

U.S. Department of Homeland Security  
500 12<sup>th</sup> St., SW  
Washington, D.C. 20536



U.S. Immigration  
and Customs  
Enforcement

April 30, 2024

Ms. Jacqueline Stevens  
601 University Place, 2d floor  
Political Science Department  
Evanston, IL 60208

**RE: Stevens v. ICE 20-cv-2725  
ICE FOIA Case Number 2020-ICLI-00042  
Supplemental Release**

Dear Ms. Stevens:

This letter is a supplemental response to your client's Freedom of Information Act (FOIA) requests to U.S. Immigration and Customs Enforcement (ICE). Your client seeks records relating to the following Freedom of Information Act requests: 2018-ICFO-56530, 2020-ICFO-18634, 2019-ICFO-33429, 2019-ICFO-29171, 2018-ICFO-59138, and 2019-ICFO-24680. ICE has considered your request under the FOIA, 5 U.S.C. § 552.

FOIA Request 2019-ICFO-33429 seeks for the timeframe April 11, 2014 to present:

1) all documents ICE has referencing the Butler County Jail work program for detainees, including but not limited to documents with the language about porters Chief Dwyer stated he had personally read in an IGSA, as well as all other correspondence about the Butler County's use of people held under immigration law to perform work in and around the facility.

People likely to have or have access to responsive documents include but are not limited to Tae Johnson and Kevin Landy.

2) In addition, please send me all formal and informal compliance reports and follow-up correspondence, including but not limited to email, attachments, grievances or complaints, and contract addenda for Butler County, in particular associated with the deficiencies noted in the reports.

3) Please also send me all data tracking the length of time people are held in the Butler County facility; if there is a db with the number of days/alien please send me an output from that db with the individually identifying information redacted but including the date of arrival and transfer from the facility, as well as the status of the case at the time of transfer, i.e., VD, removal, termination, transfer to another ICE facility.

ICE has considered your requests under the FOIA, 5 U.S.C. § 552.

A search of the Office of Enforcement and Removal Operations (ERO) located records that were potentially responsive to your request. For this production ICE reviewed 169 pages of potentially responsive documents. ICE has determined that portions of the 169 pages will be withheld in part or released in full pursuant to FOIA Exemptions 5, 6, 7(C) and, 7(E) as described below. A total of 169 pages have been Bates numbered 2020-ICLI-00042 12254 through 2020-ICLI-00042 12422.

**FOIA Exemption 5** protects inter-agency or intra-agency memorandums or letters which would not be available by law to a party other than an agency in litigation with the agency. The deliberative process privilege protects the integrity of the deliberative or decision-making processes within the agency by exempting from mandatory disclosure opinions, conclusions, and recommendations included within inter-agency or intra-agency memoranda or letters. The release of this internal information would discourage the expression of candid opinions and inhibit the free and frank exchange of information among agency personnel. The attorney work-product privilege protects documents and other memoranda prepared by an attorney in contemplation of litigation. The attorney-client privilege protects confidential communications between an attorney and his client relating to a legal matter for which the client has sought professional advice. It applies to facts divulged by a client to his attorney, and encompasses any opinions given by an attorney to his client based upon, and thus reflecting, those facts, as well as communications between attorneys that reflect client-supplied information. The attorney-client privilege is not limited to the context of litigation.

ICE has applied FOIA Exemptions 6 and 7(C) to protect from disclosure the personally identifiable information of DHS employees and third parties contained within the records.

**FOIA Exemption 6** exempts from disclosure personnel or medical files and similar files the release of which would cause a clearly unwarranted invasion of personal privacy. This requires a balancing of the public's right to disclosure against the individual's right to privacy. The privacy interests of the non-public-facing individuals in the records you have requested outweigh any minimal public interest in disclosure of the information. Any private interest you may have in that information does not factor into the aforementioned balancing test.

**FOIA Exemption 7(C)** protects records or information compiled for law enforcement purposes that could reasonably be expected to constitute an unwarranted invasion of personal privacy. This exemption takes note of the strong interests of individuals, whether they are suspects, witnesses, investigators, or individuals performing their official duties in connection with a law enforcement agency, in not being unwarrantably associated with alleged criminal activity or becoming targets for revenge by begrudged individuals. Based upon the traditional recognition of strong privacy interest in law enforcement records, categorical withholding of information that identifies third parties in law enforcement records is ordinarily appropriate. As such, I have determined that the privacy interest in the identities of the non-public-facing individuals in the records you have requested clearly outweigh any minimal public interest in disclosure of the information. Please note that any private interest you may have in that information does not factor into this determination.

**FOIA Exemption 7(E)** protects records compiled for law enforcement purposes, the release of which would disclose techniques and/or procedures for law enforcement investigations or

prosecutions or would disclose guidelines for law enforcement investigations or prosecutions if such disclosure could reasonably be expected to risk circumvention of the law. I have determined that disclosure of certain law enforcement sensitive information contained within the responsive records could reasonably be expected to risk circumvention of the law. Additionally, the techniques and procedures at issue are not well known to the public.

If you have any questions about this letter, please contact Assistant United States Attorney Alex Hartzler at [Alex.Hartzler@usdoj.gov](mailto:Alex.Hartzler@usdoj.gov).

Sincerely,

Louis P. Dinatale, III  
Supervisory Paralegal Specialist

Enclosure: 169 pages

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**From:** Adducci, Rebecca J <(b)(7)(E)>  
(b)(7)(E)  
**Sent:** 3/27/2019 3:37:08 PM  
**To:** (b)(6),(b)(7)(C),(b)(7)(E)  
**Subject:** FW: Butler  
**Attachments:** RE: Butler County Jail IGSA for immigrant work

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**From:** Lorenzen-Strait, Andrew R  
**Sent:** Wednesday, March 27, 2019 11:34 AM  
**To:** Adducci, Rebecca J <(b)(6),(b)(7)(C)>@ice.dhs.gov  
**Subject:** FW: Butler

See below and attached. Inspections shows we DO NOT participate –but I thought you had staff call the jail and we DO participate??

Andrew R. Lorenzen-Strait  
Deputy Assistant Director  
Enforcement and Removal Operations | Custody Programs  
U.S. Immigration and Customs Enforcement  
Office: 202-431-0170 | Cell: 202-431-4761  
Email: (b)(6),(b)(7)(C)>@ice.dhs.gov



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**From:** Johnson, Tae D  
**Sent:** Wednesday, March 27, 2019 10:42 AM  
**To:** Trickler-McNulty, Claire <(b)(6),(b)(7)(C)>@ice.dhs.gov; Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)>@ice.dhs.gov; (b)(6),(b)(7)(C)>@ice.dhs.gov  
**Subject:** RE: Butler

Looks like ICE detainees do not participate

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**From:** Trickler-McNulty, Claire  
**Sent:** Wednesday, March 27, 2019 9:42 AM  
**To:** Johnson, Tae D <(b)(6),(b)(7)(C)>@ice.dhs.gov; Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)>@ice.dhs.gov  
**Subject:** FW: Butler

Here's the article

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<https://www.lexisnexis.com/LegalNewsRoom/immigration/b/insidenews/posts/new-foia-release---butler-county-ice-detainees-paid-in-coffee-packets-ice-punishes-hunger-strikers-in-tacoma#>

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**From:** (b)(6),(b)(7)(C),(b)(7)(E)  
**Sent:** 3/27/2019 2:26:58 PM  
**To:** Johnson, Tae D (b)(7)(E)  
(b)(6),(b)(7)(C),(b)(7)(E)  
**Subject:** RE: Butler County Jail IGSA for immigrant work  
**Attachments:** BUTLEOH18- ButlerCoOH CoverLTR 02-23-2018.pdf; BUTLEOH18- ButlerCoOH SIS 02-23-2018.pdf; BUTLEOH18 - G324A\_NDS\_O72\_Lyon\_02-23-18.pdf; BUTLEOH\_02\_23\_2018\_Annual\_UCAP\_KEY\_606.doc

FY18 inspection documents: LCI, SIS, G-324A, and UCAP attached. Butler was rated "N/A" for VWP standard. The following was copied from the G-324A VWP standard: detainees do not participate in the voluntary work program at this facility.

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**From:** Johnson, Tae D  
**Sent:** Wednesday, March 27, 2019 10:16 AM  
**To:** (b)(6),(b)(7)(C)@tsa.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov  
**Subject:** FW: Butler County Jail IGSA for immigrant work

Any luck with the G-324 for Butler?

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**From:** Johnson, Tae D  
**Sent:** Tuesday, March 26, 2019 11:26 AM  
**To:** Trickler-McNulty, Claire <(b)(6),(b)(7)(C)@ice.dhs.gov>; Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov  
**Subject:** RE: Butler County Jail IGSA for immigrant work

The IGSA appears to be 15 years old based on the facilities list. We should also pull the last G324 to see what it says about VWP.

Interested in whether the facility considers this a VWP program or something else. I assume this is strictly voluntary, but we should confirm.

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**From:** Trickler-McNulty, Claire  
**Sent:** Tuesday, March 26, 2019 8:32 AM  
**To:** Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov; Johnson, Tae D <(b)(6),(b)(7)(C)@ice.dhs.gov>; (b)(6),(b)(7)(C)@ice.dhs.gov  
**Subject:** RE: Butler County Jail IGSA for immigrant work

Do we exempt them from the VWP in the IGSA? That seems possibly problematic.

(b)(6),(b)(7)(C) can you see if we have the Butler IGSA in the contract library and see if you can find the text she is referring to, might be good for awareness or to amend.

Sent with BlackBerry Work  
(www.blackberry.com)

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**From:** Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Date:** Tuesday, Mar 26, 2019, 8:27 AM  
**To:** (b)(6),(b)(7)(C)@ice.dhs.gov  
**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov, (b)(6),(b)(7)(C)@ice.dhs.gov, Johnson, Tae D <(b)(6),(b)(7)(C)@ice.dhs.gov>, Trickler-McNulty, Claire <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Subject:** FW: Butler County Jail IGSA for immigrant work

(b)(6),(b)(7)(C) FYI. This stakeholder is pretty adversarial given my past interactions as former Public Advocate. Further - the VWP program is being actively litigated. Pls work with ERO and OPLA on any response. (b)(5)  
FOIA.

Andrew R. Lorenzen-Strait  
Deputy Assistant Director  
Enforcement and Removal Operations | Custody Programs  
U.S. Immigration and Customs Enforcement  
Office: 202-(b)(6),(b)(7)(C) Cell: 202-431-4761  
Email: (b)(6),(b)(7)(C)@ice.dhs.gov

-----Original Message-----

**From:** Lorenzen-Strait, Andrew R  
**Sent:** Tuesday, March 26, 2019 8:26 AM  
**To:** 'Jacqueline Stevens' <jacqueline-stevens@northwestern.edu>  
**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov  
**Subject:** RE: Butler County Jail IGSA for immigrant work

Good Morning Ms. Stevens: I am looping in (b)(6),(b)(7)(C) with ICE Community Affairs to help facilitate your request.

Best,  
Andrew

Andrew R. Lorenzen-Strait  
Deputy Assistant Director  
Enforcement and Removal Operations | Custody Programs U.S. Immigration and Customs Enforcement  
Office: 202-(b)(6),(b)(7)(C) | Cell: 202-(b)(6),(b)(7)(C)  
Email: (b)(6),(b)(7)(C)@ice.dhs.gov

-----Original Message-----

**From:** Jacqueline Stevens <jacqueline-stevens@northwestern.edu>  
**Sent:** Monday, March 25, 2019 3:47 PM  
**To:** Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Subject:** Butler County Jail IGSA for immigrant work

Dear Mr. Lorenzen Strait,

Hi there, it's been a while. I hope this finds you well.  
Two questions:

1) Is it the position of ICE that IGSA's may allow facilities to disregard PBNDS and require only that payment to people in custody under immigration laws be similar to payment to people in county custody under criminal laws, even if this means no funds at all?

2) Can you please share with me information about the IGSA for Butler County, Ohio or other laws or their interpretation pertaining to the county's legal authority to incentivize work without monetary compensation and outside the so-called "Voluntary Work Program"?

This is for the purpose of a chapter I am completing updating my research on work of those in custody under immigration law for a book contracted with the University of California Press and States Without Nations, the blog I manage and on which I will post today the information I recently obtained under the Freedom of Information Act. If I do not receive a response from you prior to posting the document, I will be happy to update with your response when it arrives.

The correspondence I have indicates that ICE was aware in 2014 that Sheriff Jones was requiring people in custody under immigration laws to work without compensation.

I spoke today with both Sheriff Jones and Chief Dwyer. My understanding from my conversations today and the email report is that people in custody under immigration laws are performing janitorial and possibly other services for the jail in exchange for 20 packages of coffee/week or no compensation, if the porters enlist people to sweep, clean the showers or paint, for example. The relief of boredom and desire to maintain the cleanliness and habitability of the facility were shared as reasons why people might perform this work without compensation.

Chief Dwyer referenced language from an IGSA exempting the facility from the PBNDS requirement of payment for this work performed as long as the compensation was the same as for those who performed similar work elsewhere in the facility. He explained that the porters in criminal custody also worked in exchange for 20 packages/coffee week and therefore his program was in compliance. Does ICE agree?

I am writing you because we have been in touch previously on the topic of the work program and also because you were copied in the email on the statements by Sheriff Jones in 2014.

Thank you for your assistance with this matter, Jackie

Professor

Political Science and Legal Studies

Northwestern University

Director

Deportation Research Clinic

Buffett Institute

<http://buffett.northwestern.edu/programs/deportationresearch>

Citizenship In Question (Duke U.P. 2017), Open Source PDF <http://www.oapen.org/search?identifier=625272>

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601 University Place

Political Science Department

Evanston, IL 60208

<http://jacquelinestevens.org>

<http://stateswithoutnations.blogspot.com>



The Nakamoto Group, Inc.

February 23, 2018

TO: Tae D. Johnson  
Assistant Director for Detention Management

FROM: (b)(6),(b)(7)(C)  
Lead Compliance Inspector  
The Nakamoto Group, Inc.

SUBJECT: **Annual Detention Inspection of the Butler County Jail**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE National Detention Standards (NDS/SAAPI 2011) of the Butler County Jail in Hamilton, OH during the period of February 21-23, 2018. This is an Over 72 Hour IGSA facility.

The inspection was performed under the guidance of (b)(6),(b)(7)(C) Lead Compliance Inspector. Team Members were:

Subject Matter Field	Team Member
Security	<b>(b)(6),(b)(7)(C)</b>
Detainee Rights	
Medical Care	
Safety	
Medical Care	

**Type of Inspection**

This is a scheduled annual inspection, which is performed to determine overall compliance with the ICE NDS for Over 72 hour facilities.

**Inspection Summary**

The Butler County Jail is currently accredited by:

- The American Correctional Association (ACA) - No
- The National Commission on Correctional Health Care (NCCHC) - No
- The Joint Commission (TJC) - No
- Prison Rape Elimination Act (PREA) - Yes





The Nakamoto Group, Inc.

### Standards Compliance

The following information is a summary of the standards that were reviewed and overall compliance that was determined as a result of the 2017 and 2018 NDS compliance annual inspections:

2017 Annual Inspection		2018 Annual Inspection	
Meets Standards	37	Meets Standards	37
Deficient	0	Deficient	0
At-Risk	0	At-Risk	0
Repeat Deficiency	0	Repeat Deficiency	0
Not Applicable	2	Not Applicable	2

The inspection team identified six (6) deficient components in the following five (5) standards:

- Correspondence and Other Mail - 1, which is a repeat deficiency
- Issuance and Exchange of Clothing, Bedding and Towels - 2, which are repeat deficiencies
- Environmental Health and Safety - 1
- Security Inspections – 1
- Staff Detainee Communication - 1

### Facility Snapshot/Description

The Butler County Jail is owned and operated by Butler County Sheriff’s Office and is located in Hamilton, Ohio. The facility houses U.S. Marshals detainees, BOP inmates and various other county prisoners, as well as male and female ICE detainees of all security levels. The count during the inspection was 959, of which 127 were ICE detainees; 119 males and eight females. The average length of stay for an ICE detainee is twelve days.

The multi-story, direct supervision facility has eight general population housing units, a housing unit for detainees that require separation from the general population, and a four-cell medical unit, all branching from a single hallway. Each of the housing units, except the medical unit, has forty-eight two-person cells situated on lower and upper ranges, and an attached outdoor recreation area. An officer is stationed inside every housing unit, and video cameras are in place in every unit as well. The cameras are monitored in the control center.

Every cell has a television, a sink, and a toilet. Housing units provide adequate open space and detainees spend the majority of their time during waking hours socializing in the dayrooms or engaging in outside recreation. The atmosphere throughout the facility is relaxed. Detainees were responsive to the inspection team. Interactions observed between the facility staff and detainees were calm and professional. There were no obvious indicators of high stress levels. The staff was professional in appearance and conduct. Knowledge of the standards varied from



The Nakamoto Group, Inc.

employee to employee. The setting is that of a typical jail, not lending itself to the concepts of civil detention.

The inspection team interviewed no less than fifty detainees. Eight detainees voiced complaints about cold food and sour milk. The Safety SME checked temperature logs and checked the temperatures of actual meals served during the inspection, with no negative variances. The supply of milk on hand was not approaching expiration dates. The food service staff stated that they had heard no such allegations, and there were no grievances on file with like complaints. During an interview with an inspection team member, one detainee presented with possible mental health issues. The Medical SME reviewed the detainee's medical record. The detainee provided no mental health history upon intake and was not currently on the mental health caseload. Based on the observation of the inspection team, the Health Services Administrator had the detainee assessed by a mental health professional during the inspection. Confidential interviews revealed no concerns, and LEP detainees stated that they have no problem obtaining services. Overall, detainees stated that they feel safe at this facility.

Food service is provided by Aramark. All other services are provided by Butler County.

**Area of Concern/Significant Observation**

There were no areas of concerns or significant observations.

**Recommended Rating and Justification**

The Lead Compliance Inspector recommends that the facility receive a rating of Acceptable. The facility complies with the ICE National Detention Standards (NDS). No (0) standards were found Deficient and two (2) standards were Not Applicable (N/A). All remaining thirty-seven (37) standards were found to be in compliance.

**LCI Assurance Statement**

The findings of compliance and noncompliance are accurately and completely documented on the G-324 Inspection Form and are supported by documentation in the inspection file. An out brief was conducted at the facility and in addition to the entire Nakamoto Group, Inc. Inspection Team, the following were present:

- ICE Officials – AFOD (b)(6),(b)(7)(C) SDDO (b)(6),(b)(7)(C) and DO (b)(6),(b)(7)(C)
- Facility Staff – Major (b)(6),(b)(7)(C) Warden Dennis Adams, Deputy Wardens (b)(6),(b)(7)(C) and (b)(6),(b)(7)(C) and various other supervisors and staff.

(b)(6),(b)(7)(C)

(b)(6),(b)(7)(C) Lead Compliance Inspector

February 23, 2018

Printed Name of LCI

Date

**A. Type of Facility Reviewed**

ICE Service Processing Center  
 ICE Contract Detention Facility  
 ICE Intergovernmental Service Agreement

**B. Current Inspection**

Type of Inspection  
 Field Office  HQ Inspection  
Date[s] of Facility Review  
**02/21/2018- 02/23/2018**

**C. Previous/Most Recent Facility Review**

Date[s] of Last Facility Review  
**01/10/2017- 01/12/2017**  
Previous Rating  
 Superior  Good  Acceptable  Deficient  At-Risk

**D. Name and Location of Facility**

Name  
**Butler County Jail**  
Address (Street and Name)  
**705 Hanover Street**  
City, State and Zip Code  
**Hamilton, OH 45011**  
County  
**Butler**  
Name and Title of Chief Executive Officer (Warden/OIC/Supt.)  
**Dennis Adams, Warden**  
Telephone # (Include Area Code)  
**513- (b)(6),(b)(7)(C)**  
Field Office / Sub-Office (List Office with oversight responsibilities)  
**Detroit**  
Distance from Field Office  
**250 miles**

**E. ICE Information**

Name of Inspector (Last Name, Title and Duty Station)  
**(b)(6),(b)(7)(C) / LCI/Detainee Rights SME / Nakamoto**  
Name of Team Member / Title / Duty Location  
**(b)(6),(b)(7)(C) / Medical SME / Nakamoto**  
Name of Team Member / Title / Duty Location  
**(b)(6),(b)(7)(C) / Safety SME / Nakamoto**  
Name of Team Member / Title / Duty Location  
**(b)(6),(b)(7)(C) / Security SME / Nakamoto**  
Name of Team Member / Title / Duty Location  
**(b)(6),(b)(7)(C) / Medical SME / Nakamoto**

**F. CDF/IGSA Information Only**

Contract Number  
**ACB-4-H-002**  
Date of Contract or IGSA  
**12-16-03**  
Basic Rates per Man-Day  
**\$58.78**  
Other Charges: (If None, Indicate N/A)  
**N/A**

Estimated Man-days Per Year:  
**353,526**

**G. Accreditation Certificates**

List all State or National Accreditation[s] received:  
 Check box if facility has no accreditation[s]

**H. Problems / Complaints (Copies must be attached)**

The Facility is under Court Order or Class Action Finding  
 Court Order  Class Action Order  
The Facility has Significant Litigation Pending  
 Major Litigation  Life/Safety Issues  
 Check if None.

**I. Facility History**

Date Built  
**2002**  
Date Last Remodeled or Upgraded  
**January 2018 New booking desk**  
Date New Construction / Bed space Added  
**N/A**  
Future Construction Planned  
 Yes  No Date:  
Current Bed space  
**848**  
Future Bed space (# New Beds only)  
Number: Date:

**J. Total Facility Population**

Total Facility Intake for previous 12 months  
**13,493**  
Total ICE Man-days for Previous 12 months  
**46975**

**K. Classification Level (ICE SPCs and CDFs Only)**

	L-1	L-2	L-3
Adult Male			
Adult Female			

**L. Facility Capacity**

	Rated	Operational	Emergency
Adult Male	720		
Adult Female	128		

Facility holds Juveniles Offenders 16 and older as Adults

**M. Average Daily Population**

	ICE	USMS	Other
Adult Male	121	170	495
Adult Female	8	14	165

**N. Facility Staffing Level**

Security:  
**129**  
Support:  
**44**

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Form G-324A SIS (Rev. 7/9/07)

**Significant Incident Summary Worksheet**

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

<i>Incidents</i>	<i>Description</i>	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault: Offenders on Offenders <sup>1</sup>	Types (Sexual <sup>2</sup> , Physical, etc.)	0	0	0	0
	With Weapon	0	0	0	0
	Without Weapon	0	0	0	0
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	0	1	0	0
	With Weapon	0	0	0	0
	Without Weapon	0	1	0	0
Number of Forced Moves, incl. Forced Cell moves <sup>3</sup>		0	0	0	0
Disturbances <sup>4</sup>		0	0	0	0
Number of Times Chemical Agents Used		0	0	0	0
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	0	1	0
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	0	4	0	9
	# Resolved in favor of Offender/Detainee	0	0	0	0
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	A	0	0	0
	Number	2	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	0	3	1	0
	# Psychiatric Cases referred for Outside Care	0	0	0	0

<sup>1</sup> Any attempted physical contact or physical contact that involves two or more offenders

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

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

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

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Form G-324A SIS (Rev. 7/9/07)

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

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

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

Form G-324A SIS (Rev. 7/9/07)

**LCI Review Assurance Statement**

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

Lead Compliance Inspector: (Print Name)	Signature
(b)(6),(b)(7)(C)	(b)(6),(b)(7)(C)
Title & Duty Location	Date
Lead Compliance Inspector, The Nakamoto Group, Inc.	02/23/2018

Team Members	
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
(b)(6),(b)(7)(C) Safety SME, The Nakamoto Group, Inc.	(b)(6),(b)(7)(C) Medical SME, The Nakamoto Group, Inc.
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
(b)(6),(b)(7)(C) Security SME, The Nakamoto Group, Inc.	(b)(6),(b)(7)(C) Medical SME, The Nakamoto Group, Inc.

- Recommended Rating:**
- Superior
  - Good
  - Acceptable
  - Deficient
  - At-Risk

Comments: The Sexual Abuse and Assault Prevention and Intervention standard was inspected during this inspection but is not referenced in the Standards Review Summary Report. The standard was rated as Meets Standard for this inspection. During this inspection period there have been no allegations of sexual abuse or assault involving ICE detainees.

There were no deaths or serious suicide attempts involving ICE detainees in the past twelve months. ICE detainees are not charged a medical co-pay.

There was one immediate physical response to detainee resistance involving one ICE detainee during the inspection period. The detainee assaulted a staff member and was restrained against his will. The force was justified and appropriate, and applied only for the duration necessary. Medical services were engaged as required, and there were no injuries. The after-action review was timely.

The facility authorizes trained officers to carry chemical agents, and may use them on ICE detainees, if necessary. Shift supervisors carry Tasers but they may not be used on ICE detainees. Canines are used for contraband detection and are not used in the presence of ICE detainees.

The numbers on the second page of this form reflect the ICE population only.

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

Form G-324A SIS (Rev. 7/9/07)

**Condition of Confinement Inspection Worksheet**

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

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



**ICE National Detention Standards  
Inspection Worksheet for Over 72 Hour Facilities**

REVIEW TEAM USE: *(Edits Permitted, ALL FIELDS REQUIRED)*

<b>Facility Information</b>			
Facility Name: Butler County Jail		Review Purpose: Annual	
Facility Type: IGSA <small>Intergovernmental Service Agreement (IGSA), ICE Service Processing Center (SPC), ICE Contract Detention Facility (CDF)</small>			
Address:	705 Hanover Street		
City: Hamilton	State: OH	Zip Code: 45011	
County:	Butler		
CEO Name: Dennis Adams		CEO Title: Warden	
<b>Review Information</b> <small>(Use following format for dates: mm/dd/yyyy)</small>			
Start Date: 02/21/2018	End Date: 2/23/2018	Review Type: Headquarters	
Lead Name: (b)(6),(b)(7)(C)	Lead Title: LCI		
<b>Review Document Issue Summary</b> <small>(See Document Check Section to Review/Update)</small>			
Error(s) Found:	0	Items Not Rated:	0

ICE HQ USE ONLY: *(DO NOT EDIT\*)*

Form Name: NDS_G324A_O72_LYON	Form Key: 26	Form Date: 5/9/2017
Form Type: NDS	Form Review Type: Annual	Form Over/Under 72 Status: O72

\*If Edits are required, contact ICE HQ for an updated form.

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DOCUMENT CHECK



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

# *Section I*

## **Detainee Service Standards**

<b>ACCESS TO LEGAL MATERIALS (Key: A)</b>		
<b>Policy:</b> 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.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
1. The facility provides a designated law library for detainee use.	Meets Standard	There are two mobile law library carts. Each cart has a computer with the LexisNexis program and a printer.
2. The law library contains all materials listed in the "Access to Legal Materials" Standard, Attachment A. The listing of materials is posted in the law library.	Meets Standard	Detainees have access to all items listed in Attachment A via the LexisNexis electronic law library. The LexisNexis program lists all the required materials.
3. The library contains a sufficient number of chairs, is well lit, and is reasonably isolated from noisy areas.	Meets Standard	There is a multipurpose room in each housing unit that is used as the law library. The rooms are quiet, well lit, and have chairs, a computer stand and a table.
4. The law library is adequately equipped with typewriters and/or computers, and has sufficient supplies for daily use by the detainees.	Meets Standard	There are two computers with printers that ICE detainees may use. The computers have the LexisNexis program and word processing capabilities. Supplies are available from the officer on duty.
5. In addition to the physical law library, detainees have access to the Lexus Nexus electronic law library.	Meets Standard	
6. Where provided, the Lexus Nexus library is updated and is current.	Meets Standard	The electronic LexisNexis law library was updated in February 2018.
7. Outside persons and organizations are permitted to submit published legal material for inclusion in the legal library. Outside published material is forwarded and reviewed by ICE prior to inclusion.	Meets Standard	
8. There is a designated ICE or facility employee who inspects, updates, and maintains/replaces legal materials and equipment on a routine basis.	Meets Standard	A corrections officer performs the duties listed in this component.
9. Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.	Meets Standard	Detainees may use the law library at any time daily during their out-of-cell hours, up to 6.5 hours per day. Detainees are not required to forego recreation time to use the law library, and detainees with a court deadline are given priority use.

<b>ACCESS TO LEGAL MATERIALS (Key: A)</b>		
<b>Policy:</b> 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.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
10. Detainees may request materials not currently in the law library. Each request is reviewed and, where appropriate, an acquisition request is timely initiated. Requests for copies of court decisions are accommodated within 3 – 5 business days.	Meets Standard	Requests for additional legal materials may be made via detainee request forms, and are accommodated as stipulated in this component.
11. Detainees are permitted to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	Meets Standard	Detainees may assist other detainees from their same housing unit with legal work. The assistance must be voluntary and free of charge.
12. Illiterate or non-English-speaking detainees without legal representation receive access to more than just English-language law books after indicating their need for help.	Meets Standard	The LexisNexis program includes a Spanish tutorial.
13. Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.	Meets Standard	
14. Detainees housed in Administrative Detention and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.	Meets Standard	The portable law library carts are utilized for detainees in segregated statuses. Denials would be documented and periodically reviewed.
15. All denials of access to the law library fully documented.	Meets Standard	
16. Facility staff informs ICE Management when a detainee or group of detainees is denied access to the law library or law materials.	Meets Standard	
17. Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	Meets Standard	Detainees may seek relief without fear of reprisal or retaliation.

**ACCESS TO LEGAL MATERIALS – REVIEWER SUMMARY**  
*(Use following format for dates: mm/dd/yyyy)*

**ACCESS TO LEGAL MATERIALS – REVIEWER SUMMARY**

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

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

Detainees have access to the law library carts during their daily out-of-cell time; well beyond the weekly five hour minimum required by the standard. When outside persons and organizations are permitted to submit legal materials for inclusion in the law library which is in a language other than English, an English translation is provided.

ICE determines acceptance of outside published materials into the law library, whether the request was initiated by a detainee or an outside party. Decisions to accept or deny these materials are based on usefulness of the materials and space limitations, and the submitter is notified if materials are declined. Decisions as to whether or not to allow outside materials are made within forty-five days from the time of submission. The LexisNexis program is updated regularly, and outdated materials on LexisNexis are removed and/or replaced accordingly.

Official detention functions do not interfere with law library access. The unit officers monitor detainees using the law library in order to prevent the damaging, destroying or removal of equipment, materials or supplies.

The inmate services liaison assists detainees requesting a notary public, certified mail, or other such services to pursue a legal matter. The notary service is free to all detainees. The detainee handbooks provide detainees with the rules and procedures governing access to legal services, including legal materials and notary services.

Detainees can obtain photocopies of legal materials, at no charge, when such copies are reasonable and necessary for a legal proceeding involving the detainee. Requests for photocopies of legal material are only denied if the document poses a risk to the security and orderly operation of the facility; copying would constitute a violation of any law or regulation or; the request is clearly abusive or excessive. The assigned officer inspects documents requested for photocopying to ensure they comply with these rules. Staff do not read a document that is clearly related to a legal proceeding involving a detainee.

The local handbook and/or postings in the housing units provide detainees with the rules and procedures governing access to legal materials including: information that a law library is available for detainee use; scheduled hours of access to the law library; the procedure for requesting access to the law library; the procedure for requesting legal reference materials not maintained in the law library; and the procedure for notifying a designated employee that library material is missing or damaged.

The law library is inspected daily by the housing unit officers and the LexisNexis computer is inspected periodically by the assigned officer.

During the evaluation of this standard, the law library was inspected, the LexisNexis program was manipulated, employees and detainees were interviewed, and policy and the detainee handbook were reviewed.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** (b)(6),(b)(7)(C)

**Completion Date:** 2/23/2018

**Reviewer Signature (for printed form submission):**

<b>ADMISSION AND RELEASE (Key: B)</b>		
<b>Policy:</b> 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.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
1. In-processing includes an orientation of the facility. The orientation includes: Unacceptable activities and behavior, and corresponding sanctions; How to contact ICE; The availability of <i>pro bono</i> legal services, and how to pursue such services; schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.	Meets Standard	Orientation consists of the issuance of the local handbook and the National Detainee Handbook and the viewing of a local orientation video. The video plays constantly in the holding rooms and intake processing area, and is available for viewing on the televisions in each cell. The orientation process covers all the topics listed in this component.
2. Medical screenings are performed by medical staff <u>or</u> persons who have received specialized training for the purpose of conducting an initial health screening.	Meets Standard	Initial intake medical screenings are conducted by trained correctional officers and more detailed medical screenings are conducted by medical staff.
3. Each new arrival is classified according to criminal history and threat levels. Criminal history is provided for each detainee by the ICE field office.	Meets Standard	Criminal histories are provided by ICE. The facility classifies all detainees upon arrival.
4. All new arrivals are searched in accordance with the "Detainee Search" standard. An officer of the same sex as the detainee conducts the search and the search is conducted in an area that affords as much privacy as possible.	Meets Standard	ICE detainees are pat searched upon arrival by an officer of the same gender as the detainee. Detainees also undergo a full body screening.
5. Detainees are stripped searched only when cause has been established and not as routine policy. Non-criminal detainees are not strip-searched but are patted down, unless reasonable suspicion is established.	Meets Standard	Detainees are not stripped searched unless specific cause exists for such action. All detainees are pat searched upon arrival.
6. 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.	Meets Standard	
7. 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.	Meets Standard	This IGSA facility uses local forms to report lost or missing property claims. ICE is notified of any such claims.
8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	Meets Standard	

ADMISSION AND RELEASE (Key: B)		
<b>Policy:</b> ALL DETAINEES WILL BE ADMITTED AND RELEASED IN A MANNER THAT ENSURES THEIR HEALTH, SAFETY, AND WELFARE. THE ADMISSIONS PROCEDURE WILL, AMONG OTHER THINGS INCLUDE: MEDICAL SCREENING; A FILE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WILL BE INVENTORIED, DOCUMENTED, AND SAFEGUARDED AS NECESSARY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
9. The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE Detainees are not charged for these items.	Meets Standard	Detainees are issued hygiene items upon admission. These items are replaced upon request to the housing unit officer.
10. All releases are properly coordinated with ICE using a Form I-203.	Meets Standard	All detainee releases are coordinated with ICE using I-203 form.
11. Staff completes paperwork/forms for release as required.	Meets Standard	

ADMISSION AND RELEASE – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
<b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Detainees are processed into and out of this facility in an effective manner that ensures their safety and welfare. The orientation video meets the standards of quality established by ICE and is approved by the ICE field office. The video is broadcast in English and Spanish. A telephonically based language line provides interpretation services when needed.  Institutional clothing, including undergarments, is provided to the detainees. Personal clothing or cosmetic appliances, such as hair dryers and curling irons, are not permitted. Feminine hygiene items are provided.  This standard was evaluated via a review of post orders, detention files, and the national and local detainee handbooks; a walk-through of the intake area; and interviews with staff.	
<b>Overall Rating:</b> Meets Standard	
<b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)	<b>Completion Date:</b> 2/23/2018
<b>Reviewer Signature (for printed form submission):</b>	

<b>CLASSIFICATION SYSTEM (Key: C)</b>		
<b>Policy:</b> ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a system for classifying detainees. In CDFs and IGSA's, an Objective Classification System or similar is used.	Meets Standard	Detainees arrive having already been classified by ICE, and are then classified using a local system.
2. The facility classification system includes: <ul style="list-style-type: none"> <li>• Classifying detainees upon arrival;</li> <li>• Separating from the general population those individuals who cannot be classified upon arrival; and</li> <li>• The first-line supervisor or designated classification specialist reviewing every classification decision.</li> </ul>	Meets Standard	Detainees are classified upon arrival and are separated from general population until such time as they are classified. The classification officer reviews all classification assignments. Classification decisions are reviewed by a shift sergeant as well.
3. The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	Meets Standard	
4. Staff uses only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/ unconfirmed reports may be filed but are not used to score detainees classifications.	Meets Standard	Factual information, including the ICE Form I-213 and computerized criminal background checks, is used to classify detainees. Opinions and unsubstantiated information is not used in the classification process.
5. Housing assignments are based on classification-level.	Meets Standard	
6. A detainee's classification-level does not affect his/her recreation opportunities. Detainees recreate with persons of similar classification designations.	Meets Standard	Detainees recreate within their housing units. Recreation hours and schedules are the same for all detainees in general population.
7. Detainee work assignments are based upon classification designations.	N/A	ICE detainees do not work at this facility.
8. The classification process includes reassessment/reclassification. At IGSA's, detainees may request reassessment 60 days after arrival.	Meets Standard	This IGSA conducts reassessments every thirty days. A detainee may request a review of his/her classification level at any time after ten days of the initial classification.
9. Procedures exist for a detainee to appeal their classification assignment. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.	Meets Standard	Procedures exist for a detainee to appeal their classification via request form or the grievance process. The authority to reduce classification levels is not delegated below a supervisor or classification officer.



CLASSIFICATION SYSTEM (Key: C)		
<b>Policy:</b> ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
10. Classification appeals are resolved within five business days and detainees are notified of the outcome within 10 business days.	Meets Standard	Appeals are resolved within the time periods specified in this component.
11. Classification designations may be appealed to a higher authority, such as the Warden or equivalent.	Meets Standard	Classification decisions may be appealed to the OIC or designee, or to ICE.
12. The Detainee Handbook or equivalent for IGSA's explains the classification levels, with the conditions and restrictions applicable to each.	Meets Standard	At this IGSA, the handbook describes the classification levels and the conditions and restrictions associated with each.

CLASSIFICATION SYSTEM – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p><b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Detainees arrive having already been classified by ICE and are then classified using the local objective classification system. ICE detainees are housed with like classification levels. If necessary, the classification levels may be adjusted due to incidents, charges, or other factors that would alter the supervision requirements of a detainee. The booking officers have been trained in the classification and admission process.</p> <p>ICE detainees are assigned different color uniforms that designate their classification level. Maximum custody detainees are always monitored and escorted.</p> <p>Detainees classified as low custody are not housed with high custody detainees. A detainee classified as low custody does not have a felony conviction that includes an act of physical violence and does not have any aggravated felony convictions. A medium custody detainee does not have any recent convictions for any offense listed under the highest section of the severity of offense guideline; and does not include any detainee with a pattern or history of violent assaults, whether convicted or not. High custody detainees are considered a high-risk category and are assigned to appropriate security housing. High custody detainees are always monitored and escorted.</p> <p>Detainees indicated in interviews that they feel safe at this facility.</p> <p>During the evaluation of this standard, policy and the detainee handbook were reviewed, employees were interviewed, housing units were inspected, and classification documents were examined.</p>	
<p><b>Overall Rating:</b> Meets Standard</p>	
<p><b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)</p>	<p><b>Completion Date:</b> 2/23/2018</p>
<p><b>Reviewer Signature (for printed form submission):</b></p>	

<b>CORRESPONDENCE AND OTHER MAIL (Key: D)</b>		
<b>Policy:</b> 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.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
1. The rules for correspondence and other mail are posted in each housing or common area, or provided to each detainee via a detainee handbook.	Meets Standard	Mail rules and regulations are provided to every detainee via the local handbook and are posted in the housing units.
2. The facility provides key information in languages other than English; In the language(s) spoken by significant numbers of detainees. List any exceptions.	Meets Standard	Key information is provided in English and Spanish, languages spoken by the majority of detainees held at the facility.
3. Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	Meets Standard	Mail is delivered the day it is received.
4. Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	Meets Standard	Outgoing mail is picked up by the post office every business day.
5. Staff does not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized in writing by the Warden or equivalent for prevailing security reasons.	Does Not Meet Standard	This component was rated deficient during the last inspection, due to all incoming mail being opened and inspected without the detainee being present. The facility opens and inspects all incoming mail without the detainee present. This is a repeat deficiency.
6. Staff does not read incoming general correspondence without the Warden's prior written approval.	Meets Standard	Incoming general correspondence is inspected for contraband, but not read.
7. Staff does not inspect incoming special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.	Meets Standard	Correspondence that is appropriately marked as Special Correspondence is opened in the presence of the detainee.
8. Staff is prohibited from reading or copying incoming special correspondence.	Meets Standard	Incoming correspondence is not read or copied.
9. Staff is only authorized to inspect outgoing correspondence or other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity.	Meets Standard	Outgoing mail is sealed by the detainee and put into the mail system. Outgoing mailed is not opened or inspected unless there is reason to believe that some threat to the facility or the public exists.
10. Correspondence to a politician or to the media is processed as special correspondence and is not read or copied.	Meets Standard	

<b>CORRESPONDENCE AND OTHER MAIL (Key: D)</b>		
<b>Policy:</b> 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.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
11. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	Meets Standard	When mail is rejected, a rejection letter is sent to the detainee and the sender. Rejected mail is either placed in the detainee's property or, if criminal in nature, treated as evidence.
12. The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	Meets Standard	Detainees receive written notification of any rejection of outgoing mail.
13. Staff maintains a written record of every item removed from detainee mail.	Meets Standard	The officer that removes an item from detainee mail must write a report.
14. The Warden or equivalent monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	Meets Standard	
15. The procedure for safeguarding cash removed from a detainee protects the detainee from loss of funds and theft. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.	Meets Standard	Cash is safeguarded from loss. If cash is received in the mail, the detainee is notified of the amount of cash in the mail and the cash is placed on the detainee's account. The detainee is provided a receipt. Discrepancies are investigated and resolved.
16. Original identity documents (e.g., passports, birth certificates) are immediately removed and forwarded to ICE staff for placement in A-files.	Meets Standard	
17. Staff provides the detainee a copy of his/her identity document(s) upon request.	Meets Standard	
18. Staff disposes of prohibited items found in detainee mail in accordance with the "Control and Disposition of Contraband" Standard or the similar prevailing policy in IGSA's.	Meets Standard	Contraband is disposed of per the local policy, which is in accordance with the Contraband Standard. Illegal contraband is turned over to the investigative branch of the sheriff's office for investigation and possible prosecution.
19. Every indigent detainee has the opportunity to mail, at government expense, reasonable correspondence about a legal matter, in three one ounce letters per week and packages deemed necessary by ICE.	Meets Standard	Indigent detainees are provided postage to mail three letters per week and a reasonable amount of legal mail.

CORRESPONDENCE AND OTHER MAIL (Key: D)		
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COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
20. The facility has a system for detainees to purchase stamps and for mailing all special correspondence and a minimum of 5 pieces of general correspondence per week.	Meets Standard	Detainees may purchase as many stamps and mail as many letters as they desire.
21. The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	Meets Standard	

CORRESPONDENCE AND OTHER MAIL – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p><b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Detainees may send and receive correspondence and other mail in a timely and safe manner through an established internal mail system, as required by this standard. Mail is delivered and sent on a regular schedule and in a timely manner, and limitations exist only for the purposes of security and order. The local handbook provides guidelines to detainees for receiving and sending mail, which include the mailing address of the facility and instructions on how envelopes are to be addressed. The handbook also covers how to obtain writing implements, paper, and envelopes. The National Detainee Handbook and local handbook also combine to notify detainees of the following: that a detainee may send mail, the procedure for sending mail, and instructions on how outgoing mail must be addressed; that special correspondence may only be opened in the detainee's presence, and may be inspected for contraband, but not read; and the definition of special correspondence. The notification does not clearly state that it is the detainee's responsibility to inform senders of special mail of the labeling requirement nor does it include instructions on the proper labeling for special correspondence. The notifications provide information about packages and a description of mail which may be rejected by the facility and which the detainee will not be permitted to keep in his/her possession. The notification states that identity documents are seized and copies may be requested from ICE. The notification does not state that identity documents may be used by ICE as evidence or as otherwise appropriate. The notifications provide the rules for providing indigent and certain other detainees free postage. The notifications provided to detainees do not include information on the procedures for purchasing postage, although postage items are included on the commissary list. Detainees may receive packages containing certain personal items and packages marked as legal mail can be received.</p> <p>The facility has policies addressing the issue of acceptable and non-acceptable mail.</p> <p>Detainees are not permitted to receive compensation or anything of value for correspondence with the news media. A detainee may not act as a reporter or publish under a byline. Representatives of the news media are permitted to initiate correspondence with a detainee. This correspondence is treated as special correspondence only when properly labeled.</p> <p>To evaluate this standard, employees and detainees were interviewed; forms, policy and the local and national detainee handbooks were reviewed; and housing unit postings were inspected.</p>	
<p><b>Overall Rating:</b> Meets Standard</p>	
<p><b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)</p>	<p><b>Completion Date:</b> 2/23/2018</p>
<p><b>Reviewer Signature (for printed form submission):</b></p>	

**DETAINEE HANDBOOK (Key: E)**

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The detainee handbook is written in English and translated into Spanish, or into the next most-prevalent Language(s).	Meets Standard	Detainees are issued a facility handbook and the ICE National Detainee Handbook. The handbooks are available in English and Spanish. Detainees are required to sign for the handbooks.
2. The handbook is supplemented by the facility orientation video, where one is provided.	Meets Standard	
3. All staff members receive a handbook and training regarding the handbook contents.	Meets Standard	Interviews with staff and the OIC confirms that staff are provided copies of the handbooks.
4. The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.	Meets Standard	The handbooks are revised as necessary. Procedures are in place for the immediate communication of changes to staff members and detainees.
5. There an annual review of the handbook by a designated committee or staff member.	Meets Standard	The handbooks are reviewed annually by designated personnel and forwarded to the OIC for approval.
6. The detainee handbook addresses the following issues: <ul style="list-style-type: none"> <li>• Personal Items permitted to be retained by the detainee; and</li> <li>• Initial issue of clothes, bedding and personal hygiene items.</li> </ul>	Meets Standard	The handbooks address the bulleted requirements listed in this component.
7. The detainee handbook states in clear language the basic detainee responsibilities.	Meets Standard	
8. The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.	Meets Standard	
9. The handbook states when a medical examination will be conducted.	Meets Standard	The handbook states that detainees will receive a medical examination within fourteen days of arrival to the facility.

**DETAINEE HANDBOOK (Key: E)**

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COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
10. The handbook describes the facility, housing units, dayrooms, in-dorm activities, and special housing units.	Meets Standard	This component was rated deficient during the last inspection due to the handbook not describing housing pods, dayrooms and special housing units' activities. This deficiency has been corrected. The handbook describes the housing pods, dayrooms and special housing units.
11. The handbook describes official count times and count procedures; meal times and feeding procedures; procedures for medical or religious diets; smoking policy; clothing exchange schedules; and, if authorized, clothes washing and drying procedures, and expected personal hygiene practices.	Meets Standard	The handbook describes each of the items in this component except count times and feeding procedures. A waiver was issued from ICE/Detention Management Division on 04/16/2014 addressing count times. The facility is not required to state the specific times for counts for security purposes. This is a non-smoking facility.
12. The handbook describe times and procedures for obtaining disposable razors, and allows that detainees attending court will be afforded the opportunity to shave first.	Meets Standard	The handbook outlines the procedure for obtaining and returning disposable razors and informs detainees that they can shave prior to appearing in court.
13. The handbook describes barber hours and hair cutting restrictions.	Meets Standard	This component was rated deficient during the last inspection due to the handbook not describing hair cutting restrictions. This deficiency has been corrected. The handbook describes the barber hours and hair cutting restrictions.
14. The handbook describes the telephone policy; debit card procedures; direct and free calls; locations of telephones; policy when telephone demand is high; and policy and procedures for emergency phone calls.	Meets Standard	The handbooks address all the items listed in this component.
15. The handbook addresses religious programming.	Meets Standard	

**DETAINEE HANDBOOK (Key: E)**

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COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
16. The handbook states times and procedures for commissary or vending machine usage, where available.	Meets Standard	This component was rated deficient during the last inspection due to the handbook not addressing commissary procedures. This deficiency has been corrected.
17. The handbook describes the detainee voluntary work program.	Meets Standard	This component was rated deficient during the last inspection due to the handbook not describing the voluntary work program. This deficiency has been corrected. The handbook describes the voluntary work program. ICE detainees are not authorized to participate in the volunteer work program.
18. The handbook describes the library location and hours of operation, and law library procedures and schedules.	Meets Standard	
19. The handbook describes attorney and regular visitation hours, policies, and procedures.	Meets Standard	General public and attorney visiting rules, procedures, hours and restrictions are addressed in the local handbook.
20. The handbook describes the facility contraband policy.	Meets Standard	
21. The handbook describes the facility visiting hours and schedule, and visiting rules and regulations.	Meets Standard	
22. The handbook describes the correspondence policy and procedures.	Meets Standard	
23. The handbook describes the detainee disciplinary policy and procedures, including: <ul style="list-style-type: none"> <li>• Prohibited acts and severity scale sanctions;</li> <li>• Time limits in the Disciplinary Process; and</li> <li>• Summary of the Disciplinary Process.</li> </ul>	Meets Standard	The handbook provides a summary of the policies and procedures within the disciplinary program, including the prohibited acts, severity scale sanctions and the time limits within the process.

**DETAINEE HANDBOOK (Key: E)**

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COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
24. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> <li>• Informal (if used) and formal grievance procedures;</li> <li>• The appeals process;</li> <li>• In CDF facilities: procedures for filing an appeal of a grievance with ICE.</li> <li>• Staff/detainee availability to help during the grievance process.</li> <li>• Guarantee against staff retaliation for filing/pursuing a grievance.</li> <li>• How to file a complaint about officer misconduct with the Department of Homeland Security.</li> </ul>	Meets Standard	All the bulleted requirements of this component are included in either the local handbook and/or the ICE National Detainee Handbook.
25. The detainee handbook describes the medical sick call procedures for general population and segregation.	Meets Standard	
26. The handbook describes the facility recreation policy including: <ul style="list-style-type: none"> <li>• Outdoor recreation hours.</li> <li>• Indoor recreation hours.</li> </ul>	Meets Standard	This component was rated deficient during the last inspection due to the handbook not describing the policy and hours for outdoor recreation. This deficiency has been corrected. The handbook describes the policy and schedule for indoor recreation and gym recreation, which is considered an outdoor recreation area. The area used for outside recreation/gymnasium is designed to provide for sunshine and exchange of free-flowing outdoor air sufficient to reflect climate conditions.
27. The handbook describes the detainee dress code for daily living; and work assignments.	Meets Standard	The handbook addresses the dress code for daily living. ICE detainees do not participate in the volunteer work program.
28. The handbook specifies the rights and responsibilities of all detainees.	Meets Standard	

**DETAINEE HANDBOOK – REVIEWER SUMMARY**

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



**DETAINEE HANDBOOK – REVIEWER SUMMARY**

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

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

Detainees are provided a copy of the ICE National Detainee Handbook and the local supplement during the intake process. Detainees are required to sign a form acknowledging receipt of the handbooks and the form is placed in the detainee’s file. The site-specific handbook, written in English and Spanish, describes facility rules, programs, procedures and requirements that each detainee must comply with during their detention. The handbooks state that: the facility conducts routine searches of a detainee's person/property and common areas; unscheduled searches of common areas are conducted when deemed necessary; and random searches may be conducted when detainees enter and/or leave a building or area at the facility.

Translation assistance is available for detainees exhibiting literacy or language problems, and to those who request it. The facility provides an orientation to the facility during the intake process. Interviews with staff confirms that procedures in place ensure that if a detainee cannot read, or does not understand the language of the handbook, that the materials will be presented to the detainee in a manner the detainee can understand.

The handbooks address how detainees report allegations of abuse and civil rights violations, along with violations of officer misconduct directly to ICE management or the DHS Office of Inspector General. The facility provides written guidance through policy and training to personnel to ensure that treatment of ICE detainees is consistent with these standards.

Review of handbook content and interviews with staff revealed the handbooks serve as an overview to the services, programs and opportunities available to detainees during their stay and as a guide to detention policies, rules and procedures. The handbook is free from derogatory or insensitive statements about a detainee's religion or culture.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** (b)(6),(b)(7)(C)

**Completion Date:** 2/23/2018

**Reviewer Signature (for printed form submission):**

<b>FOOD SERVICE (Key: F)</b>		
<b>Policy:</b> EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The food service program is under the direct supervision of a professionally trained and certified food service administrator. Responsibilities of cooks and cook foremen are in writing. The Food Service Administrator (FSA) determines the responsibilities of the Food Service Staff.	Meets Standard	The food service program is operated by Aramark Corrections and is under the direction of a trained food service director (FSD), who is ServSafe certified. Staff responsibilities are determined by the FSD and are outlined in written job descriptions. The FSD is responsible for planning, controlling, directing, and evaluating the food service operation.
2. The Cook Supervisor is on duty on days when the FSA is off duty and vice versa.	Meets Standard	An assistant FSD (AFSD) is on duty when the FSD is off duty.
3. The FSA provides food service employees with training that specifically addresses detainee-related issues. <ul style="list-style-type: none"> <li>• In ICE Facilities this includes a review of the ICE "Food Service" standard</li> </ul>	Meets Standard	The FSD and AFSD provide training to lead cooks and cook supervisors relative to their assigned duties and responsibilities. The training includes working in food service within a detention facility. ICE detainees do not participate in the voluntary work program.
4. Knife cabinets close with an approved locking device, and the on-duty cook foreman maintains control of the key that locks the device.	Meets Standard	The knife cabinet closes with an approved locking device. Tools are properly secured with an approved locking device. Food service staff maintain control of the key that locks the device.
5. All knives not in a secure cutting room are physically secured to the workstation and staff directly supervises detainees using knives at these workstations. Staff monitors the condition of knives and dining utensils.	Meets Standard	There is no secure cutting room. Knives are tethered with a cable and lock to the workstations. Non-ICE detainees are supervised by food service personnel. The condition of the knives and utensils is monitored by food service personnel.
6. When necessary, special procedures govern the handling of food items that pose a security threat.	Meets Standard	
7. Operating procedures include daily searches (shakedowns) of detainee work areas.	Meets Standard	

<b>FOOD SERVICE (Key: F)</b>		
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<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
8. The FSA monitors staff implementation of the facility's population counts procedures. Staff is trained in count procedures.	Meets Standard	During this inspection it was observed that counts are being conducted by officers, who have been trained in count procedures.
9. The detainees assigned to the food service department look neat and clean. Their clothing and grooming comply with the "Food Service" standard.	Meets Standard	Non-ICE detainees working in food service were dressed in clean, neat and appropriate uniforms in accordance with industry standards. ICE detainees do not participate in the voluntary work program.
10. The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	Meets Standard	Non-ICE detainee job descriptions are reviewed and updated annually by the FSD. ICE detainees do not participate in the voluntary work program.
11. The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	Meets Standard	Non-ICE detainee workers receive training regarding the rules and procedures of the food service department. ICE detainees do not participate in the voluntary work program.
12. During orientation and training session(s), the CS explains and demonstrates: <ul style="list-style-type: none"> <li>• Safe work practices and methods;</li> <li>• Safety features of individual products/pieces of equipment; and</li> <li>• Training covers the safe handling of hazardous material[s] the detainees are likely to encounter in their work.</li> </ul>	Meets Standard	Training provided to the non-ICE detainee workers assigned to food service includes all the bulleted items listed in this component. ICE detainees do not participate in the voluntary work program.
13. The Cook Supervisor documents all training in individual detainee detention files.	Meets Standard	Orientation training given by the FSD instructs detainee workers in each of the items listed in this component. Training is documented and maintained in the detainee's kitchen work file. ICE detainees do not work in food service.
14. Detainees at CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSA's are subject to local and state rules and regulations regarding detainee pay.	Meets Standard	Non-ICE detainees are paid consistent with local rules and regulations. ICE detainees do not work in this IGSA facility.

FOOD SERVICE (Key: F)		
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COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
15. Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.	Meets Standard	Three meals, including at least two hot meals, are served daily, with no more than fourteen hours between the evening meal and following day's breakfast meal.
16. For cafeteria style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	N/A	Cafeteria style operations are not used at this facility. All detainees are served meals in the housing units via satellite food trays.
17. The facility has a standard 35-day menu cycle. IGSA's use a 35 day or similar system for rotating meals.	Meets Standard	The facility uses a standard twenty-eight-day-cycle menu for rotating meals.
18. The FSA or facility considers the ethnic diversity of the facility's detainee population when developing menu cycles (Provide examples).	Meets Standard	The food service department serves a variety of food, considering the ethnic diversity of the population. Examples include tacos, rice and beans, spaghetti and meatloaf, chicken patties, goulash, stroganoff, tamale pie, Asian fried rice and Spanish rice. Pork products are not used or served at this facility.
19. A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	Meets Standard	All menus have been reviewed and certified annually by a registered dietitian to ensure conformity with U.S. Recommended Daily Allowances (RDA).
20. The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	Meets Standard	
21. The Cook Foreman has the authority to change menu items if necessary. <ul style="list-style-type: none"> <li>If yes, documenting each substitution, along with its justification</li> <li>With copy to FSA</li> </ul>	Meets Standard	A food service supervisor has the authority to change menu items, if needed. Documentation of the menu substitution justification for the change is forwarded to the FSD.
22. All staff and volunteers know and adhere to written "food preparation" procedures.	Meets Standard	

FOOD SERVICE (Key: F)		
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COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	Meets Standard	Detainees whose religious beliefs require adherence to particular religious dietary laws are referred to the programs supervisor (PS).
24. A common-fare menu available to detainees whose dietary requirements cannot be met on the main line. <ul style="list-style-type: none"> <li>• Changes to the planned common-fare menu can be made at the facility level;</li> <li>• Hot entrees are offered three times a week;</li> <li>• The common-fare menus satisfy nutritional recommended daily allowances (RDAs);</li> <li>• Staff routinely provide hot water for instant beverages and foods;</li> <li>• Common-fare meals are served with:</li> <li>• Disposable plates and utensils.</li> <li>• Reusable plates and utensils.</li> <li>• Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items.</li> </ul>	Meets Standard	A religious/common-fare program is available to detainees whose religious dietary requirements cannot be met on the regular menu. The common-fare menu/program includes the bulleted items listed in this component.
25. A supervisor at the command level must approve a detainee's removal from the Common-Fare Program.	Meets Standard	
26. The Warden, in conjunction with the chaplain and/or local religious leaders, provides the FSA a schedule of the ceremonial meals for the following calendar year.	Meets Standard	
27. The common-fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. <ul style="list-style-type: none"> <li>• Muslims fasting during Ramadan receive their meals after sundown.</li> <li>• Jews who observe Passover but do not participate in the Common-Fare Program receive the same Kosher-for- Passover meals as those who do participate.</li> <li>• Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent.</li> </ul>	Meets Standard	The common fare program is available to accommodate detainees whose religious dietary requirements cannot be met on the main menu. The program includes each of the listed requirements in this component. There were no detainees receiving the common-fare diet during the inspection.
28. The food service program addresses medical diets.	Meets Standard	The food service department provides medical diets as prescribed by the medical department. There were twenty-eight detainees receiving medical diets during the inspection.
29. Satellite-feeding programs follow guidelines for proper sanitation.	Meets Standard	

<b>FOOD SERVICE (Key: F)</b>		
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<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
30. Hot and cold foods are maintained at the prescribed, "safe" temperature(s) while being served.	Meets Standard	Temperatures of plated foods were checked during the lunch meal on 02/21/2018. All items were found to be within the proper temperature range.
31. All meals are provided in nutritionally adequate portions.	Meets Standard	The menus have been certified to be nutritionally adequate by a registered dietitian. Portion sizes were observed to be provided in accordance with the listed portion sizes approved by the dietitian.
32. Food is not used to punish or reward detainees based upon behavior.	Meets Standard	Policy prohibits nutraloaf being served to ICE detainees.
33. The food service staff instructs detainee volunteers on: <ul style="list-style-type: none"> <li>• Personal cleanliness and hygiene;</li> <li>• Sanitary techniques for preparing, storing, and serving food; and</li> <li>• The sanitary operation, care, and maintenance of equipment.</li> </ul>	Meets Standard	All the bulleted training requirements of this component are provided to the non-ICE detainee food service workers. ICE detainees do not participate in the voluntary work program.
34. Everyone working in the food service department complies with food safety and sanitation requirements.	Meets Standard	This component was rated deficient during the last inspection due to cracked tiles, missing grout in the floor of the kitchen areas, and food debris and dirt build-up on the floors. This deficiency has been corrected. The kitchen floor has been replaced with a new epoxy-floor. Sanitation levels were observed to be maintained at an average level.
35. Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment. <ul style="list-style-type: none"> <li>• Who conducts the inspections?</li> </ul>	Meets Standard	Daily inspections are conducted by food service personnel. A weekly inspection is conducted by the FSD.
36. Equipment is inspected for compliance with health and safety codes and regulations. <ul style="list-style-type: none"> <li>• When was the most recent inspection?</li> <li>• Which agency conducted the inspection?</li> </ul>	Meets Standard	A review of the Ohio Department of Health inspection of 01/23/2018 and the Ohio Department of Agriculture inspection of 10/05/2017 confirms that the food service department complies with health and safety codes and regulations.

<b>FOOD SERVICE (Key: F)</b>		
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<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
37. Reports of discrepancies are forwarded to the Warden or designated department head, and corrective action is scheduled and completed.	Meets Standard	
38. Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal.	Meets Standard	A review of logs documenting the temperatures of the dishwashing machine confirms these checks are completed three times daily. Appropriate temperatures were observed during the inspection.
39. Staff documents the results of every refrigerator/freezer temperature check.	Meets Standard	Staff document refrigerator/freezer temperatures at the beginning of the shift, and after the evening shift. A review of documentation confirms that temperatures recorded are within acceptable ranges.
40. The cleaning schedule for each food service area is conspicuously posted.	Meets Standard	
41. Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	Meets Standard	Food service staff inspects all incoming shipments for damage, contamination and pest infestation. Observation of the storeroom area reveals no evidence of insect, rodent or vermin infestation.
42. Storage areas are locked when not in use.	Meets Standard	

**FOOD SERVICE – REVIEWER SUMMARY**  
*(Use following format for dates: mm/dd/yyyy)*

**FOOD SERVICE – REVIEWER SUMMARY**

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

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

The food service department is operated by Aramark Corrections. The food service program is providing detainees with nutritious and attractively presented meals. The meals were observed to be prepared, plated and served within the proper time and temperature requirements.

Non-ICE detainee workers are provided the same meals as the population and may not prepare special food. ICE detainees do not participate in the volunteer work program. The use of tobacco is prohibited. The number of non-ICE detainees assigned to the food service area is based on need and approved by the FSD in conjunction with the OIC. All food service personnel receive a pre-employment medical examination. Daily hygiene checks are conducted at the start of each work period. Non-ICE detainee workers, identified with health issues or concerns, are not permitted to work until cleared by the medical department. A roster of detainees receiving religious or medical diets is provided to the FSD daily. The FSD does not issue special diet identification cards at this IGSA facility.

Sack meals are provided for detainees being transported from the facility and arriving or departing between scheduled meal hours. Sack meal ingredients are consistent with the food service standard. With the OIC's concurrence, the food service lead cook may make temporary, nutritionally equal substitutions for fresh seasonal produce that violate no religious dietary laws.

Sanitation in the food service area was observed to be maintained at an average level. Kitchenware and food contact surfaces are washed, rinsed and sanitized after each use and after any interruption of operation. Garbage and trash is collected and removed as required. The refuse containers have sufficient capacity for the volume.

Manufacturer's information about the operation, cleaning and care of the equipment is maintained by the FSD. The information has been used to develop the cleaning and sanitation procedures for the equipment. All equipment is installed according to manufacturer's recommendations. A sink with three labeled compartments, all with hot and cold water, is utilized for manually washing, rinsing and sanitizing pots, pans, utensils and equipment. Observation of this process reveals proper sanitizing procedures are being followed. The dishwashing machine includes automatic dispensers and is maintained in good working order. Plates, cups, utensils and equipment placed in the machine are exposed to all cycles.

An approved, fixed, fire-suppression system is installed in ventilation hoods over grills and open flame devices. A review of documentation confirms that a qualified contractor inspects the system every six months. The fire-suppression system is audible and is connected to the control room's annunciator panel. All gas fired equipment is equipped with automatic shut-off controls.

During the evaluation of this standard, an interview with the FSD and a review of menus, logs, inspection reports and supporting documentation was conducted. Concerns were expressed in the female housing unit regarding the serving of cold food, sour milk and poor quality of food. Interviews in the male housing units revealed no issues or concerns with the meals. Observation of the preparation of meals and temperature checks indicates that meals are served at the proper temperature. Interviews with the FSD confirmed that should issues arise regarding spoiled or soured milk, that those items would be replaced. Milk cartons were observed to be printed with used by dates ten days past the inspection date. The menus have been analyzed by a registered dietitian and certified to be nutritionally adequate and meet the recommended dietary requirements (RDA). Observation of the food tray makeup operation revealed portion sizes were consistent with the dietitian approved menus.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** (b)(6),(b)(7)(C)

**Completion Date:** 2/23/2018

**Reviewer Signature (for printed form submission):**



**FUNDS AND PERSONAL PROPERTY (Key: G)**

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

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Detainee funds and valuables are properly separated, stored, and are accessible only by designated supervisor(s).	Meets Standard	Detainee funds and valuables are removed from the detainee, inventoried and stored during the admission process. Only designated personnel have access to the property storage area.
2. Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	Meets Standard	
3. Staff itemizes the baggage and personal property of arriving detainees (including funds and valuables). For IGSA's and CDFs, using a personal property inventory form that meets the ICE standard?	Meets Standard	Intake officers at this IGSA use a local property inventory receipt form to itemize and categorize baggage, personal property, funds and valuables. Inventory forms adhere to the requirements of the standard. Detainees are required to sign the completed inventory form and are provided a copy.
4. Staff forwards an arriving detainee's medication to the medical staff.	Meets Standard	
5. Audits of baggage and non-valuable property occur each quarter and audits are logged and verified.	Meets Standard	Audits of non-valuable property and baggage are conducted and documented on a quarterly basis.
6. Two officers are present during the processing of detainee funds and valuables during in-processing to the facility. Both officers verify funds and valuables.	Meets Standard	Two officers process and verify detainee funds and valuables during the booking process.
7. Staff searches arriving detainees and their personal property for contraband.	Meets Standard	Booking personnel search arriving detainees' personal property during the intake process for contraband.
8. Staff procedures follow written policy for returning forgotten property to detainees.	Meets Standard	
9. Property discrepancies are immediately reported to the CDEO or Chief of Security.	Meets Standard	Detainee property discrepancies are immediately reported, in writing, to the OIC and ICE.
10. Staff follows written procedures when returning property to detainees.	Meets Standard	

**FUNDS AND PERSONAL PROPERTY (Key: G)**

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

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
11. CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.	Meets Standard	All claims of missing or stolen property are documented and investigated by the property room supervisor. Validated cases would result in reimbursement. Policy requires that ICE is notified immediately of all claims and investigation outcomes.
12. The facility attempts to notify an out-processed detainee that he/she left property in the facility: <ul style="list-style-type: none"> <li>• By sending written notice to the detainee's last known address;</li> <li>• Via certified mail; and</li> <li>• The notice state that the detainee has 30 days in which to claim the property, after which it will be considered abandoned.</li> </ul>	Meets Standard	If detainee property is left at the facility, the items are forwarded to ICE for handling in accordance with established protocols.
13. The facility disposes of abandoned property in accordance with written procedures. <ul style="list-style-type: none"> <li>• If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE.</li> </ul>	Meets Standard	Policy requires that all abandoned property be immediately forwarded to ICE.

**FUNDS AND PERSONAL PROPERTY – REVIEWER SUMMARY**

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

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

Policy reviews, employee interviews and inspection of the property room revealed that practices are sufficient to ensure that detainee property is safeguarded and controlled under conditions that enhance the security of detainee property. Detainees are permitted to keep in their possession reasonable quantities of personal property, if the items do not pose a threat to the security or good order of the facility. The handbook notifies the detainees of the policies and procedures concerning items they may retain in their possession, rules for storing or mailing unauthorized property, the procedures for claiming property, and the procedures for filing a property claim.

To prevent overcrowding and related storage problems, the facility allows extra property to be sent to a third party of the detainee's choice. If detainee property is shipped, it is inventoried, and a record is maintained. A copy of the record is placed in the detention file.

Identity documents are maintained in the detainee's A-file, which is located at the ICE sub-office. ICE stated that upon written request, detainees are provided with ICE/ERO certified true and correct copies of their identity document(s).

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** (b)(6),(b)(7)(C)

**Completion Date:** 2/23/2018

**FUNDS AND PERSONAL PROPERTY – REVIEWER SUMMARY**

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

**Reviewer Signature (for printed form submission):**

**DETAINEE GRIEVANCE PROCEDURES (Key: H)**

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Written procedures provide for the informal resolution of oral grievances (Not mandatory). <ul style="list-style-type: none"> <li>• If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff.</li> </ul>	Meets Standard	The handbook and written procedures provide for an informal grievance process. Detainees have five days after the event to make their concern known to staff.
2. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. <ul style="list-style-type: none"> <li>• Detainees may seek help from other detainees or facility staff when preparing a grievance.</li> <li>• Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary.</li> </ul>	Meets Standard	Detainees have access to the grievance system using formal procedures. Detainees may seek assistance from other detainees, facility staff, family members, legal representatives or members of non-governmental organizations, when needed. Illiterate, disabled or non-English speaking detainees receive special assistance when necessary.
3. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	Meets Standard	
4. There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodged a complaint: <ul style="list-style-type: none"> <li>• If yes, explain.</li> </ul>	Meets Standard	There have been no substantiated or documented cases of staff members harassing detainees who have filed a complaint.
5. Procedures include maintaining a Detainee Grievance Log. <ul style="list-style-type: none"> <li>• If not, an alternative acceptable record keeping system is maintained.</li> <li>• "Nuisance complaints" are identified in the records.</li> <li>• For quality control purposes, staff document nuisance complaints received but not filed.</li> </ul>	Meets Standard	A grievance log is maintained that includes the documentation listed in this component. A copy of the grievance disposition is given to the detainee and another copy is placed in the detainee's detention file. Nuisance complaints are documented when filed.
6. Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	Meets Standard	Per policy, grievances that include staff misconduct are handled as emergency grievances and will be forwarded to ICE.

<b>DETAINEE GRIEVANCE PROCEDURES – REVIEWER SUMMARY</b> <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p><b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>The grievance system offers detainees an informal and a formal avenue to address issues and concerns without fear of reprisal. Responses to grievances can be appealed. Detainees may make requests to staff using the Inmate Services Request Form. If not satisfied with the response from staff on the request form, they may submit a request to receive a grievance form to lodge a formal complaint. Detainee grievance forms are not readily accessible to detainees in the housing units. The facility assists special needs detainees in preparing and pursuing a grievance. Translation assistance is provided upon request or as needed.</p> <p>Interviews with staff and a review of policy, procedures and handbooks indicated that detainees are provided information regarding how to communicate directly with ERO and how to appeal the decision to the OIC. Interviews with staff confirms that ERO would be notified and provided a copy of all grievances reported by detainees, including staff misconduct allegations. The facility provides one independent appeal that excludes individuals previously involved in the decision-making process for the same grievance. The OIC is the final arbitrator of all grievances in the facility. A copy of the grievance remains in the detainee's detention file. Staff do not harass, discipline, punish, or otherwise retaliate against a detainee lodging a complaint.</p> <p>The evaluation of this standard is based on review of policy, handbooks and the grievance log; and interviews with the grievance coordinator, facility staff and detainees. There have been thirteen ICE detainee grievances filed during the past twelve months, with none found in favor of the detainee.</p>	
<p><b>Overall Rating:</b> Meets Standard</p>	
<p><b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)</p>	<p><b>Completion Date:</b> 2/23/2018</p>
<p><b>Reviewer Signature (for printed form submission):</b></p>	

**GROUP LEGAL RIGHTS PRESENTATIONS (Key: I)**

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

Standard N/A

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

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

GROUP LEGAL RIGHTS PRESENTATIONS (Key: I)		
Policy: Facilities housing ICE detainees shall permit AUTHORIZE persons to make presentations to groups of detainees for the purpose of informing them of U.S. immigration law and procedures, consistent with the security and orderly operation of each facility. ICE encourages such presentations, which instruct detainees about the immigration system and their rights and options within it.		
Standard N/A		
Click the above button if No Group Presentations were conducted within the past 12 months. (All Line Items and standard will be rated "N/A")		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
12. Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee; and the reasons for suspension are documented. The Headquarters Office for Detention and Removal, Field Operations and Detention management Division, is notified when a group or individual is suspended from making presentations.	Meets Standard	
13. The facility plays ICE-approved videotaped presentations on legal rights at regular opportunities, at the request of outside organizations.	Meets Standard	
14. A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request	Meets Standard	The group legal rights procedure is posted in the housing units.

GROUP LEGAL RIGHTS PRESENTATIONS – REVIEWER SUMMARY	
(Use following format for dates: mm/dd/yyyy)	
<b>Overall Remarks:</b> (Record significant facts, observations, other sources used, etc.)(5000 Character Max)	
Attorneys and legal representatives interested in making a group presentation on legal rights submit a written request to ICE. Legal assistants/paralegals are permitted to conduct a group presentation for legal rights when accompanied by a supervising attorney/legal representative, who validates the supervisory relationship in writing prior to the presentation. ICE notifies the OIC upon approving a group presentation. The OIC contacts the designated party and arranges a mutually acceptable date and time for the presentation. Presentations are scheduled during normal legal visiting hours, excluding weekends and holidays. Presenters’ arrival is required to be timely in order to facilitate processing.	
ABLE has been approved to make presentations in the facility. Presentations are scheduled every Wednesday. Presenters do not charge a fee or solicit business during presentations. Presenters may distribute a reasonable amount of pre-approved written materials to detainees and attending staff. Distribution of unapproved materials may result in suspension of presentation privileges. If presenters wish to distribute an amount of materials too voluminous to do so during a presentation, those materials can be made available in the law library upon request.	
This standard was evaluated via review of policy and the local handbook, inspection of group presentation procedure posters, and interviews with staff.	
<b>Overall Rating:</b> Meets Standard	
<b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)	<b>Completion Date:</b> 2/23/2018
<b>Reviewer Signature (for printed form submission):</b>	

<b>Issuance and Exchange of Clothing, Bedding, and Towels (Key: J)</b>		
<b>Policy:</b> ICE REQUIRES THAT ALL FACILITIES HOUSING ICE DETAINEES PROVIDE CLEAN CLOTHING, BEDDING, LINENS AND TOWELS TO EVERY ICE DETAINEE UPON ARRIVAL. FURTHER, FACILITIES SHALL PROVIDE ICE DETAINEES WITH REGULAR EXCHANGES OF CLOTHING, LINENS, AND TOWELS FOR AS LONG AS THEY REMAIN IN DETENTION.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, and towels. <ul style="list-style-type: none"> <li>• The supply of these items exceeds the minimum required for the number of detainees.</li> </ul>	Meets Standard	Policy addresses the regular issuance and exchange of clothing, bedding, linens and towels. Observation of the supply of these items indicated that quantities on-hand exceed the minimum required for the number of detainees housed at this facility.
2. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive: <ul style="list-style-type: none"> <li>• One uniform shirt and one pair of uniform pants, or one jumpsuit;</li> <li>• One pair of socks;</li> <li>• One pair of underwear (Daily change); and</li> <li>• One pair of facility-issued footwear.</li> </ul>	Meets Standard	The standard issue of clothing consists of four uniforms, four pairs of underwear, four t-shirts, four bras (females), four pairs of socks, one jacket and one pair of footwear. The clothing appears clean, temperature appropriate and presentable.
3. Additional clothing is available for changing weather conditions, or as seasonally appropriate.	Meets Standard	
4. New detainees are issued clean bedding, linens, and towels. They receive at a minimum: <ul style="list-style-type: none"> <li>• One mattress;</li> <li>• One blanket;</li> <li>• Two sheets;</li> <li>• One pillowcase;</li> <li>• One towel; and</li> <li>• Additional blankets are issued based on local weather conditions.</li> </ul>	Does Not Meet Standard	This component was rated deficient during the last inspection due to pillows and pillowcases not being issued. All new detainees receive the items and the quantities listed in this component, except pillows and pillowcases. Additional clothing and bedding are provided to address temperature changes or medical needs. This is a repeat finding.
5. Detainees assigned to special work areas are clothed in accordance with the requirements of the job.	Meets Standard	Non-ICE detainees assigned to special work areas are clothed appropriately in accordance with the requirements of the job. ICE detainees do not participate in the voluntary work program.



Issuance and Exchange of Clothing, Bedding, and Towels (Key: J)		
<b>Policy:</b> ICE REQUIRES THAT ALL FACILITIES HOUSING ICE DETAINEES PROVIDE CLEAN CLOTHING, BEDDING, LINENS AND TOWELS TO EVERY ICE DETAINEE UPON ARRIVAL. FURTHER, FACILITIES SHALL PROVIDE ICE DETAINEES WITH REGULAR EXCHANGES OF CLOTHING, LINENS, AND TOWELS FOR AS LONG AS THEY REMAIN IN DETENTION.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
6. Detainees are provided clean clothing, linen and towels. <ul style="list-style-type: none"> <li>• Socks and undergarments - exchanged daily.</li> <li>• Outer garments - twice weekly.</li> <li>• Sheets - weekly.</li> <li>• Towels - weekly.</li> <li>• Pillowcases - weekly.</li> </ul>	Does Not Meet Standard	This component was rated deficient during the last inspection due to pillows and pillowcases not being issued. The laundry schedule and the amount of clothing, linens and towels issued is adequate to ensure that detainees are provided an exchange of each of the items listed in this component, with the exception pillowcases. Pillowcases are not issued at the facility. This is a repeat finding.
7. Food service detainee volunteer workers are permitted to exchange outer garments daily.	Meets Standard	Non-ICE detainees assigned to food service are permitted to exchange clothing daily. ICE detainees do not participate in the voluntary work program.
8. Volunteer detainee workers are permitted to exchange outer garments more frequently.	Meets Standard	Non-ICE detainee workers may exchange outer garments more frequently when needed. ICE detainees do not participate in the voluntary work program.

Issuance and Exchange of Clothing, Bedding, and Towels – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
<b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Detainees are provided with clean clothing, bedding, linens and towels upon admission. Laundry schedules provide for the regular exchange of clothing and bedding. The evaluation of this standard was based on review of policy and procedures, observations of laundry and clothing issue processes, and interviews with staff and detainees.	
<b>Overall Rating:</b> Meets Standard	
<b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)	<b>Completion Date:</b> 2/23/2018
<b>Reviewer Signature (for printed form submission):</b>	

<b>Marriage Requests (Key: K)</b>		
<b>POLICY:</b> ALL DETAINEE MARRIAGE REQUESTS WILL RECEIVE CASE-BY-CASE CONSIDERATION FROM ICE MANAGEMENT.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The Field Office considers detainee marriage requests on a case-by-case basis.	Meets Standard	Policy requires that when a detainee submits a request to be married, the FOD is notified for approval or denial of the request. The FOD considers all marriage requests on a case-by-case basis.
2. The Field Office Director reviews every marriage request rejected by a Warden/OIC or IGSA. Rejections are documented.	Meets Standard	The FOD makes the decision to approve or deny all marriage requests. Rejections are documented. The OIC is not involved in the marriage process and therefore makes no decisions on marriage requests.
3. It is standard practice to require a written request for permission to marry.	Meets Standard	ICE detainees wishing to marry must submit a written request to be married.
4. The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	Meets Standard	
5. The Warden/OIC provides a written copy of his/her decision to the detainee and his/her legal representative.	Meets Standard	ICE generates all notifications to the detainee and their legal representatives regarding the approval or denial of the marriage request.
6. When permission is denied, the Warden/OIC states the basis for his/her decision.	Meets Standard	ICE will inform the detainee when permission to marry is denied.
7. The Warden/OIC provides the detainee with a place and time to make wedding arrangements.	Meets Standard	Should ICE approve a marriage request, the wedding ceremony is held in a timely manner at the facility.

**Marriage Requests – REVIEWER SUMMARY**  
(Use following format for dates: mm/dd/yyyy)

**Marriage Requests – REVIEWER SUMMARY**

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

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

Interviews with ICE officials indicated that all the requirements within the standard on detainee marriages are performed by ICE. Detainees are informed about the marriage request procedures through the local handbook and the National Detainee Handbook.

Approval or denial of marriage requests is decided by the FOD or designee. ICE notifies the detainee, in writing, of the reasons for the denial within thirty days from the date of request. Detainees may seek legal assistance throughout the marriage application process. Guidelines for denying a detainee's marriage request includes the following: the detainee is not legally eligible to be married; the detainee is not mentally competent, as determined by a qualified medical practitioner; the intended spouse has not affirmed, in writing, the intent to marry the detainee; the marriage would present a threat to the security or orderly operation of the facility; or there are compelling government interests for denying the request. A detainee may file an appeal to the FOD if the request is denied.

Upon approval, the detainee, legal representative or other individual acting on the detainee's behalf, makes all the marriage arrangements, including blood tests, obtaining marriage license, and retaining an official to perform the marriage ceremony. ICE personnel do not participate in making marriage arrangements nor serve as witnesses in the ceremony. The marriage does not interrupt nor stay any hearing, transfer to another facility or removal from the United States and transfers do not occur solely to prevent a marriage. Arrangements are consistent with the security and orderly operation of the facility according to the following stipulations: all expenses relating to the marriage shall be borne by the detainee or person acting on the detainee's behalf; and the ceremony is private with no media publicity and only individuals' essential for the marriage ceremony attend. The FOD may revoke approval of a marriage request for good cause and notifies the detainee in writing. The detainee may file an appeal in such instances.

There has been one ICE detainee marriage conducted during the past twelve months. Evaluation of this standard included a review of policy and procedures as well as interviews with ICE and facility staff.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** (b)(6),(b)(7)(C)

**Completion Date:** 02/23/2018

**Reviewer Signature (for printed form submission):**

**NON-MEDICAL EMERGENCY ESCORTED TRIPS (Key: L)**

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

Standard N/A

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

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

**NON-MEDICAL EMERGENCY ESCORTED TRIPS – REVIEWER SUMMARY**

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

NON-MEDICAL EMERGENCY ESCORTED TRIPS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> ICE handles all non-medical emergency escorted trips for ICE detainees.	
<b>Overall Rating:</b> N/A	
<b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)	<b>Completion Date:</b> 2/23/2018
<b>Reviewer Signature (for printed form submission):</b>	

**RECREATION (Key: M)**

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

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a recreation program and facility.	Meets Standard	The program provides detainees with day room activities and access to outdoor recreation areas.
2. A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.	Meets Standard	During the inspection, the daily ICE detainee population count was 127. Housing pod officers are responsible for monitoring and supervising recreational activities.
3. Regular maintenance keeps recreational facilities and equipment in good condition.	Meets Standard	
4. The recreational specialist or trained equivalent supervises detainee recreation workers.	N/A	ICE detainees do not participate in the voluntary work program.
5. The recreational specialist or trainee equivalent oversees recreation programs for special housing units (SHU) and special-needs detainees.	Meets Standard	Officers oversee recreation programs for all ICE detainees. The facility does not place ICE detainees in a special housing unit (SHU). ICE detainees are allowed to serve any administrative or disciplinary segregation status in their assigned housing pod with restrictive privileges. Detainees given this status are allowed one hour of outdoor recreation daily.
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	Meets Standard	Dayroom activities consist of board games, leisure library, cards and television.
7. Outside activities are restricted to limited-contact sports.	Meets Standard	Activities are limited to cardiovascular exercises that include basketball, soccer and walking.
8. Each detainee has the opportunity to participate in daily recreation.	Meets Standard	

**RECREATION (Key: M)**

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

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
9. Detainees have access to recreation activities outside the housing units for at least one hour daily, 5 days a week.	Meets Standard	Detainees at this IGSA facility are allowed to participate in daily recreational activities outside the housing pods for at least one hour a day, seven days a week.
10. Staff checks all items for damage and condition when equipment is returned.	Meets Standard	
11. Staff conducts searches of recreation areas before and after use.	Meets Standard	
12. All recreation areas under constant staff supervision.	Meets Standard	
13. Supervising staff is equipped with radios.	Meets Standard	
14. The facility provides detainees in the SHU at least one hour of outdoor recreation time daily, five times per week.	Meets Standard	The facility does not place ICE detainees in the special housing unit (SHU). ICE detainees are allowed to serve any administrative or disciplinary segregation status in their assigned housing pod with restrictive privileges. Detainees given this status are allowed one hour of outdoor recreation daily.
15. Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his/her recreation privileges.	Meets Standard	In the event that any recreation privileges are withheld, a written report of the action is given to the detainee.
16. Special programs or religious activities are available to detainees.	Meets Standard	
17. Volunteers are required to sign a waiver of liability before entering a secure portion of the facility where detainees are present.	Meets Standard	Volunteers are required to sign a waiver of liability and must submit to a background check prior to entering the secure portion of the facility.
18. Visitors, relatives or friends are not allowed to serve as volunteers.	Meets Standard	Visitors, relatives and friends of detainees are not permitted to serve as a volunteer.
19. If the facility has no outside recreation, are detainees considered for transfer after six months? <ul style="list-style-type: none"> <li>If yes, written procedures ensure timely review of all eligible detainees.</li> </ul>	N/A	

**RECREATION (Key: M)**

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

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
20. Case officers make written transfer recommendations about every six-month detainee to the OIC.	N/A	
21. The OIC documents all detainee-transfer decisions, whether yes or no.	N/A	
22. The detainee's written decision for or against an offered transfer documented in his/her A-file.	N/A	
23. Staff notifies the detainee's legal representative of his/her decision to accept/decline a transfer.	N/A	
24. If no recreation is available, the ICE Districts routinely review transfer eligibility for all detainees after 60 days.	N/A	
25. The A-file of every detainee who is held more than 60 days without access to recreation contains either a transfer-waiver signed by the detainee, or the OIC's written determination of the detainee's ineligibility for transfer.	N/A	
26. The detainee's legal representative is notified of the detainee's/OIC's decision.	N/A	

**RECREATION – REVIEWER SUMMARY**

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

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

Detainees are provided access to recreational programs and activities within the constraints of safety and security. The facility offers both indoor and outdoor recreation. Officers search the recreation areas before and after use to detect altered or damaged equipment, hidden contraband, and security breaches. Recreational programs and activities are within the parameters of a safe, secure and orderly operation. Recreational opportunities are provided for those with disabilities and under no circumstances does the facility require a detainee to forgo their law library privileges for recreation.

Recreation is available outside of the housing units. The area used for outside recreation/gymnasium is designed to provide for sunshine and exchange of free-flowing outdoor air sufficient to reflect climate conditions. Individual recreation is provided as necessary for detainees placed on administrative and segregation status in the housing units. Indoor recreation activities include television, cards and board games. Detainees can be denied recreation privileges as part of the disciplinary process.

Detainees are provided adequate space to ensure they can be active during their stay at this facility. The evaluation of this standard is based on review of policy and procedures, observations of detainee recreation areas, and interviews with the recreation specialist and detainees.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** (b)(6),(b)(7)(C)

**Completion Date:** 2/23/2018

**Reviewer Signature (for printed form submission):**





<b>RELIGIOUS PRACTICES (Key: N)</b>		
<b>Policy:</b> 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.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
1. Detainees are allowed to engage in religious services.	Meets Standard	
2. Space is available for detainees to conduct religious services.	Meets Standard	The facility does not have a chapel; religious services are conducted in the housing pod multi-purpose room.
3. The facility allows detainees to observe the major “holy days” of their religious faith. <ul style="list-style-type: none"> <li>List any exceptions.</li> </ul>	Meets Standard	Requests to observe a recognized religious holy day are accommodated. No exceptions have occurred.
4. The facility accommodates recognized holy-day observances by: <ul style="list-style-type: none"> <li>Providing special meals, consistent with dietary restrictions;</li> <li>Honoring fasting requirements;</li> <li>Facilitating religious services; and</li> <li>Allowing activity restrictions.</li> </ul>	Meets Standard	Procedures for accommodating recognized holy day observances include all the listed requirements in this component, provided these activities do not threaten the safety, security and orderly operation of the institution.
5. Each detainee is allowed religious items in his/her immediate possession.	Meets Standard	
6. Volunteer’s credentials are checked and verified before allowing participation in detainee programs.	Meets Standard	Background investigations are completed before allowing community religious volunteers to participate in detainee programs. All volunteers are required to provide credentials of their affiliations. If cleared, they must attend a volunteer orientation program and sign a waiver of liability prior to starting their service.
7. Members of faiths not represented by clergy may conduct their own services within security allowances.	Meets Standard	

RELIGIOUS PRACTICES (Key: N)		
<b>Policy:</b> FACILITIES WILL PROVIDE ICE DETAINEES OF ALL FAITHS WITH REASONABLE AND EQUITABLE OPPORTUNITIES TO PARTICIPATE IN THE PRACTICES OF THEIR FAITH, LIMITED ONLY BY THE CONSTRAINTS OF SAFETY, SECURITY, THE ORDERLY OPERATIONS OF THE FACILITY AND BUDGETARY CONSIDERATIONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
8. Detainees in the Special Management Unit are allowed to participate in religious practices unless otherwise documented for the safety and security of the facility.	Meets Standard	The facility does not place ICE detainees in the special management unit (SMU). ICE detainees are permitted to serve administrative or disciplinary segregation status in their assigned housing unit with restrictive privileges. The programs supervisor (PS) facilitates pastoral visits by local religious clergy to ICE detainees who are unable to participate in regular religious practices due to safety/security concerns.

RELIGIOUS PRACTICES – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
<b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> ICE detainees are permitted opportunities to voluntarily practice their religious faith through a variety of religious programs and activities, limited only by concerns about safety, security and the orderly operation of the facility. The programs supervisor oversees the religious program at the facility and is assisted by thirty-three local volunteers to coordinate religious activities and services at the facility.  Employees do not disparage the religious beliefs of a detainee, nor coerce or harass a detainee to change his/her religious affiliation. Attendance at all religious activities is voluntary and open to all detainees. When necessary for the security or good order of the facility, the OIC can limit attendance at, or discontinue a religious activity. ICE does not require a detainee to profess a religious belief. A detainee can designate any or no religious preference during the intake process. Detainees may request to change their religious designation at any time, and the change is affected in a timely fashion.  Detainees can request the introduction of new religious components to the program. The programs supervisor asks the detainee(s) to provide additional data to make an informed decision to include or exclude the practice from the religious services program. Detainees are allowed to participate in group services.  During the evaluation of this standard, the programs supervisor and detainees were interviewed, policy was reviewed, and the multi-purpose room was visited. The religious programs available to detainees enhance the quality of life for detainees at this facility.	
<b>Overall Rating:</b> Meets Standard	
<b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)	<b>Completion Date:</b> 2/23/2018
<b>Reviewer Signature (for printed form submission):</b>	

<b>DETAINEE TELEPHONE ACCESS (Key: O)</b>		
<b>POLICY:</b> ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Detainees are allowed access to telephones during established facility waking hours.	Meets Standard	Telephones are available in the housing units during facility waking hours.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	Meets Standard	The telephone access policy is provided to detainees via the local detainee handbook, which is issued to each detainee upon arrival. The information is available in English and Spanish.
3. Access rules are posted in housing units.	Meets Standard	Telephone access rules are posted in the housing units.
4. The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	Meets Standard	The detainee handbook and postings are in English and Spanish, the primary languages of detainees housed at this facility.
5. Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	Meets Standard	Telephones are available at a ratio of at least one telephone for every ten detainees.
6. Telephones are inspected regularly by facility staff to ensure that they are in good working order.	Meets Standard	Unit officers inspect telephones daily and document the results on a checklist.
7. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	Meets Standard	A supervisor promptly notifies the telephone provider of a telephone malfunction.
8. The facility administration monitors repair progress and takes appropriate measures to ensure that required repairs are begun and completed timely.	Meets Standard	
9. Detainees are afforded a reasonable degree of privacy for legal phone calls.	Meets Standard	Detainees may submit a request to the shift supervisor or ICE personnel for a phone call in a private room.
10. A procedure exists to assist a detainee who is having trouble placing a confidential call.	Meets Standard	Detainees may submit a request to the shift supervisor or ICE personnel for a confidential call.
11. The facility provides the detainees with the ability to make non-collect (special access) calls.	Meets Standard	Special access telephone numbers are programmed into the telephone system.
12. Special Access calls are at no charge to the detainees.	Meets Standard	The special access numbers are programmed in the detainee telephone system and are free of charge.

<b>DETAINEE TELEPHONE ACCESS (Key: O)</b>		
<b>Policy:</b> ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
13. The OIG phone number for reporting abuse is programmed into the detainee phone system and the phone number was checked by the inspector during the review.	Meets Standard	This inspector reached the DHS OIG hotline recording via the speed dial system programmed into the housing unit telephones.
14. In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.	N/A	Special access telephone numbers are programmed into the telephone system and are free of charge.
15. No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".	Meets Standard	
16. Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.	Meets Standard	ICE approves these requests.
17. Any telephone restrictions are documented.	Meets Standard	Telephone restrictions are documented via the disciplinary process.
18. The facility has a system for taking and delivering emergency detainee telephone messages.	Meets Standard	Emergency messages are taken and given to the detainee as soon as possible.
19. Emergency phone call messages are immediately given to detainees.	Meets Standard	Emergency telephone messages will be taken and delivered to detainees as promptly as possible, subject to verification.
20. Detainees are allowed to return emergency phone calls as soon as possible.	Meets Standard	Detainees are permitted to return emergency phone calls, subject to verification, as soon as possible.
21. Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	Meets Standard	The frequency and duration of immigration/legal telephone calls are unrestricted for all detainees.
22. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	Meets Standard	Consular/embassy telephone calls are unrestricted for all ICE detainees.
23. Detainees in disciplinary segregation are allowed phone calls for family emergencies.	Meets Standard	ICE detainees in disciplinary segregation may make phone calls for family emergencies.
24. Detainees in administrative detention and protective custody are afforded the same telephone privileges as those in general population.	Meets Standard	Detainees in administrative segregation and protective custody are afforded the same telephone privileges as those in general population.

<b>DETAINEE TELEPHONE ACCESS (Key: O)</b>		
<b>Policy:</b> ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
25. When detainee phone calls are monitored, notification is posted by detainee telephones that phone calls made by the detainees may be monitored. Special Access calls are not monitored.	Meets Standard	Notification of monitoring is posted on the wall near telephones and is noted in the facility handbook. Special access calls are not monitored.
26. <b>LYON AGREEMENT:</b> When a detainee requests a direct or free Legal Call to an attorney, court, or government agency or demonstrates a compelling need for other direct or free calls, access is granted within 24 hours of the request and ordinarily within 8 facility waking hours. Further delays may be justified by extraordinary circumstances.	Meets Standard	When a detainee requests a call of this type, access is granted, ordinarily within eight hours and always within twenty-four hours of the request.
27. <b>LYON AGREEMENT:</b> The facility documents and reports to ICE/ERO any delays in responding to requests for free or direct Legal Calls beyond 8 facility waking hours.	Meets Standard	Delays in responding to requests for free or direct legal calls beyond eight facility waking hours would be reported to ICE.
28. <b>LYON AGREEMENT:</b> Detainees are provided private settings for Legal Calls such that calls cannot be overheard by officers, other staff, or other detainees.	Meets Standard	Legal telephone calls may be placed from a private area upon request.
29. <b>LYON AGREEMENT:</b> The facility has a system for taking and delivering telephone messages to detainees, including but not limited to attorney messages, other messages related to a detainee's legal case, and emergency messages, and ensures the timeliness of such message delivery.	Meets Standard	
30. <b>LYON AGREEMENT:</b> The facility provides translation and interpretation services to detainees who are unable to read written telephone access rules in the languages provided.	Meets Standard	The facility provides translation and interpretation services to detainees who are unable to read written telephone access rules in the languages provided.
31. <b>LYON AGREEMENT:</b> Detainees in segregation or other environments with limited physical access to telephones have reasonable and equitable access to telephones during waking hours (i.e., they can request telephone calls and receive them in a timely manner).	Meets Standard	Detainees in segregation, or other environments with limited physical access to telephones, have the same access to telephone use as the general population, except for those detainees under disciplinary sanctions that may specifically include certain calls.

**DETAINEE TELEPHONE ACCESS – REVIEWER SUMMARY**  
(Use following format for dates: mm/dd/yyyy)

**DETAINEE TELEPHONE ACCESS – REVIEWER SUMMARY**

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

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

Detainees have access to telephones as required by the standard. The facility has a contract with Combined Public Communications (CPC) to provide detainee phone service. Local and long-distance calls cost \$.16 per minute. International calls start at \$1.00 per minute with no connection fee. These rates are comparable to community telephone call rates.

A review of documentation, employee interviews and the testing of housing unit telephones confirmed that the facility permits detainees to make direct calls, free of charge for indigent detainees, to the local immigration court and the Board of Immigration Appeals; Federal and State courts; to consular officials; to legal service providers; to a government office when needed for their case; in a personal or family emergency; or when the detainee can otherwise demonstrate a compelling need. Detainees must submit a request to facility officers or ICE in order to make unmonitored/confidential telephone calls to their legal representative. Such calls are usually granted within eight waking hours of the request, as stipulated by the standard. There are neither time limits nor frequency restrictions for telephone calls to a legal representative unless necessary to maintain security.

Telephone calls from housing unit telephones may be limited to twenty minutes in duration during high use times in order to allow all detainees an opportunity to use the telephones. Telephone privileges may be suspended entirely during an emergency with the authorization of the OIC, and are only suspended for the time necessary under the circumstances.

Indigent detainees may return emergency telephone calls free of charge.

During the evaluation of this standard policy and the detainee handbook were reviewed; housing unit inspection logs and telephone serviceability worksheets were inspected; call rates were calculated; housing unit telephones were tested; and staff and detainees were interviewed.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** (b)(6),(b)(7)(C)

**Completion Date:** 2/23/2018

**Reviewer Signature (for printed form submission):**

<b>VISITATION (Key: P)</b>		
<b>Policy:</b> ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
1. There is a written visitation schedule and hours for general visitation.	Meets Standard	The visitation schedule and hours for general visitation are available in the facility handbook, are posted in the entrance lobby and available on the facility website.
2. The visitation hours tailored to the detainee population and the demand for visitation.	Meets Standard	General visitation is facilitated through video visitation. The visitation hours are tailored to the detainee population.
3. The visitation schedule and rules are available to the public.	Meets Standard	The schedule and rules are available in the facility lobby.
4. The hours for all categories of visitation are posted in the visitation waiting area.	Meets Standard	
5. A written copy of the rules regulating visitation and the hours of visitation is available to visitors.	Meets Standard	Visitation information is posted on the agency website.
6. A general visitation log is maintained.	Meets Standard	A visitation log is maintained for all visits.
7. The detainees are permitted to retain personal property items specified in the standard.	Meets Standard	
8. A visitor dress code is available to the public.	Meets Standard	A visitor dress code is posted in the entrance of the facility.
9. Visitors are searched and identified according to standard requirements.	Meets Standard	Visitors do not enter the secure perimeter of the facility, nor do they have any contact with detainees; therefore, they are not searched. Visitation is conducted via video terminals that are located in a room outside of the secure areas of the facility. Visitors are required to have a valid driver's license or photo identification card in order to visit. The facility does have procedures in place to allow a contact social visit if approved by the OIC and those visitors are searched.
10. The requirement on visitation by minors is complied with.	Meets Standard	
11. At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, within the first 30 days.	N/A	Minors are permitted to visit.
12. After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.	N/A	Minors are permitted to visit.



<b>VISITATION (Key: P)</b>		
<b>Policy:</b> ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
13. Detainees in special housing are afforded visitation.	Meets Standard	
14. Legal visitation is available seven (7) days a week, including holidays.	Meets Standard	Legal visitation is available seven days a week, including holidays.
15. On regular business days legal visitation hours are provide for a minimum of eight (8) hours per day, and a minimum of four hours per day on weekends and holidays.	Meets Standard	
16. On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	Meets Standard	Detainees are permitted to continue a legal visit through a scheduled meal.
17. Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	Meets Standard	Legal visits are contact and conducted in private rooms. Documents may be exchanged.
18. There are written procedures governing detainee searches.	Meets Standard	
19. When strip searches are required after every contact visit with a legal representative, the facility provides an option for non-contact visits with legal representatives.	N/A	Strip searches are not required after legal visits.
20. Prior to each visit, legal service providers and assistants are identified per the standard.	Meets Standard	Legal visitors must produce a state bar card.
21. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	Meets Standard	The list of pro bono legal providers is posted in the housing units and issued to every detainee during initial processing at the ICE sub-office.
22. The decision to permit or deny a tour is not delegated below the level of Field Office Director.	Meets Standard	
23. Provisions for NGO visitation, as stated in the Detention Standards, are complied with.	Meets Standard	Any NGO visitation must be approved by ICE. The provisions of the standard are adhered to.
24. Law enforcement officials who request to visit with a detainee are referred to the ICE Field Office for approval.	Meets Standard	Law enforcement officials must have approval from ICE to visit with a detainee.
25. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the OIC or ICE Field Office.	Meets Standard	ICE is notified if any former detainee or alien in proceedings requests to visit.
26. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	Meets Standard	Policy addresses independent medical examinations.

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

**VISITATION – REVIEWER SUMMARY**

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

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

Visitation is managed in such a manner as to permit detainees to maintain ties with family and friends, and facilitate professional contact with legal representatives and others. Social visiting is facilitated via video terminals. The local handbook addresses visiting rules and hours. The visitation schedule is available to the public via telephone. Legal visitors and social visitors are logged on separate logs. Written procedures address incoming property and money for detainees. Visitors may not give money directly to a detainee. Visitation is restricted only through the disciplinary process. Criminal behavior during visits may be referred for prosecution.

Visiting hours may be limited based on space and resources. Detainees may visit other family members who are detained at this facility by special arrangement. Visitation areas are furnished with backless stainless-steel stools; not necessarily comfortable. Visits are conducted in a quiet, orderly and dignified manner. Staff does not accept articles or gifts of any kind for a detainee. Policy provides that any violation of the visitation rules may result in disciplinary action against the detainee, which may entail loss of visitation privileges.

Legal visitors may be accompanied by interpreters. Legal visitors are not required to know the detainee's A-number in order to visit and legal visitors may call ICE prior to the visit to determine if the detainee is at the facility. Legal providers are not required to file a Form G-28 for pre-representation meetings with detainees or for representation of non-immigration matters, but must file a G-28 to represent detainees for immigration matters. Form G-28 is not available in the visitor entrance, but is available online. Employees visually observe legal visits, but are not able to hear conversations, and legal visits may continue through counts. Upon request, legal visits may occur via video or screened visiting rooms if private consultation rooms are not available. Documents exchanged between detainees and their legal visitors are inspected by employees, but not read. Legal visiting policy is available upon request.

NGO visitation and facility tour requests are submitted to ICE in writing and state the reasons for the visit and issues to be discussed. Legitimate community service organizations may visit upon approval of the OIC. News media visits occur only with the approval of ICE. All requirements of the standard are adhered to for news media visits and interviews.

Detainees subject to expedited removal may consult whomever they choose, in person or by phone, at any time, during the first forty-eight hours. Consultants might include, but are not limited to: attorneys and other legal representatives; prospective legal representatives; legal assistants; members of non-governmental organizations (NGOs); and friends and family. All consultation visitors are subject to the same identification and security screening procedures as general visitors. If documented security concerns preclude an in-person visit with a particular individual, the OIC will arrange for consultation by telephone. If security reasons also preclude consultation by telephone, the OIC will consult the FOD. Consultation visitation, asylum officer visits, and consular officer visits are managed within the parameters of the standard.

Written notification posted at the entrance states that service animals, but not pets, are permitted into the visiting area.

This standard was evaluated via review of policy and the detainee handbook, inspection of the postings and logs in the entrance lobby, interviews with staff and detainees, and observation of the visiting areas.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** (b)(6),(b)(7)(C)

**Completion Date:** 02/23/2018

**Reviewer Signature (for printed form submission):**

**VOLUNTARY WORK PROGRAM (Key: Q)**

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

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Does the facility have a voluntary work program? • Do ICE detainees participate?	N/A	
2. Detainee housekeeping meets neatness and cleanliness standards.	N/A	
3. Detainees have the opportunity to participate in special details, however, are never allowed to work outside the secure perimeter.	N/A	
4. Written procedures govern selection of detainees for the Voluntary Work Program.	N/A	
5. Where possible, physically and mentally challenged detainees participate in the program.	N/A	
6. The facility complies with work-hour requirements for detainees, not exceeding: • Eight hours a day and Forty hours a week.	N/A	
7. Detainee volunteers generally work according to fixed schedule.	N/A	
8. If a detainee is removed from a work detail, staff places the written justification for the action in the detainee's detention file.	N/A	
9. Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	N/A	
10. The voluntary work program meets: • OSHA, NFPA, ACA standards	N/A	
11. Medical staff screen and formally certify detainee food service volunteers. • Before the assignment begins; and • As a matter of written procedure	N/A	
12. Detainees receive safety equipment/ training sufficient for the assignment.	N/A	
13. Proper procedure is followed when an ICE detainee is injured on the job.	N/A	

**VOLUNTARY WORK PROGRAM – REVIEWER SUMMARY**

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

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

ICE detainees do not participate in the voluntary work program at this facility.

**Overall Rating:** N/A

VOLUNTARY WORK PROGRAM – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Reviewer Name (Printed): (b)(6),(b)(7)(C)	Completion Date: 2/23/2018
Reviewer Signature (for printed form submission):	

# ***Section II***

## **Health Service Standards**

<b>HUNGER STRIKES (Key: R)</b>		
<b>Policy:</b> ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. When a detainee has refused food for 72 hours, it is standard practice for staff to refer him/her to the medical department.	Meets Standard	Per policy, when a detainee has refused food for 72 hours, he/she is referred to the medical department.
2. CDFs and IGSA's immediately report a hunger strike to the ICE.	Meets Standard	At this IGSA facility, a hunger strike is immediately reported to administration who immediately contact ICE.
3. The facility has established procedures to ensure staff respond immediately to a hunger strike.	Meets Standard	Established procedures and training ensure personnel respond immediately to a hunger strike.
4. Policy and procedure require that staff isolate a hunger-striking detainee from other detainees. <ul style="list-style-type: none"> <li>• If yes, in an observation room?</li> </ul>	Meets Standard	Per policy, a hunger striking detainee is placed in an observation cell within the medical department.
5. Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	Meets Standard	Medical personnel are authorized to place a detainee in an observation cell located in the medical department.
6. Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	Meets Standard	Per policy and observed in hunger strike medical record documentation, medical personnel record the weight and vital signs of a hunger-striking detainee at least once every 24 hours.
7. The OIC of the facility obtains a hunger striker's consent before medical treatment.	Meets Standard	Per policy and observed in detainee medical records, general informed consent to treatment is obtained from each detainee at the time of admission. Additional procedure specific consents are obtained as needed.
8. A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.	Meets Standard	Per policy, a signed refusal of treatment form is required of every detainee who rejects medical evaluation or treatment.

<b>HUNGER STRIKES (Key: R)</b>		
<b>Policy:</b> ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
9. During a hunger strike, staff document and provide the hunger-striking detainee three meals a day.	Meets Standard	Per policy and as observed in hunger strike medical documentation, during a hunger strike, personnel document and provide a hunger-striking detainee three meals a day.
10. Staff maintains the hunger striker's supply of drinking water/other beverages.	Meets Standard	Per policy, water to the medical department observation cell is turned-off, and personnel maintain the hunger striker's supply of drinking water and other beverages.
11. During a hunger strike, staff removes all food items from the hunger striker's living area.	Meets Standard	No food items are permitted in the hunger-striker's observation cell other than food provided by personnel.
12. Staff is directed to record the hunger striker's fluid intake and food consumption; Does staff always use Hunger Strike Monitoring Form I-839 or similar IGSA form.	Meets Standard	Personnel record a hunger striker's fluid intake and food consumption on the Hunger Strike Monitoring form I-839.
13. The medical staff has written procedures for treating hunger strikers.	Meets Standard	Medical personnel have written protocols for the basic management of detainees on hunger strike. Management of hunger strikes is individualized based on the detainee's medical history and physical assessment.
14. Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.	Meets Standard	Medical personnel are required to document all treatment attempts including attempts to persuade a hunger striker of medical risks. Hunger striking detainees are provided a handout titled, "The Effects of Starvation" and are asked to sign for receipt of the information.

HUNGER STRIKES (Key: R)		
<b>Policy:</b> ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
15. Staff has received training in identification of hunger strikes. Medical staff receives early training in hunger-strike evaluation and treatment. Staff remains current in evaluation and treatment techniques.	Meets Standard	A review of training documentation confirmed that all security and other personnel receive hunger-strike training during employee orientation and annually during refresher training. Medical personnel receive additional hunger-strike protocol training.

HUNGER STRIKE – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p><b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>A detainee suspected or announced to be on a hunger strike is evaluated by medical personnel to determine whether the detainee's action is reasoned and deliberate or the manifestation of a mental illness. If it is determined the detainee is engaging in a hunger strike due to a mental condition, appropriate medical/mental health action is taken.</p> <p>ICE is immediately notified that a detainee is refusing treatment. Prior to administering medical treatment against a detainee's will, reasonable efforts are made to convince the detainee to accept treatment voluntarily. Forced medical treatment is administered pursuant to applicable laws; only after medical personnel determine the detainee's life or permanent health is at risk and only after permission has been granted by ICE.</p> <p>Food and water intake and output is measured and recorded for any detainee participating in a hunger strike.</p> <p>Release from hunger strike evaluation and treatment is only determined by the physician with the order clearly documented in the detainee's medical record.</p> <p>Since the last inspection, there have been two hunger strikes as follows. A 28-year old male detainee was admitted to the facility 6/21/2017. At the time of admission, he provided no mental health history. The detainee declared a hunger strike on 10/19/2017 in protest to being housed in F-pod as a result of having a broken arm and wearing a cast. The detainee signed a refusal of treatment form against medical advice, had the cast removed, was moved out of F-pod and self-terminated the hunger strike on 10/20/2017.</p> <p>A 31-year old male detainee was admitted to the facility 1/2/2017. At the time of admission, he provided no mental health history. The detainee declared a hunger strike on 3/15/2017 in protest to being detained. Following a conversation with the Health Services Administrator, the detainee self-terminated the hunger strike the same day, 3/15/2017.</p> <p>Evaluation of the standard was determined following a review of policy, training records, observations and interviews with medical and security personnel.</p>	
<b>Overall Rating:</b> Meets Standard	
<b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)	<b>Completion Date:</b> 2/23/2018
<b>Reviewer Signature (for printed form submission):</b>	



<b>ACCESS TO MEDICAL CARE (Key: S)</b>		
<b>Policy: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.</b>		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
1. Facilities operate a health care facility in compliance with state and local laws and guidelines.	Meets Standard	The facility operates pursuant to the Ohio Department of Corrections Jail Standards and is inspected annually. Medical personnel are appropriately licensed, certified and credentialed and perform within the scope of their credentials and pursuant to orders from individuals medically credentialed and licensed to give such orders.
2. The facility's in-processing procedures for arriving detainees include medical screening.	Meets Standard	In-processing procedures for arriving detainees include a medical screening performed by trained security personnel. An additional medical screening is conducted by medical personnel.
3. All detainees have access to and receive medical care.	Meets Standard	All detainees, regardless of custody status, have access to and receive medical care. Sick call is conducted seven days a week.
4. The facility has access to a PHS/DIHS Managed Health Care Coordinator.	Meets Standard	Medical personnel use the computerized medical provider analysis and review (MedPar) system to access the ICE Health Services Corps (IHSC) field case managers. Medical personnel also have telephonic contact with the field office field case manager.

<b>ACCESS TO MEDICAL CARE (Key: S)</b>		
<b>Policy:</b> EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
5. The medical staff is large enough to provide, examine, and treat the facility's detainee population.	Meets Standard	Review of the medical department staffing plan indicated sufficient personnel to provide, examine and treat the detainee population. Full-time personnel include a health services administrator (HSA), two medical supervisors and eight paramedics. Part-time personnel include twelve paramedics, and one RN. Contractual personnel include a physician medical director on site three days every other week for two to three hours at each visit and on-call at all times, and a psychiatrist two days a week for two to three hours at each visit and on call at all times, and a dentist one day a week. Additionally, the physician medical director provides a Physician Assistant to work on site three days a week when the physician is not on site and to be on call at all times.
6. The facility has sufficient space and equipment to afford detainee privacy when receiving health care.	Meets Standard	Observations verified there is sufficient space and equipment to afford detainee privacy when receiving health care.
7. The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	Meets Standard	The medical department has its own restricted-access area located within the confines of the secure perimeter.
8. The medical facility entrance includes a holding/waiting room.	Meets Standard	The medical department entrance includes a holding/waiting room.
9. The medical facility's holding/waiting room is under the direct supervision of custodial staff.	Meets Standard	The holding/waiting room is under the direct supervision of escorting security personnel.
10. Detainees in the holding/waiting room have access to a drinking fountain.	Meets Standard	Detainees in the holding/waiting room have access to drinking water.

<b>ACCESS TO MEDICAL CARE (Key: S)</b>		
<b>Policy:</b> EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
11. Medical records are kept apart from other files. They are: <ul style="list-style-type: none"> <li>• Secured in a locked area within the medical unit;</li> <li>• With physical access restricted to authorized medical staff; and</li> <li>• Procedurally, no copies made and placed in detainee files.</li> </ul>	Meets Standard	The facility uses an electronic medical record (EMR), Correct Tech, which is username and password protected to medical personnel. Procedurally, copies are not made and placed in detainee files.
12. Pharmaceuticals are stored in a secure area.	Meets Standard	Pharmaceuticals, syringes and needles are stored in a locked room constructed of floor to ceiling concrete walls. The ceiling is a hard ceiling. The entry door is steel with a high security lock. Access to the room is restricted to authorized medical personnel. A random review of controlled medication, sharps and medical tools indicated all perpetual inventories were accurate and being counted at the appropriate intervals.
13. Medical screening includes a Tuberculosis (TB) test. <ul style="list-style-type: none"> <li>• Every arriving detainee receives a TB test during the admission process;</li> <li>• Detainee’s TB-screening does not occur more than one business day after his/her arrival at the facility; and</li> <li>• Detainees not screened are housed separate from the general population.</li> </ul>	Meets Standard	As confirmed in medical record review, detainees receive symptomatic screening for TB during in-processing. Many of the detainees arrive with evidence of recent TB testing. Detainees arriving without evidence of testing receive either a TB skin test or chest x-ray within one business day of arrival. Detainees not screened would be housed separately from the general population. The facility has four negative air respiratory isolation rooms located in the medical department.

<b>ACCESS TO MEDICAL CARE (Key: S)</b>		
<b>Policy:</b> EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
14. All detainees receive a mental-health screening upon arrival. It is conducted: <ul style="list-style-type: none"> <li>• By a health care provider or specially trained officer; and</li> <li>• Before a detainee’s assignment to a housing unit.</li> </ul>	Meets Standard	Per policy and as confirmed in medical record review, trained security personnel conduct a mental health screening on all detainees during in-processing. An additional mental health screening is conducted by medical personnel. Screening occurs before a detainee's assignment to a housing unit.
15. The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.	Meets Standard	As confirmed in medical record review, medical personnel review all completed intake screening forms.
16. The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.	Meets Standard	A random review of medical records verified detainees are physically examined/assessed within fourteen-days of admission. The examinations/assessments are performed by the ICE-RN with a review and sign-off by the physician. Review of medical personnel credentialing verified the ICE-RN has been trained by the physician to conduct the examinations/assessments.
17. Detainees in the Special Management Unit have access to health care services.	Meets Standard	Detainees placed in administrative or disciplinary status are housed in cells in living pods designated for this purpose. Detainees in this status have equal access to health care as the general population.
18. Staff provides detainees with health services (sick call) request slips daily, upon request. <ul style="list-style-type: none"> <li>• Request slips are available in languages other than English, including every language spoken by a sizeable number of the facility's detainee population.</li> <li>• Service-request slips are delivered in a timely fashion to the health care provider.</li> </ul>	Meets Standard	Health services request slips, printed in English and Spanish, are provided to detainees at a minimum daily upon request. Completed requests are collected by medical personnel at least once daily.

<b>ACCESS TO MEDICAL CARE (Key: S)</b>		
<b>Policy:</b> EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
19. The facility has a written plan for the delivery of 24-hour emergency health care when no medical personnel are on duty at the facility, or when immediate outside medical attention is required.	Meets Standard	There is a written plan for the delivery of 24-hour emergency health care when immediate outside medical attention is required. Medical personnel are on-duty at all times.
20. The plan includes an on-call provider.	Meets Standard	Either the physician or physician assistant is on-call at all times. Their telephone numbers are available in the medical department and central control.
21. The plan includes a list of telephone numbers for local ambulance and hospital services.	Meets Standard	Local hospital numbers are maintained in the medical department and central control. The county 911 system is used to obtain ambulance services.
22. The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.	Meets Standard	Per policy, emergency health care is provided consistent with facility safety and security.
23. Detention staff is trained to respond to health-related emergencies within a 4-minute response time.	Meets Standard	Training records review verified all security personnel are trained in first aid and certified in CPR and automatic external defibrillator use. Observation of the facility indicated security personnel can respond to any area of the facility within a four-minute response time.
24. Where staff is used to distribute medication, a health care provider properly trains these officers.	N/A	Only medical personnel distribute medication.
25. The medical unit keeps written records of medication that is distributed.	Meets Standard	The facility uses an electronic medical record (EMR) which includes an electronic medication administration record (EMAR), and each dose of medication administered or refused is documented on the EMAR at the time of administration or refusal.

<b>ACCESS TO MEDICAL CARE (Key: S)</b>		
<b>Policy:</b> EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
26. The Form I-819 (or IGSA equivalent) is used to notify the Warden/Facility of a detainee that has special medical needs.	Meets Standard	At this IGSA facility, the computerized jail management system is used to notify the OIC/administration of a detainee that has special medical needs.
27. A signed and dated consent form is obtained from a detainee before medical treatment is administered.	Meets Standard	As verified in medical record review, signed and dated informed consent to treatment is obtained from each detainee at the time of admission. Additional procedure specific consents are obtained as needed.
28. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	Meets Standard	At this IGSA facility, a Release of Medical Records form is used to authorize the release of confidential medical records to outside sources.
29. The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	Meets Standard	Per the HSA, generally, 24-hours advance notice is provided prior to the release, transfer or removal of a detainee.
30. Detainee's medical records or a copy thereof, are available and transferred with the detainee.	Meets Standard	A transfer summary is completed and transferred with each detainee. Copies of medical records are available for transfer with detainees if required for continuity of care.
31. Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL".	Meets Standard	Medical records are placed in a sealed envelope and labeled with a detainee's name and A-number and marked Medical Confidential.

**ACCESS TO MEDICAL CARE – REVIEWER SUMMARY**  
*(Use following format for dates: mm/dd/yyyy)*

**ACCESS TO MEDICAL CARE – REVIEWER SUMMARY***(Use following format for dates: mm/dd/yyyy)***Overall Remarks:** *(Record significant facts, observations, other sources used, etc.)(5000 Character Max)*

The facility is inspected annually for compliance with the state of Ohio jail standards. The facility is not accredited by ACA or NCCHC.

Comprehensive health care services, including personnel, medical supplies and equipment, specialty care and hospitalization with community providers are provided by the county. These arrangements include securing appropriate security personnel to transport and remain with a detainee for the duration of any off-site treatment or hospital admission.

Upon admission, detainees are screened to determine their use of or dependence on alcohol, opiates, hypnotics, sedatives, etc., and for their degree of reliance on and potential for withdrawal. The medical director has established guidelines for evaluation and treatment of new arrivals that require detoxification that permit withdrawal with minimal physiological and physical discomfort. Detainees experiencing severe, life-threatening alcohol or drug withdrawal are immediately transferred to a community acute care facility that is qualified in accordance with local state and federal laws to administer withdrawal treatment.

A telephone translation service provides translation assistance to detainees requiring those services. If the initial admission screening indicates the need for emergency treatment, medical personnel is immediately notified.

An initial dental screening is performed within fourteen days of admission by a trained RN. Detainees are afforded emergency dental treatment, which includes those procedures directed toward the immediate relief of pain, trauma and acute oral infection that endangers the health of the detainee. Also included is the repair of prosthetic appliances to prevent detainee suffering. Routine dental treatment is provided to detainees for whom dental treatment is inaccessible for prolonged periods because of detention for over six months.

There are five AEDs available throughout the facility. Medical personnel are responsible to maintain the AEDs in good working order.

The OIC is notified in writing when a detainee has been diagnosed as having a medical or psychiatric condition requiring special attention (e.g. pregnancy, special diet, medical isolation, AIDS, etc.). The diagnosis of HIV infection and/or AIDS is only made by a licensed physician. Medical isolation is only based on the results of a clinical evaluation. HIV positive detainees are hospitalized until any acute treatment deemed necessary is completed. Detainees diagnosed HIV positive and/or AIDS are reported to government bodies according to state and federal requirements. All detainees with active tuberculosis are evaluated for HIV infection.

Standard precautions are used at all times when caring for detainees. Employee or detainee exposure to potentially infectious body fluids, such as through needle sticks or bites, are reported as soon as possible to the physician/medical director. If a detainee refuses to consent to treatment, medical personnel makes reasonable efforts to convince the detainee to voluntarily accept treatment. The medical risks faced if treatment is declined are explained to the detainee. Medical personnel document their treatment efforts and the refusal of treatment in the detainee's medical record. ICE is consulted in determining whether forced treatment will be administered unless the situation is an emergency. In emergency situations, ICE is notified as soon as possible.

Detainees are not used in medical, pharmaceutical or cosmetic experiments or research. This does not preclude an individual detainee from receiving a medical procedure not generally available but determined medically necessary by the primary health care provider and approved by IHSC.

Formal meetings between medical and jail administration are routinely conducted.

The medical department has sufficient resources to provide for the basic medical, dental and mental health needs of the detainee population. There is no medical co-pay for detainees.

Inspection of the medical department and detainee living units reflected clean, well-maintained, well-lighted areas with comfortable environmental temperatures. No life-safety issues were observed. Interviews with detainees indicated no concerns concerning safety, health/mental health/dental services or environmental conditions.

At the time of the inspection, there were 119 males and 8 female ICE detainees in the facility. The average length of stay is twelve days.

Evaluation of the standard was determined following a review of policy, medical records, training records, employee and detainee interviews and observations.

**Overall Rating:** Meets Standard

ACCESS TO MEDICAL CARE – REVIEWER SUMMARY	
Reviewer Name (Printed): (b)(6),(b)(7)(C)	Completion Date: 2/23/2018
Reviewer Signature (for printed form submission):	



<b>SUICIDE PREVENTION AND INTERVENTION (Key: T)</b>		
<b>Policy:</b> 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.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
1. Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.	Meets Standard	Per policy, all employees receive suicide-prevention training during orientation.
2. Training prepares staff to: <ul style="list-style-type: none"> <li>Recognize potentially suicidal behavior;</li> <li>Refer potentially suicidal detainees, following facility procedures; and</li> <li>Understand and apply suicide-prevention techniques.</li> </ul>	Meets Standard	Curriculum review verified employees are trained in each of the bulleted requirements listed in this component.
3. A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process. <ul style="list-style-type: none"> <li>Screening does not occur later than one working day after the detainee's arrival.</li> </ul>	Meets Standard	Medical record review confirmed that trained security personnel conduct a mental health screening on all detainees during in-processing. An additional mental health screening is conducted by medical personnel within 24 hours of the detainee's admission.
4. Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.	Meets Standard	Policy addresses when and how to refer at-risk detainees to medical personnel. Medical record review verified policy is followed.
5. The facility has a designated isolation room for evaluation and treatment.	Meets Standard	Female ICE detainees identified as a suicide risk are housed in one of four cells located in the booking department. Male ICE detainees identified as a suicide risk are housed in one of four cells located in housing pod F.
6. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	Meets Standard	Inspection of the cells verified they do not contain any structures or smaller items that could be used in a suicide attempt.
7. Medical staff has approved the room for this purpose.	Meets Standard	Medical personnel have provided verbal approval for use of the rooms.
8. Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes.	Meets Standard	Per policy, personnel observe and document the status of a suicide-watch detainee at least once every ten minutes.

**SUICIDE PREVENTION AND INTERVENTION – REVIEWER SUMMARY**

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

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

Training for all employees includes the identification of suicide risk factors and the psychological profile of a suicidal detainee.

Security personnel going off-duty inform personnel coming on-duty of any detainee assessed as "at risk" for suicide.

The OIC has the authority to allow a potentially suicidal detainee who presents no imminent danger to life or property to remain in the general population but only under close observation and only upon the written recommendation of the physician. Security personnel are required to check on the safety of the detainee at intervals as ordered by the physician. Precautions are taken with any personal possessions that could aid in a suicide attempt.

If danger to life or property appears imminent, medical personnel have the authority to segregate the detainee from the general population. The detainee would be placed in a special isolation room designed for evaluation and treatment. If approved by medical personnel, the detainee could be placed in the special management unit.

Any detainee diagnosed as suicidal or requiring special housing for suicide risk is immediately reported to ICE.

A detainee is released from suicide watch and returned to general population only upon the written authorization of the physician.

Since the last inspection, there were no ICE detainee suicides or serious suicide attempts. There was one non-ICE female suicide as follows. A 21-year old female was admitted to the facility 1/14/2018. At the time of admission, the only mental health history she provided was having suicidal ideation a year previously. The next day, 1/15/2018, the individual was involved in an altercation and placed in a two-person pre-disciplinary cell pending a hearing. Prior to placement, the individual was evaluated by mental health personnel and determined fit for placement. The next day, 1/16/2018, while the individual's cellmate was away at court, the individual hanged herself in her cell. Resuscitative measures were initiated, and she was transported by ambulance to the local hospital where she was pronounced dead.

Evaluation of the standard was determined following a review of policy, medical records/suicide watch forms, training records, inspection of the suicide watch cells and interviews with medical, security and ICE personnel.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** (b)(6),(b)(7)(C)

**Completion Date:** 2/23/2018

**Reviewer Signature (for printed form submission):**

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

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

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Detainees who are chronically or terminally ill are transferred to an appropriate offsite medical facility.	Meets Standard	Detainees who are chronically or terminally ill are not placed at this facility. Detainees who develop health care concerns beyond the scope of services available are referred to ICE who generally moves the detainee to a more appropriate facility.
2. The facility or appropriate ICE office promptly notifies the next of kin of the detainee's medical condition, to include: <ul style="list-style-type: none"> <li>• The detainee's location; and</li> <li>• The limitations placed on visiting.</li> </ul>	Meets Standard	Per onsite ICE personnel, the facility would notify ICE personnel when a detainee is housed at an off-site health care facility. ICE would be responsible for notifying the detainee's next of kin regarding his/her location and visitation restrictions.
3. There are guidelines addressing the State Advanced Directive Form for Implementing Living Wills and Advanced Directives. <ul style="list-style-type: none"> <li>• 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.</li> </ul>	Meets Standard	There are guidelines addressing the Ohio advance directive form for implementing living wills and advance directives. The guidelines include instructions for detainees who wish to have a living will other than the generic form or who wish to appoint another to make advance decisions for him or her.
4. The guidelines provide the detainee the opportunity to have a private attorney prepare the documents.	Meets Standard	The guidelines reflect that a detainee may have a private attorney assist in the preparation of the documents.
5. There is a policy addressing "Do Not Resuscitate Orders"	Meets Standard	Policy addresses Do Not Resuscitate orders.

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

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

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
6. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation?	Meets Standard	Policy states that detainees with a validated DNR order in the record would receive maximal therapeutic efforts short of resuscitation.
7. The facility notifies the DHS Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSA's, this notification is made through the local ICE representative.	Meets Standard	Policy requires medical personnel to notify ICE when an ICE detainee has a DNR order in his/her medical record. ICE is responsible to make all other notifications.
8. The facility has written procedures to address the issues of organ donation by detainees.	Meets Standard	Written policy addresses the issue of organ donation by detainees.
9. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.	Meets Standard	Policy addresses immediate notification to ICE when a detainee dies while in custody. ICE is responsible to make all other required notifications.
10. The facility has a policy and procedure to address the death of a detainee while in transport.	Meets Standard	Policy and procedure address the death of a detainee while in transport.
11. At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	Meets Standard	Per ICE, the detainee's remains would be disposed of in accordance with the standard and local laws.
12. In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. <ul style="list-style-type: none"> <li>If the detainee's is a U.S. military veteran, is the Department of Veterans Affairs notified?</li> </ul>	Meets Standard	Per ICE, an indigent's burial would be provided if neither the family nor consulate would claim the detainee's remains. Additionally, if the detainee were a U.S. military veteran, the Department of Veterans Affairs would be notified.

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

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

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
13. An original or certified copy of a detainee's death certificate is placed in the subject's a-file.	Meets Standard	Since the last inspection, there have been no ICE detainee deaths; however, per ICE, a certified copy of the detainee's death certificate would be placed in the detainee specific A-file, and the original would be provided to whomever claims the detainee remains.
14. The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as: <ul style="list-style-type: none"> <li>• Performance of an autopsy;</li> <li>• Who will perform the autopsy;</li> <li>• Obtaining state approved death certificates; and</li> <li>• Local transportation of the body.</li> </ul>	Meets Standard	Policy addresses each of the requirements listed in this component.
15. ICE staff follows established procedures to properly close the case of a deceased detainee.	Meets Standard	Per ICE, established procedures to properly close the case of a deceased detainee would be followed. Since the last inspection, there have been no ICE detainee deaths.

**TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH – REVIEWER SUMMARY**

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

**TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH – REVIEWER SUMMARY**

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

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

A detainee in a community hospital remains under ICE authority. ICE retains the authority to make administrative decisions affecting the detainee (visitors, movement, authorizing/limiting services, etc.). The hospital assumes medical decision-making authority consistent with the contract (treatment regimen, lab tests, x-rays, etc.). Authority over the detainee's treatment, once approved by ICE, is exercised by the hospital's medical personnel who keep ICE informed of major developments.

ICE is notified by telephone or email concerning any detainee who is seriously ill or injured. If a detainee has an advance directive or living will, and it is determined the directive should be implemented, appropriate chain-of-command notifications would be made.

DNR orders are only written by a physician following consultation with the detainee. If a detainee were to implement an advance directive or DNR order, he/she would be referred to ICE for transfer consideration. The detainee's medical record would include documentation validating the DNR order. The outside of the detainee's medical record would be labeled "Do Not Resuscitate".

Written procedure provides for mental health personnel to communicate news of a serious illness or death of a detainee or member of the detainee's family. ICE is responsible for disposition of a deceased detainee's property. Following the death of a detainee and before the initiation of an autopsy or embalming, determination of the detainee's religious affiliation would be made.

Since the last inspection, there have been no ICE detainee deaths, and one non-ICE detainee death as detailed in the remarks section of Suicide Prevention and Intervention.

The facility has policy and procedures in place to properly manage advance directives, a continuum of care, terminal illness and the death of a detainee. The facility does not have the necessary medical resources to accept and care for severely or terminally ill detainees. In such cases, ICE is contacted to transfer the detainee to a more appropriate facility.

Evaluation of the standard was determined following a review of policy, medical records and administrative, medical and ICE personnel interviews.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** (b)(6),(b)(7)(C)

**Completion Date:** 2/23/2018

**Reviewer Signature (for printed form submission):**

## ***Section III***

### **SECURITY AND CONTROL STANDARDS**

<b>CONTRABAND (Key: V)</b>		
<b>Policy:</b> ALL DETENTION FACILITIES WILL ENSURE THE PROPER HANDLING AND DISPOSAL OF ALL CONTRABAND. DOCUMENTATION OF CONTRABAND DESTRUCTION IS REQUIRED.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
1. The facility follows a written procedure for handling illegal contraband. Staff inventory, hold, and report it when necessary to the proper authority for action/possible seizure.	Meets Standard	Policy is in place for the handling of illegal contraband which includes the inventorying, holding and reporting to the proper authority for appropriate action. The information is also included in post orders.
2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	Meets Standard	Contraband that is government property is retained as evidence for disciplinary action or possible criminal prosecution.
3. Staff returns property not needed as evidence to the proper authority. Written procedures cover the return of such property.	Meets Standard	Procedures are in place to return property to the proper authority.
4. Altered property is destroyed following documentation and using established procedures.	Meets Standard	Altered property is documented and destroyed per established procedures.
5. Before confiscating religious items, the OIC or designated investigator contacts a religious authority.	Meets Standard	The on-duty shift supervisor contacts a religious authority before confiscating a religious item.
6. Staff follows written procedures when destroying hard contraband that is illegal.	Meets Standard	Written procedures are in place on how hard contraband is to be destroyed.
7. Hard contraband that is illegal (under criminal statutes) may be retained and used for official use, e.g. training purposes. <ul style="list-style-type: none"> <li>If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use.</li> </ul>	Meets Standard	Contraband that may be evidence in connection with a violation of a criminal statute is confiscated, inventoried as evidence, and turned over to the investigative section of the sheriff's office. If there is no prosecution, the contraband can be returned to the facility to be used as a training aid, per policy.

**CONTRABAND – REVIEWER SUMMARY**  
*(Use following format for dates: mm/dd/yyyy)*



**CONTRABAND – REVIEWER SUMMARY**

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

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

Evaluation of this standard was based on interviews with staff, as well as a review of policy, post orders on contraband, and the detainee handbook. Per the lieutenant, there has been no hard contraband confiscated from detainees during this inspection period.

Detainees, via the orientation video, are advised of the rules and procedures governing contraband. The information is also included in the detainee handbook, which they all receive. All medicine brought into the facility by a detainee is forwarded to medical for disposition. Medication found in the possession of a detainee for who it was not prescribed is considered hard contraband and confiscated and forwarded to the medical department. If ownership is in doubt, medical would be contacted to determine if the detainee had been prescribed the medication.

If the contraband property is not illegal under criminal statutes, and does not pose a security threat, the property is disposed of as defined in policy. Contraband that is government property is retained as evidence for possible disciplinary action or criminal prosecution. Destruction of illegal contraband is performed by the Investigation Division of the Sheriff's Department.

The booking supervisor determines when excess property can be shipped to a third party. The facility will dispose of excess property in accordance with policy. Disputed property will be inventoried and stored pending verification of ownership. ICE detainees claiming ownership of disputed property will be provided with a copy of the inventory when confiscated. The facility determines ownership of a disputed item within seven days following receipt of the inventory. The OIC determines when an item will be destroyed. An item of questionable ownership is generally held for thirty days before considering its destruction.

Contraband is searched for, confiscated, documented and disposed of as this standard requires.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** (b)(6),(b)(7)(C)

**Completion Date:** 2/23/2018

**Reviewer Signature (for printed form submission):**

<b>DETENTION FILES (Key: W)</b>		
<b>Policy:</b> EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY ICE DETAINEE BOOKED INTO THE FACILITY, EXCLUDING ONLY DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETENTION FILE WILL CONTAIN COPIES AND, IN SOME CASES, THE ORIGINAL OF SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE FACILITY: CLASSIFICATION SHEET, MEDICAL QUESTIONNAIRE, PROPERTY INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. A detention file is created for every new arrival whose stay will exceed 24 hours.	Meets Standard	A detention file is created for each detainee on the day of admission.
2. The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	Meets Standard	Files contain originals and copies of documents generated during admission, e.g., property inventories, classification check lists and ICE Form I-203.
3. The detainee's detention file also contains documents generated during the detainee's custody. <ul style="list-style-type: none"> <li>• Special requests</li> <li>• Any G-589s and/or I-77s closed-out during the detainee's stay</li> <li>• Disciplinary forms/Segregation forms</li> <li>• Grievances, complaints, and the disposition(s) of same</li> </ul>	Meets Standard	Detention files contain documents such as those listed in this component.
4. The detention files are located and maintained in a secure area. If not, the cabinets are lockable and distribution of the keys is limited to supervisors.	Meets Standard	Active detention files are securely stored in in the booking area.
5. The detention file remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent, and other documentation.	Meets Standard	Detention files remain active during a detainee's stay. When a detainee is released, closed out documents, such as signed property return forms, transfer/discharge papers and receipts, are added to the file.
6. The officer closing the detention file makes a notation that the file is complete and ready to be archived.	Meets Standard	The staff member closing the detention file makes a notation that the file is complete and moves the file to the archive section of the records area.
7. Staff makes copies and sends documents from the file when properly requested by supervisory personnel at the receiving facility or office.	Meets Standard	
8. Appropriate staff has access to the detention files, and other departmental requests are accommodated by making a request for the file. Each file is properly logged out and in by a representative of the responsible department.	Meets Standard	Staff has access to detention files on an as needed basis. Files are properly logged out when removed from the immediate file storage area.

**DETENTION FILES – REVIEWER SUMMARY**  
(Use following format for dates: mm/dd/yyyy)

DETENTION FILES – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p><b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>The intake officer initiates the creation of the detention file during the admissions process. Detention files remain at the facility and are not transferred with the detainee. According to the SDDO, the field office maintains A-files but does not maintain a detention file. The A-file transfers with the detainee when transferring out of the field office.</p> <p>During the evaluation of this standard, detention files, policy, and the detention file sign-out log were reviewed and staff were interviewed.</p>	
<p><b>Overall Rating:</b> Meets Standard</p>	
<p><b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)</p>	<p><b>Completion Date:</b> 2/23/2018</p>
<p><b>Reviewer Signature (for printed form submission):</b></p>	

<b>DISCIPLINARY POLICY (Key: X)</b>		
<b>Policy:</b> ALL FACILITIES HOUSING ICE DETAINEES ARE AUTHORIZED TO IMPOSE DISCIPLINE ON DETAINEES WHOSE BEHAVIOR IS NOT IN COMPLIANCE WITH FACILITY RULES AND REGULATIONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	Meets Standard	Written policy outlines the disciplinary system which includes a progressive level of reviews and appeals.
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	Meets Standard	Policy states disciplinary action shall not be capricious or retaliatory.
3. Written rules prohibit staff from imposing or permitting the following sanctions: <ul style="list-style-type: none"> <li>• corporal punishment</li> <li>• deviations from normal food service</li> <li>• clothing deprivation</li> <li>• bedding deprivation</li> <li>• denial of personal hygiene items</li> <li>• loss of correspondence privileges</li> <li>• deprivation of physical exercise</li> </ul>	Meets Standard	The items noted in this component are prohibited in the officers' post orders.
4. The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	Meets Standard	The rules of conduct, sanctions, and procedures for violations are defined in writing in the detainee handbook and are communicated verbally to all detainees during orientation while in the booking area. The orientation video is also on the facility's television channel accessible to detainees once they are assigned to a housing unit.
5. The following items are conspicuously posted in Spanish and English, and other dominate languages used in the facility: <ul style="list-style-type: none"> <li>• Rights and Responsibilities</li> <li>• Prohibited Acts</li> <li>• Disciplinary Severity Scale</li> <li>• Sanctions</li> </ul>	Meets Standard	The items in this component are available in the housing units in Spanish and English.
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	Meets Standard	Officers are encouraged to resolve minor rule violations. Officers receive training in dealing with issues at an informal level. Informal resolutions are documented electronically.
7. Incident reports and Notice of Charges are promptly forwarded to the designated supervisor.	Meets Standard	Incident reports and notice of charges are forwarded to the disciplinary hearing sergeant before the end of shift.

**DISCIPLINARY POLICY (Key: X)**

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
8. Incident reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before an investigation ends.	Meets Standard	Policy outlines the disciplinary process and expected timeframes.
9. An intermediate disciplinary process is used to adjudicate minor infractions.	Meets Standard	
10. A disciplinary panel (or equivalent in IGSA's) adjudicates infractions. The panel: <ul style="list-style-type: none"> <li>• Conducts hearings on all charges and allegations referred by the UDC;</li> <li>• Considers written reports, statements, physical evidence, and oral testimony;</li> <li>• Hears pleadings by detainees and staff representatives;</li> <li>• Bases its findings on the preponderance of evidence; and</li> <li>• Imposes only authorized sanctions</li> </ul>	Meets Standard	At this IGSA facility, a sergeant is designated as the disciplinary hearing officer. The sergeant conducts a hearing and takes into consideration written reports, statements, physical evidence, and oral testimony and bases findings on the preponderance of evidence and imposes only authorized sanctions.
11. A staff representative is available if requested for a detainee facing a disciplinary hearing.	Meets Standard	A staff representative will be made available if the detainee is unable to effectively communicate or if requested by a detainee.
12. The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	Meets Standard	Policy permits postponements or continuances when warranted; reasons are documented.
13. The duration of punishment set by the OIC, as recommended by the disciplinary panel, does not exceed established sanctions. The maximum time in disciplinary segregation is limited to 60 days for a single offense.	Meets Standard	Policy limits the amount of time a detainee can spend in disciplinary segregation to sixty days for a single offense.
14. Written procedures govern the handling of confidential-informant information. Standards include criteria for recognizing "substantial evidence"	Meets Standard	Per the lieutenant, confidential informants are not utilized.
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	Meets Standard	All forms relevant to the incident, investigation, committee/panel reports are completed and distributed.

**DISCIPLINARY POLICY – REVIEWER SUMMARY**

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

**DISCIPLINARY POLICY – REVIEWER SUMMARY**

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

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

The evaluation of this standard was based on interviews with security staff. A review of policy, post orders, disciplinary paperwork, and the detainee handbook was also completed. There have been three ICE detainees who received disciplinary sanctions during this inspection period, two were not placed in segregation status, rather they were given limited privilege restrictions. The paperwork was reviewed and was found to be within the guidelines of the standard. One detainee was placed in segregation status and was issued thirty days of full restrictions which consist of commissary, telephone and recreation restriction. The television in the cell was also removed. Legal calls are not affected, and the detainee still receives one hour of recreation daily but is not permitted to recreate with general population detainees. The detainee was transferred from the facility after ten days on restriction. The facility did not produce the paperwork for the time the detainee was in disciplinary segregation status for this inspector to review.

Detainees who have been determined to be incompetent by a medical authority will not be accountable for their actions. Detainees receive translation or interpretation services throughout the investigative, disciplinary, and appeal process, if needed. A sergeant conducts the disciplinary hearing and all appeals are heard by a lieutenant. Time served in segregation status, pending the outcome of the proceedings, may be credited to the number of days to be spent in the segregation status after the infraction is adjudicated. Detainees who have been found not guilty will not have any documentation of the incident placed in their detention file. The facility does maintain documentation in a master file for statistical and historical use.

The detainee handbook informs detainees of the disciplinary process, the prohibited acts and disciplinary severity scale, and the procedure for appealing disciplinary findings. Policy and procedures are in place so detainees who violate the rules of this facility are managed as this standard requires.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** (b)(6),(b)(7)(C)

**Completion Date:** 2/23/2018

**Reviewer Signature (for printed form submission):**

<b>EMERGENCY (CONTINGENCY) PLANS (Key: Y)</b>		
<b>Policy</b> 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.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
1. Policy precludes detainees or detainee groups from exercising control or authority over other detainees.	Meets Standard	Policy prohibits detainees from being given control or authority over other detainees.
2. Detainees are protected from: <ul style="list-style-type: none"> <li>• Personal abuse</li> <li>• Corporal punishment</li> <li>• Personal injury</li> <li>• Disease</li> <li>• Property damage</li> <li>• Harassment from other detainees</li> </ul>	Meets Standard	Written policy clearly states no detainees shall be subjected to any of the items listed in this component.
3. Staff is trained to identify signs of detainee unrest. <ul style="list-style-type: none"> <li>• What type of training and how often?</li> </ul>	Meets Standard	Detainee unrest is covered in pre-service and annual training. Employees are trained to identify signs of unrest and to report unusual behavior to the shift supervisor.
4. Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Officer In Charge (OIC)	Meets Standard	Staff transmit information, both verbally and in writing, on the facility's climate and detainees' attitudes and moods to their shift supervisor and through the facility's electronic management system.
5. There is a designated person or persons responsible for emergency plans and their implementation. Sufficient time is allotted to the person or group for development and implementation of the plans.	Meets Standard	A lieutenant is responsible for the emergency plans and their implementation. Sufficient time is allotted for the development and implementation of the plans.
6. The plans address the following issues: <ul style="list-style-type: none"> <li>• Confidentiality</li> <li>• Accountability (copies and storage locations)</li> <li>• Annual review procedures and schedule</li> <li>• Revisions</li> </ul>	Meets Standard	The emergency plans address confidentiality and accountability. There is a procedure in place for annual review and revisions.
7. Contingency plans include a comprehensive general section with procedures applicable to most emergency situations.	Meets Standard	
8. The facility has cooperative contingency plans with applicable: <ul style="list-style-type: none"> <li>• Local law enforcement agencies</li> <li>• State agencies</li> <li>• Federal agencies</li> </ul>	Meets Standard	The facility has cooperative contingency plans with other local, state and federal law enforcement agencies.

**EMERGENCY (CONTINGENCY) PLANS (Key: Y)**

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
9. All staff receives copies of Hostage Situation Management policy and procedures.	Meets Standard	All staff receives training on the hostage management policy and procedures during their initial and annual training. It is available for review electronically at all times.
10. Staff is trained to disregard instructions from hostages, regardless of rank. Within 24 hours after release, hostages are screened for medical and psychological effects.	Meets Standard	Staff is trained to disregard instructions from hostages, regardless of rank. This directive is also in the post orders. Hostages are screened for medical and psychological effects immediately upon release.
11. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	Meets Standard	Emergency medical treatment for staff and detainees is covered in the emergency plans.
12. Food service maintains at least 3 days' worth of emergency meals for staff and detainees.	Meets Standard	Per the food service administrator, food service maintains at least three weeks' worth of meals for staff and detainees in case of an emergency.
13. Written plans identify locations of shut-off valves and switches for all utilities (water, gas, electric).	Meets Standard	Written plans provide for emergency utility control, including plot plans, identifying water and gas shut-off valves, and electricity on-off switches.
14. Written procedures cover: <ul style="list-style-type: none"> <li>• Work/Food Strike</li> <li>• Disturbances</li> <li>• Escapes</li> <li>• Bomb Threats</li> <li>• Adverse Weather</li> <li>• Internal Searches</li> <li>• Facility Evacuation</li> <li>• Detainee Transportation System Plan</li> <li>• Internal Hostages</li> <li>• Civil Disturbances</li> </ul>	Meets Standard	All items in this component are covered in the facility's written emergency plans.

**EMERGENCY (CONTINGENCY) PLANS – REVIEWER SUMMARY**

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



EMERGENCY (CONTINGENCY) PLANS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p><b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>The evaluation of this standard was based on staff interviews, a review of training documentation, and the emergency plans. The staff training manual includes topics such as facility safety, emergency management, hostages, safety with inmates, etc. Officers are instructed to report signs of unrest including gang activity, sexual misconduct or other complaints to their shift supervisor and complete a report on the facility's computer system.</p> <p>The OIC, in determining when to implement emergency plans, will consider safety, property protection, and if applicable, the safety and welfare of hostages. Input from staff is considered when plans are developed and implemented. All plans include a statement prohibiting unauthorized plan disclosure. Staff reporting procedures, communications equipment/radio location and post emergency procedures is covered in the plans. Each plan is reviewed annually and updated as needed.</p> <p>The fire safety plan has been reviewed and approved by the local fire official on 07/05/2017. A copy of the fire safety plan is on file at the City of Hamilton Fire Department. There have been no incidents during this inspection period that resulted in an emergency plan being implemented. The plans have been created to minimize the harming of human life and the destruction of property as this standard requires.</p>	
<p><b>Overall Rating:</b> Meets Standard</p>	
<p><b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)</p>	<p><b>Completion Date:</b> 2/23/2018</p>
<p><b>Reviewer Signature (for printed form submission):</b></p>	

<b>ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)</b>		
<b>Policy:</b> 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		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
1. The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	Meets Standard	
2. Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	Does Not Meet Standard	Constant inventories were observed not to be maintained for hazardous materials stored in the warehouse. Prior to the conclusion of the inspection, a perpetual inventory system was implemented.
3. The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. <ul style="list-style-type: none"> <li>The files list all storage areas, and include a plant diagram and legend.</li> <li>The MSDSs and other information in the files are available to personnel managing the facility's safety program.</li> </ul>	Meets Standard	The environmental supervisor (ES) and the administrative lieutenant maintain master copies of the Material Safety Data Sheets (MSDS) files. The files are up-to-date with an index listing of all hazardous substances and their location at the facility.
4. All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: <ul style="list-style-type: none"> <li>Wear personal protective equipment; and</li> <li>Report hazards and spills to the designated official.</li> </ul>	Meets Standard	Personal protective equipment is available in areas as required. Interviews with staff indicated any spills would be reported immediately to the fire safety officer.
5. The MSDSs are readily accessible to staff and detainees in work areas.	Meets Standard	
6. Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> <li>Quantities are limited; and</li> <li>Staff always supervises detainees using these substances.</li> </ul>	Meets Standard	Hazardous materials are diluted prior to being issued to detainees and supervised by staff when in use by detainees.
7. All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	Meets Standard	All flammable and combustible materials are stored outside the secure perimeter.
8. Lighting fixtures and electrical equipment installed in storage rooms and other hazardous areas meet National Electrical Code requirements.	Meets Standard	
9. The facility has sufficient ventilation, and provides and ensures clean air exchanges throughout all buildings.	Meets Standard	The facility maintains sufficient ventilation and air exchanges throughout all buildings.
10. Vents return vents, and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility.	Meets Standard	

<b>ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)</b>		
<b>Policy:</b> 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		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
11. Living units are maintained at appropriate temperatures in accordance with industry standards. (68 to 74 degrees in the winter and 72 to 78 degrees in the summer.)	Meets Standard	The automated heating/air conditioning system is currently programmed to maintain ambient temperatures in the housing units and common areas at 70°F year-round.
12. Shower and sink water temperatures do not exceed the industry standard of 120 degrees.	Meets Standard	Shower and sink water temperature checks in the housing units read between 110°F-115°F.
13. All toxic and caustic materials are stored in their original containers in a secure area.	Meets Standard	
14. Excess flammables, combustibles, and toxic liquids are disposed of properly and in accordance with MSDSs.	Meets Standard	An interview with the maintenance supervisor confirms that all excess flammables, combustibles and toxic liquids are stored outside the secure perimeter and are disposed of in accordance with the SDSs.
15. Staff directly supervise and account for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, e.g., shoe dye. All such products are clearly labeled. "Accountability" includes issuing such products to detainees in the smallest workable quantities.	N/A	The facility does not use products containing methyl alcohol.
16. Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.	Meets Standard	Employees receive training on hazardous materials, to include their use, storage and disposal. All detainees receive training in the use of hazardous materials.
17. The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association and the Occupational Safety and Health Administration (OSHA).	Meets Standard	The facility is inspected annually by the City of Hamilton Fire Department. The last inspection was completed 07/05/2017.
18. A technically qualified officer conducts the fire and safety inspections.	Meets Standard	The facility has a technically qualified officer conducting fire and safety inspections.
19. The Safety Office (or officer) maintains files of inspection reports.	Meets Standard	

<b>ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)</b>		
<b>Policy:</b> 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		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
20. The facility has an approved fire prevention, control, and evacuation plan.	Meets Standard	The fire prevention, control and evacuation plan has been approved by the City of Hamilton Fire Chief.
21. The plan requires: <ul style="list-style-type: none"> <li>• Monthly fire inspections;</li> <li>• Fire protection equipment strategically located throughout the facility;</li> <li>• Public posting of emergency plans with accessible building/room floor plans;</li> <li>• Exit signs and directional arrows; and</li> <li>• An area-specific exit diagram conspicuously posted in the diagrammed area.</li> </ul>	Meets Standard	A review of policy, procedures and documentation confirms that the fire prevention, control and evacuation plan includes all the elements listed in this component.
22. Fire drills are conducted and documented monthly.	Meets Standard	Fire drills are scheduled so that employees on each shift participate in an annual drill. Detainees were evacuated, except in areas where safety or security could be jeopardized. The evacuations were simulated in areas where the detainees were not evacuated.
23. A sanitation program covers barbering operations.	Meets Standard	
24. The barber shop has the facilities and equipment necessary to meet sanitation requirements.	Meets Standard	The facility does not have a dedicated barbershop. Barbering is conducted in a designated common area in the housing pods. The facility has received a waiver for this component from ICE/ Detention Management Division, dated 07/17/2013, allowing barbering services to be conducted in the housing pod's dayroom common area.
25. The sanitation standards are conspicuously posted in the barbershop.	Meets Standard	
26. Written procedures regulate the handling and disposal of used needles and other sharp objects.	Meets Standard	

<b>ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)</b>		
<b>Policy:</b> 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		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
27. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	Meets Standard	Inventories on items representing potential safety and security risks are being conducted weekly by a designated healthcare individual.
28. Standard cleaning practices include: <ul style="list-style-type: none"> <li>Using specified equipment; cleansers; disinfectants and detergents.</li> <li>An established schedule of cleaning and follow-up inspections.</li> </ul>	Meets Standard	The observed cleaning practices incorporate the listed items of this component.
29. The facility follows standard cleaning procedures.	Meets Standard	
30. Spill kits are readily available.	Meets Standard	
31. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	Meets Standard	Infectious/biohazardous waste is disposed of through a contract with a licensed medical waste contractor. Infectious waste is labeled and placed in red bags that are impermeable and then boxed for biohazardous waste storage. Standard precautions are followed by all personnel when handling untreated infectious waste.
32. Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	Meets Standard	All employees are trained in standard precautions upon initial hire.
33. Do the methods for handling/disposing of refuse meet all regulatory requirements?	Meets Standard	
34. A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. <ul style="list-style-type: none"> <li>At least monthly.</li> <li>The pest-control program includes preventative spraying for indigenous insects.</li> </ul>	Meets Standard	Pest control services are provided through a contract with a licensed pest control company. Inspections and preventive spraying occur on a monthly or as-needed basis.
35. Drinking water and wastewater is routinely tested according to a fixed schedule.	Meets Standard	

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
<b>Policy:</b> EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
36. Emergency power generators are tested at least every two weeks. <ul style="list-style-type: none"> <li>• Other emergency systems and equipment receive testing at least quarterly.</li> <li>• Testing is followed-up with timely corrective actions (repairs and replacements).</li> </ul>	Meets Standard	Generators are tested weekly for one hour and also inspected weekly for mechanical readiness. Other emergency systems and equipment are tested quarterly. Preventive maintenance is completed routinely.

ENVIRONMENTAL HEALTH AND SAFETY – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>
<p><b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>The facility provides a safe environment for detainees and staff through fire prevention practices and the control of hazardous materials. Fire protection equipment is installed throughout the facility and is inspected, tested and maintained in accordance with applicable codes. A review of policy, interviews with employees, and an inspection of the physical plant was conducted. Inspections, maintenance and service records were available for review and confirm that inspections are completed according to schedule. The weekly and monthly fire and safety inspections are documented and coordinated by the environmental supervisor. Any outstanding issues or concerns noted during the inspections are addressed in a timely manner and corrective action is documented.</p> <p>Sound environmental health and safety policies and procedures were observed to be in place during the inspection. General cleaning procedures include isolation cleaning, terminal cleaning, blood and body fluid clean-up and the selection and use of disinfectants. The facility has an exposure-control plan. Items included under this plan/policy are: hypodermic needles and syringes, scalpel blades, glass vials or ampoules containing materials deemed to be infectious, burrs, glass cartridges, and lancets. Should an individual become exposed while handling a potentially contaminated sharp instrument, the individual is counseled regarding baseline testing for HBV and HIV and referred to their health care provider. If the injury involves a person who is a known source of possible infection, that person is also tested as required. The incident is reported as an occupational injury and documented in accordance with applicable regulations and laws. There have been no reported incidents during the past twelve months.</p> <p>The environmental supervisor and maintenance supervisor maintain the master SDS binder. The master file includes a plant diagram and legend showing the location of all hazardous materials storage areas and a comprehensive, up-to-date list of emergency phone numbers. Semi-annual reviews of the master indexes are not conducted. During the inspection it was observed that accurate inventories were not being maintained in the chemical storage area. Inventory was only being done for ordering purposes. Inventory records were not being maintained separately for each substance, with entries for each substance logged on a separate card/form. Prior to the conclusion of the inspection a perpetual inventory system was implemented.</p> <p>All areas of the facility were visited and found to be secure, properly ventilated, well-lit and with sanitation levels being maintained at an above average level. The housing units were observed to be clean and graffiti free. Hot water temperatures were observed to be maintained within industry standards. An inspection of the facility overall reflected a positive environment, with no issues being noted with the conditions of confinement. The evaluation of this standard was based on a review of policy, procedures and documentation, observations and interviews with staff and detainees.</p>
<p><b>Overall Rating:</b> Meets Standard</p>

ENVIRONMENTAL HEALTH AND SAFETY – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Reviewer Name (Printed): (b)(6),(b)(7)(C)	Completion Date: 2/23/2018
Reviewer Signature (for printed form submission):	

<b>HOLD ROOMS IN DETENTION FACILITIES (Key: AA)</b>		
<b>Policy:</b> 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.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
1. The hold rooms are situated within the secure perimeter.	Meets Standard	The hold rooms are located within the secure perimeter of the facility.
2. The hold rooms are well ventilated well lighted, and all activating switches are located outside the room.	Meets Standard	Hold rooms are well ventilated and well lit; all activating switches are located outside the rooms.
3. The hold rooms contain sufficient seating for the number of detainees held.	Meets Standard	The hold rooms are sufficient for the number of detainees held.
4. Bunks, cots, beds, or other related make-shift sleeping apparatus are precluded from use inside hold rooms.	Meets Standard	No bunks, cots, beds, or other related make-shift sleeping apparatuses were observed inside the hold rooms utilized for detainees. Several rooms in the intake area did have sleeping apparatus; however, the supervisor stated the rooms are used for medical/suicide watches, not for detainees.
5. The walls and ceilings of the hold rooms are tamper and escape proof.	Meets Standard	The walls and ceilings of the hold rooms are tamper resistant and escape proof.
6. Individuals are not held in hold rooms for more than 12 hours.	Meets Standard	
7. Male and females are segregated from each other.	Meets Standard	The facility has separate hold rooms for males and females.
8. Detainees under the age of 18 are not held with adult detainees.	Meets Standard	This facility does not house detainees under the age of eighteen; however, they would be separated if they did receive a minor.
9. Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	Meets Standard	Hygiene items are provided to detainees.



<b>HOLD ROOMS IN DETENTION FACILITIES (Key: AA)</b>		
<b>Policy:</b> 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.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
10. In older facilities, officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.	Meets Standard	Officers are within visual and audible range of the hold rooms. All hold rooms, except for one, are equipped with a toilet. The large hold room utilized to show the orientation video does not have a toilet. With the officers in close proximity the detainees have easy access to a toilet if needed.
11. All detainees are given a pat down search for weapons or contraband before being placed in the room.	Meets Standard	Detainees are given a pat down search and go through a full body scanner prior to being placed in a hold room.
12. Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring). <ul style="list-style-type: none"> <li>• Hold rooms are irregularly monitored every 15 minutes.</li> <li>• Unusual behavior or complaints are noted.</li> </ul>	Meets Standard	Officers closely supervise the hold rooms and log their observations. Unusual behavior is documented and reported to the supervisor.
13. When the last detainee has been removed from the hold room, it is given a thorough inspection.	Meets Standard	An officer assigned to the booking area is responsible for conducting a thorough inspection of the hold rooms once the last detainee has been removed.
14. There is a written evacuation plan that includes a designated officer to remove detainees from hold rooms in case of fire and/or building evacuation.	Meets Standard	The evacuation plan is included in the facility's emergency plan. The area supervisor is responsible for removing detainees in case of fire and/or building evacuation.
15. An appropriate emergency service is called immediately upon a determination that a medical emergency may exist.	Meets Standard	Medical staff is notified immediately of any medical emergency. An on-call physician is on call after hours. 911 would be called if additional resources were needed.

**HOLD ROOMS IN DETENTION FACILITIES – REVIEWER SUMMARY**  
*(Use following format for dates: mm/dd/yyyy)*

<b>HOLD ROOMS IN DETENTION FACILITIES – REVIEWER SUMMARY</b> <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p><b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>The evaluation of this standard was based on an inspection of the hold rooms and the booking area. Interviews with the officers and the supervisor of the area were conducted. The booking documentation maintained in the area, policy and the booking post orders were reviewed. Meals are provided to detainees in accordance to the established feeding times set by the facility for the general population; however, if a detainee is received and has not eaten, a meal would be provided. Pregnant detainees have access to pre-natal trays and snacks.</p> <p>An officer observes every detainee, checking for obvious mental or physical conditions, prior to placing them in a hold room. All detainees undergo a pat down search by an officer of the same gender; each detainee then goes through the full body scanner before being placed in a hold room. The facility began utilizing the full body scanner in March 2017. A detention log is maintained for every ICE detainee. No officer enters a hold room without another officer being stationed outside the door ready to respond as needed.</p> <p>The hold rooms utilized for ICE detainees are equipped with stainless steel, combination lavatory/toilet fixtures in accordance with the American with Disabilities Act of 1990, except for one large hold room which is utilized to show the orientation video. Officers are stationed in close proximity and can escort a detainee to the restroom if needed.</p> <p>In addition to the officers assigned to booking, the area is monitored by the officer in the control center via the camera system.</p>	
<p><b>Overall Rating:</b> Meets Standard</p>	
<p><b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)</p>	<p><b>Completion Date:</b> 2/23/2018</p>
<p><b>Reviewer Signature (for printed form submission):</b></p>	

<b>KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) (Key: AB)</b>		
<b>Policy</b> IT IS THE POLICY OF THE ICE SERVICE TO MAINTAIN AN EFFICIENT SYSTEM FOR THE USE, ACCOUNTABILITY AND MAINTENANCE OF ALL KEYS AND LOCKS.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
1. The security officer[s], or equivalent in IGSA's, has attended an approved locksmith training program.	Meets Standard	The maintenance supervisor has attended an approved locksmith training program.
2. The security officer, or equivalent in IGSA's, has responsibly for all administrative duties and responsibilities relating to keys, locks etc.	Meets Standard	A sergeant has the responsibility for all the administrative duties and responsibilities relating to keys and the maintenance supervisor for the locks.
3. The security officer, or equivalent in IGSA's, provides training to employees in key control.	Meets Standard	The sergeant is responsible for providing training to all employees on key control.
4. The security officer, or equivalent in IGSA's, maintains inventories of all keys, locks and locking devices.	Meets Standard	The sergeant maintains inventories of all keys. The maintenance supervisor maintains the inventories for locks and locking devices.
5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	Meets Standard	A preventative maintenance program, and documentation of such, is maintained by the maintenance department electronically. The facility has a contract with Unique Security to provide preventive maintenance on the locks on a quarterly basis. Documentation of the service was reviewed.
6. Facility policies and procedures address the issue of compromised keys and locks.	Meets Standard	
7. The security officer, or equivalent in IGSA's, develops policy and procedures to ensure safe combinations integrity.	N/A	The facility does not have combination safes per the maintenance supervisor.
8. Only dead bolt or dead lock functions are used in detainee accessible areas.	Meets Standard	
9. Only authorized locks (as specified in the Detention Standard) are used in detainee accessible areas.	Meets Standard	
10. Grand master keying systems are prohibited.	Meets Standard	Policy prohibits a grand master keying system.
11. All worn or discarded keys and locks are cut up and properly disposed of.	Meets Standard	The maintenance supervisor is responsible for the proper disposal of worn or discarded keys and locks.
12. Padlocks and/or chains are prohibited from use on cell doors.	Meets Standard	

<b>KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) (Key: AB)</b>		
<b>Policy</b> IT IS THE POLICY OF THE ICE SERVICE TO MAINTAIN AN EFFICIENT SYSTEM FOR THE USE, ACCOUNTABILITY AND MAINTENANCE OF ALL KEYS AND LOCKS.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
13. The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to: <ul style="list-style-type: none"> <li>Occupational Safety and Environmental Health Manual, Ch. 3;</li> <li>National Fire Protection Association Life Safety Code 101.</li> </ul>	Meets Standard	
14. The operational keyboard is sufficient to accommodate all the facility key rings, including keys in use, and is located in a secure area.	Meets Standard	The operational keyboard in the control room is of sufficient size to accommodate all the facility's keys.
15. Procedures are in place to ensure that key rings are: <ul style="list-style-type: none"> <li>Identifiable;</li> <li>The numbers of keys are cited; and</li> <li>Keys cannot be removed.</li> </ul>	Meets Standard	The key rings are secured so keys cannot be removed; the number of keys on the rings is cited on a chit which is secured on the ring.
16. Emergency keys are available for all areas of the facility.	Meets Standard	<b>(b)(7)(E)</b>
17. The facilities use a key accountability system.	Meets Standard	All keys are accounted for on each shift in the control center. Documentation is maintained electronically.
18. Authorization is necessary to issue any restricted key.	Meets Standard	Restricted keys can be accessed only by those authorized by the shift supervisor.
19. Individual gun lockers are provided. <ul style="list-style-type: none"> <li>They are located in an area that permits constant officer observation.</li> <li>In an area that does not allow detainee or public access.</li> </ul>	Meets Standard	<b>(b)(7)(E)</b>
20. The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	Meets Standard	Policy and post orders are in place for key accountability. Keys are counted once per shift and verified in writing by the shift supervisor.

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) (Key: AB)		
Policy IT IS THE POLICY OF THE ICE SERVICE TO MAINTAIN AN EFFICIENT SYSTEM FOR THE USE, ACCOUNTABILITY AND MAINTENANCE OF ALL KEYS AND LOCKS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> <li>• Issued keys are returned immediately in the event an employee inadvertently carries a key ring home.</li> <li>• When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified.</li> <li>• Detainees are not permitted to handle keys assigned to staff.</li> </ul>	Meets Standard	Staff members receive training on key control. Policy addresses all items in this component.

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
<b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> The evaluation of this standard was based on interviews with the sergeant designated as the key control officer, the maintenance supervisor, and an officer in the control center. A review of training documentation, preventative maintenance documentation and key accountability logs was completed. Observation of key issuance/accountability and individual key rings support proper procedures are being followed.  Housing unit officers exchange keys when they relieve each other during shift change. The control center officer calls and confirms they have the proper number of keys during the required daily accounting of all facility keys. The control center officer completes a report of the accounting of all the keys electronically on the facility's computer system.  There is a post order for tool and key control. No keys are issued on a twenty-four-hour basis without the OIC's written authorization. The OIC has developed written procedures authorizing the use of restricted keys. Keys and locks are maintained, accounted for and secured as this standard requires.	
<b>Overall Rating:</b> Meets Standard	
<b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)	<b>Completion Date:</b> 2/23/2018
<b>Reviewer Signature (for printed form submission):</b>	

**POPULATION COUNTS (Key: AC)**

**Policy:** ALL DETENTION FACILITIES SHALL ENSURE AROUND-THE-CLOCK ACCOUNTABILITY FOR ALL DETAINEES. THIS REQUIRES THAT THEY CONDUCT AT LEAST ONE FORMAL COUNT OF THE DETAINEE POPULATION PER SHIFT, WITH ADDITIONAL FORMAL AND INFORMAL COUNTS CONDUCTED AS NECESSARY.

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Staff conduct a formal count at least once each shift.	Meets Standard	<b>(b)(7)(E)</b>
2. Activities cease or are strictly controlled while a formal count is being conducted.	Meets Standard	All activities cease during formal counts.
3. Certain operations cease during formal counts.	Meets Standard	All operations cease during formal counts.
4. All movement ceases for the duration of a formal count.	Meets Standard	All movement of detainees cease during a formal count.
5. Formal counts in all units take place simultaneously.	Meets Standard	Formal counts are conducted simultaneously in the housing units.
6. Detainee participation in counts is prohibited.	Meets Standard	Detainees are prohibited from participating in counts.
7. A face-to-photo count follows each unsuccessful recount.	Meets Standard	A face-to-photo count is conducted after each unsuccessful recount, per policy.
8. Officers positively identify each detainee before counting him/her as present.	Meets Standard	Officers are required to positively identify each detainee before counting him/her as present. Officers utilize detainee's pictures on their wristband to verify identity.
9. Written procedures cover informal and emergency counts. <ul style="list-style-type: none"> <li>• They are followed during informal counts and emergencies.</li> </ul>	Meets Standard	
10. The control officer (or other designated position) maintains an out -count record of all detainees temporarily leaving the facility.	Meets Standard	The court docket officer in booking maintains an out-count record of all detainees temporarily leaving the facility.
11. This training is documented in each officer's training folder.	Meets Standard	

**POPULATION COUNTS – REVIEWER SUMMARY**

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

POPULATION COUNTS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p><b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>The evaluation of this standard was based on interviews with the shift supervisor, the control center officer and an officer in a housing unit. A review of policy, count documentation, and post orders was conducted. A formal count was observed at (b)(7)(E) on 02/22/2018.</p> <p>During formal counts, detainees are required to stand at their cell doors and wait for the officer to count them. They are required to be in full uniform, display their wristband, and give the officer their name. Officers verify detainee by their picture on the wristband. During all formal counts no movement or talking is permitted.</p> <p>All counts are called into the shift supervisor who records, reviews and verifies the count information; count is not cleared until the shift supervisor has verified the submitted information. The master count is maintained in the shift supervisor's office.</p> <p>Informal counts are conducted at irregular intervals to verify the presence of all detainees. The formal and informal counts ensure around the clock accountability for all detainees.</p>	
<p><b>Overall Rating:</b> Meets Standard</p>	
<p><b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)</p>	<p><b>Completion Date:</b> 2/23/2018</p>
<p><b>Reviewer Signature (for printed form submission):</b></p>	

<b>POST ORDERS (Key: AD)</b>		
<b>Policy:</b> ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR CARRYING OUT THEIR DUTIES. THIS GUIDANCE INCLUDES THE POST ORDERS ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST ANNUALLY, AND GIVEN TO EACH OFFICER UPON ASSIGNMENT TO THAT POST.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
1. Every fixed post has a set of post orders.	Meets Standard	
2. Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	Meets Standard	Post orders are updated and include the latest information and updates. Revisions are available electronically. Staff are notified of changes and are required to review and acknowledge their understanding.
3. One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.	Meets Standard	A sergeant is responsible for keeping all post-orders current.
4. The IGSA maintains a complete set (central file) of post orders.	Meets Standard	A complete set of post orders is maintained electronically. The system is accessible to all personnel and can be reviewed on the computer at their post.
5. The central file is accessible to all staff.	Meets Standard	All staff has access to the post orders electronically.
6. The OIC or Contract / IGSA equivalent initiates/authorizes all post-order changes.	Meets Standard	The OIC authorizes all post-order changes.
7. The OIC or Contract / IGSA equivalent has signed and dated the last page of every section.	Meets Standard	The OIC signs and dates the post orders.
8. A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.	Meets Standard	Post orders are reviewed annually or as needed. The OIC completed the annual review on 12/31/2017.
9. Procedures keep post orders and logbooks secure from detainees at all times.	Meets Standard	Post orders and logbooks are secured; detainees do not have access.
10. Every armed-post officer qualifies with the post weapon(s) before assuming post duty.	Meets Standard	The only armed post at the facility is transportation. It is the shift supervisors' responsibility to ensure that every officer's qualification is current prior to assigning them to an armed post.
11. Armed-post post orders provide instructions for escape attempts.	Meets Standard	
12. The post orders for housing units track the event schedule.	Meets Standard	The event schedule for the housing units is included in the post order.



POST ORDERS (Key: AD)		
<b>Policy:</b> ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR CARRYING OUT THEIR DUTIES. THIS GUIDANCE INCLUDES THE POST ORDERS ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST ANNUALLY, AND GIVEN TO EACH OFFICER UPON ASSIGNMENT TO THAT POST.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
13. Housing-unit post officers record all detainee activity in a log. The post order includes instructions on maintaining the logbook.	Meets Standard	The housing unit officers maintain an electronic log of all detainee activity. The housing unit post order instructs the officers on how to maintain the log.

POST ORDERS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p><b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>The evaluation of this standard was based on a review of post orders, policy, and training documents; as well as security staff interviews.</p> <p>Officers are trained during their initial orientation and on-the-job training on all post orders. They also receive annual training on post orders. A signature is required on all training, and acknowledgement of review and understanding on all revisions.</p> <p>Post orders for non-permanent assignments are developed in advance or as soon as possible after the need arises. Written procedures provide official on-duty time for officers to read post orders and ensure that officers read those applicable post orders prior to assuming the post. Officers use the post orders to familiarize themselves with the duties for which they are responsible. Supervisors ensure that officers understand the post orders, whether the assignment is temporary, permanent or due to an emergency.</p> <p>The post orders for posts that control access to the institution clearly state that any staff member who is taken hostage is considered to be under duress and any order issued by them, regardless of their rank or position of authority, is to be disregarded.</p>	
<b>Overall Rating:</b> Meets Standard	
<b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)	<b>Completion Date:</b> 2/23/2018
<b>Reviewer Signature (for printed form submission):</b>	

<b>SECURITY INSPECTIONS (Key: AE)</b>		
<b>Policy:</b> POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHERE SPECIAL SECURITY PROCEDURES MUST BE FOLLOWED, WILL BE RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNDING IN FACILITY OPERATIONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> <li>• Posts to be inspected;</li> <li>• Required inspection forms;</li> <li>• Frequency of inspections;</li> <li>• Guidelines for checking security features; and</li> <li>• Procedures for reporting weak spots, inconsistencies, and other areas needing improvement</li> </ul>	Meets Standard	Policy outlines the expectations of inspections and how they are to be documented. All items listed in this component are covered in policy. Post orders outline which posts conduct security inspections throughout the facility. An electronic log is used to report and document the results of the inspections.
2. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	Meets Standard	Per policy and procedure, every officer is required to conduct a security check of their assigned area. (b)(7)(E) <b>(b)(7)(E)</b>
3. Documentation of security inspections is kept on file.	Meets Standard	The documentation of the security inspections is kept electronically.
4. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	Meets Standard	The facility utilizes an electronic system to notify maintenance of a problem. The system records the problem being reported and area where problem is located. The shift supervisor follows up on recurring problems.
5. The front-entrance officer checks the ID of everyone entering or exiting the facility.	Meets Standard	The front entrance officer checks each visitor's ID prior to having them sign in on the logbook.
6. All visits are officially recorded in a visitor logbook or electronically recorded.	Meets Standard	
7. The facility has a secure visitor pass system.	Meets Standard	
8. Every Control Center officer receives specialized training.	Meets Standard	All officers receive extensive training in the control center with an experienced officer.
9. The Control Center is staffed around the clock.	Meets Standard	The control center is staffed at all times (b)(7)(E)
10. Policy restricts staff access to the Control Center.	Meets Standard	Access to the control center is restricted by post orders.
11. Detainees are restricted from access to the Control Center.	Meets Standard	No detainee is permitted in the control center.

<b>SECURITY INSPECTIONS (Key: AE)</b>		
<b>Policy:</b> POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHERE SPECIAL SECURITY PROCEDURES MUST BE FOLLOWED, WILL BE RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNDING IN FACILITY OPERATIONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
12. Communications are centralized in the Control Center.	Meets Standard	All communication is centralized in the control center.
13. Officers monitor all vehicular traffic entering and leaving the facility.	N/A	Vehicles do not enter the secure perimeter of the facility.
14. The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: <ul style="list-style-type: none"> <li>• The driver's name;</li> <li>• Company represented;</li> <li>• Vehicle contents;</li> <li>• Delivery date and time;</li> <li>• Date and time out;</li> <li>• Vehicle license number; and</li> <li>• Name of employee responsible for the vehicle during the visit</li> </ul>	N/A	Vehicles do not enter the secure perimeter of the facility.
15. Officers thoroughly search each vehicle entering and leaving the facility.	N/A	Vehicles do not enter the secure perimeter of the facility.
16. The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	Meets Standard	
17. Tools being taken into the secure area of the facility are inventoried before entering and prior to departure.	Meets Standard	Tools are inventoried before entering and prior to departing the secure area of the facility.
18. The SMU entrance has a sally port.	Meets Standard	All housing units have a sally port. The facility utilizes cells in each of the housing units to place detainees in segregation status.
19. Written procedures govern searches of detainee housing units and personal areas.	Meets Standard	
20. Housing area searches occur at irregular times.	Meets Standard	Searches in the housing units are conducted at irregular times.
21. Every search of the SMU and other housing units is documented.	Meets Standard	Documentation of searches is maintained electronically.
<b>(b)(7)(E)</b>	Meets Standard	<b>(b)(7)(E)</b>
	Meets Standard	

SECURITY INSPECTIONS (Key: AE)		
Policy: POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHERE SPECIAL SECURITY PROCEDURES MUST BE FOLLOWED, WILL BE RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNDING IN FACILITY OPERATIONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
24. Daily procedures include: <ul style="list-style-type: none"> <li>• (b)(7)(E)</li> </ul>	Does Not Meet Standard	(b)(7)(E)
25. Visitation areas receive frequent, irregular inspections.	Meets Standard	

SECURITY INSPECTIONS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p><b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>The evaluation of this standard was based on interviews with security personnel. A review of logs, policy, post orders and inspection forms was conducted. Observation of the entry processing and the operations in the control center verified compliance to policy and procedures to ensure security is maintained at all times. The entrance into the secure perimeter of the facility has (b)(7)(E)</p> <p>In addition to daily security inspections conducted by officers, there are safety and sanitation inspections done monthly. (b)(7)(E) The maintenance supervisor is notified via the electronic maintenance system when a maintenance issue is identified during an inspection. The maintenance supervisor assigns the work and monitors the needed repair. Security issues and quality of life issues are addressed immediately.</p> <p>Outside contractors are brought into the facility through the receiving dock, their tools are inventoried by maintenance and a copy of the inventory is kept with them. The contractor is escorted by a maintenance worker at all times. Before the contractor leaves the facility, all tools are accounted for and verified by the maintenance supervisor.</p> <p>(b)(7)(E)</p> <p>Female detainees interviewed voiced concerns with food service. Their concerns were relayed to the inspector reviewing those standards for follow-up. One female detainee presented with possible mental health issues. The inspector reviewing the medical standards reviewed her file and she was scheduled to be seen by a psychiatrist on 02/22/2018. There were no issues or concerns voiced by male detainees. All detainees were knowledgeable on the phone system and the grievance process. All detainees stated they felt safe at the facility. The overall appearance and sanitation of the facility was above average. There was little to no clutter and no graffiti in the cells inspected in the various housing units.</p>	
<b>Overall Rating:</b> Meets Standard	
<b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)	<b>Completion Date:</b> 2/23/2018
<b>Reviewer Signature (for printed form submission):</b>	

<b>SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)</b>		
<b>Policy:</b> 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).		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
1. The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. <ul style="list-style-type: none"> <li>• Detainees are placed in the SMU (administrative) in accordance with written criteria.</li> </ul>	Meets Standard	There is written criteria for a detainee to be placed in administrative segregation status.
2. In exigent circumstances, staff may place a detainee in the SMU (administrative) before a written order has been approved. <ul style="list-style-type: none"> <li>• A copy of the order given to the detainee within 24 hours.</li> </ul>	Meets Standard	Policy permits an employee to place a detainee in segregation status, before a written order is approved, if the situation warrants such action. The detainee receives a copy of the order within twenty-four hours.
3. The OIC (or equivalent) regularly reviews the status of detainees in administrative detention. <ul style="list-style-type: none"> <li>• A supervisory officer conducts a review within 72 hours of the detainee's placement in the SMU (administrative).</li> </ul>	Meets Standard	The disciplinary hearing officer reviews the status of detainees within seventy-two hours of their placement in administrative segregation status. The OIC reviews and can approve, modify or sustain the supervisor's sanctions.
4. A supervisory officer conducts another review after the detainee has spent seven days in administrative segregation, and: <ul style="list-style-type: none"> <li>• Every week thereafter for the first month; and</li> <li>• Every 30 days after the first month.</li> <li>• Does each review include an interview with the detainee?</li> <li>• Is a written record made of the decision and the justification?</li> </ul>	Meets Standard	The disciplinary hearing supervisor reviews a detainee's placement in administrative segregation status after seven days; and all subsequent reviews as required of this component. A written record of all decisions and the justification is made. The disciplinary hearing officer maintains a log of all detainees in administrative segregation status and the dates of past and future reviews. All reviews are maintained electronically.
5. The detainee is given a copy of the decision and justification for each review. <ul style="list-style-type: none"> <li>• The detainee is given an opportunity to appeal the reviewer's decision to someone else in the facility.</li> </ul>	Meets Standard	The detainee will receive a copy of the decision and justification for each review. The detainee has the right to appeal the decision through the grievance process.

<b>SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)</b>		
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<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
<p>6. The OIC (or equivalent) routinely notifies the Field Office Director (or staff officer in charge of IGSA's) any time a detainee's stay in administrative detention exceeds 30 days.</p> <ul style="list-style-type: none"> <li>• 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.</li> </ul>	Meets Standard	The ICE field office is notified telephonically, and receives a facsimile, of the segregation order when a detainee is placed in administrative segregation status. The ICE field office is notified when segregation lasts longer than thirty and sixty days. There were no detainees in administrative segregation status during this inspection period.
<p>7. The OIC (or equivalent) reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU.</p> <ul style="list-style-type: none"> <li>• A written record is made of the decision and the justification.</li> <li>• The detainee receives a copy of this record.</li> </ul>	Meets Standard	The disciplinary hearing supervisor reviews the case of every detainee who has objected to their placement in administrative segregation after thirty days. A written record of the decision and justification is provided to the detainee.
<p>8. The detainee is given the right to appeal to the OIC (or equivalent) the conclusions and recommendations of any review conducted after the detainee have remained in administrative segregation for seven consecutive days.</p>	Meets Standard	The detainee has the right to appeal the decision of the review of his/her continued placement in administrative segregation.
<p>9. Administratively segregated detainees enjoy the same general privileges as detainees in the general population.</p>	Meets Standard	The same general privileges of general population are provided to detainees in administrative segregation status.
<p>10. The SMU is:</p> <ul style="list-style-type: none"> <li>• Well ventilated;</li> <li>• Adequately lighted;</li> <li>• Appropriately heated; and</li> <li>• Maintained in a sanitary condition.</li> </ul>	Meets Standard	The cells utilized for administrative segregation status are located in the housing units. They are well ventilated, adequately lit, heated appropriately and maintained in a sanitary condition.
<p>11. All cells are equipped with beds.</p> <ul style="list-style-type: none"> <li>• Every bed is securely fastened to the floor or wall.</li> </ul>	Meets Standard	All cells are equipped with beds fastened to the wall.

<b>SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)</b>		
<b>Policy:</b> 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).		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
<p>12. The number of detainees in any cell does not exceed the occupancy limit.</p> <ul style="list-style-type: none"> <li>When occupancy exceeds recommended capacity, do basic living standards decline?</li> <li>Do criteria for objectively assessing living standards exist?</li> <li>If yes, are the criteria included in the written procedures?</li> </ul>	Meets Standard	The cells are double occupancy. This is never exceeded per the lieutenant.
<p>13. The segregated detainees have the same opportunities to exchange/laundry clothing, bedding, and linen as detainees in the general population.</p>	Meets Standard	Bedding and linens are exchanged and laundered the same as general population.
<p>14. Detainees receive three nutritious meals per day, from the general population's menu of the day.</p> <ul style="list-style-type: none"> <li>Do detainees eat only with disposable utensils?</li> <li>Is food ever used as punishment?</li> </ul>	Meets Standard	Food is not used as punishment. Detainees in administrative segregation status receive the same meal service as those in general population.
<p>15. Each detainee maintains a normal level of personal hygiene in the SMU.</p> <ul style="list-style-type: none"> <li>The detainees have the opportunity to shower and shave at least three times a week.</li> <li>If not, explain.</li> </ul>	Meets Standard	Detainees in administrative segregation status have the opportunity to shower and shave daily.
<p>16. The detainees are provided:</p> <ul style="list-style-type: none"> <li>Barbering services;</li> <li>Recreation privileges in accordance with the "Detainee Recreation" standard;</li> <li>Non-legal reading material;</li> <li>Religious material;</li> <li>The same correspondence privileges as detainees in the general population;</li> <li>Telephone access similar to that of the general population; and</li> <li>Personal legal material.</li> </ul>	Meets Standard	Detainees in administrative segregation status are provided all services listed in this component unless there is a documented security concern.
<p>17. A health care professional visits every detainee at least three times a week.</p> <ul style="list-style-type: none"> <li>The shift supervisor visits each detainee daily.</li> <li>Weekends and holidays.</li> </ul>	Meets Standard	Visits by the shift supervisor and health care professionals are documented in the unit log. Per policy, medical staff makes visual and verbal contact with each detainee in administrative segregation status at least three days a week. The shift supervisor visits each detainee daily, including weekends and holidays.

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<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
18. Procedures comply with the "Visitation" standard. <ul style="list-style-type: none"> <li>The detainee retains visiting privileges; and</li> <li>The visiting room is available during normal visiting hours.</li> </ul>	Meets Standard	Detainees are permitted to have visits during normal visiting hours unless there is a documented threat to security.
19. Visits from clergy are allowed.	Meets Standard	Clergy visitation privileges are the same for detainees in administrative segregation status as those in general population unless there is a documented threat to security.
20. Detainees have the same law-library access as the general population. <ul style="list-style-type: none"> <li>Are they required to use the law library <input checked="" type="checkbox"/> Separately, or <input type="checkbox"/> As a group?</li> <li>Are legal materials brought to them?</li> </ul>	Meets Standard	Detainees in administrative segregation status have the same access to the law library as the general population. The portable law library materials, including LexisNexis, are brought to the unit.
21. The SMU maintains a permanent log of detainee-related activity, e.g., meals served, recreation, visitors etc.	Meets Standard	All detainees' activities in administrative segregation are documented electronically by the unit officer.
22. SPC procedures include completing the SMU Housing Record (I-888) immediately upon a detainee's placement in the SMU. <ul style="list-style-type: none"> <li>Staff completes the form at the end of each shift.</li> <li>CDFs and IGSA facilities use Form I-888 (or local equivalent).</li> </ul>	Meets Standard	This IGSA facility utilizes their own form which is completed immediately upon a detainee's placement in administrative segregation and at the end of each shift.
23. Staff record whether the detainee ate, showered, exercised, and took any applicable medication during every shift. <ul style="list-style-type: none"> <li>Staff logs record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc;</li> <li>The medical officer/health care professional signs each individual's record during each visit; and</li> <li>The housing officer initials the record when all detainee services are completed or at the end of the shift.</li> </ul>	Meets Standard	Officers record all detainee activity listed in this component on their individual housing unit log. Medical staff signs the segregation log each time they visit the detainee. An officer signs the log when all services are completed or by the end of their shift.
24. A new record is created for each week the detainee is in Administrative Segregation. <ul style="list-style-type: none"> <li>The weekly records are retained in the SMU until the detainee's return to the general population.</li> </ul>	Meets Standard	A weekly record is maintained for all detainees in administration segregation status until they return to general population.



<b>SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) – REVIEWER SUMMARY</b> <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p><b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>The evaluation of this standard was based on policy and post order review, staff interviews, and observation of the housing units. If a detainee needs to be placed in administrative segregation status they would be placed in a cell designated for this purpose in the housing unit. A detainee's movement may be restricted, depending on why they were placed in administrative segregation status, to ensure their safety or the safety of others, i.e. the detainee may not be permitted out of their cell but to recreate, shower and shave. The facility has not placed a detainee in administrative segregation during this inspection period; therefore, there were no logs or administrative segregation paperwork to review.</p> <p>Administrative segregation is utilized to provide detainees isolated housing for their own protection, for the protection of others or for other non-disciplinary reasons. Detainees in administrative segregation are provided with the same level of services as those in general population except when documented security threats exist.</p> <p>Observation of the housing units indicates they are well maintained in a safe and sanitary condition.</p>	
<p><b>Overall Rating:</b> Meets Standard</p>	
<p><b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)</p>	<p><b>Completion Date:</b> 2/23/2018</p>
<p><b>Reviewer Signature (for printed form submission):</b></p>	

<b>SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)</b>		
<b>Policy:</b> 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.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
1. Officers placing detainees in disciplinary segregation follow written procedures.	Meets Standard	
2. The sanctions for violations committed during one incident are limited to 60 days.	Meets Standard	Sanctions are limited to sixty days per incident in disciplinary segregation status.
3. A completed Disciplinary Segregation Order accompanies the detainee into the SMU. <ul style="list-style-type: none"> <li>The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation.</li> </ul>	Meets Standard	The detainee receives a copy of the placement order when placed in disciplinary segregation status.
4. Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at set intervals. <ul style="list-style-type: none"> <li>After each formal review, the detainee receives a written copy of the decision and supporting reasons.</li> </ul>	Meets Standard	When a detainee is placed in disciplinary segregation status, the detainee receives a copy of each status review decision and supporting documentation per policy.
5. The conditions of confinement in the SMU are proportional to the amount of control necessary to protect detainees and staff.	Meets Standard	
6. Detainees in disciplinary segregation have fewer privileges than those housed in administrative segregation.	Meets Standard	Detainees in disciplinary segregation have fewer privileges than those housed in general population. These detainees are subjected to more stringent personal property control, restricted reading material, and limitations imposed on television viewing, commissary privileges, etc.
7. Living conditions in disciplinary SMUs remain the same regardless of behavior. <ul style="list-style-type: none"> <li>If no, does staff prepare written documentation for this action?</li> <li>Does the OIC sign to indicate approval.</li> </ul>	Meets Standard	
8. Every detainee in disciplinary segregation receives the same humane treatment, regardless of offense.	Meets Standard	Every detainee in disciplinary segregation status receives the same humane treatment, regardless of their offense.
9. The quarters used for segregation are: <ul style="list-style-type: none"> <li>Well-ventilated.</li> <li>Adequately lighted.</li> <li>Appropriately heated.</li> <li>Maintained in a sanitary condition.</li> </ul>	Meets Standard	The cells used for disciplinary segregation status are well ventilated, adequately lit, appropriately heated and maintained in a sanitary condition.

<b>SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)</b>		
<b>Policy:</b> 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.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
10. All cells are equipped with beds that are securely fastened to the floor or wall of the cell.	Meets Standard	All cells are equipped with beds that are securely fastened to the wall.
11. The number of detainees confined to each cell or room is limited to the number for which the space was designate. <ul style="list-style-type: none"> <li>Does the OIC approve excess occupancy on a temporary basis?</li> </ul>	Meets Standard	The lieutenant stated no cells will be occupied above the designed limit. Cells are double occupancy.
12. When a detainee is segregated without clothing, mattress, blanket, or pillow (in a dry cell setting), a justification is made and the decision is reviewed each shift. Items are returned as soon as it is safe.	Meets Standard	Per policy, detainees can be deprived of clothing, mattress, blanket, pillow, etc., for medical or psychiatric reasons only, as determined by the medical officer. A regimen of treatment would be instituted.
13. Detainees in the SMU have the same opportunities to exchange clothing, bedding, etc., as other detainees.	Meets Standard	Detainees in disciplinary segregation status can exchange/laundry items the same as general population.
14. Detainees in the SMU receive three nutritious meals per day, selected from the Food Service's menu of the day. <ul style="list-style-type: none"> <li>Food is not used as punishment.</li> </ul>	Meets Standard	Detainees in disciplinary segregation status receive the same meals as those in general population. Food is not used as punishment.
15. Detainees are allowed to maintain a normal level of personal hygiene, including the opportunity to shower and shave at least three times/week.	Meets Standard	Detainees are permitted to shower and shave daily.
16. Detainees receive, unless documented as a threat to security: <ul style="list-style-type: none"> <li>Barbering services;</li> <li>Recreation privileges;</li> <li>Other-than-legal reading material;</li> <li>Religious material;</li> <li>The same correspondence privileges as other detainees; and</li> <li>Personal legal material.</li> </ul>	Meets Standard	Per policy, unless there is a documented threat to security, detainees in disciplinary segregation status receive each of the items required by this component.
17. When phone access is limited by number or type of calls, the following areas are exempt: <ul style="list-style-type: none"> <li>Calls about the detainee's immigration case or other legal matters;</li> <li>Calls to consular/embassy officials; and</li> <li>Calls during family emergencies (as determined by the OIC/Warden).</li> </ul>	Meets Standard	Detainees in disciplinary segregation status may have calls restricted. Calls relating to the items listed in this component are not impacted by any restrictions imposed.

<b>SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)</b>		
<b>Policy:</b> 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.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
18. A health care professional visits every detainee at least three times a week. <ul style="list-style-type: none"> <li>The shift supervisor visits each detainee daily.</li> <li>Weekends and holidays.</li> </ul>	Meets Standard	A health care professional visits every detainee in disciplinary segregation status each week day per the health service administrator. The shift supervisor visits detainees in segregation status each day, including weekends and holidays.
19. SMU detainees are allowed visitors, in accordance with the "Visitation" standard.	Meets Standard	Visits for detainees in disciplinary segregation status are permitted in accordance with the visitation standard.
20. SMU detainees receive legal visits, as provided in the "Visitation" standard. <ul style="list-style-type: none"> <li>Legal service providers are notified of security concerns arising before a visit.</li> </ul>	Meets Standard	There are no limitations for detainees to receive visits from their attorneys. Attorneys will be notified prior to a visit if a security concerns exist.
21. Visits from clergy are allowed. <ul style="list-style-type: none"> <li>The clergy member is given the option of visiting/not visiting the segregated detainee.</li> <li>Violent/uncooperative detainees are denied access to religious services when safety and security would otherwise be affected.</li> </ul>	Meets Standard	Detainees in disciplinary segregation status are permitted visits by clergy if the detainee's behavior does not pose a threat to others.
22. SMU detainees have law library access. <ul style="list-style-type: none"> <li>Violent/uncooperative detainees retain access to the law library unless adjudicated a security threat in writing.</li> <li>Legal material brought to individuals in the SMU on a case-by-case basis.</li> <li>Staff documents every incident of denied access to the law library.</li> </ul>	Meets Standard	Detainees in disciplinary status have the same access to the law library as the general population. The portable law library materials, including LexisNexis, are brought to the housing unit.
23. All detainee-related activities are documented, e.g. meals served, recreation activities, visitors, etc.	Meets Standard	All detainees' activities in disciplinary status are documented by the unit officer on the electronic log.
24. The SPCs, the Special Management Housing Unit Record (I-888or equivalent), is prepared as soon as the detainee is placed in the SMU. <ul style="list-style-type: none"> <li>All I-888s are filled out by the end of each shift.</li> <li>The CDF/IGSA facility use Form.</li> <li>I-888 (or equivalent local form).</li> </ul>	Meets Standard	This IGSA facility utilizes their own form which is completed immediately upon a detainee's placement in disciplinary status and at the end of each shift.

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)		
<p><b>Policy:</b> 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.</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>25. SMU staff record whether the detainee ate, showered, exercised, took medication, etc.</p> <ul style="list-style-type: none"> <li>• Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc.</li> <li>• The health care official sign individual records after each visit.</li> <li>• The housing officer initials the record when all detainee services are completed or at the end of the shift.</li> <li>• A new record is created weekly for each detainee in the SMU.</li> <li>• The SMU retains these records until the detainee leaves the SMU.</li> </ul>	Meets Standard	<p>When a detainee is placed in disciplinary segregation status, a log is maintained of all the activities noted in this component. The logs are created weekly and retained in the housing unit until the detainee is released from this status.</p>

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
<p><b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>The evaluation of this standard was based on review of policy, post orders, staff interviews and observation of the housing units where detainees are held in disciplinary segregation status. There were no detainees in the disciplinary segregation status at the time of this inspection. There was one detainee placed in disciplinary segregation status during this inspection period. The log documenting all activities and services the detainee received while in this status was not provided by the facility.</p> <p>Disciplinary segregation placement is utilized for detainees who are being segregated from the general population due to disciplinary reasons. Standard living conditions are not modified for detainees in disciplinary segregation for disciplinary reasons. The same living levels of decency and humane treatment for each detainee in disciplinary segregation, regardless of the purpose for which the detainee has been segregated, is maintained except for the television being removed from the cell. When different treatment is required for security concerns presented by an individual detainee, officers prepare written documentation justifying this action. If approved, this document is signed by the OIC. A detainee may be deprived of clothing, mattress, blanket, pillow, etc., for medical reasons or psychiatric reasons only, as determined by a medical authority.</p> <p>A maximum sanction of sixty days is imposed for violations related to a single prohibited incident. After the first thirty days, and every thirty days thereafter, the OIC sends a written justification to the FOD. Written procedures are in place requiring a review of a detainee in disciplinary segregation every seven days. The review includes an interview with the detainee and documentation of the review. A written copy of the decision and basis for the findings is provided to the detainee.</p> <p>Observation of the housing units indicate they are well maintained in a safe and sanitary condition.</p>	
<p><b>Overall Rating:</b> Meets Standard</p>	
<p><b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)</p>	<p><b>Completion Date:</b> 2/23/2018</p>
<p><b>Reviewer Signature (for printed form submission):</b></p>	

<b>TOOL CONTROL (Key: AH)</b>		
<b>Policy:</b> IT IS THE POLICY OF ALL FACILITIES THAT ALL EMPLOYEES SHALL BE RESPONSIBLE FOR COMPLYING WITH THE TOOL CONTROL POLICY. THE MAINTENANCE SUPERVISOR SHALL MAINTAIN A COMPUTER GENERATED OR TYPEWRITTEN MASTER INVENTORY LIST OF TOOLS AND EQUIPMENT AND THE LOCATION IN WHICH TOOLS ARE STORED. THESE INVENTORIES SHALL BE CURRENT, FILED AND READILY AVAILABLE FOR TOOL INVENTORY AND ACCOUNTABILITY DURING AN AUDIT.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	Meets Standard	The maintenance supervisor developed the tool control procedures and inspection system to ensure accountability of all tools.
2. Department heads are responsible for implementing this standard in their departments.	Meets Standard	Department heads are responsible for implementing tool control in their departments.
3. Tool inventories are required for the: <ul style="list-style-type: none"> <li>• Maintenance Department;</li> <li>• Medial Department;</li> <li>• Food Service Department;</li> <li>• Electronics Shop;</li> <li>• Recreation Department; and</li> <li>• Armory.</li> </ul>	Meets Standard	(b)(7)(E) (b)(7)(E). The facility does not have an electronics shop or recreation department. The maintenance, medical and food service departments have the required tool inventories.
4. The facility has a policy for the regular inventory of all tools. <ul style="list-style-type: none"> <li>• The policy sets minimum time lines for physical inventory and all necessary documentation.</li> <li>• ICE facilities use AMIS bar code labels when required.</li> </ul>	Meets Standard	
5. The facility has a tool classification system. Tools are classified according to: <ul style="list-style-type: none"> <li>• Restricted (dangerous/hazardous); and</li> <li>• Non-Restricted (non-hazardous).</li> </ul>	Meets Standard	All tools are classified as restricted.
6. Department heads are responsible for implementing tool-control procedures.	Meets Standard	Department heads are responsible for implementing tool-control procedures in their areas.
7. The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable.	Meets Standard	All tools are marked and readily identifiable, per policy.

<b>TOOL CONTROL (Key: AH)</b>		
<b>Policy:</b> IT IS THE POLICY OF ALL FACILITIES THAT ALL EMPLOYEES SHALL BE RESPONSIBLE FOR COMPLYING WITH THE TOOL CONTROL POLICY. THE MAINTENANCE SUPERVISOR SHALL MAINTAIN A COMPUTER GENERATED OR TYPEWRITTEN MASTER INVENTORY LIST OF TOOLS AND EQUIPMENT AND THE LOCATION IN WHICH TOOLS ARE STORED. THESE INVENTORIES SHALL BE CURRENT, FILED AND READILY AVAILABLE FOR TOOL INVENTORY AND ACCOUNTABILITY DURING AN AUDIT.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
8. The facility has an approved tool storage system. <ul style="list-style-type: none"> <li>• The system ensures that all stored tools are accountable.</li> <li>• Commonly used tools (tools that can be mounted) are stored in such a way that missing tool is readily notice.</li> </ul>	Meets Standard	Shadow boards provide storage for tools that can be mounted. Tools not adaptable to shadow boards are kept in a locked drawer or cabinet. Individual toolboxes, containing tools used daily, must be secured with a locking device. The individual responsible for the toolbox keeps an inventory sheet in it.
9. Each facility has procedures for the issuance of tools to staff and detainees.	Meets Standard	Detainees are not issued tools apart from the kitchen. Procedures for the issuance of tools to employees are in place.
10. The facility has policies and procedures to address the issue of lost tools. The policy and procedures include: <ul style="list-style-type: none"> <li>• Verbal and written notification;</li> <li>• Procedures for detainee access; and</li> <li>• Necessary documentation/review for all incidents of lost tools.</li> </ul>	Meets Standard	Policies and procedures address all the items noted in this component.
11. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	Meets Standard	The maintenance supervisor is responsible for the proper disposal of all broken or worn tools.
12. All private or contract repairs and maintenance workers under contract to ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility.	Meets Standard	All tools are inventoried prior to admittance and departure from the facility by maintenance.

<b>TOOL CONTROL – REVIEWER SUMMARY</b> <i>(Use following format for dates: mm/dd/yyyy)</i>
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<b>TOOL CONTROL – REVIEWER SUMMARY</b> <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p><b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>The evaluation of this standard was based on interviews with the maintenance supervisor and a security supervisor. An inspection of the tool storage areas in maintenance, food service and medical was also conducted. A review of post orders and the tool control policy was completed.</p> <p>Per policy, employees are required to immediately report missing or lost tools to a supervisor who will report the lost tool to the OIC. Tools are not issued to detainees except in food service. Knives used in the kitchen were properly tethered and all other tools were properly secured and inventoried. Medical tools are accounted for on each shift, their inventories were found to be current and accurate.</p> <p>If an outside contractor is necessary to makes repairs inside the facility they enter through the receiving dock and their tools are inventoried by maintenance staff. The contractor is under direct escort at all times. Prior to leaving the job site all tools are inventoried. Upon arriving in maintenance and prior to departure from the facility the tools are again inventoried to ensure all tools are accounted for.</p> <p>Per the maintenance supervisor there have been no lost tools at this facility during this inspection period. The facility has policy and procedures in place to maintain and account for tools as this standard requires.</p>	
<p><b>Overall Rating:</b> Meets Standard</p>	
<p><b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)</p>	<p><b>Completion Date:</b> 2/23/2018</p>
<p><b>Reviewer Signature (for printed form submission):</b></p>	



**TRANSPORTATION (Land Transportation) (Key: AI)**

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

Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	Meets Standard	The transportation supervisor maintains personnel records supporting compliance with local, state, and federal laws.
2. Every transporting officer required to drive a commercial size bus has a valid Commercial Driver's License (CDL) issued by the state of employment.	Meets Standard	The facility has one vehicle that requires a CDL. Two transport officers have a CDL to operate the vehicle.
3. Supervisors maintain records for each vehicle operator.	Meets Standard	The transportation lieutenant maintains records for every transport officer.
4. Officers use a checklist during every vehicle inspection. <ul style="list-style-type: none"> <li>• Officers report deficiencies affecting operability; and</li> <li>• Deficiencies are corrected before the vehicle goes back into service.</li> </ul>	Meets Standard	Transportation officers use a checklist during each pre-trip vehicle inspection. Officers report deficiencies affecting operability, and such deficiencies must be corrected prior to the vehicle returning to service.
5. Transporting officers: <ul style="list-style-type: none"> <li>• Limit driving time to 10 hours in any 15 hour period;</li> <li>• Drive only after eight consecutive off-duty hours;</li> <li>• Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours;</li> <li>• Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days;</li> <li>• During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a safe area—exceeding the 10-hour limit.</li> </ul>	Meets Standard	
6. (b)(7)(E) with valid CDLs required in any bus transporting detainees. <ul style="list-style-type: none"> <li>• When buses travel in tandem with detainees, (b)(7)(E)</li> <li>• An unaccompanied driver may transport an empty vehicle.</li> </ul>	Meets Standard	
7. Before the start of each detail, the vehicle is thoroughly searched.	Meets Standard	Vehicles are searched prior to transports.

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Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
8. Positive identification of all detainees being transported is confirmed.	Meets Standard	Detainees are identified by name and face prior to boarding the transport vehicle.
9. All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.	Meets Standard	Detainees are searched prior to transport.
10. The facility ensures that the number of detainees transported does not exceed the vehicles manufacturer's occupancy level.	Meets Standard	
11. (b)(7)(E)	Meets Standard	<b>(b)(7)(E)</b>
12. The vehicle crew conducts a visual count once all passengers are on board and seated. (b)(7)(E)	Meets Standard	
13. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	Meets Standard	Post orders address the use of restraints for transportation vehicles.
14. Officers ensure that no one contacts the detainees. • [REDACTED] in the vehicle at all times when detainees are present.	Meets Standard	<b>(b)(7)(E)</b>
15. Meals are provided during long distance transfers. • The meals meet the minimum dietary standards, as identified by dieticians utilized by ICE.	Meets Standard	
16. 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.	Meets Standard	

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Standard N/A

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
17. Vehicles have: <ul style="list-style-type: none"> <li>• Two-way radios;</li> <li>• Cellular telephones; and</li> <li>• Equipment boxes stocked in accordance with the Use of Force Standard.</li> </ul>	Meets Standard	Vehicles are equipped with two-way radios and mobile phones. Transportation restraints are in accordance with the Use of Force Standard. Restraints are not stored on the transport vehicles, but rather signed out for each transport.
18. The vehicles are clean and sanitary at all times.	Meets Standard	Vehicles are cleaned after each detainee transport.
19. Personal property of a detainee transferring to another facility is: <ul style="list-style-type: none"> <li>• Inventoried;</li> <li>• Inspected; and</li> <li>• Accompanies the detainee.</li> </ul>	Meets Standard	
20. The following contingencies are included in the written procedures for vehicle crews: <ul style="list-style-type: none"> <li>• Attack</li> <li>• Escape</li> <li>• Hostage-taking</li> <li>• Detainee sickness</li> <li>• Detainee death</li> <li>• Vehicle fire</li> <li>• Riot</li> <li>• Traffic accident</li> <li>• Mechanical problems</li> <li>• Natural disasters</li> <li>• Severe weather</li> <li>• Passenger list includes women or minors</li> </ul>	Meets Standard	All contingencies listed in this component are included in policy, with the exception of minors on the transport passenger list. This facility does not transfer juveniles for ICE.

**TRANSPORTATION (Land Transportation) – REVIEWER SUMMARY**

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

**TRANSPORTATION (Land Transportation) – REVIEWER SUMMARY**

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

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

Detainees are transported in a secure, safe and humane manner under the supervision of trained, qualified personnel.

The transportation lieutenant has overall responsibility for all aspects of vehicle operations. All written materials provided to detainees are translated into Spanish. A certified language interpreter service is available for use by personnel to interpret for detainees speaking any language. Supervisory personnel confirmed that staff interpreters are used when necessary.

Policy requires transport officers to secure a vehicle before leaving it unattended, including removing keys from the ignition immediately upon parking the vehicle. Officers are instructed to avoid parking in a spot where the vehicle may attract undue attention or be vulnerable to vandalism or sabotage. If a parking area with adequate security cannot be located, transport officers are instructed to contact the central control center and local law enforcement agencies for advice or permission to use one of their parking areas.

All officers transporting ICE detainees are required to wear their prescribed uniforms unless other attire is authorized by the OIC. (b)(7)(E)

(b)(7)(E) Officers ensure that when vehicles are equipped with seatbelts, detainees are properly secured before the transport begins.

Any information of an adverse nature shall be clearly indicated on the G-391 (when utilized) and the escorting officers shall be advised to take the necessary precautions.

Detainees are transferred with their funds, valuables and other personal property listed on their property inventory form.

**(b)(7)(E)**

Policy requires assigned transportation staff to search a detainee of the opposite sex only in extraordinary circumstances and only when a same gender officer is not available. When transporting detainees of the opposite gender, an assigned transportation staff member calls in the time of departure and odometer reading; and then does so again upon arrival to account for the time.

This standard was evaluated via policy review and staff interviews.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** (b)(6),(b)(7)(C)

**Completion Date:** 2/23/2018

**Reviewer Signature (for printed form submission):**

<b>USE OF FORCE (Key: AJ)</b>		
<p><b>Policy:</b> 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:</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	Meets Standard	Policy and post orders authorize staff to respond in an immediate use-of-force situation without a supervisor's presence or direction.
2. When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, officers must try to resolve the situation without resorting to force.	Meets Standard	Officers are required to attempt to resolve conflicts without resorting to force if there is no direct threat to the detainee or others.
3. Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	Meets Standard	
4. The facility subscribes to the prescribed Confrontation Avoidance Procedures. <ul style="list-style-type: none"> <li>• Ranking detention official, health professional, and others confer before every calculated use of force.</li> </ul>	Meets Standard	Per policy, confrontation avoidance techniques must be used before the use of force is authorized. The shift supervisor and medical personnel are required to assess the situation and the detainee's history prior to any planned use of force.
5. When a detainee must be forcibly moved and/or restrained, and there is time for a calculated use of force, staff uses the Use-of-Force Team Technique. <ul style="list-style-type: none"> <li>• Under staff supervision.</li> </ul>	Meets Standard	
6. Staff members are trained in the performance of the Use-of-Force Team Technique.	Meets Standard	All officers are trained on the use-of-force team technique. Each shift has a specially trained team that can be called upon to conduct a planned use of force.
7. All use-of-force incidents are documented and reviewed.	Meets Standard	All use of force incidents are documented and reviewed by the shift supervisor, a lieutenant, and the OIC or designee.

<b>USE OF FORCE (Key: AJ)</b>		
<p><b>Policy:</b> 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:</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>8. Staff:</p> <ul style="list-style-type: none"> <li>• Do not use force as punishment;</li> <li>• Attempt to gain the detainee's voluntary cooperation before resorting to force;</li> <li>• Use only as much force as necessary to control the detainee; and</li> <li>• Use restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical.</li> </ul>	Meets Standard	Policy and post orders cover all the items in this component.
<p>9. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.</p>	Meets Standard	
<p>10. Use-of-Force Team follows written procedures that attempt to prevent injury and exposure to communicable disease(s).</p>	Meets Standard	
<p>11. Standard procedures associated with using four-point restraints include:</p> <ul style="list-style-type: none"> <li>• Soft restraints (e.g., vinyl);</li> <li>• Dressing the detainee appropriately for the temperature;</li> <li>• A bed, mattress, and blanket/sheet;</li> <li>• Checking the detainee at least every 15 minutes;</li> <li>• Logging each check;</li> <li>• Turning the bed-restrained detainee often enough to prevent soreness or stiffness;</li> <li>• Medical evaluation of the restrained detainee twice per eight hour shift; and</li> <li>• When qualified medical staff is not immediately available, staff position the detainee "face-up".</li> </ul>	Meets Standard	The facility utilizes a restraint chair. All the items listed in this component relevant to a restraint chair are covered in policy. There was one detainee restrained during this inspection period.
<p>12. The shift supervisor monitors the detainee's position/condition every two hours.</p> <ul style="list-style-type: none"> <li>• He/she allows the detainee to use the rest room at these times under safeguards.</li> </ul>	Meets Standard	
<p>13. All detainee checks are logged.</p>	Meets Standard	Checks are conducted every ten minutes and are logged.
<p>14. In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.</p>	Meets Standard	Medical is notified immediately in immediate use-of-force situations, once the detainee is under control.
<p>15. When the OIC authorizes use of non-lethal weapons:</p> <ul style="list-style-type: none"> <li>• Medical staff is consulted before staff use pepper spray/non-lethal weapons.</li> <li>• Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized.</li> </ul>	Meets Standard	

<b>USE OF FORCE (Key: AJ)</b>		
<p><b>Policy:</b> 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:</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
16. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> <li>• Medical personnel are consulted</li> </ul>	Meets Standard	Post orders state that medical staff shall prescribe the precautions required to protect the fetus in pregnant detainees, including the way the pregnant detainee will be restrained.
17. Protective gear is worn when restraining detainees with open cuts or wounds.	Meets Standard	
18. Staff documents every use of force and/or non-routine application of restraints.	Meets Standard	
19. It is standard practice to review any use of force and the non-routine application of restraints.	Meets Standard	All use of force and the non-routine application of restraints are reviewed by the OIC or designee.
20. All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. <ul style="list-style-type: none"> <li>• Specialized training is given and Officers are certified in all devices they use.</li> </ul>	Meets Standard	Training is provided to all officers in the areas noted in this component during their initial training and annually thereafter.
21. In SPCs, is the Use of Force form is used? In other facilities (IGSAs / CDFs) is this form or its equivalent used?	Meets Standard	This IGSA facility utilizes a local form for use of force reporting.

<p><b>USE OF FORCE – REVIEWER SUMMARY</b>  <i>(Use following format for dates: mm/dd/yyyy)</i></p>
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**USE OF FORCE – REVIEWER SUMMARY**

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

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

The evaluation of this standard was based on interviews with security staff. Policy and post orders authorize staff to use necessary force only after all reasonable efforts to resolve a situation have failed. Only the amount of force necessary to gain control of the detainee may be used.

Shift supervisors inspect areas for blood or other body fluid spillage after an incident. Unless it is determined that the spillage must be preserved as evidence, staff will immediately sanitize the affected areas. Medical staff provides guidance on appropriate cleaning solutions and usage, spill kits are available. An after-action report is completed by the shift supervisor following conclusion of the use of force or application of restraints incident and is then forwarded to a lieutenant for review. Once reviewed it is forwarded to the OIC.

As required by policy, all calculated uses of force are video-taped and the on-duty supervisor and medical staff must be on the scene before the application of any planned use of force. (b)(7)(E)

(b)(7)(E) Canines are used for searches but never in the presence of ICE detainees. The facility did conduct a facility wide search in November 2017 and utilized four canines from other agencies; all detainees were removed from the areas being searched. Unauthorized less than lethal force devices such as blackjacks and sap gloves are not permitted. Any type of choke or carotid holds is prohibited. (b)(7)(E)

(b)(7)(E)

There was one immediate use of force incident involving an ICE detainee during this inspection period which resulted in the detainee being placed in a restraint chair for two hours. A crisis intervention ten-minute checklist was completed. Medical documented their reviews and action. A review of the incident and action taken was completed by a sergeant, lieutenant and captain. The amount of force used was found to be appropriate, no injuries to staff or the detainee were noted. If force becomes necessary, the facility manages, documents and reviews the incidents as this standard requires.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** (b)(6),(b)(7)(C)

**Completion Date:** 2/23/2018

**Reviewer Signature (for printed form submission):**



<b>STAFF DETAINEE COMMUNICATIONS (Key: AK)</b>		
<b>Policy:</b> 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.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
1. The ICE Field Office Director ensures that weekly announced and unannounced visits occur at the IGSA.	Meets Standard	This component was rated as deficient during the previous inspection as there was no documentation of weekly announced and unannounced visits by ICE staff. The ICE officer assigned to this IGSA makes visits to the housing units on a daily basis. ICE case officers visit the housing units two days per week. These visits are documented on the housing unit logs.
2. Detention and Deportation Staff conduct scheduled weekly visits with detainees held in the IGSA.	Meets Standard	This component was rated as deficient during the previous inspection as there was no documentation that detention and deportation staff conducted scheduled weekly visits. ICE case officers visit the housing units two days per week. These visits are documented on the housing unit logs.
3. Scheduled visits are posted in ICE detainee areas.	Meets Standard	The ICE visit schedule is posted in detainee areas.
4. Visiting staff observe and note current climate and conditions of confinement at each IGSA.	Does Not Meet Standard	The facility visiting liaison checklists document observation and notation of climate and conditions of confinement. Facility visiting liaison checklists have not been completed for the entire inspection period.
5. ICE information request Forms are available at the IGSA for use by ICE detainees.	Meets Standard	Detainee request forms are available in the housing units
6. The IGSA treats detainee correspondence to ICE staff as Special Correspondence.	Meets Standard	The facility treats ICE correspondence as special correspondence, in that it is placed in a secure ICE dropbox and not opened by facility staff.
7. ICE staff responds to a detainee request from an IGSA within 72 hours.	Meets Standard	Detainee requests are responded to within seventy-two hours.

STAFF DETAINEE COMMUNICATIONS (Key: AK)		
<b>Policy:</b> PROCEDURES MUST BE IN PLACE TO ALLOW FOR FORMAL AND INFORMAL CONTACT BETWEEN KEY FACILITY STAFF AND ICE STAFF AND ICE DETAINEE AND TO PERMIT DETAINEES TO MAKE WRITTEN REQUESTS TO ICE STAFF AND RECEIVE AN ANSWER IN AN ACCEPTABLE TIME FRAME.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
8. ICE detainees are notified in writing upon admission to the facility of their right to correspond with ICE staff regarding their case or conditions of confinement.	Meets Standard	The handbook explains how detainees may correspond with ICE.

STAFF DETAINEE COMMUNICATIONS – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
<b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Detainees have formal and informal access to and interaction with key facility supervisors on a regular basis. ICE officers and facility staff members make announced and unannounced visits to the housing units and activity areas to encourage informal communication with detainees. There is an assigned ICE officer who is in the housing units nearly every day, and ICE case officers visit the housing units two days per week. ICE officers document their visits on the facility visiting liaison checklist and are logged into each housing unit during their visits by the housing unit officer. Facility visiting liaison checklists were only available for portions of the inspection period.  The ICE detainee request form log contains the date the request was received, the A-number, the date the request was responded to, the topic and ICE response. The log does not contain the name of the requesting detainee or the ICE officer logging the request, or the nationality of the detainee. Requests are consistently returned to the detainee within seventy-two hours. Formal written requests to ICE are not read, altered, or delayed by facility staff. Detainees can obtain assistance from other detainees or staff in preparing a request form.  This standard was evaluated via review of ICE facility visiting liaison checklists, request form logs, housing unit postings and the handbook; interviews with staff and detainees; and tours of the housing units.	
<b>Overall Rating:</b> Meets Standard	
<b>Reviewer Name (Printed):</b> (b)(6),(b)(7)(C)	<b>Completion Date:</b> 2/23/2018
<b>Reviewer Signature (for printed form submission):</b>	

**DETAINEE TRANSFER STANDARD (Key: AL)**

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. When a detainee is represented by legal counsel or a legal representative, and a G-28 has been filed, the representative of record is notified by the detainee’s Deportation Officer. <ul style="list-style-type: none"> <li>• The notification is recorded in the detainee’s file; and</li> <li>• When the A File is not available, notification is noted within DACS</li> </ul>	Meets Standard	When a G-28 has been filed, the detainee’s representative of record is notified of the transfer by ICE staff. The notification is documented electronically and in the detainee’s A-file.
2. Notification includes the reason for the transfer and the location of the new facility.	Meets Standard	Transfer notices state the reason for the transfer and the location of the new facility.
3. The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	Meets Standard	Deportation officers may adjust the timing of the notification when necessary.
4. The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	Meets Standard	Transfer forms note that it is the attorney’s and detainee’s responsibility to notify family members about a transfer.
5. Facility policy mandates that: <ul style="list-style-type: none"> <li>• Times and transfer plans are never discussed with the detainee prior to transfer;</li> <li>• The detainee is not notified of the transfer until immediately prior to departing the facility; and</li> <li>• The detainee is not permitted to make any phone calls or have contact with any detainee in the general population.</li> </ul>	Meets Standard	Facility policy states that a detainee may have no contact with anyone after notification of transfer. ICE provides the official notification of transfer at another facility. The facility has no prior knowledge of the times and plans of a transfer.
6. The detainee is provided with a completed Detainee Transfer Notification Form.	Meets Standard	Notification forms are given to transferring detainees by ICE staff, at a location remote to this facility.
7. Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	Meets Standard	
8. For medical transfers: <ul style="list-style-type: none"> <li>• The Detainee Immigration Health Service (or IGSA) (DIHS) Medical Director or designee approves the transfer;</li> <li>• Medical transfers are coordinated through the local ICE office; and</li> <li>• A medical transfer summary is completed and accompanies the detainee.</li> </ul>	Meets Standard	Medical transfers are conducted in accordance with each of the items listed in this component.

**DETAINEE TRANSFER STANDARD (Key: AL)**

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
9. Detainees in ICE facilities having DIHS staff and medical care are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number, and the envelope is marked Medical Confidential.	N/A	ICE Health Service Corps personnel are not assigned to this facility.
10. For medical transfers, transporting officers receive instructions regarding medical issues.	Meets Standard	
11. Detainee's funds, valuables, and property are returned and transferred with the detainee to his/her new location.	Meets Standard	Detainee personal property and funds are transferred with the detainee to their new facility.
12. Transfer and documentary procedures outlined in Section C and D are followed.	Meets Standard	
13. Meals are provided when transfers occur during normally schedule meal times.	Meets Standard	Meals are sent with every detainee.
14. An A File or work folder accompanies the detainee when transferred to a different field office or sub-office.	Meets Standard	The A-file accompanies each detainee on the transport.
15. Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.	Meets Standard	

**DETAINEE TRANSFER STANDARD – REVIEWER SUMMARY**

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

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

Transfers are approved and facilitated with consideration for the safety and security of the facility personnel, detainees and the public.

This facility transports ICE detainees to another facility in preparation for transfer out of the field office. As a result, the facility is not involved with the transfer notification process, nor do they have knowledge of the transfer details.

Policy and procedures address notifications, detainee records and the protection of detainee funds and property. Notifications, release processing, detainee records and the protection of detainee funds and personal property are managed as per the standard. Detainees are offered a free telephone call upon arrival to this facility. Room and board cases are administered per the standard. Transfers are conducted as stipulated by the standard.

During the evaluation of this standard, policy and transfer forms were reviewed and staff were interviewed.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** (b)(6),(b)(7)(C)

**Completion Date:** 2/23/2018

**Reviewer Signature (for printed form submission):**

<b>SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (Key: AM)</b>		
<b>Policy:</b> THIS DETENTION STANDARD REQUIRES THAT FACILITIES THAT HOUSE ICE/ERO DETAINEES AFFIRMATIVELY ACT TO PREVENT SEXUAL ABUSE AND ASSAULTS ON DETAINEES, PROVIDE PROMPT AND EFFECTIVE INTERVENTION AND TREATMENT FOR VICTIMS OF SEXUAL ABUSE AND ASSAULT, AND CONTROL, DISCIPLINE, AND PROSECUTE THE PERPETRATORS OF SEXUAL ABUSE AND ASSAULT.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
1. The facility has a Sexual Abuse and Assault Prevention and Intervention Program consistent with the ICE Zero Tolerance Policy.	Meets Standard	
2. The facility administrator has designated a Sexual Abuse and Assault Prevention and Intervention Program coordinator for the facility.	Meets Standard	
3. All staff are trained, during orientation and in annual refresher training, in the prevention and intervention areas required by the Detention Standard.	Meets Standard	
4. The facility maintains written documentation verifying employee, volunteer, and contractor training.	Meets Standard	
5. Detainees are informed about the program in facility orientation and the detainee handbook (or equivalent).	Meets Standard	
6. The Sexual Assault Awareness Notice, along with the name of the program coordinator and local organizations that can assist detainees who have been victims of sexual assault, is posted on all housing unit bulletin boards.	Meets Standard	
7. The Sexual Assault Awareness Information brochure is distributed to detainees.	Meets Standard	
8. Detainees are screened upon arrival for "high risk" sexual assaultive and sexual victimization potential and housed and counseled accordingly.	Meets Standard	
9. A detainee who is subjected to sexual abuse or assault is not returned to general population until proper reclassification, taking into consideration any increased vulnerability of the detainee as a result of the sexual abuse or assault, is completed.	Meets Standard	
10. There is prompt and effective intervention when any detainee is sexually abused or assaulted and policy and procedures for required chain-of-command and immediate ICE reporting.	Meets Standard	
11. The facility uses a coordinated, multidisciplinary team approach to responding to sexual abuse, such as a sexual assault response team (SART), which includes a medical practitioner, a mental health practitioner, a security staff member, and an investigator from the assigned investigative entity, as well as representatives from outside entities that provide relevant services and expertise.	Meets Standard	

<b>SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (Key: AM)</b>		
<b>Policy:</b> THIS DETENTION STANDARD REQUIRES THAT FACILITIES THAT HOUSE ICE/ERO DETAINEES AFFIRMATIVELY ACT TO PREVENT SEXUAL ABUSE AND ASSAULTS ON DETAINEES, PROVIDE PROMPT AND EFFECTIVE INTERVENTION AND TREATMENT FOR VICTIMS OF SEXUAL ABUSE AND ASSAULT, AND CONTROL, DISCIPLINE, AND PROSECUTE THE PERPETRATORS OF SEXUAL ABUSE AND ASSAULT.		
<b>COMPONENTS</b>	<b>RATING</b>	<b>REMARKS (1000 CHAR MAX)</b>
12. Care is taken to place a victimized detainee in a supportive environment that represents the least restrictive housing option possible (e.g. protective custody), but victims are not held for longer than five days in any type of administrative segregation except in highly unusual circumstances or at the request of the detainee.	Meets Standard	
13. Staff suspected of perpetrating sexual abuse or assault are removed from all duties requiring detainee contact pending the outcome of an investigation.	Meets Standard	
14. When there is an alleged sexual assault, staff gather and maintain evidence, make referrals to appropriate law enforcement agencies for possible prosecution, and ensure that qualified investigators conduct a prompt, thorough, objective, and fair investigation.	Meets Standard	
15. When there is an alleged or proven sexual assault, the required notifications are promptly made to facility supervisors and ICE management.	Meets Standard	
16. When possible and feasible, victims of sexual abuse or assault are referred to specialized community resources for treatment and gathering of evidence.	Meets Standard	
17. All records associated with claims of sexual abuse or assault is maintained, and such incidents are specifically logged and tracked by a designated staff coordinator.	Meets Standard	
18. The Sexual Abuse and Assault Prevention and Intervention Program coordinator conducts an annual review of aggregate data regarding incidents of sexual abuse or assault, and presents the findings to the Field Office Director and ICE/ERO HQ for use in determining whether changes are needed to existing policies and practices.	Meets Standard	
19. Tracking statistics and reports are readily available for review by the inspectors.	Meets Standard	

<b>SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION – REVIEWER SUMMARY</b> <i>(Use following format for dates: mm/dd/yyyy)</i>	
<b>Overall Remarks:</b> <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i>	
<b>Overall Rating:</b> Meets Standard	
<b>Reviewer Name (Printed):</b>	<b>Completion Date:</b>
<b>Reviewer Signature (for printed form submission):</b>	

# DOCUMENT CHECK

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

Review Document Issue Summary		Ratings check complete.			
Check Document:	<input type="button" value="Run Check"/>	Error(s) Found:	0	Items Not Rated:	0
<b>Errors:</b>					
<p><b>No Errors Found</b></p>					
<b>Items Not Rated:</b>					
<p><b>All Items Rated</b></p>					

Run Indicator:

## ICE Uniform Corrective Action Plan

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**ICE HQ USE ONLY: (DO NOT EDIT\*)**

Review Date: 2/23/2018	DETLOC: BUTLEOH	Review Purpose: Annual
Complete and Return to ICE HQ No Later Than: 5/16/2018	Review Type: NDS_G324A_O72_LYON	
Facility Corrective Action Plan Assigned To: DET		
Facility Name BUTLER COUNTY JAIL		
Address 705 HANOVER STREET		
City: HAMILTON	State: OH	Zip Code: 45011
County BUTLER		
Document Key: 606	Form Key (Version): 9	
Document Name: 2232018606		

\*If Edits are required, contact ICE HQ for an updated form.

**FIELD OFFICE USE: (Updates Permitted, Field Entry Required)**

Date of Final Submission: (Use following format for dates: mm/dd/yyyy) 5/8/2018
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Form Date: 01-27-2014

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Report produced on Thursday, March 01, 2018 Form Key: 9



**Department of Homeland Security**

Immigration and Customs Enforcement: Office of Enforcement and Removal Operations

**Instructions for Corrective Action Response**

Provide a detailed description of the corrective action taken by the facility to address each of the deficiencies identified in the review. Please ensure that each corrective action corrects the noted deficiency to the fullest extent possible. In the event a deficiency cannot be corrected within the authorized timeline, an explanation is required in the “Corrective Actions” column. The explanation should include a work around solution while pending final resolution, and an approximate completion date. If an extension is needed, the Field Office must contact the appropriate DMD staff member with this request in advance of the specified timelines for submission.

*\*Exceptions to this timeline may be granted for necessary construction and staffing requirements, but will require an estimated completion date and temporary “work around” as part of the approved UCAP. Serious life and safety issues must be corrected immediately.*

<b>Correspondence and Other Mail (Key: D)</b>					
This Detention Standard ensures that detainees will be able to correspond with their families, the community, legal representatives, government offices, and consular officials consistent with the safe and orderly operation of the facility.					
Item No.	Component	Deficiency Identified	Corrective Action	Projected Completion Date	Date Completed
1	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. (Key: D05)	This component was rated deficient during the last inspection, due to all incoming mail being opened and inspected without the detainee being present. The facility opens and inspects all incoming mail without the detainee present. This is a repeat deficiency.	It is the policy of the Butler County Jail, approved by the Warden, to open/inspect incoming inmate mail for safety and security before it is given to the detainees to prevent the introduction of contraband into the facility. Only legal mail will be opened in the presence of the detainees.		
<b>Environmental Health and Safety (Key: Z)</b>					
This Detention Standard protects detainees, staff, volunteers, and contractors from injury and illness by maintaining high facility standards of cleanliness and sanitation, safe work practices, and control of hazardous substances and equipment.					
Item No.	Component	Deficiency Identified	Corrective Action	Projected Completion Date	Date Completed
2	Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility. (Key: Z02)	Constant inventories were observed not to be maintained for hazardous materials stored in the warehouse. Prior to the conclusion of the inspection, a perpetual inventory system was implemented.	System in place prior to the end of the inspection. There is now a perpetual inventory with each chemical on it's own separate sheet. Inventory completed at beginning of shift, as items received or removed they are logged. Another inventory completed at end of shift.		2/23/2018

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 Report produced on Thursday, March 01, 2018 Form Key:9

**Department of Homeland Security**

Immigration and Customs Enforcement: Office of Enforcement and Removal Operations

<b>Issuance and Exchange of Clothing, Bedding, and Towels (Key: J)</b>					
This Detention Standard ensures that each detainee is able to maintain acceptable personal hygiene practices through the provision of adequate bathing facilities and the issuance and exchange of clean clothing, bedding, linens, towels, and personal hygiene items.					
Item No.	Component	Deficiency Identified	Corrective Action	Projected Completion Date	Date Completed
3	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. (Key: J04)	This component was rated deficient during the last inspection due to pillows and pillowcases not being issued. All new detainees receive the items and the quantities listed in this component, except pillows and pillowcases. Additional clothing and bedding are provided to address temperature changes or medical needs. This is a repeat finding.	We do not issue pillow cases or pillows for the entire population housed at the Butler County Jail. The Field Office concurs with present issuance of bedding and linens. We are applying for a waiver.		4/19/2018
4	Detainees are provided clean clothing, linen and towels. (Key: J06)	This component was rated deficient during the last inspection due to pillows and pillowcases not being issued. The laundry schedule and the amount of clothing, linens and towels issued is adequate to ensure that detainees are provided an exchange of each of the items listed in this component, with the exception pillowcases. Pillowcases are not issued at the facility. This is a repeat finding.	We do not issue pillow cases or pillows for the entire population housed at the Butler County Jail. The Field Office concurs with present issuance of bedding and linens. We are applying for a waiver.		4/19/2018
<b>Security Inspections (Key: AE)</b>					
This Detention Standard protects the community, staff, contractors, volunteers, and detainees from harm by ensuring that facility security is maintained and that events that pose a risk of harm are prevented.					
Item No.	Component	Deficiency Identified	Corrective Action	Projected Completion Date	Date Completed
5	(b)(7)(E)	(b)(7)(E)	Directive sent out addressing this issue. An entry will be made for each physical perimeter inspection.		4/30/2018
<b>Staff Detainee Communications (Key: AK)</b>					
This Detention Standard enhances security, safety, and orderly facility operations by encouraging and requiring informal direct and written contact among staff and detainees, as well as informal supervisory observation of living and working conditions.					
It also requires the posting of Hotline informational posters from the Department of Homeland Security Office of the Inspector General.					
Item No.	Component	Deficiency Identified	Corrective Action	Projected Completion Date	Date Completed
6	Visiting staff observe and note current climate and conditions of confinement at each IGSA. (Key: AK04)	The facility visiting liaison checklists document observation and notation of climate and conditions of confinement. Facility visiting liaison checklists have not been completed for the entire inspection period.	Weekly visits are occurring. Documentation is stored electronically in CLM ICE office and will be made available as requested. Additionally, documentation will be kept in the BCJ ICE office to aid during inspection periods. ERO staff has been reminded about thoroughly completing the liaison checklist at each visit.		5/7/2018

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**Department of Homeland Security**

Immigration and Customs Enforcement: Office of Enforcement and Removal Operations

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<b>This UCAP has been reviewed and concurred with by an ERO field office official equivalent to an AFOD or above.</b>	
<b>Reviewer Name (Printed):</b>  (b)(6),(b)(7)(C)	<b>*Reviewed Date:</b> 5/8/2018
<b>Reviewer Title (Printed):</b> Assistant Field Office Director	
<b>Reviewer Signature (for printed form submission):</b>	

*\* Field Entry Required*

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*Report produced on Thursday, March 01, 2018 Form Key:9*

**From:** Adducci, Rebecca J (b)(7)(E)  
(b)(7)(E)  
**Sent:** 3/26/2019 11:06:45 PM  
**To:** (b)(6),(b)(7)(C),(b)(7)(E)  
**Subject:** FW: Butler County Jail IGSA for immigrant work  
**Flag:** Follow up

Sent with BlackBerry Work  
(www.blackberry.com)

---

**From:** (b)(6),(b)(7)(C)@ice.dhs.gov  
**Date:** Tuesday, Mar 26, 2019, 6:52 PM  
**To:** (b)(6),(b)(7)(C)@ice.dhs.gov, Lorenzen-Strait, Andrew R (b)(6),(b)(7)(C)  
(b)(6),(b)(7)(C)@ice.dhs.gov, Adducci, Rebecca J (b)(6),(b)(7)(C)@ice.dhs.gov, Johnson, Tae D (b)(6),(b)(7)(C)@ice.dhs.gov,  
(b)(6),(b)(7)(C)@ice.dhs.gov, Trickler-McNulty, Claire (b)(6),(b)(7)(C)@ice.dhs.gov  
**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov, (b)(6),(b)(7)(C)@ice.dhs.gov, Phillips, Michael  
(b)(6),(b)(7)(C)@ice.dhs.gov  
**Subject:** RE: Butler County Jail IGSA for immigrant work

What DSM did you talk to and when?

Thank you.

(b)(6),(b)(7)(C)  
Unit Chief  
Detention Monitoring Unit - East  
Detention Management Division  
U.S. Immigration and Customs Enforcement  
500 12th Street, SW  
Washington, D.C. 20536  
(b)(6),(b)(7)(C) desk  
(b)(6),(b)(7)(C) iPhone

Sent with BlackBerry Work  
(www.blackberry.com)

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**From:** (b)(6),(b)(7)(C)@ice.dhs.gov  
**Date:** Tuesday, Mar 26, 2019, 6:25 PM  
**To:** Lorenzen-Strait, Andrew R (b)(6),(b)(7)(C)@ice.dhs.gov, Adducci, Rebecca J  
(b)(6),(b)(7)(C)@ice.dhs.gov, Johnson, Tae D (b)(6),(b)(7)(C)@ice.dhs.gov, (b)(6),(b)(7)(C)  
(b)(6),(b)(7)(C)@ice.dhs.gov, Trickler-McNulty, Claire (b)(6),(b)(7)(C)@ice.dhs.gov, (b)(6),(b)(7)(C)  
(b)(6),(b)(7)(C)@ice.dhs.gov  
**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov, (b)(6),(b)(7)(C)@ice.dhs.gov, Phillips, Michael  
(b)(6),(b)(7)(C)@ice.dhs.gov  
**Subject:** RE: Butler County Jail IGSA for immigrant work

Including DMU.

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(www.blackberry.com)

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**From:** Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Date:** Tuesday, Mar 26, 2019, 6:12 PM  
**To:** Adducci, Rebecca J <(b)(6),(b)(7)(C)@ice.dhs.gov>, Johnson, Tae D <(b)(6),(b)(7)(C)@ice.dhs.gov>, (b)(6),(b)(7)(C) <(b)(6),(b)(7)(C)@ice.dhs.gov>, Trickler-McNulty, Claire <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Cc:** (b)(6),(b)(7)(C) <(b)(6),(b)(7)(C)@ice.dhs.gov>, (b)(6),(b)(7)(C) <(b)(6),(b)(7)(C)@ice.dhs.gov>, (b)(6),(b)(7)(C) <(b)(6),(b)(7)(C)@ice.dhs.gov>, Phillips, Michael <Michael.Phillips@ice.dhs.gov>  
**Subject:** RE: Butler County Jail IGSA for immigrant work

And DSM I think wrongly said coffee was “monetary” and okay - correct?

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(www.blackberry.com)

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**From:** Adducci, Rebecca J <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Date:** Tuesday, Mar 26, 2019, 6:06 PM  
**To:** Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>, Johnson, Tae D <(b)(6),(b)(7)(C)@ice.dhs.gov>, (b)(6),(b)(7)(C) <(b)(6),(b)(7)(C)@ice.dhs.gov>, Trickler-McNulty, Claire <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Cc:** (b)(6),(b)(7)(C) <(b)(6),(b)(7)(C)@ice.dhs.gov>, (b)(6),(b)(7)(C) <(b)(6),(b)(7)(C)@ice.dhs.gov>, (b)(6),(b)(7)(C) <(b)(6),(b)(7)(C)@ice.dhs.gov>, (b)(6),(b)(7)(C) <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Subject:** RE: Butler County Jail IGSA for immigrant work

As well as some Hq guidance. We checked with the regional DSM on this.

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(www.blackberry.com)

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**From:** Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Date:** Tuesday, Mar 26, 2019, 6:04 PM  
**To:** Johnson, Tae D <(b)(6),(b)(7)(C)@ice.dhs.gov>, (b)(6),(b)(7)(C) <(b)(6),(b)(7)(C)@ice.dhs.gov>, Trickler-McNulty, Claire <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Cc:** (b)(6),(b)(7)(C) <(b)(6),(b)(7)(C)@ice.dhs.gov>, (b)(6),(b)(7)(C) <(b)(6),(b)(7)(C)@ice.dhs.gov>, (b)(6),(b)(7)(C) <(b)(6),(b)(7)(C)@ice.dhs.gov>, Phillips, Michael <Michael.Phillips@ice.dhs.gov>, Adducci, Rebecca J <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Subject:** RE: Butler County Jail IGSA for immigrant work

Plus Mike and Rebecca. Mike talked to Rebecca today. Looks like Jail is having our detainees do VWP and the compensation is coffee packets. I’ve asked field to cease practice. I think it may be time for some field guidance.

Sent with BlackBerry Work  
(www.blackberry.com)

---

**From:** Johnson, Tae D <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Date:** Tuesday, Mar 26, 2019, 12:19 PM  
**To:** (b)(6),(b)(7)(C) <(b)(6),(b)(7)(C)@ice.dhs.gov>, Trickler-McNulty, Claire <(b)(6),(b)(7)(C)@ice.dhs.gov>, Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>

Cc: (b)(6),(b)(7)(C)@ice.dhs.gov, (b)(6),(b)(7)(C)@ice.dhs.gov, (b)(6),(b)(7)(C)@ice.dhs.gov

**Subject:** RE: Butler County Jail IGSA for immigrant work

The BICE days

Sent with BlackBerry Work  
(www.blackberry.com)

**From:** (b)(6),(b)(7)(C)@ice.dhs.gov

**Date:** Tuesday, Mar 26, 2019, 11:34 AM

**To:** Johnson, Tae D <(b)(6),(b)(7)(C)@ice.dhs.gov>, Trickler-McNulty, Claire <(b)(6),(b)(7)(C)@ice.dhs.gov>, Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>

**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov, (b)(6),(b)(7)(C)@ice.dhs.gov, (b)(6),(b)(7)(C)@ice.dhs.gov

**Subject:** RE: Butler County Jail IGSA for immigrant work

Good morning,

Looking over the Butler IGSA (attached), there is no mention of the VWP. However, it does proscribe having detainees perform manual labor: "Except for maintaining personal living areas, persons detained for BICE shall not be required to perform manual labor."

Thank you,

(b)(6),(b)(7)(C)  
Policy and Data Analyst  
Detention Evaluation and Analysis Division  
DHS/ICE/CMD  
Office: (b)(6),(b)(7)(C)  
Mobile: (b)(6),(b)(7)(C)  
(b)(6),(b)(7)(C)@ice.dhs.gov

**From:** Johnson, Tae D

**Sent:** Tuesday, March 26, 2019 11:26 AM

**To:** Trickler-McNulty, Claire <(b)(6),(b)(7)(C)@ice.dhs.gov>; Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>

**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov, (b)(6),(b)(7)(C)@ice.dhs.gov, (b)(6),(b)(7)(C)@ice.dhs.gov, (b)(6),(b)(7)(C)@ice.dhs.gov, (b)(6),(b)(7)(C)@ice.dhs.gov

**Subject:** RE: Butler County Jail IGSA for immigrant work

The IGSA appears to be 15 years old based on the facilities list. We should also pull the last G324 to see what it says about VWP.

Interested in whether the facility considers this a VWP program or something else. I assume this is strictly voluntary, but we should confirm.

**From:** Trickler-McNulty, Claire

**Sent:** Tuesday, March 26, 2019 8:32 AM

**To:** Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>

**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov; Johnson, Tae D <(b)(6),(b)(7)(C)@ice.dhs.gov>; (b)(6),(b)(7)(C)@ice.dhs.gov

(b)(6),(b)(7)(C)@ice.dhs.gov>

**Subject:** RE: Butler County Jail IGSA for immigrant work

Do we exempt them from the VWP in the IGSA? That seems possibly problematic.

(b)(6),(b)(7)(C) can you see if we have the Butler IGSA in the contract library and see if you can find the text she is referring to, might be good for awareness or to amend.

Sent with BlackBerry Work  
(www.blackberry.com)

---

**From:** Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Date:** Tuesday, Mar 26, 2019, 8:27 AM  
**To:** (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov>, (b)(6),(b)(7)(C)@ice.dhs.gov>, Johnson, Tae D <(b)(6),(b)(7)(C)@ice.dhs.gov>, Trickler-McNulty, Claire <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Subject:** FW: Butler County Jail IGSA for immigrant work

(b)(6),(b)(7)(C) FYI. This stakeholder is pretty adversarial given my past interactions as former Public Advocate. (b)(5)  
program is being actively litigated. Pls work with ERO and OPLA on any response. (b)(5)  
(b)(5)

Andrew R. Lorenzen-Strait  
Deputy Assistant Director  
Enforcement and Removal Operations | Custody Programs  
U.S. Immigration and Customs Enforcement  
Office: (b)(6),(b)(7)(C) | Cell: (b)(6),(b)(7)(C)  
Email: (b)(6),(b)(7)(C)@ice.dhs.gov

-----Original Message-----

**From:** Lorenzen-Strait, Andrew R  
**Sent:** Tuesday, March 26, 2019 8:26 AM  
**To:** 'Jacqueline Stevens' <jacqueline-stevens@northwestern.edu>  
**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Subject:** RE: Butler County Jail IGSA for immigrant work

Good Morning Ms. Stevens: I am looping in (b)(6),(b)(7)(C) with ICE Community Affairs to help facilitate your request.

Best,  
Andrew

Andrew R. Lorenzen-Strait  
Deputy Assistant Director  
Enforcement and Removal Operations | Custody Programs U.S. Immigration and Customs Enforcement  
Office: (b)(6),(b)(7)(C) | Cell: (b)(6),(b)(7)(C)  
Email: (b)(6),(b)(7)(C)@ice.dhs.gov

-----Original Message-----

From: Jacqueline Stevens <jacqueline-stevens@northwestern.edu>  
Sent: Monday, March 25, 2019 3:47 PM  
To: Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>  
Subject: Butler County Jail IGSA for immigrant work

Dear Mr. Lorenzen Strait,

Hi there, it's been a while. I hope this finds you well.  
Two questions:

- 1) Is it the position of ICE that IGSA's may allow facilities to disregard PBNDS and require only that payment to people in custody under immigration laws be similar to payment to people in county custody under criminal laws, even if this means no funds at all?
- 2) Can you please share with me information about the IGSA for Butler County, Ohio or other laws or their interpretation pertaining to the county's legal authority to incentivize work without monetary compensation and outside the so-called "Voluntary Work Program"?

This is for the purpose of a chapter I am completing updating my research on work of those in custody under immigration law for a book contracted with the University of California Press and States Without Nations, the blog I manage and on which I will post today the information I recently obtained under the Freedom of Information Act. If I do not receive a response from you prior to posting the document, I will be happy to update with your response when it arrives.

The correspondence I have indicates that ICE was aware in 2014 that Sheriff Jones was requiring people in custody under immigration laws to work without compensation.

I spoke today with both Sheriff Jones and Chief Dwyer. My understanding from my conversations today and the email report is that people in custody under immigration laws are performing janitorial and possibly other services for the jail in exchange for 20 packages of coffee/week or no compensation, if the porters enlist people to sweep, clean the showers or paint, for example. The relief of boredom and desire to maintain the cleanliness and habitability of the facility were shared as reasons why people might perform this work without compensation.

Chief Dwyer referenced language from an IGSA exempting the facility from the PBNDS requirement of payment for this work performed as long as the compensation was the same as for those who performed similar work elsewhere in the facility. He explained that the porters in criminal custody also worked in exchange for 20 packages/coffee week and therefore his program was in compliance. Does ICE agree?

I am writing you because we have been in touch previously on the topic of the work program and also because you were copied in the email on the statements by Sheriff Jones in 2014.

Thank you for your assistance with this matter, Jackie

Professor  
Political Science and Legal Studies  
Northwestern University  
Director  
Deportation Research Clinic  
Buffett Institute  
<http://buffett.northwestern.edu/programs/deportationresearch>  
Citizenship In Question (Duke U.P. 2017), Open Source PDF <http://www.oopen.org/search?identifier=625272>

office phone: 847-467-2093  
mail



601 University Place  
Political Science Department  
Evanston, IL 60208  
<http://jacquelinestevens.org>  
<http://stateswithoutnations.blogspot.com>

**From:** (b)(6),(b)(7)(C),(b)(7)(E)  
**Sent:** 3/26/2019 1:16:32 PM  
**To:** (b)(6),(b)(7)(C),(b)(7)(E)  
**Subject:** FW: Butler County Jail IGSA for immigrant work

FYI

-----Original Message-----

**From:** (b)(6),(b)(7)(C)  
**Sent:** Tuesday, March 26, 2019 9:05 AM  
**To:** Adducci, Rebecca J (b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov  
**Subject:** FW: Butler County Jail IGSA for immigrant work

Good morning Rebecca and (b)(6),(b)(7)(C)  
I assured the group below that I would make you aware of the issue and specifically what the author is saying the Sheriff is allegedly reporting regarding the Voluntary work Program. Please see below.  
Thank you.

(b)(6),(b)(7)(C)

Best regards,

(b)(6),(b)(7)(C)  
Community Relations Officer (MI & OH)  
Stakeholder Engagement / Victims of Immigration Crime Engagement (VOICE) Office DHS/U.S. Immigration and Customs Enforcement (ICE)  
Office: (b)(6),(b)(7)(C) Cell: (b)(6),(b)(7)(C) Follow ICE

CONFIDENTIALITY NOTICE: This document may contain confidential and sensitive U.S. Government information, and is not for release, review, retransmission, dissemination or use by anyone other than the intended recipient. Please notify the sender if this email has been misdirected and immediately destroy all originals and copies of the original. Any disclosure of this document must be approved by the Department of Homeland Security, U.S. Immigration and Customs Enforcement.

-----Original Message-----

**From:** (b)(6),(b)(7)(C)  
**Sent:** Tuesday, March 26, 2019 8:48 AM  
**To:** (b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov  
**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov; Lorenzen-Strait, Andrew R (b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov  
**Subject:** FW: Butler County Jail IGSA for immigrant work

Hi OPA team,  
Looking for a brain huddle here.  
We have an inquiry from an author who I have previously worked with back when I was in OPA. Now that she has a book deal, (b)(6),(b)(7)(C)  
(b)(6)  
At any rate, I'm copying our local CRO (b)(6),(b)(7)(C) (b)(6),(b)(7)(C) can you please make sure the FOD/AFOD are aware of what this author is saying the sheriff is reporting regarding the Voluntary work Program?

Thank you.

(b)(6),(b)(7)(C)  
Spokesperson (San Francisco and Northern California) U.S. Immigration and Customs Enforcement/Homeland Security Investigations  
(b)(6),(b)(7)(C)@ice.dhs.gov  
(b)(6),(b)(7)(C)@ice.dhs.gov

-----Original Message-----

**From:** Lorenzen-Strait, Andrew R  
**Sent:** Tuesday, March 26, 2019 7:28 AM  
**To:** (b)(6),(b)(7)(C)@ice.dhs.gov  
**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov; Johnson, Tae D (b)(6),(b)(7)(C)@ice.dhs.gov; Trickler-McNulty, Claire (b)(6),(b)(7)(C)@ice.dhs.gov

Subject: FW: Butler County Jail IGSA for immigrant work

(b)(6),(b)(7)(C) FYI. This stakeholder is pretty adversarial given my past interactions as former Public Advocate.  
(b)(6) Pls work with ERO and OPLA on any response. (b)(5)  
(b)(6)

Andrew R. Lorenzen-Strait  
Deputy Assistant Director  
Enforcement and Removal Operations | Custody Programs U.S. Immigration and Customs Enforcement  
Office: (b)(6),(b)(7)(C) | Cell: (b)(6),(b)(7)(C)  
Email: (b)(6),(b)(7)(C)@ice.dhs.gov

-----Original Message-----

From: Lorenzen-Strait, Andrew R  
Sent: Tuesday, March 26, 2019 8:26 AM  
To: 'Jacqueline Stevens' <jacqueline-stevens@northwestern.edu>  
Cc: (b)(6),(b)(7)(C)@ice.dhs.gov  
Subject: RE: Butler county Jail IGSA for immigrant work

Good Morning Ms. Stevens: I am looping in (b)(6),(b)(7)(C) with ICE Community Affairs to help facilitate your request.

Best,  
(b)(6),(b)(7)(C)

Andrew R. Lorenzen-Strait  
Deputy Assistant Director  
Enforcement and Removal Operations | Custody Programs U.S. Immigration and Customs Enforcement  
Office: (b)(6),(b)(7)(C) | Cell: (b)(6),(b)(7)(C)  
Email: (b)(6),(b)(7)(C)@ice.dhs.gov

-----Original Message-----

From: Jacqueline Stevens <jacqueline-stevens@northwestern.edu>  
Sent: Monday, March 25, 2019 3:47 PM  
To: Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>  
Subject: Butler County Jail IGSA for immigrant work

Dear Mr. Lorenzen Strait,

Hi there, it's been a while. I hope this finds you well.  
Two questions:

- 1) Is it the position of ICE that IGSA's may allow facilities to disregard PBNDS and require only that payment to people in custody under immigration laws be similar to payment to people in county custody under criminal laws, even if this means no funds at all?
- 2) Can you please share with me information about the IGSA for Butler County, Ohio or other laws or their interpretation pertaining to the county's legal authority to incentivize work without monetary compensation and outside the so-called "Voluntary work Program"?

This is for the purpose of a chapter I am completing updating my research on work of those in custody under immigration law for a book contracted with the University of California Press and States Without Nations, the blog I manage and on which I will post today the information I recently obtained under the Freedom of Information Act. If I do not receive a response from you prior to posting the document, I will be happy to update with your response when it arrives.

The correspondence I have indicates that ICE was aware in 2014 that Sheriff Jones was requiring people in custody under immigration laws to work without compensation. I spoke today with both Sheriff Jones and Chief Dwyer. My understanding from my conversations today and the email report is that people in custody under immigration laws are performing janitorial and possibly other services for the jail in exchange for 20 packages of coffee/week or no compensation, if the porters enlist people to sweep, clean the showers or paint, for example. The relief of boredom and desire to maintain the cleanliness and habitability of the facility were shared as reasons why people might perform this work without compensation.

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I am writing you because we have been in touch previously on the topic of the work program and also because you were copied in the email on the statements by Sheriff Jones in 2014.

Thank you for your assistance with this matter, Jackie

Professor  
Political Science and Legal Studies  
Northwestern University  
Director  
Deportation Research Clinic  
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<http://buffett.northwestern.edu/programs/deportationresearch>  
Citizenship In Question (Duke U.P. 2017), Open Source PDF <http://www.oopen.org/search?identifier=625272>

office phone: 847-467-2093  
mail  
601 University Place  
Political Science Department  
Evanston, IL 60208  
<http://jacquelinestevens.org>  
<http://stateswithoutnations.blogspot.com>

---

**Subject:** FW: Thank you for your help!

From: (b)(6),(b)(7)(C)  
Sent: Wednesday, March 27, 2019 1:26 PM  
To: (b)(6),(b)(7)(C)@butlersheriff.org  
Subject: RE: Thank you for your help!

Good afternoon,  
Do you have a minute to discuss the voluntary work program? If so, please let me know a good time.  
Thank you.

(b)(6),(b)(7)(C)  
Assistant Field Office Director  
DHS / ICE / ERO  
Detroit Field Office  
(b)(6),(b)(7)(C) Desk  
(b)(6),(b)(7)(C) Cell

---

**From:** (b)(6),(b)(7)(C),(b)(7)(E)  
**Sent:** 3/26/2019 6:34:08 PM  
**To:** (b)(6),(b)(7)(C),(b)(7)(E)  
**Subject:** RE: Butler County Jail IGSA for immigrant work

Yup, but didn't know it.

---

**From:** (b)(6),(b)(7)(C)  
**Sent:** Tuesday, March 26, 2019 2:32 PM  
**To:** (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Subject:** FW: Butler County Jail IGSA for immigrant work

FYI, was what you were working on yesterday related to the below?? The string below indicates involving ICE FOIA and/or Community Relations.....is that where you got queried from?

Very respectfully,

(b)(6),(b)(7)(C)  
Management & Program Analyst  
(PMP) (FAC-P/PM) (FAC-C) (COR)  
DHS/ICE/ERO – Detroit Field Office  
333 Mount Elliott Street  
Detroit, MI 48207

Office – (b)(6),(b)(7)(C)  
Cell (b)(6),(b)(7)(C)

---

**From:** (b)(6),(b)(7)(C)  
**Sent:** Tuesday, March 26, 2019 11:50 AM  
**To:** (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Subject:** FW: Butler County Jail IGSA for immigrant work

Hi (b)(6),(b)(7)(C)

For your awareness, please see the email chain below. I will check the mods, but I doubt VWP is addressed.

(b)(6),(b)(7)(C)  
Detention, Compliance & Removals | Section Chief  
DHS | ICE | Office of Acquisition Management (OAQ)  
Phone: (b)(6),(b)(7)(C) Mobile: (b)(6),(b)(7)(C)  
Email: (b)(6),(b)(7)(C)@ice.dhs.gov

---

**From:** Trickler-McNulty, Claire  
**Sent:** Tuesday, March 26, 2019 11:40 AM  
**To:** (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Subject:** FW: Butler County Jail IGSA for immigrant work

(b)(6),(b)(7)(C) can you help me run down if there are any mods on the Butler IGSA that might reference the VWP?

Thanks,  
Claire

---

**From:** (b)(6),(b)(7)(C)  
**Sent:** Tuesday, March 26, 2019 11:34 AM  
**To:** Johnson, Tae D <(b)(6),(b)(7)(C)@ice.dhs.gov>; Trickler-McNulty, Claire <(b)(6),(b)(7)(C)@ice.dhs.gov>; Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov  
**Subject:** RE: Butler County Jail IGSA for immigrant work

Good morning,

Looking over the Butler IGSA (attached), there is no mention of the VWP. However, it does proscribe having detainees perform manual labor: "Except for maintaining personal living areas, persons detained for BICE shall not be required to perform manual labor."

Thank you,

(b)(6),(b)(7)(C)  
*Policy and Data Analyst*  
*Detention Evaluation and Analysis Division*  
*DHS/ICE/CMD*  
*Office:* (b)(6),(b)(7)(C)  
*Mobile:* (b)(6),(b)(7)(C)  
(b)(6),(b)(7)(C)@ice.dhs.gov

---

**From:** Johnson, Tae D  
**Sent:** Tuesday, March 26, 2019 11:26 AM  
**To:** Trickler-McNulty, Claire <(b)(6),(b)(7)(C)@ice.dhs.gov>; Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov  
**Subject:** RE: Butler County Jail IGSA for immigrant work

The IGSA appears to be 15 years old based on the facilities list. We should also pull the last G324 to see what it says about VWP.

Interested in whether the facility considers this a VWP program or something else. I assume this is strictly voluntary, but we should confirm.

---

**From:** Trickler-McNulty, Claire  
**Sent:** Tuesday, March 26, 2019 8:32 AM  
**To:** Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov; Johnson, Tae D <(b)(6),(b)(7)(C)@ice.dhs.gov>; (b)(6),(b)(7)(C)@ice.dhs.gov  
**Subject:** RE: Butler County Jail IGSA for immigrant work

Do we exempt them from the VWP in the IGSA? That seems possibly problematic.

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**Date:** Tuesday, Mar 26, 2019, 8:27 AM  
**To:** (b)(6),(b)(7)(C)@ice.dhs.gov  
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**Subject:** FW: Butler County Jail IGSA for immigrant work

Rich - FYI. This stakeholder is pretty adversarial given my past interactions as former Public Advocate. (b)(5)  
(b)(5) Pls work with ERO and OPLA on any response. (b)(5)  
FOIA.

Andrew R. Lorenzen-Strait  
Deputy Assistant Director  
Enforcement and Removal Operations | Custody Programs  
U.S. Immigration and Customs Enforcement  
Office: (b)(6),(b)(7)(C) | Cell: (b)(6),(b)(7)(C)  
Email: (b)(6),(b)(7)(C)@ice.dhs.gov

-----Original Message-----

**From:** Lorenzen-Strait, Andrew R  
**Sent:** Tuesday, March 26, 2019 8:26 AM  
**To:** 'Jacqueline Stevens' <jacqueline-stevens@northwestern.edu>  
**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov  
**Subject:** RE: Butler County Jail IGSA for immigrant work

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Andrew

Andrew R. Lorenzen-Strait  
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Enforcement and Removal Operations | Custody Programs U.S. Immigration and Customs Enforcement  
Office: (b)(6),(b)(7)(C) | Cell: (b)(6),(b)(7)(C)  
Email: (b)(6),(b)(7)(C)@ice.dhs.gov

-----Original Message-----

**From:** Jacqueline Stevens <jacqueline-stevens@northwestern.edu>  
**Sent:** Monday, March 25, 2019 3:47 PM  
**To:** Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>  
**Subject:** Butler County Jail IGSA for immigrant work

Dear Mr. Lorenzen Strait,

Hi there, it's been a while. I hope this finds you well.



Two questions:

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Political Science and Legal Studies  
Northwestern University  
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Deportation Research Clinic  
Buffett Institute  
<http://buffett.northwestern.edu/programs/deportationresearch>  
Citizenship In Question (Duke U.P. 2017), Open Source PDF <http://www.oapen.org/search?identifier=625272>

office phone: 847-467-2093  
mail  
601 University Place  
Political Science Department  
Evanston, IL 60208  
<http://jacquelinestevens.org>  
<http://stateswithoutnations.blogspot.com>

---

**From:** (b)(6),(b)(7)(C),(b)(7)(E)  
**Sent:** 3/26/2019 7:05:51 PM  
**To:** (b)(6),(b)(7)(C),(b)(7)(E)  
**Subject:** RE: Butler County Jail IGSA for immigrant work

HQ is working on it. No need to respond. I spoke with [redacted] earlier and will chat with you when you get back from SSM. I believe the sole immediate issue is whether commissary items equate to monetary compensation.

---

**From:** (b)(6),(b)(7)(C)  
**Sent:** Tuesday, March 26, 2019 2:46 PM  
**To:** (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Subject:** RE: Butler County Jail IGSA for immigrant work

(b)(6),(b)(7)(C)

There is a lot packed into the original question in the email string below. What correspondence the individual has and what it says. What Chief Dwyer said. Does ICE agree with what Chief Dwyer said, although we don't know for sure what he did or did not say. Whether ICE knew about this in 2014.

Attached is what I sent to the Contracting Officer.....I would be reluctant to respond without knowing what I am actually responding to and having the opportunity to check into things myself. (b)(5)  
what the IGSA language and VWP standard allows after checking with Lyle and/or OPLA to make sure I wasn't speaking out of turn.

Very respectfully,

(b)(6),(b)(7)(C)  
Management & Program Analyst  
(PMP) (FAC-P/PM) (FAC-C) (COR)  
DHS/ICE/ERO – Detroit Field Office  
333 Mount Elliott Street  
Detroit, MI 48207

Office (b)(6),(b)(7)(C)  
Cell (b)(6),(b)(7)(C)

---

**From:** (b)(6),(b)(7)(C)  
**Sent:** Tuesday, March 26, 2019 2:34 PM  
**To:** (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Subject:** RE: Butler County Jail IGSA for immigrant work

Yup, but didn't know it.

---

**From:** (b)(6),(b)(7)(C)  
**Sent:** Tuesday, March 26, 2019 2:32 PM  
**To:** (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Subject:** FW: Butler County Jail IGSA for immigrant work

FYI, was what you were working on yesterday related to the below?? The string below indicates involving ICE FOIA and/or Community Relations.....is that where you got queried from?

Very respectfully,

(b)(6),(b)(7)(C)

Management & Program Analyst  
(PMP) (FAC-P/PM) (FAC-C) (COR)  
DHS/ICE/ERO – Detroit Field Office  
333 Mount Elliott Street  
Detroit, MI 48207

Office (b)(6),(b)(7)(C)

Cell (b)(6),(b)(7)(C)

---

**From:** (b)(6),(b)(7)(C)

**Sent:** Tuesday, March 26, 2019 11:50 AM

**To:** (b)(6),(b)(7)(C)@ice.dhs.gov

**Subject:** FW: Butler County Jail IGSA for immigrant work

H (b)(6),(b)(7)(C)

For your awareness, please see the email chain below. I will check the mods, but I doubt VWP is addressed.

(b)(6),(b)(7)(C)

Detention, Compliance & Removals | Section Chief  
DHS | ICE | Office of Acquisition Management (OAQ)  
Phone: (b)(6),(b)(7)(C) Mobile: (b)(6),(b)(7)(C)  
Email: (b)(6),(b)(7)(C)@ice.dhs.gov

---

**From:** Trickler-McNulty, Claire

**Sent:** Tuesday, March 26, 2019 11:40 AM

**To:** (b)(6),(b)(7)(C)@ice.dhs.gov

**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov

**Subject:** FW: Butler County Jail IGSA for immigrant work

(b)(6),(b)(7)(C) – can you help me run down if there are any mods on the Butler IGSA that might reference the VWP?

Thanks,

Claire

---

**From:** (b)(6),(b)(7)(C)

**Sent:** Tuesday, March 26, 2019 11:34 AM

**To:** Johnson, Tae D (b)(6),(b)(7)(C)@ice.dhs.gov; Trickler-McNulty, Claire (b)(6),(b)(7)(C)@ice.dhs.gov;

Lorenzen-Strait, Andrew R (b)(6),(b)(7)(C)@ice.dhs.gov

**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov (b)(6),(b)(7)(C)@ice.dhs.gov (b)(6),(b)(7)(C)

(b)(6),(b)(7)(C)@ice.dhs.gov

**Subject:** RE: Butler County Jail IGSA for immigrant work

Good morning,

Looking over the Butler IGSA (attached), there is no mention of the VWP. However, it does proscribe having detainees perform manual labor: "Except for maintaining personal living areas, persons detained for BICE shall not be required to perform manual labor."

Thank you,

(b)(6),(b)(7)(C)

Policy and Data Analyst

Detention Evaluation and Analysis Division

DHS/ICE/CMD

Office: (b)(6),(b)(7)(C)

Mobile: (b)(6),(b)(7)(C)

(b)(6),(b)(7)(C)@ice.dhs.gov

---

**From:** Johnson, Tae D

**Sent:** Tuesday, March 26, 2019 11:26 AM

**To:** Trickler-McNulty, Claire <(b)(6),(b)(7)(C)@ice.dhs.gov>; Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>

**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)

(b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov

**Subject:** RE: Butler County Jail IGSA for immigrant work

The IGSA appears to be 15 years old based on the facilities list. We should also pull the last G324 to see what it says about VWP.

Interested in whether the facility considers this a VWP program or something else. I assume this is strictly voluntary, but we should confirm.

---

**From:** Trickler-McNulty, Claire

**Sent:** Tuesday, March 26, 2019 8:32 AM

**To:** Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>

**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov; Johnson, Tae D <(b)(6),(b)(7)(C)@ice.dhs.gov>; (b)(6),(b)(7)(C)

(b)(6),(b)(7)(C)@ice.dhs.gov

**Subject:** RE: Butler County Jail IGSA for immigrant work

Do we exempt them from the VWP in the IGSA? That seems possibly problematic.

(b)(6),(b)(7)(C) can you see if we have the Butler IGSA in the contract library and see if you can find the text she is referring to, might be good for awareness or to amend.

Sent with BlackBerry Work  
(www.blackberry.com)

---

**From:** Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>

**Date:** Tuesday, Mar 26, 2019, 8:27 AM

**To:** (b)(6),(b)(7)(C)@ice.dhs.gov

**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov; (b)(6),(b)(7)(C)@ice.dhs.gov; Johnson, Tae

D <(b)(6),(b)(7)(C)@ice.dhs.gov>; Trickler-McNulty, Claire <(b)(6),(b)(7)(C)@ice.dhs.gov>

**Subject:** FW: Butler County Jail IGSA for immigrant work

(b)(6),(b)(7)(C) FYI. This stakeholder is pretty adversarial given my past interactions as former Public Advocate. (b)(5)

(b)(5) Pls work with ERO and OPLA on any response. My recommendation is to send her to

(b)(5)

Andrew R. Lorenzen-Strait  
Deputy Assistant Director  
Enforcement and Removal Operations | Custody Programs  
U.S. Immigration and Customs Enforcement  
Office: (b)(6),(b)(7)(C) | Cell (b)(6),(b)(7)(C)  
Email: (b)(6),(b)(7)(C)@ice.dhs.gov

-----Original Message-----

From: Lorenzen-Strait, Andrew R  
Sent: Tuesday, March 26, 2019 8:26 AM  
To: 'Jacqueline Stevens' <jacqueline-stevens@northwestern.edu>  
Cc: (b)(6),(b)(7)(C)@ice.dhs.gov  
Subject: RE: Butler County Jail IGSA for immigrant work

Good Morning Ms. Stevens: I am looping in (b)(6),(b)(7)(C) with ICE Community Affairs to help facilitate your request.

Best,  
Andrew

Andrew R. Lorenzen-Strait  
Deputy Assistant Director  
Enforcement and Removal Operations | Custody Programs U.S. Immigration and Customs Enforcement  
Office: (b)(6),(b)(7)(C) | Cell (b)(6),(b)(7)(C)  
Email: (b)(6),(b)(7)(C)@ice.dhs.gov

-----Original Message-----

From: Jacqueline Stevens <jacqueline-stevens@northwestern.edu>  
Sent: Monday, March 25, 2019 3:47 PM  
To: Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>  
Subject: Butler County Jail IGSA for immigrant work

Dear Mr. Lorenzen Strait,

Hi there, it's been a while. I hope this finds you well.  
Two questions:

- 1) Is it the position of ICE that IGSA's may allow facilities to disregard PBNDS and require only that payment to people in custody under immigration laws be similar to payment to people in county custody under criminal laws, even if this means no funds at all?
- 2) Can you please share with me information about the IGSA for Butler County, Ohio or other laws or their interpretation pertaining to the county's legal authority to incentivize work without monetary compensation and outside the so-called "Voluntary Work Program"?

This is for the purpose of a chapter I am completing updating my research on work of those in custody under immigration law for a book contracted with the University of California Press and States Without Nations, the blog I manage and on which I will post today the information I recently obtained under the Freedom of Information

Act. If I do not receive a response from you prior to posting the document, I will be happy to update with your response when it arrives.

The correspondence I have indicates that ICE was aware in 2014 that Sheriff Jones was requiring people in custody under immigration laws to work without compensation.

I spoke today with both Sheriff Jones and Chief Dwyer. My understanding from my conversations today and the email report is that people in custody under immigration laws are performing janitorial and possibly other services for the jail in exchange for 20 packages of coffee/week or no compensation, if the porters enlist people to sweep, clean the showers or paint, for example. The relief of boredom and desire to maintain the cleanliness and habitability of the facility were shared as reasons why people might perform this work without compensation.

Chief Dwyer referenced language from an IGSA exempting the facility from the PBNDS requirement of payment for this work performed as long as the compensation was the same as for those who performed similar work elsewhere in the facility. He explained that the porters in criminal custody also worked in exchange for 20 packages/coffee week and therefore his program was in compliance. Does ICE agree?

I am writing you because we have been in touch previously on the topic of the work program and also because you were copied in the email on the statements by Sheriff Jones in 2014.

Thank you for your assistance with this matter, Jackie

Professor  
Political Science and Legal Studies  
Northwestern University  
Director  
Deportation Research Clinic  
Buffett Institute  
<http://buffett.northwestern.edu/programs/deportationresearch>  
Citizenship In Question (Duke U.P. 2017), Open Source PDF <http://www.oopen.org/search?identifier=625272>

office phone: 847-467-2093  
mail  
601 University Place  
Political Science Department  
Evanston, IL 60208  
<http://jacquelinestevens.org>  
<http://stateswithoutnations.blogspot.com>

---

**From:** Adducci, Rebecca J. [REDACTED] (b)(7)(E)  
[REDACTED] (b)(7)(E)  
**Sent:** 3/26/2019 4:16:13 PM  
**To:** Lorenzen-Strait, Andrew R [REDACTED] (b)(7)(E)  
[REDACTED] (b)(7)(E)  
**CC:** [REDACTED] (b)(6),(b)(7)(C),(b)(7)(E)  
**Subject:** RE: Butler County Jail IGSA for immigrant work

I have some more information. Tried to call you. At a BRIDGES meeting now. Will try again this afternoon.

Sent with BlackBerry Work  
(www.blackberry.com)

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**From:** Lorenzen-Strait, Andrew R <[REDACTED] (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Date:** Tuesday, Mar 26, 2019, 12:14 PM  
**To:** Adducci, Rebecca J <[REDACTED] (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Subject:** FW: Butler County Jail IGSA for immigrant work

Sent with BlackBerry Work  
(www.blackberry.com)

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**From:** [REDACTED] (b)(6),(b)(7)(C)@ice.dhs.gov  
**Date:** Tuesday, Mar 26, 2019, 11:34 AM  
**To:** Johnson, Tae D <[REDACTED] (b)(6),(b)(7)(C)@ice.dhs.gov>, Trickler-McNulty, Claire [REDACTED] (b)(6),(b)(7)(C)@ice.dhs.gov, Lorenzen-Strait, Andrew R <[REDACTED] (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Cc:** [REDACTED] (b)(6),(b)(7)(C)@ice.dhs.gov, [REDACTED] (b)(6),(b)(7)(C)@ice.dhs.gov, [REDACTED] (b)(6),(b)(7)(C)@ice.dhs.gov  
**Subject:** RE: Butler County Jail IGSA for immigrant work

Good morning,

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Thank you,

[REDACTED] (b)(6),(b)(7)(C)  
*Policy and Data Analyst*  
*Detention Evaluation and Analysis Division*  
*DHS/ICE/CMD*  
*Office:* [REDACTED] (b)(6),(b)(7)(C)  
*Mobile:* [REDACTED] (b)(6),(b)(7)(C)  
[REDACTED] (b)(6),(b)(7)(C)@ice.dhs.gov

---

**From:** Johnson, Tae D  
**Sent:** Tuesday, March 26, 2019 11:26 AM  
**To:** Trickler-McNulty, Claire <[REDACTED] (b)(6),(b)(7)(C)@ice.dhs.gov>; Lorenzen-Strait, Andrew R <[REDACTED] (b)(6),(b)(7)(C)@ice.dhs.gov>

(b)(6),(b)(7)(C)@ice.dhs.gov>

**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov>; (b)(6),(b)(7)(C)@ice.dhs.gov>; (b)(6),(b)(7)(C)@ice.dhs.gov>; (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Subject:** RE: Butler County Jail IGSA for immigrant work

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**From:** Trickler-McNulty, Claire

**Sent:** Tuesday, March 26, 2019 8:32 AM

**To:** Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>

**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov>; Johnson, Tae D <(b)(6),(b)(7)(C)@ice.dhs.gov>; (b)(6),(b)(7)(C)@ice.dhs.gov>

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Sent with BlackBerry Work

([www.blackberry.com](http://www.blackberry.com))

---

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**Date:** Tuesday, Mar 26, 2019, 8:27 AM

**To:** (b)(6),(b)(7)(C)@ice.dhs.gov>

**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov>; (b)(6),(b)(7)(C)@ice.dhs.gov>; Johnson, Tae D <(b)(6),(b)(7)(C)@ice.dhs.gov>; Trickler-McNulty, Claire <(b)(6),(b)(7)(C)@ice.dhs.gov>

**Subject:** FW: Butler County Jail IGSA for immigrant work

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(b)(5) Pls work with ERO and OPLA on any response. (b)(5)

FOIA.

Andrew R. Lorenzen-Strait

Deputy Assistant Director

Enforcement and Removal Operations | Custody Programs

U.S. Immigration and Customs Enforcement

Office: (b)(6),(b)(7)(C) | Cell: (b)(6),(b)(7)(C)

Email: (b)(6),(b)(7)(C)@ice.dhs.gov

-----Original Message-----

**From:** Lorenzen-Strait, Andrew R

**Sent:** Tuesday, March 26, 2019 8:26 AM

**To:** 'Jacqueline Stevens' <jacqueline-stevens@northwestern.edu>

**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov>



Subject: RE: Butler County Jail IGSA for immigrant work

Good Morning Ms. Stevens: I am looping in (b)(6),(b)(7)(C) with ICE Community Affairs to help facilitate your request.

Best,  
Andrew

Andrew R. Lorenzen-Strait  
Deputy Assistant Director  
Enforcement and Removal Operations | Custody Programs U.S. Immigration and Customs Enforcement  
Office: (b)(6),(b)(7)(C) | Cell: (b)(6),(b)(7)(C)  
Email: (b)(6),(b)(7)(C)@ice.dhs.gov

-----Original Message-----

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Sent: Monday, March 25, 2019 3:47 PM  
To: Lorenzen-Strait, Andrew R <(b)(6),(b)(7)(C)@ice.dhs.gov>  
Subject: Butler County Jail IGSA for immigrant work

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I am writing you because we have been in touch previously on the topic of the work program and also because you were copied in the email on the statements by Sheriff Jones in 2014.

Thank you for your assistance with this matter, Jackie

Professor

Political Science and Legal Studies

Northwestern University

Director

Deportation Research Clinic

Buffett Institute

<http://buffett.northwestern.edu/programs/deportationresearch>

Citizenship In Question (Duke U.P. 2017), Open Source PDF <http://www.oapen.org/search?identifier=625272>

office phone: 847-467-2093

mail

601 University Place

Political Science Department

Evanston, IL 60208

<http://jacquelinestevens.org>

<http://stateswithoutnations.blogspot.com>

---

**From:** (b)(6),(b)(7)(C),(b)(7)(E)  
**Sent:** 4/1/2019 12:12:15 PM  
**To:** (b)(6),(b)(7)(C),(b)(7)(E)  
**Subject:** RE: Tasking I need HELP with

Seneca, Monroe, Butler, NEOCC. The other three have suspended the program until they can figure out a method to pay.

Sent with BlackBerry Work  
(www.blackberry.com)

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**From:** (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Date:** Monday, Apr 01, 2019, 7:58 AM  
**To:** (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Cc:** (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Subject:** RE: Tasking I need HELP with

(b)(6),(b)(7)(C)

Am out today. Believe NEOCC is the only facility with a VWP. Or at least the only facility with a VWP indicated on the annual inspections.

I understand there is some question about Butler as well, but again the last inspection stated they didn't have a VWP.....

I think (b)(6),(b)(7)(C) also checked last week so he might have good info as well.

(b)(6),(b)(7)(C)

Sent with BlackBerry Work  
(www.blackberry.com)

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**From:** (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Date:** Friday, Mar 29, 2019, 10:26 AM  
**To:** (b)(6),(b)(7)(C)@ice.dhs.gov>  
**Subject:** Tasking I need HELP with

(b)(6),(b)(7)(C)

I got hit with a tasking from HQ on the Voluntary Work Program concerning 072 hour facilities using the VWP. I know the answers for most of the jails but will need your assistance on the other ones, if you can help. If I left off any facilities, please add them. Thank you very much!

(b)(6),(b)(7)(C)

1. Does the facility have a VWP
2. If so, how much do they get paid?

Seneca – No VWP (they just stopped)

Calhoun – No VWP

Monroe – No VWP

NEOCC – Yes, \$1

Geauga -

Chippewa –

Butler –

St Clair –

Morrow (Not sure if it is an 072 that is used anymore) -

(b)(6),(b)(7)(C)

Group Supervisor Northeast Region

Detention Monitoring Unit

Custody Management

Immigration and Customs Enforcement

(b)(6),(b)(7)(C)

Warning: This document is UNCLASSIFIED//FOR OFFICIAL USE ONLY (U//FOUO). It contains information that may be exempt from public release under the Freedom of Information Act (5 U.S.C. 552). It is to be controlled, stored, handled, transmitted, distributed, and disposed of in accordance with DHS policy relating to FOUO information and is not to be released to the public or other personnel who do not have a valid "need-to-know" without prior approval of an authorized DHS official. No portion of this report should be furnished to the media, either in written or verbal form.