professional sees detainees in
The shift supervisor visits each detainee daily.	\boxtimes		Ц	the SMU twice each day. The shift
Weekends and holidays.				supervisor make rounds once each shift.
Procedures comply with the "Visitation" standard.				
The detainee retains visiting privileges; and				
• The detained retains visiting privileges, and • The visiting room is available during normal visiting	\boxtimes			
hours.				

SPECIAL MANAGEMENT UNIT (SMU) (ADMINISTRATIVE SEGREGATION)

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

[DISCIPLINARY SECRECATION] STANDARD).	r	·	1		
COMPONENTS	YES	No	NA	REMARKS	
Visits from clergy are allowed.	Ø			Detainees are required to submit a 'Chaplaincy Request Form' to visit with volunteer clergy.	
Detainees have the same law-library access as the general population. ■ Are they required to use the law library Separately, or Separately As a group? ■ Are legal materials brought to them?	⊠			Detainees in administrative segregation have access to the LexisNexis database in the SMU. Detainees are required to notify the Control Center by intercom of their request to use the LexisNexis.	
The SMU maintains a permanent log of detainee-related activity, e.g., meals served, recreation, visitors etc.	\boxtimes			The facility records detainee activity in the SMU Housing Record.	
 SPC procedures include completing the SMU Housing Record (I-888) immediately upon a detainee's placement in the SMU. Staff completes the form at the end of each shift. CDFs and IGSA facilities use Form I-888 (or local equivalent). 	⊠			The section of this component that requires the use of the "SMU housing Record" (I-888) immediately upon a detainee's placement in the SMU and for staff to complete the form at the end of each shift is specific to SPCs and CDFs. The facility's SMU Housing Record provides a record of individual activity and behavior.	
Staff record whether the detainee ate, showered, exercised, and took any applicable medication during every shift. • Staff logs record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc; • The medical officer/health care professional signs each individual's record during each visit; and • The housing officer initials the record when all detainee services are completed or at the end of the shift.			\boxtimes	This component is only applicable for SPCs and CDFs. The facility's SMU Housing Record is utilized to record bulleted items listed 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 applicable for SPCs and CDFs. The facility's SMU Housing Record is created each week the detainee is housed in administrative segregation. Records are maintained until the detainees return to general population.	
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING					

REMARKS:

The SMU operations are supervised and the area is clean and appropriately staffed. Logs have daily entries of both routine and unusual detainee behavior. Delivery of services and activities is consistent with the ICE standard. Detainees in administrative segregation have access to the LexisNexis database or law library.

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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.

COMPONENTS	YES	No	NA	REMARKS
Officers placing detainees in disciplinary segregation follow written procedures.	×			Facility policy addresses and the detainee handbook defines procedures for placement of detainees in disciplinary segregation.
The sanctions for violations committed during one incident are limited to 60 days.	\boxtimes			Sixty days is the maximum sanction for a single rule violation.
A completed Disciplinary Segregation Order accompanies the detainee into the SMU. • The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation.	\boxtimes			Detainees are given a copy of a Disciplinary Segregation order within 24 hours of placement.
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.	detainees to receive a copy of the			
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			Detainees in disciplinary segregation are not allowed commissary privileges.
Living conditions in disciplinary SMUs remain the same regardless of behavior. • If no, does staff prepare written documentation for this action? • Does the OIC sign to indicate approval.	×			
Every detainee in disciplinary segregation receives the same humane treatment, regardless of offense.	\boxtimes			·
The quarters used for segregation are:	\boxtimes			The overall sanitation of the SMU at the time of the inspection was good.
All cells are equipped with beds that are securely fastened to the floor or wall of the cell.	\boxtimes			SMU beds are constructed with steel and secured to the floor and walf.
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			All cells are double occupancy. There were no ICE detainees in disciplinary segregation during the inspection.
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.	⊠			Dry cell placements are discussed with the Jail Administrator and medical staff. Placement must be justified and reviews are documented in the detainee's booking file. There were no dry cell incidents with ICE detainees over the last 12 months.
Detainees in the SMU have the same opportunities to exchange clothing, bedding, etc., as other detainees.	\boxtimes			Clothing and bedding are exchanged three times a week.
Detainees in the SMU receive three nutritious meals per day, selected from the Food Service's menu of the day. • Food is not used as punishment.	\boxtimes			Meals served to detainees in the SMU are from the general population menu. Food is not used as punishment.

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.

COMPONENTS	YES	NO	NA	REMARKS	
Detainees are allowed to maintain a normal level of personal hygiene, including the opportunity to shower and shave at least three times/week.	×			Detainees are afforded the opportunity to shower and shave daily.	
Detainees receive, unless documented as a threat to security: Barbering services; Recreation privileges; Other-than-legal reading material; Religious material; The same correspondence privileges as other detainees; and Personal legal material.	⊠			Any service or privilege denied to detainees in disciplinary segregation is documented on their individual SMU Housing Record.	
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; Calls to consular/embassy officials; and Calls during family emergencies (as determined by the OIC/Warden).	⊠			Detainees are allowed to make calls during out-of-cell periods.	
 A health care professional visits every detainee in disciplinary segregation every week day. The shift supervisor visits each segregated detainee daily Weekends and holidays. 	⊠			A health care professional sees detainees in the SMU twice each day. The shift supervisor make rounds once each shift.	
SMU detainees are allowed visitors, in accordance with the "Visitation" standard.	\boxtimes			Detainees are allowed family visits on Thursdays, Saturdays and Sundays.	
SMU detainees receive legal visits, as provided in the "Visitation" standard. • Legal service providers are notified of security concerns arising before a visit.	\boxtimes				
Visits from clergy are allowed. The clergy member is given the option of visiting/not visiting the segregated detainee. Violent/uncooperative detainees are denied access to religious services when safety and security would otherwise be affected.	⊠				
 SMU detainees have law library access. Violent/uncooperative detainees retain access to the law library unless adjudicated a security threat in writing. Legal material brought to individuals in the SMU on a case-by-case basis. Staff documents every incident of denied access to the law library. All detainee-related activities are documented, e.g. meals served, 	\boxtimes			Detainees in disciplinary segregation have access to the LexisNexis computer database in the SMU. Detainees are required to notify the Control Center by intercom of their request to use the LexisNexis. The facility records detainee activity on the	
recreation activities, visitors, etc.				SMU Housing Record form.	

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COMPONENTS	YES	No	NA	REMARKS		
The SPCs, the Special Management Housing Unit Record (I-888or equivalent), is prepared as soon as the detainee is placed in the SMU. • All I-888s are filled out by the end of each shift. • The CDF/IGSA facility use Form. • I-888 (or equivalent local form).				The section of the component that requires staff to prepare the Special Management Housing Unit Record (I-888 or equivalent) a soon as the detainee is placed in the SMU and that completion of the form is by the end of each shift is specific to SPCs and CDFs. The facility's SMU Housing Record provide a record of individual activity and behavior.		
 SMU staff record whether the detainee ate, showered, exercised, took medication, etc. Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc. The health care official sign individual records after each visit. The housing officer initials the record when all detainee services are completed or at the end of the shift. A new record is created weekly for each detainee in the SMU. The SMU retains these records until the detainee leaves the SMU. 				This component is only applicable for SPCs and CDFs. The facility's SMU Housing Record is utilized to record the bulleted iter listed in this component.		
Acceptable Deficient		AT-R	usk	REPEAT FINDING		

REMARKS:

The Disciplinary Board may impose sanctions for serious rule violations and place detainees in disciplinary segregation after an impartial hearing has determined the detainee committed the rule violation. Detainees on disciplinary status do not have commissary privileges. The facility demonstrates an acceptable level of compliance with this standard.

(b)(6). (b)(7)c August 4, 2011

AUDITOR'S SIGNATURE / DATE (b)(6). (b)(7)c

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.

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 Jail Administrator is responsible for tool control.			
Department heads are responsible for implementing this standard in their departments.				This component is only applicable for SPCs and CDFs. Department heads are responsible for accountability and inventory of tools and equipment in their area.			
Tool inventories are required for the: Maintenance Department; Medial Department; Food Service Department; Electronics Shop; Recreation Department; and Armory.				All areas, except those listed below, have tool inventories. The facility does not have an electronics shop or a recreation department, and the armory has no tools.			
 The facility has a policy for the regular inventory of all tools. The policy sets minimum time lines for physical inventory and all necessary documentation. ICE facilities use AMIS bar code labels when required. 	\boxtimes			Facility policy mandates an inventory of tools at the beginning and end of every workday. The Maintenance Supervisor conducts a monthly inventory of all tools to ensure accountability.			
The facility has a tool classification system. Tools are classified according to: Restricted (dangerous/hazardous); and Non-Restricted (non-hazardous).				The section of the component that requires tools to be classified as restricted and non-restricted is specific to SPCs and CDFs. This facility has a tool classification system. Tools are classified in two categories consistent with the provisions of this component.			
Department heads are responsible for implementing tool-control procedures.			\boxtimes	This component is only applicable for SPCs and CDFs. Department heads are responsible for tool control procedures in their area.			
The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable.	\boxtimes			Tools stored in the facility maintenance shop were not marked and readily identifiable. The facility engraved identification markings on these tools during the course of this inspection.			
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.				Food Service culinary equipment is stored in a locked metal cabinet bolted to the wall. The Maintenance shop tools are stored on shadow boards and in a tool pouch. Medical staff has three scissors in a locked cabinet.			
Each facility has procedures for the issuance of tools to staff and detainees.				The ICE detainees working in the Food Service Department are issued culinary equipment signed-out by food service staff, under direct supervision.			
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.	\boxtimes						

TOOL CONTROL						
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COMPONENTS YES NO NA REMARKS						
Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	\boxtimes			The facility disposes of broken or worn out tools off-site in a burn pit.		
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.						
ACCEPTABLE DEFICIENT	☐ AT-RISK		ISK	REPEAT FINDING		

REMARKS:

All inventories reviewed were found to be current. The maintenance shop is located on the second floor of the facility in a secured area and tools are strictly controlled. A 'Tool Sign-Out Form' is used when issuing culinary equipment to staff and ICE detainee food service workers. Tools brought into the facility are inventoried entering and exiting the facility. One concern noted was tools stored in the facility maintenance shop did not have identification markings; however, this was corrected during the inspection.



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.

ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEI						
STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE 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			The assigned transport officers comply with State of Illinois vehicle laws and regulations. Transport officers are licensed and records are maintained in the facility's Human Resources Office		
Every transporting officer required to drive a commercial size bus has a valid Commercial Driver's License (CDL) issued by the state of employment.	\boxtimes			The facility does not have any vehicle that require the driver to have a CDL.		
Supervisors maintain records for each vehicle operator.	\boxtimes			Human Resources have a copy of all transport officers' driver licenses.		
Officers use a checklist during every vehicle inspection. • Officers report deficiencies affecting operability; and • Deficiencies are corrected before the vehicle goes back into service.	\boxtimes			The transportation vehicle has a vehicle inspection checklist that is completed by the assigned officers prior to using the vehicle. Noted deficiencies are corrected prior to going back into service.		
 Transporting officers: Limit driving time to 10 hours in any 15 hour period; Drive only after eight consecutive off-duty hours; Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours; Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days; During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a safe area—exceeding the 10-hour limit. 	\boxtimes			The facility transports detainees to and from the ICE Field Office in Chicago, Illinois. The driving time is six hours.		
 Two officers with valid CDLs required in any bus transporting detainees. When buses travel in tandem with detainees, there are two qualified officers per vehicle. An unaccompanied driver may transport an empty vehicle. 				The facility vehicle fleet consists of vans and sedans. There are no buses in the fleet.		
Before the start of each detail, the vehicle is thoroughly searched.	\boxtimes			Facility policy and transportation post orders require staff to conduct a thorough search of vehicles prior to departure from the facility.		
Positive identification of all detainees being transported is confirmed.						
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.			\boxtimes	This component is only applicable for SPCs and CDFs. A review of policy and observations revealed transportation officers wear protective vests.		

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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

The vehicle crew conducts a visual count once all passengers are

COMPONENTS	XES	NO	INA.	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.				Facility policy and transportation post orders require officers to conduct a visual count prior to departure or in the event of an unscheduled stop.
Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	\boxtimes			The facility policy and post orders address use of restraints during transport.
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.				Transport Officers are authorized to purchase meals from a commercial source during long distance transportation. Facility policy requires that 'drive-through' restaurants be used and food served inside the vehicle.
 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. 				Facility food service staff does not provide meals during transportation. Vehicles are equipped with portable urinals and bottled water. Transport vehicle are cleaned after each trip.
Vehicles have: Two-way radios; Cellular telephones; and Equipment boxes stocked in accordance with the Use of Force Standard.				The requirement for vehicles to have equipment boxes stocked in accordance with the Use of Force Standard is specific to SPCs and CDFs. The facility vehicles are equipped with all bulleted items listed in 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			

TRANS	PORT	ATION		
(LAND TR	ANSPOR	RTATION	i)	
POLICY: THE IMMIGRATION AND NATURALIZATION SERVICE WILL				
WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN I			•	· ·
HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION		THE SU	PERVISI	ON OF EXPERIENCED AND TRAINED DETENTION
ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL			175	H 1 30 1 - 1 - 1 - 1 - 1
STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTA	TION IS	HANDLE	ED ONLY	BY THE ICE FIELD OFFICE OR SUB-OFFICE IN
CONTROL OF THE DETAINEE CASE.		- <u> </u>		*
COMPONENTS	YES	No	NA	REMARKS
The following contingencies are included in the written				
procedures for vehicle crews:			}	
• Attack				
• Escape				
 Hostage-taking 				
 Detainee sickness 				
Detainee death	153		_	Transportation contingency plans address all
Vehicle fire	\boxtimes		[]	bulleted items listed in this component.
• Ríot				•
Traffic accident			-	
Mechanical problems				
Matural disautary				

REMARKS:

Severe weather

The facility has comprehensive policy and procedures for transporting ICE detainees. All staff assigned to transportation duties is properly trained in areas identified within this standard. Vehicles are properly equipped and controlled. The facility demonstrates an acceptable level of compliance with this standard. It should be noted the facility does not have buses in their fleet.

AT-RISK

REPEAT FINDING

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/ August 4, 2011	
NATURE / DATE (b)(6). (b)(7)c

Passenger list includes women or minors

ACCEPTABLE

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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 allows staff to respond to an incident, assess the situation and take immediate action without supervisory staff presence.
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			The facility follows a UOF continuum to de- escalate incidents, beginning with "presence" and "verbalization."
The facility subscribes to the prescribed Confrontation Avoidance Procedures. • Ranking detention official, health professional, and others confer before every calculated use of force.	\boxtimes			Facility policy requires consultation among senior security and health care staff.
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.				The facility policy addresses provisions for calculated UOF techniques when a detainee must be forcibly moved or restrained with staff supervision.
Staff members are trained in the performance of the Use-of-Force Team Technique.	\boxtimes			The facility Jail Administrator and Training Officer recently began training staff in the UOF cell movement.
All use-of-force incidents are documented and reviewed.	\boxtimes			All UOF incidents are documented and reviewed by the shift supervisor and Jail Administrator.
 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. 	⊠			Facility policy includes the bulleted items listed in this component. The underlying intent is to de-escalate a situation.
Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.				Medication is not used for restraint purposes.
Use-of-Force Team follows written procedures that attempt to prevent injury and exposure to communicable disease(s).	\boxtimes			

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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 available, staff position the detainee "face-up".				A restraint chair is used for restraint purposes. Procedures are in place which meet the applicable requirements listed in this component. There were no incidents requiring the placement of an ICE detainee in the restraint chair over the last 12 months.
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			Fifteen-minute checks are conducted when a detainee is place in a restraint chair. The detainee is allowed to use the rest room with staff present.
All detainee checks are logged.	\boxtimes		<u> </u>	
In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	\boxtimes		П	Facility policy requires a documented medical examination and treatment immediately after a UOF incident.
 When the OIC authorizes use of non-lethal weapons: Medical staff is consulted before staff use pepper spray/non-lethal weapons. Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized. 	\boxtimes			Facility policy includes procedures for consulting with medical staff and provisions for review prior to use of non-lethal weapons in a manner consistent with this component.
Special precautions are taken when restraining pregnant detainees. • Medical personnel are consulted	\boxtimes			The facility policy addresses special precautions for restraining pregnant detainees in their third trimester, as well as medical staff consultation.
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			
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			The requirement to use the "Use of Force form" is specific to SPCs. This facility completes a local UOF form.
Acceptable Deficient] AT-R	ISK	REPEAT FINDING

REMARKS:

The Use of Force Program is well managed and both policy and procedures are designed to support the mission. Requirements of this standard are being met by the facility. The facility's intermediate force equipment consists of the following devices: X26 Taser; Oleoresin Capsicum (OC, commonly called "pepper spray"); and Specialty Impact Munitions. At this facility the following acts and techniques are specifically prohibited: choke holds; carotid holds; and other neck restraints. Policy 5-507, Intermediate Weapons, prohibits the use of a Taser on ICE detainees.

(b)(6), (b)(7)c / August 4, 2011 AUDITOR'S SIGNATURE / DATE (b)(6), (b)(7)c

STAFF DI	ETAINER	COMMUNI	CATIONS

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 unannounced visits occur at the IGSA.	×			The section of this component that requires weekly announced and unannounced visits is specific to SPCs and CDFs. Supervisory staff conducts monthly unannounced visits. Deportation Officers and IEAs conduct weekly announced visits.
Detention and Deportation Staff conduct scheduled weekly visits with detainees held in the IGSA.	\boxtimes			Deportation Officers and IEAs conduct weekly scheduled visits with detainees.
Scheduled visits are posted in ICE detainee areas.	\boxtimes			
Visiting staff observe and note current climate and conditions of confinement at each IGSA.	\boxtimes			
ICE information request Forms are available at the IGSA for use by ICE detainees.	\boxtimes			
The IGSA treats detainee correspondence to ICE staff as Special Correspondence.	\boxtimes			
ICE staff responds to a detainee request from an IGSA within 72 hours.	\boxtimes			ICE staff at this facility respond to detainee requests within 24 hours.
ICE detainees are notified in writing upon admission to the facility of their right to correspond with ICE staff regarding their case or conditions of confinement.			П	Detainees are issued a handbook which outlines their right to contact ICE.
ACCEPTABLE DEFICIENT	AT-Risk			REPEAT FINDING

REMARKS:

This inspector interviewed a Deportation Officer and several ICE detainees, reviewed the Facility Liaison Checklist Form and observed postings in the living units. ICE staff makes weekly visits to the facility every Wednesday. Those ICE detainees interviewed did not have any issues with the availability of ICE staff. Based on this inspector's review, the facility is found to be in compliance with the standard.

(b)(6), (b)(7)c / August 4, 2011 AUDITOR'S SIGNATURE / DATE (b)(6), (b)(7)c

DET	A	INEE	TR	ľ	NSF	ER	STA	ND	ARD
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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.

TAKING PLACE.			00:17	
COMPONENTS	YES	No	NA	REMARKS
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. • The notification is recorded in the detainee's file; and • When the A File is not available, notification is noted within DACS				
Notification includes the reason for the transfer and the location of the new facility.	⊠			
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			
 Facility policy mandates that: Times and transfer plans are never discussed with the detainee prior to transfer; The detainee is not notified of the transfer until immediately prior to departing the facility; and The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 	\boxtimes			
The detainee is provided with a completed Detainee Transfer Notification Form.	×			ICE detainees are usually provided a copy of this form within a day or two prior to transfer.
Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	\boxtimes			
For medical transfers: The Detainee Immigration Health Service (or IGSA) (DIHS) Medical Director or designee approves the transfer; Medical transfers are coordinated through the local ICE office; and A medical transfer summary is completed and accompanies the detainee.	×			
Detainces in ICE facilities having DIHS staff and medical care are transferred with a completed transfer summary sheet in a sealed envelope with the detaince's name and A-number, and the envelope is marked Medical Confidential.			\boxtimes	This facility does not have IHSC staff.
For medical transfers, transporting officers receive instructions regarding medical issues.	\boxtimes			
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 chedule meal times.	\boxtimes			
An A File or work folder accompanies the detainee when transferred to a different field office or sub-office.				

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. **COMPONENTS** YES No NA REMARKS Files are forwarded to the receiving office via overnight mail no Files are forwarded through the mail the day later than one business day following the transfer. \boxtimes after the transfer. **ACCEPTABLE** ☐ DEFICIENT AT-RISK REPEAT FINDING

REMARKS:

This inspector interviewed a Deportation Officer, reviewed detention files for transfer documents and interviewed detainees. Based on this inspector's review, the facility is found to be in compliance with the standard.

