

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 2013 and 2014 NDS compliance annual inspections.

2013 Inspection		2014 Inspection	
Compliant	36	Compliant	35
Deficient	0	Deficient	0
At-Risk	0	At-Risk	0
Repeat Deficiency	0	Repeat Deficiency	0
Not Applicable	2	Not Applicable	3

The inspection team found two (2) deficient components in the following two (2) standards:

- Correspondence and Other Mail - 1, which is a repeat deficiency
- Detainee Handbook - 1

LCI Issues and Concerns

There were no issues or concerns identified during this inspection.

Significant Observations

There were no significant observations made during this inspection.

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 three (3) standards were Not Applicable (N/A). All remaining thirty-five (35) standards were found to be in compliance.

LCI Assurance Statement

The findings of compliance and noncompliance are accurately and completely documented on the G-324A 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) AFOD (b)(6); (b)(7)(C) SDDO (b)(6); (b)(7)(C) SDDO (b)(6); (b)(7)(C) and IEA (b)(6); (b)(7)(C) Facility staff -- Captain (b)(6); (b)(7)(C) Lieutenant (b)(6); (b)(7)(C) Lieutenant (b)(6); (b)(7)(C) Lieutenant (b)(6); (b)(7)(C) Corrections Officer (b)(6); (b)(7)(C) and various other supervisors and staff.

(b)(6); (b)(7)(C)
Signature _____

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

January 16, 2014

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
01/14/2014- 01/16/2014

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
01/15/2013- 01/17/2013
 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.)
Captain (b)(6); (b)(7)(C) Warden
 Telephone # (Include Area Code)
(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); / LCI / Nakamoto
 Name of Team Member / Title / Duty Location
(b)(6); Medical SME / Nakamoto
 Name of Team Member / Title / Duty Location
(b)(6); Safety/Food Service SME / Nakamoto
 Name of Team Member / Title / Duty Location
(b)(6); Security SME / Nakamoto
 Name of Team Member / Title / Duty Location
 / /

F. CDF/IGSA Information Only

Contract Number
(b)(7)(E) Date of Contract or IGSA
12-16-03
 Basic Rates per Man-Day
(b)(4)
 Other Charges: (If None, Indicate N/A)
N/A

Estimated Man-days Per Year:
299,464

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
N/A
 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: **N/A** Date: **N/A**

J. Total Facility Population

Total Facility Intake for previous 12 months
13,588
 Total ICE Man-days for Previous 12 months
30,360

K. Classification Level (ICE SPCs and CDFs Only)

	L-1	L-2	L-3
Adult Male	N/A	N/A	N/A
Adult Female	N/A	N/A	N/A

L. Facility Capacity

	Rated	Operational	Emergency
Adult Male	720	720	720
Adult Female	128	128	128

Facility holds Juveniles Offenders 16 and older as Adults

M. Average Daily Population

	ICE	USMS	Other
Adult Male	84	140	454
Adult Female	2	9	133

N. Facility Staffing Level

Security:
111 Support:
43

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 ¹	Types (Sexual ² , Physical, etc.)	P	P	P	P
	With Weapon	0	0	0	0
	Without Weapon	1	2	1	2
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	P	N/A	P	N/A
	With Weapon	0	0	0	0
	Without Weapon	1	0	5	0
Number of Forced Moves, incl. Forced Cell moves ³		0	1	0	0
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		0	0	0	0
Number of Times Special Reaction Team Deployed/Used		0	1	0	0
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O Other)	V=45	V=21	V=42	V=27
	Type (C=Chair, B=Bed, BB=Board, O Other)	C	C	C	C
Offender / Detainee Medical Referrals as a result of injuries sustained.		1	2	1	2
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	98	56	45	52
	# Resolved in favor of Offender/Detainee	15	7	3	15
Deaths	Reason (V=Violent, I Illness, S Suicide, A=Attempted Suicide, O Other)	N/A	I	I	N/A
	Number	0	1	1	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	75	81	71	47
	# Psychiatric Cases referred for Outside Care	0	0	0	0

¹ Any attempted physical contact or physical contact that involves two or more offenders

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

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

⁴ 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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.

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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) (b)(6); (b)(7)(C)	Signature 
Title & Duty Location Lead Compliance Inspector, The Nakamoto Group, Inc.	Date 01/16/2014

Team Members	
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
(b)(6); (b)(7)(C) Safety/Food Service 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.	

Recommended Rating:

Superior
 Good
 Acceptable
 Deficient
 At-Risk

Comments: The Butler County Jail falls under the jurisdiction of the Butler County Sheriff. The facility consists of cellblock housing and is operated under the direct supervision model. Male and female adult ICE detainees are housed at the facility, as well as local and U. S. Marshals Service detainees. During the inspection, the total population count was 819, which included 73 male and two female ICE detainees. The average length of stay for an ICE detainee at this facility is 34 days. The majority of ICE detainees are housed separate from non-ICE detainees and stratified in their housing area by classification level. One ICE officer is assigned to this facility on a full time basis.

The facility does not deploy canines, Tasers, or chemical agents on ICE detainees. There have been no reported physical responses to resistance involving ICE detainees during the inspection period, and no escapes or attempted escapes involving ICE detainees. ICE detainees are not charged medical co-pay fees. There have been no substantiated incidents of sexual assault or abuse. There were no serious suicide attempts involving ICE detainees.

There were two deaths of non-ICE detainees during the inspection period. A 42 year old white male admitted to the facility 12/12/2012 expired at a local hospital on 04/24/2013. The cause of death was determined to be complications due to diabetes, high blood pressure, pancreatitis and obesity. All of these chronic illnesses were identified during intake screening and the detainee was routinely evaluated.

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A 50 year old white female admitted to the facility 06/20/2013 expired at a local hospital on 07/03/2013. The cause of death was listed as a life-threatening cardiac arrhythmia secondary to complications of schizophrenia. The detainee's mental health issues were identified during intake and the detainee was on the mental health case load.

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

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



ICE Detention Standards Review Worksheet

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

Facility Information			
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: (b)(6); (b)(7)(C)	CEO Title: Captain/Warden		
Review Information <small>(Use following format for dates: mm/dd/yyyy)</small>			
Start Date: 1/14/14	End Date: 1/16/2014	Review Type: Headquarters	
Lead Name: (b)(6); (b)(7)(C)	Lead Title: LCI		
Review Document Issue Summary <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: G324A_NDS	Form Key: 4	Form Date: 10/24/2012
Form Type: NDS	Form Review Type: Annual	Form Over/Under 72 Status: 072

*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

ACCESS TO LEGAL MATERIALS (Key: A)

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility provides a designated law library for detainee use.	Meets Standard	The law library is in a room adjacent to each housing unit and is not used for any other purpose during the times it is being used as a law library.
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	The listing of required materials is posted on the LexisNexis computer in the law library.
3. The library contains a sufficient number of chairs, is well lit, and is reasonably isolated from noisy areas.	Meets Standard	The library is in a well lit and quiet room. There are several chairs situated around three large tables.
4. The law library is adequately equipped with typewriters and/or computers, and has sufficient supplies for daily use by the detainees.	Meets Standard	Each housing unit law library has a computer equipped with LexisNexis, a printer and writing supplies.
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 LexisNexis software was last updated in December 2013.
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 is assigned to maintain the law libraries and is responsible for updating the LexisNexis computer and ensuring the printer is operable. The housing unit officer or inmate services department will issue writing materials upon request. The housing unit officer inspects the law library area daily and ICE officers inspect the law library at least once per week.
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	

ACCESS TO LEGAL MATERIALS (Key: A)		
POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	
11. Detainees are permitted to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	Meets Standard	
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	LexisNexis is bilingual (English/Spanish), contains all the required law materials and is available to all detainees.
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	Upon request from a detainee in segregated housing, a LexisNexis computer is taken to the segregated housing area for the detainee's use. Any denial of law library access would be directly related to a disciplinary infraction and the denial would expire upon conclusion of the discipline.
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	

ACCESS TO LEGAL MATERIALS -- REVIEWER SUMMARY		
<i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Detainees have access to a law library and the equipment and materials necessary to research, copy and prepare legal documents. To evaluate this standard, the law library areas were inspected, detainees were interviewed, LexisNexis programs were examined, policy was reviewed and employees were interviewed.		
Overall Rating: Meets Standard		
Reviewer Name (Printed)	(b)(6); (b)(7)(C)	Completion Date: 1/16/2014
Reviewer Signature (for printed form submission):	(b)(6); (b)(7)(C)	

ADMISSION AND RELEASE (Key: B)

POLICY: ALL DETAINEES WILL BE ADMITTED AND RELEASED IN A MANNER THAT ENSURES THEIR HEALTH, SAFETY, AND WELFARE. THE ADMISSIONS PROCEDURE WILL, AMONG OTHER THINGS INCLUDE: MEDICAL SCREENING; A FILE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WILL BE INVENTORIED, DOCUMENTED, AND SAFEGUARDED AS NECESSARY.

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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 includes the issuance of a local handbook and the National Detainee Handbook and an orientation video. These tools combine to deliver all of the information 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	Trained intake officers perform an initial health screening on all newly admitted detainees.
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	
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	Upon admission, detainees are pat searched and must clear a metal detector. The pat search is conducted by an officer of the same gender as the detainee.
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	
6. The "Contraband" standard governs all personal property searches. IGSA/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 IGSA for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	Meets Standard	Local claim forms are used to report lost or missing property. ICE receives copies of all completed forms and outcomes.
8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	Meets Standard	
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	
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 forms.
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>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Detainees are admitted and released in a safe and secure manner. The admission process includes a proper search, issuance of property, orientation to the facility and other processes. Evaluation of this standard included a review of policy and the detainee handbook, inspection of the intake area and interviews with staff and detainees.</p>	
<p>Overall Rating: Meets Standard</p>	
<p>Reviewer Name (Printed): (b)(6); (b)(7)(C)</p>	<p>Completion Date: 1/16/2014</p>
<p>Reviewer Signature (for printed form submission): (b)(6); (b)(7)(C)</p>	

CLASSIFICATION SYSTEM (Key: C)		
<p>POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES</p>		
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	ICE classifies all detainees prior to their arrival at this facility using the Risk Classification Assessment (RCA).
2. The facility classification system includes: <ul style="list-style-type: none"> • Classifying detainees upon arrival; • Separating from the general population those individuals who cannot be classified upon arrival; and • The first-line supervisor or designated classification specialist reviewing every classification decision. 	Meets Standard	Detainees undergo a local classification upon arrival and are separated from the general population until such time as they are classified. A sergeant approves all classification decisions.
3. The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	Meets Standard	All available documented information is utilized to classify detainees.
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	
5. Housing assignments are based on classification-level.	Meets Standard	All detainees are housed in the same cellblock, but on separate ranges. Detainees eat and recreate only with detainees of similar classification designations. High level detainees do not mingle with low security detainees.
6. A detainee's classification-level does not affect his/her recreation opportunities. Detainees recreate with persons of similar classification designations.	Meets Standard	
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	Detainees may request a review of their classification decision within ten days of the classification action. Additionally, all classification designations are automatically reviewed every thirty days by the classification department.
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	Classification appeals are sent to the classification department. Classification levels may be decreased by the classification staff, if warranted.

CLASSIFICATION SYSTEM (Key: C)		
POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES		
COMPONENTS	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	Classification appeals are resolved within five days and communicated in writing to the detainee within ten days.
11. Classification designations may be appealed to a higher authority, such as the Warden or equivalent.	Meets Standard	Detainees may further appeal a classification decision to a sergeant, and ultimately to the classification lieutenant.
12. The Detainee Handbook or equivalent for IGSA's explains the classification levels, with the conditions and restrictions applicable to each.	Meets Standard	

CLASSIFICATION SYSTEM – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Detainees are classified by ICE using the RCA, and further classified by the facility upon arrival. All ICE detainees of the same sex are housed in the same cellblock and recreate, eat and conduct other activities only with detainees of similar classification levels. This standard was evaluated via observation of the housing unit activities, policy review, staff interviews and review of the detainee handbook.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/16/2014
Reviewer Signature (for printed form submission): (b)(6); (b)(7)(C)	

CORRESPONDENCE AND OTHER MAIL (Key: D)		
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	Rules governing detainee correspondence and other mail are described in the detainee handbook.
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	
3. Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	Meets Standard	Incoming mail is distributed the next business day after receipt.
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 postal service each morning.
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 as deficient during the previous inspection due to the mail being opened outside the presence of detainees. Incoming mail is opened and inspected prior to delivery to the detainee. This is a repeat deficiency.
6. Staff does not read incoming general correspondence without the Warden's prior written approval.	Meets Standard	Incoming mail is not read without prior approval from a supervisor.
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	
8. Staff is prohibited from reading or copying incoming special correspondence.	Meets Standard	
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 not routinely opened and inspected. Any such action would require approval from a supervisor after determination that the item may present a threat to security or safety or otherwise be criminal in nature.
10. Correspondence to a politician or to the media is processed as special correspondence and is not read or copied.	Meets Standard	

CORRESPONDENCE AND OTHER MAIL (Key: D)		
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
11. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	N/A	Mail is not rejected at this facility. Inappropriate mail is placed in the detainee's property and given to the detainee upon departure from the facility. The detainee is notified via a local form that inappropriate mail has been placed in his/her property.
12. The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	Meets Standard	Outgoing mail is not censored or opened. If outgoing mail contains obvious contraband, the detainee will be subject to the disciplinary process and will be notified in writing via that process.
13. Staff maintains a written record of every item removed from detainee mail.	Meets Standard	
14. The Warden or equivalent monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	Meets Standard	All illegal contraband is securely maintained in the property room and records are accurate. Nuisance contraband is placed in the detainee's property and documented appropriately.
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	
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	ICE handles these requests.
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	At this IGSA, local policy, similar to the Contraband Standard, dictates the handling and destruction of contraband.
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	
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	

CORRESPONDENCE AND OTHER MAIL (Key: D)		
<p>POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
21. The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	Meets Standard	The housing officer or the inmate services department can supply detainees with writing supplies as needed.

CORRESPONDENCE AND OTHER MAIL – REVIEWER SUMMARY	
<p><i>(Use following format for dates: mm/dd/yyyy)</i></p> <p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Mail is sent and received in a timely manner, limited only by legitimate security interests. To evaluate this standard, employees and detainees were interviewed, housing units were toured, and policy and the detainee handbook were reviewed.</p>	
<p>Overall Rating: Meets Standard</p>	
<p>Reviewer Name (Printed): (b)(6); (b)(7)(C)</p>	<p>Completion Date: 1/16/2014</p>
<p>Reviewer Signature (for printed form submission): (b)(6); (b)(7)(C)</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	The handbook is written in English and Spanish, the most prevalent languages at this facility.
2. The handbook is supplemented by the facility orientation video, where one is provided.	Meets Standard	The facility provides an orientation video in both English and Spanish.
3. All staff members receive a handbook and training regarding the handbook contents.	Meets Standard	All staff members are provided a handbook during initial training and given training on its contents. Thereafter, detainee handbooks are available electronically to all employees.
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 handbook is reviewed and revised annually as necessary. Procedures are in place to immediately communicate any revision to staff members and detainees.
5. There an annual review of the handbook by a designated committee or staff member.	Meets Standard	
6. The detainee handbook addresses the following issues: <ul style="list-style-type: none"> • Personal Items permitted to be retained by the detainee; and • Initial issue of clothes, bedding and personal hygiene items. 	Meets Standard	The handbook addresses all of the requirements of 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	
10. The handbook describes the facility, housing units, dayrooms, in-dorm activities, and special housing units.	Meets Standard	
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.	Does Not Meet Standard	Count times are described as being conducted during each shift, as opposed to specifying the exact times. All other elements of this component are outlined in the site-specific handbook or the ICE National Detainee Handbook.

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)
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 procedure for obtaining disposable razors is outlined in the site-specific handbook. The ICE National Detainee Handbook addresses that detainees attending court will be afforded the opportunity to shave first.
13. The handbook describes barber hours and hair cutting restrictions.	Meets Standard	
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	All elements of this component are outlined in the site-specific handbook and/or the ICE National Detainee Handbook.
15. The handbook addresses religious programming.	Meets Standard	
16. The handbook states times and procedures for commissary or vending machine usage, where available.	Meets Standard	The handbook outlines the times and procedures for commissary. The facility does not use vending machines.
17. The handbook describes the detainee voluntary work program.	N/A	The facility does not have a voluntary work program for ICE detainees.
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	
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"> • Prohibited acts and severity scale sanctions; • Time limits in the Disciplinary Process; and • Summary of the Disciplinary Process. 	Meets Standard	The handbook outlines the bulleted parts of this component.

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)
24. The grievance section of the handbook explains all steps in the grievance process – including: <ul style="list-style-type: none"> • Informal (if used) and formal grievance procedures; • The appeals process; • In CDF facilities: procedures for filing an appeal of a grievance with ICE. • Staff/detainee availability to help during the grievance process. • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Homeland Security. 	Meets Standard	All of the bulleted requirements of this component are included in the site-specific 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"> • Outdoor recreation hours. • Indoor recreation hours. 	Meets Standard	The handbook describes the recreation policy. It notes the outdoor and indoor recreation hours, which are the same.
27. The handbook describes the detainee dress code for daily living; and work assignments.	Meets Standard	
28. The handbook specifies the rights and responsibilities of all detainees.	Meets Standard	Detainees are issued the site-specific handbook and the National Detainee Handbook. Both list the rights and responsibilities of detainees.

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)*

During the evaluation of this standard, employees and detainees were interviewed and the site-specific handbook and National Detainee Handbook were reviewed. The handbook serves as an overview and guide to the facility's policies, procedures, rules, regulations and programs offered. Detainees are issued a site-specific handbook and ICE issues detainees the National Detainee Handbook. Those detainees interviewed all stated that they received both handbooks.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

Reviewer Signature (for printed form submission): (b)(6); (b)(7)(C)

FOOD SERVICE (Key: F)

POLICY: 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 director (FSD) is ServSafe-certified. The responsibilities of the FSD and food service workers are in writing.
2. The Cook Supervisor is on duty on days when the FSA is off duty and vice versa.	Meets Standard	A cook supervisor is on duty on days 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"> • In ICE Facilities this includes a review of the ICE "Food Service" standard 	Meets Standard	The FSD provides training to all food service employees by way of a DVD entitled, "Handling Offender Manipulation Effectively". The training also includes a review of the food service standard. This training is documented.
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	
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	Food service employees monitor the conditions and use of knives and dining utensils. All knives, when in use, are tethered to work stations using a cable and padlock.
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	Food service employees and correctional officers conduct daily searches of detainee work areas.
8. The FSA monitors staff implementation of the facility's population counts procedures. Staff is trained in count procedures.	Meets Standard	
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 detainee workers were observed to be neat and clean. Their clothing and grooming followed the food service standard.
10. The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	Meets Standard	

FOOD SERVICE (Key: F)

POLICY: 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)
11. The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	Meets Standard	ICE detainees do not work in the food service department. Training provided to newly assigned non-ICE detainee workers includes the rules and procedures for the food service department.
12. During orientation and training session(s), the CS explains and demonstrates: <ul style="list-style-type: none"> • Safe work practices and methods; • Safety features of individual products/pieces of equipment; and • Training covers the safe handling of hazardous material[s] the detainees are likely to encounter in their work. 	Meets Standard	ICE detainees do not work in the food service department. The FSD trains all newly assigned non-ICE detainee workers on the bulleted elements listed in this component. This training is documented.
13. The Cook Supervisor documents all training in individual detainee detention files.	Meets Standard	
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.	N/A	ICE detainees do not work in the food service department. Non-ICE detainee workers are not paid.
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	The facility meals are served at 5:00 a.m., 11:00 a.m. and 5:00 p.m.
16. For cafeteria style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	N/A	There are no cafeteria-style feeding operations for detainees at this facility.
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 28-day menu cycle.
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, taking into consideration the ethnic diversity of the facility. Examples include spaghetti, tacos and chili.
19. A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	Meets Standard	
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"> • If yes, documenting each substitution, along with its justification • With copy to FSA 	Meets Standard	Food service employees have the authority to change menu items when necessary. All menu changes are documented and justified, and notification to the FSD is required.

FOOD SERVICE (Key: F)

POLICY: 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)
22. All staff and volunteers know and adhere to written "food preparation" procedures.	Meets Standard	
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	Meets Standard	
24. A common-fare menu available to detainees whose dietary requirements cannot be met on the main line. <ul style="list-style-type: none"> Changes to the planned common-fare menu can be made at the facility level; Hot entrees are offered three times a week; The common-fare menus satisfy nutritional recommended daily allowances (RDAs); Staff routinely provide hot water for instant beverages and foods; Common-fare meals are served with: <ul style="list-style-type: none"> Disposable plates and utensils. Reusable plates and utensils. Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items. 	Meets Standard	A common fare menu is available to detainees whose dietary requirements cannot be met on the main line. All of the bulleted requirements of this component are included in the program.
25. A supervisor at the command level must approve a detainee's removal from the Common-Fare Program.	Meets Standard	The FSD, in conjunction with a shift sergeant, can remove a detainee from the common fare program.
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"> Muslims fasting during Ramadan receive their meals after sundown. Jews who observe Passover but do not participate in the Common-Fare Program receive the same Kosher-for-Passover meals as those who do participate. Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. 	Meets Standard	The common fare program is used to accommodate detainees whose religious dietary requirements cannot be met on the main menu. The program includes all of the bulleted items listed in this component.
28. The food service program addresses medical diets.	Meets Standard	
29. Satellite-feeding programs follow guidelines for proper sanitation.	Meets Standard	
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 served on 01/14/2014 and were found to be within industry standards.

FOOD SERVICE (Key: F)

POLICY: 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)
31. All meals are provided in nutritionally adequate portions.	Meets Standard	
32. Food is not used to punish or reward detainees based upon behavior.	Meets Standard	The facility has a special diet that consists of a "warden's burger" meal. Policy prohibits ICE detainees from receiving this meal. Food is not used to punish or reward detainees.
33. The food service staff instructs detainee volunteers on: <ul style="list-style-type: none"> • Personal cleanliness and hygiene; • Sanitary techniques for preparing, storing, and serving food; and • The sanitary operation, care, and maintenance of equipment. 	Meets Standard	All of the bulleted items of this component are addressed in the training provided to the non-ICE detainee food service workers. ICE detainees do not work in the food service department.
34. Everyone working in the food service department complies with food safety and sanitation requirements.	Meets Standard	
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"> • Who conducts the inspections? 	Meets Standard	The FSD conducts weekly inspections of the food service department, which includes the employee dining area and food preparation areas and equipment.
36. Equipment is inspected for compliance with health and safety codes and regulations. <ul style="list-style-type: none"> • When was the most recent inspection? • Which agency conducted the inspection? 	Meets Standard	The City of Hamilton Health Department conducted an annual inspection of the food service department on 09/12/2013.
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	Food service employees document the temperatures of all dishwashing machines after each meal. These checks are documented in the Aramark Manager's "Red Book". The previous four weeks' log entries were reviewed, with no discrepancies found.

FOOD SERVICE (Key: F)

POLICY: 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)
39. Staff documents the results of every refrigerator/freezer temperature check.	Meets Standard	Food service employees document every refrigerator/freezer temperature check in the Aramark Manager's "Red Book". The previous four weeks' log entries were reviewed, with no discrepancies found.
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 employees inspect all incoming food shipments for damage, contamination and pest infestation. Damaged, contaminated or infested food items are not accepted.
42. Storage areas are locked when not in use.	Meets Standard	

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)*

During the evaluation of this standard, policy was reviewed, food service employees and detainees were interviewed, documentation was examined and sanitation levels were evaluated. Menus have been nutritionally analyzed, certified and approved by a registered dietitian. Observation of meals during the inspection indicated portions provided were consistent with the portions specified in the nutritionally approved menus. The majority of detainees interviewed complained about the food being bland and lack of the availability of salt and pepper.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

Reviewer Signature (for printed form submission): (b)(6); (b)(7)(C)

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)
1. Detainee funds and valuables are properly separated, stored, and are accessible only by designated supervisor(s).	Meets Standard	All detainee valuables are separated, inventoried and stored in a locked room in the booking area. Only designated employees have access to this 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	
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 occur on a quarterly basis. The facility maintains a logbook on these audits.
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 are present during the processing of detainee funds and valuables during in-processing. Both officers verify the funds and valuables.
7. Staff searches arriving detainees and their personal property for contraband.	Meets Standard	During in-processing, officers search arriving detainees and their personal property 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	Property discrepancies are immediately reported to the shift supervisor.
10. Staff follows written procedures when returning property to detainees.	Meets Standard	
11. CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.	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)
12. The facility attempts to notify an out-processed detainee that he/she left property in the facility: <ul style="list-style-type: none"> • By sending written notice to the detainee's last known address; • Via certified mail; and • The notice state that the detainee has 30 days in which to claim the property, after which it will be considered abandoned. 	Meets Standard	Forgotten property is forwarded to ICE. ICE personnel attempt to contact the detainee by following the bulleted elements listed in this component.
13. The facility disposes of abandoned property in accordance with written procedures. <ul style="list-style-type: none"> • If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE. 	Meets Standard	Policy requires that all abandoned property is promptly 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)*

During the evaluation of this standard, employees were interviewed, documents were reviewed and the property room was inspected. Facility policy and practice are sufficient to ensure that detainee property is safeguarded and controlled under secure conditions.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

Reviewer Signature (for printed form submission) (b)(6); (b)(7)(C)

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"> If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff. 	Meets Standard	Written procedures encourage detainees to attempt to resolve grievances informally with staff prior to submitting a formal grievance. The site-specific handbook does not put a time limit on submitting grievances.
2. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. <ul style="list-style-type: none"> Detainees may seek help from other detainees or facility staff when preparing a grievance. Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary. 	Meets Standard	All of the requirements of this component are addressed in policy and the detainee handbook.
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"> If yes, explain. 	Meets Standard	There have been no substantiated or documented cases of staff harassing, disciplining, penalizing or otherwise retaliating against a detainee who lodged a complaint.
5. Procedures include maintaining a Detainee Grievance Log. <ul style="list-style-type: none"> If not, an alternative acceptable record keeping system is maintained. "Nuisance complaints" are identified in the records. For quality control purposes, staff document nuisance complaints received but not filed. 	Meets Standard	An electronic log is maintained on all grievances. The facility processes and files all grievances and does not consider any grievances to be nuisance complaints.
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	

DETAINEE GRIEVANCE PROCEDURES – REVIEWER SUMMARY

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

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

During the evaluation of this standard, employees were interviewed, the electronic logbook was reviewed and six grievances were reviewed. The grievance system offers detainees an informal and formal means to address issues and concerns to administrative staff members without fear of reprisals. During the past 12 months, 240 grievances were filed, with six of them being filed by ICE detainees. The six ICE detainee grievances were reviewed.

DETAINEE GRIEVANCE PROCEDURES -- REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Rating: Meets Standard		
Reviewer Name (Printed): (b)(6); (b)(7)(C)		Completion Date: 1/16/2014
Reviewer Signature (for printed form submission):	(b)(6); (b)(7)(C)	

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	
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	Notifications of pending group legal rights presentations are posted in the housing units at least 48 hours prior to a presentation. The same information is given at every presentation. All detainees are scheduled for the legal rights presentations upon arrival, negating the need for a sign-up sheet.
5. Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.	N/A	Detainees are not denied access to group legal rights presentations at this facility.
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	
7. Detainees in segregation, unable to attend for security reasons, may request separate sessions with presenters. Such requests are documented.	Meets Standard	Presenters are escorted to segregation to provide the presentation to detainees, as needed. Because all newly-arrived detainees that are housed in segregation are provided the presentation, requests are not solicited or received.
8. Interpreters are admitted when necessary to assist attorneys and other legal representatives.	Meets Standard	

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)
9. Presenters are afforded a minimum of one hour to make the presentation and to conduct a question-and-answer session.	Meets Standard	Presentations last 90 minutes to two hours and include question and answer sessions after the presentations.
10. Staff permits presenters to distribute ICE-approved materials.	Meets Standard	
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	
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	While no presenter has ever been suspended at this facility, any such suspension would be handled as stipulated by this component.
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 policy is summarized on a poster in the housing units.

GROUP LEGAL RIGHTS PRESENTATIONS – REVIEWER SUMMARY

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

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

Authorized groups are permitted to make group legal rights presentations to detainees and to meet with individuals or small groups as desired. To evaluate this standard, policy was reviewed, housing areas were toured and employees were interviewed.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

Reviewer Signature (for printed form submission): (b)(6); (b)(7)(C)

Issuance and Exchange of Clothing, Bedding, and Towels (Key: J)

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

COMPONENTS	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"> • The supply of these items exceeds the minimum required for the number of detainees. 	Meets Standard	Policy addresses the issuance and exchange of clothing, bedding, linens and towels. The supply of these items exceeds the minimum required for the number of detainees.
2. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive: <ul style="list-style-type: none"> • One uniform shirt and one pair of uniform pants, or one jumpsuit; • One pair of socks; • One pair of underwear (Daily change); and • One pair of facility-issued footwear. 	Meets Standard	This component was rated as deficient during the last inspection due to the facility not issuing socks to ICE detainees. The facility issues socks and two pairs of underwear, along with the other bulleted items listed in this component.
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"> • One mattress; • One blanket; • Two sheets; • One pillowcase; • One towel; and • Additional blankets are issued based on local weather conditions. 	Meets Standard	Newly admitted detainees receive one mattress, one blanket, two sheets, one towel and additional blankets as needed, based on the weather conditions. A pillowcase is not issued because detainees are not issued pillows. The mattresses have built-in pillows.
5. Detainees assigned to special work areas are clothed in accordance with the requirements of the job.	Meets Standard	ICE detainees do not work at this facility. Non-ICE detainees assigned to special work assignments are issued the required clothing items.
6. Detainees are provided clean clothing, linen and towels. <ul style="list-style-type: none"> • Socks and undergarments - exchanged daily. • Outer garments - twice weekly. • Sheets - weekly. • Towels - weekly. • Pillowcases - weekly. 	Meets Standard	This component was rated as deficient during the last inspection due to the facility not issuing socks to ICE detainees. The facility issues socks to detainees. Detainees are permitted to exchange socks and undergarments daily. Except for pillowcases, the other bulleted items in this component are exchanged bi-weekly. Pillowcases are not issued as mattresses have built-in pillows.

Issuance and Exchange of Clothing, Bedding, and Towels (Key: J)

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
7. Food service detainee volunteer workers are permitted to exchange outer garments daily.	Meets Standard	ICE detainees do not work at this facility. Non-ICE detainees assigned to the food service area are permitted to exchange outer garments daily.
8. Volunteer detainee workers are permitted to exchange outer garments more frequently.	Meets Standard	ICE detainees do not work at this facility. Non-ICE detainee workers are permitted to exchange outer garments as needed.

Issuance and Exchange of Clothing, Bedding, and Towels -- REVIEWER SUMMARY

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

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

During the evaluation of this standard, employees were interviewed, policy was reviewed, detainees were observed and the laundry was inspected. Detainees are provided with clean clothing, bedding, linens and towels upon admission. Detainees exchange clothing in accordance with the standard. Observation of detainees indicated they have clean, temperature-appropriate clothing.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

Reviewer Signature (for printed form submission)

(b)(6); (b)(7)(C)

Marriage Requests (Key: K)

Policy: 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	All marriage requests are forwarded to the local ICE field office for approval.
2. The Field Office Director reviews every marriage request rejected by a Warden/OIC or IGSA. Rejections are documented.	Meets Standard	
3. It is standard practice to require a written request for permission to marry.	Meets Standard	Policy requires that all marriage requests are in writing.
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	The warden will provide a written copy of his decision to the detainee and his/her legal representative.
6. When permission is denied, the Warden/OIC states the basis for his/her decision.	Meets Standard	Policy requires that when permission is denied, the detainee is provided the basis for the decision.
7. The Warden/OIC provides the detainee with a place and time to make wedding arrangements.	Meets Standard	

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)*

During the evaluation of this standard, employees and ICE personnel were interviewed and policy was reviewed. Policy states that all detainee marriage requests are to be forwarded to the ICE field office for consideration. The facility has not had any marriage requests from ICE detainees during the past 12 months.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

Reviewer Signature (for printed form submission): (b)(6); (b)(7)(C)

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"> • Funeral; or • Deathbed 	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"> • Conduct themselves in a manner that does not bring discredit to the ICE; • Do not violate federal, state, or local laws; • Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants; • Make no unauthorized phone calls; and • Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return. 	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>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> All non-medical emergency escorted trips are handled by ICE personnel.	
Overall Rating: N/A	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/16/2014
Reviewer Signature (for printed form submission): (b)(6); (b)(7)(C)	

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	
2. A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.	Meets Standard	This component was rated as deficient during the last inspection due to the facility not having a recreation specialist. The facility has less than 350 ICE detainees; therefore, the facility is not required to have a recreation specialist. Administrative personnel develop and tailor the recreation program and unit officers supervise recreation 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	There are no detainee recreation workers.
5. The recreational specialist or trainee equivalent oversees recreation programs for special housing units (SHU) and special-needs detainees.	Meets Standard	Officers oversee the recreation program for detainees assigned to the special housing units as well as for special needs detainees.
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	Meets Standard	Detainees have access to card games, checkers, dominoes and television.
7. Outside activities are restricted to limited-contact sports.	Meets Standard	
8. Each detainee has the opportunity to participate in daily recreation.	Meets Standard	
9. Detainees have access to recreation activities outside the housing units for at least one hour daily, 5 days a week.	Meets Standard	The outdoor recreation area is attached to each living unit dayroom. Detainees have access to outdoor recreation seven days a week during out-of-cell time.
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	

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)
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	Detainees housed in disciplinary or administrative segregation are permitted at least one hour of outdoor recreation time daily, five days a week.
15. Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his/her recreation privileges.	Meets Standard	A written explanation would be provided to detainees in administrative or disciplinary segregation if recreation privileges were revoked for safety or security reasons.
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 waivers of liability before entering the secure portion of the facility where detainees are present.
18. Visitors, relatives or friends are not allowed to serve as volunteers.	Meets Standard	Visitors, relatives or friends are not permitted to serve as volunteers.
19. If the facility has no outside recreation, are detainees considered for transfer after six months? • If yes, written procedures ensure timely review of all eligible detainees.	N/A	Facility provides outdoor recreation.
20. Case officers make written transfer recommendations about every six-month detainee to the OIC.	N/A	Facility provides outdoor recreation.
21. The OIC documents all detainee-transfer decisions, whether yes or no.	N/A	Facility provides outdoor recreation.
22. The detainee's written decision for or against an offered transfer documented in his/her A-file.	N/A	Facility provides outdoor recreation.
23. Staff notifies the detainee's legal representative of his/her decision to accept/decline a transfer.	N/A	Facility provides outdoor recreation.
24. If no recreation is available, the ICE Districts routinely review transfer eligibility for all detainees after 60 days.	N/A	Facility provides indoor and outdoor recreation.

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)
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	Facility provides indoor and outdoor recreation.
26. The detainee's legal representative is notified of the detainee's/OIC's decision.	N/A	Facility provides indoor and outdoor recreation.

RECREATION – REVIEWER SUMMARY

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

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

During the evaluation of this standard, policy was reviewed, employees were interviewed and dayrooms and outdoor recreation areas were observed. An adjacent room attached to each housing unit dayroom, including the special management unit, is used for outdoor recreation. The outdoor recreation area has three solid walls and a ceiling and has a three foot by fifteen foot window located about fifteen feet above the floor. The design of the room allows for natural light and a free exchange of outdoor air sufficient to reflect the outside climate and time of day. Detainees have access to this area seven days a week during waking hours.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

Reviewer Signature (for printed form submission):

(b)(6); (b)(7)(C)

(Signature area)

RELIGIOUS PRACTICES (Key: N)

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Detainees are allowed to engage in religious services.	Meets Standard	Detainees are permitted to engage in religious services. Community religious volunteers are used to provide religious services.
2. Space is available for detainees to conduct religious services.	Meets Standard	
3. The facility allows detainees to observe the major "holy days" of their religious faith. • List any exceptions.	Meets Standard	Requests from detainees to observe a recognized religious holy day are accommodated. No exceptions have occurred.
4. The facility accommodates recognized holy-day observances by: • Providing special meals, consistent with dietary restrictions; • Honoring fasting requirements; • Facilitating religious services; and • Allowing activity restrictions.	Meets Standard	Procedures for accommodating recognized holy-day observances include the bulleted items listed in this component.
5. Each detainee is allowed religious items in his/her immediate possession.	Meets Standard	Policy allows for detainees to have religious items, such as rosaries, prayer beads, crosses and prayer rugs, in their possession.
6. Volunteer's credentials are checked and verified before allowing participation in detainee programs.	Meets Standard	Volunteer credentials are checked and verified before allowing the volunteer to participate in detainee programs. The facility also conducts a background check through the State of Ohio Bureau of Criminal Identification and Investigation.
7. Members of faiths not represented by clergy may conduct their own services within security allowances.	Meets Standard	
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	

RELIGIOUS PRACTICES -- REVIEWER SUMMARY

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

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

During the evaluation of this standard, employees and detainees were interviewed. Detainees are provided with reasonable and equitable opportunities to participate in the practice of their faiths. Volunteers conduct Bible study, prayer groups and religious counseling. The volunteers are coordinated and scheduled by the inmate services clerk.

RELIGIOUS PRACTICES – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/16/2014
Reviewer Signature (for printed form submission): (b)(6); (b)(7)(C)	

DETAINEE TELEPHONE ACCESS (Key: O)**POLICY:** 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 for detainee use during waking hours, from 7:00 a.m. until 11:00 p.m. each day. Actual out-of-cell times are staggered to equitably distribute recreation time, and subsequently telephone availability, among detainees of different security levels.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	Meets Standard	The detainee handbook describes the telephone access policy.
3. Access rules are posted in housing units.	Meets Standard	
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	Postings in the housing units are in Spanish and English, languages spoken by the majority of detainees held at this facility. The handbook is also available in Spanish and English.
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 no less than one telephone for every twelve detainees.
6. Telephones are inspected regularly by facility staff to ensure that they are in good working order.	Meets Standard	ICE officers inspect telephones at least weekly and housing unit officers inspect the telephones on each shift.
7. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	Meets Standard	
8. The facility administration monitors repair progress and takes appropriate measures to ensure that required repairs are begun and completed timely.	Meets Standard	A lieutenant monitors repair progress and follows up with the service provider as needed.
9. Detainees are afforded a reasonable degree of privacy for legal phone calls.	Meets Standard	
10. A procedure exists to assist a detainee who is having trouble placing a confidential call.	Meets Standard	Detainees may petition ICE for a confidential telephone call.
11. The facility provides the detainees with the ability to make non-collect (special access) calls.	Meets Standard	
12. Special Access calls are at no charge to the detainees.	Meets Standard	

DETAINEE TELEPHONE ACCESS (Key: O)**POLICY:** ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	The inspector witnessed a detainee successfully reach the OIG hot line recording using the number programmed into a housing unit telephone.
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	The inspector witnessed a detainee successfully reach the OIG hot line using the number programmed into a housing unit telephone.
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 handles 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	Housing unit officers notify the detainee immediately upon receipt and verification of an emergency telephone message. The detainee is permitted to return the call without delay upon receipt of the message.
19. Emergency phone call messages are immediately given to detainees.	Meets Standard	After an emergency call is received and verified, the housing unit is notified and the housing unit officer immediately informs the detainee.
20. Detainees are allowed to return emergency phone calls as soon as possible.	Meets Standard	
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	
22. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	Meets Standard	
23. Detainees in disciplinary segregation are allowed phone calls for family emergencies.	Meets Standard	
24. Detainees in administrative detention and protective custody are afforded the same telephone privileges as those in general population.	Meets Standard	

DETAINEE TELEPHONE ACCESS (Key: O)		
POLICY: 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	All telephones are marked with the notice that calls may be monitored. Special access calls are not monitored.

DETAINEE TELEPHONE ACCESS – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Detainees have access to telephones during normal waking hours during out-of-cell time, on a staggered schedule that facilitates equitable out-of-cell time for the different classification levels of detainees in the housing units. Rates for fifteen minute calls include \$7.50 for long distance in-state or out-of-state calls and \$15.00 for international calls. These rates are comparable to those in the community. This standard was evaluated via staff and detainee interviews, policy review, telephone testing, review of the detainee handbook and examination of ICE telephone serviceability logs.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6); (b)(7)(C)	Completion Date: 1/16/2014
Reviewer Signature (for printed form submission) (b)(6); (b)(7)(C)	

VISITATION (Key: P)		
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. There is a written visitation schedule and hours for general visitation.	Meets Standard	The local handbook cites the visiting schedule and hours.
2. The visitation hours tailored to the detainee population and the demand for visitation.	Meets Standard	
3. The visitation schedule and rules are available to the public.	Meets Standard	Visiting rules and schedules are posted in the visitor waiting area and on the agency website.
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	Visiting schedules and hours are posted on the agency website.
6. A general visitation log is maintained.	Meets Standard	The visitation log is maintained electronically on each individual detainee screen on the jail management system.
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	
9. Visitors are searched and identified according to standard requirements.	Meets Standard	Visitors must present a valid ID. They are not searched as they do not enter the secure area of the facility. Visitors conduct video visitation from a room located adjacent to the entrance. The room is equipped with booths containing video monitors and handsets.
10. The requirement on visitation by minors is complied with.	Meets Standard	Minors are permitted to visit detainees when accompanied by an adult.
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 detainees when accompanied by an adult.
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 detainees when accompanied by an adult.
13. Detainees in special housing are afforded visitation.	Meets Standard	
14. Legal visitation is available seven (7) days a week, including holidays.	Meets Standard	

VISITATION (Key: P)		
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	Legal visits are permitted at any time.
16. On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	Meets Standard	
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	
18. There are written procedures governing detainee searches.	Meets Standard	Social visits are facilitated by video and detainees are not searched for these visits. Detainees are pat-searched after contact legal visits.
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 contact legal visits.
20. Prior to each visit, legal service providers and assistants are identified per the standard.	Meets Standard	All legal representatives must produce their Attorney General Cards and photographic identification for entry.
21. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	Meets Standard	A listing of pro bono legal organizations is posted in all detainee housing units and provided to all detainees in the intake area upon admission.
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	
24. Law enforcement officials who request to visit with a detainee are referred to the ICE Field Office for approval.	Meets Standard	
25. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the OIC or ICE Field Office.	Meets Standard	
26. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	Meets Standard	ICE handles the arrangements for examinations by independent medical providers and the facility provides the location for the exam.

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

VISITATION – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Social visits are facilitated via video terminals and are available to detainees in accordance with the standard. Professional visits may be contact or non-contact. The facility does not restrict the time or length of legal visits. During the evaluation of this standard, policy was reviewed, the visitation areas were toured, postings and logs were examined, and employees and detainees were interviewed.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/16/2014
Reviewer Signature (for printed form submission)	(b)(6); (b)(7)(C)

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 work 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: 1/16/2014
Reviewer Signature (for printed form submission): (b)(6); (b)(7)(C)	

Section II

Health Service Standards

HUNGER STRIKES (Key: R)

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

COMPONENTS	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, a detainee is referred to the medical unit if he/she declares a hunger strike or the detainee has been observed to not eat for 72 hours.
2. CDFs and IGSAAs immediately report a hunger strike to the ICE.	Meets Standard	Per the health services administrator (HSA), she immediately notifies ICE by telephone.
3. The facility has established procedures to ensure staff respond immediately to a hunger strike.	Meets Standard	Policy requires an immediate staff response 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"> If yes, in an observation room? 	Meets Standard	Policy requires staff to isolate a hunger-striking detainee from other detainees. Per the HSA, hunger strikers are placed in one of four observation cells located in the medical unit.
5. Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	Meets Standard	If required, medical personnel are authorized to place a detainee in the special management unit, medical housing located in F-pod or in one of four medical unit observation cells.
6. Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	Meets Standard	Per policy, a hunger striker's vital signs are obtained and recorded every eight hours, with the weight being recorded every 24 hours.
7. The OIC of the facility obtains a hunger striker's consent before medical treatment.	Meets Standard	Consent to treatment is obtained during the intake process. Procedure/examination-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 and the HSA, refusal of treatment is obtained when a detainee refuses recommended examinations or treatment.

HUNGER STRIKES (Key: R)

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
9. During a hunger strike, staff document and provide the hunger-striking detainee three meals a day.	Meets Standard	Policy requires staff members to provide and document the offering of three meals a day.
10. Staff maintains the hunger striker's supply of drinking water/other beverages.	Meets Standard	A hunger striker is provided with a supply of drinking water and other beverages. Per policy and practice, the independent source of drinking water in the cell is turned off during a hunger strike.
11. During a hunger strike, staff removes all food items from the hunger striker's living area.	Meets Standard	Per the HSA, a hunger striker would be placed in one of four observation cells in the medical unit; these cells are free of any food items.
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	This IGSA facility uses a hunger strike monitoring form to document and record fluid intake and food consumption.
13. The medical staff has written procedures for treating hunger strikers.	Meets Standard	The medical unit has written procedures for the treatment and management of hunger strikes.
14. Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.	Meets Standard	All treatment attempts by medical personnel are documented on a progress note in the electronic medical record. Medical department personnel provide the detainee education on the medical risks of a hunger strike through a prepared "Effects of Starvation" informational form.
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	All detention and medical personnel receive training on hunger strike management, identification, evaluation and treatment during orientation and annual refresher training. Per the HSA, hunger strike identification and treatment is addressed with medical personnel two to three times per year. Review of staff training files verified receipt of the training.

HUNGER STRIKE – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Evaluation of this standard was determined through a review of policy, staff training files and the training curriculum and through medical and detention personnel interviews. Policy and procedures are in place for the management, identification, evaluation and treatment of hunger strikes. There have been no hunger strikes in this facility since the last inspection. As a result, the inspector was unable to determine if the medical practices of the facility fully comply with the standard as there was no applicable documentation available for review.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6); (b)(7)(C)	Completion Date: 1/16/2014
Reviewer Signature (for printed form submission)	(b)(6); (b)(7)(C)

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
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 credentialed, licensed and/or certified and work within their respective scopes of practice as defined by written job descriptions. The physician has a current Drug Enforcement Administration certificate. Westwood Pharmacy, located in Virginia, provides pharmacy services and is licensed to operate in the State of Ohio.
2. The facility's in-processing procedures for arriving detainees include medical screening.	Meets Standard	Trained detention officers conduct an initial health screening, contacting medical personnel if there is an urgent issue or questions. The four-page electronic form includes numerous questions concerning a detainee's medical and mental health history, any current health-related issues and any current treatment, to include medications. Following the intake screening, medical personnel review the screening, obtain and record vital signs, administer a tuberculosis (TB) skin test and document any identified medical issues. A review of 20 ICE detainee medical records indicated detention and medical intake screenings were consistently completed at the time of admission. Observation of intake verified the above practices.

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
3. All detainees have access to and receive medical care.	Meets Standard	Instructions for accessing health care are explained verbally during the booking process and presented in English and Spanish in the orientation video and the detainee handbook. At any time, a detainee can obtain and complete a sick call request. Completed forms are deposited directly into a locked medical drop-box located in each housing unit. Medical personnel collect and triage the requests daily on the midnight to 8:00 a.m. shift, and the detainee is scheduled for sick call. A review of 20 ICE detainee medical records indicated 12 had submitted sick call requests. All 12 were evaluated by medical staff in sick call the same day the request was submitted. Additionally, the facility has implemented a "crisis hot line" which detainees, at any time, can access by housing unit telephone to report any problem or issue. Medical personnel are on-duty 24 hours a day, seven days a week, and sick call is conducted seven days a week.
4. The facility has access to a PHS/DIHS Managed Health Care Coordinator.	Meets Standard	Per the health services administrator (HSA), she has open access and communication with the assigned IHSC case manager.

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
5. The medical staff is large enough to provide, examine, and treat the facility's detainee population.	Meets Standard	Review of the current staffing roster indicated a medical staff large enough to examine and treat the detainee population. Staffing includes a full-time HSA/registered nurse (RN), a full-time RN-supervisor, three full-time paramedics and 22 part-time paramedics. Contract personnel include a physician and a physician assistant. Together, they provide onsite services 12 hours a week and are on call 24 hours a day, seven days a week. In addition, a dentist is on site four hours a week and a psychiatrist is on site five hours a week. Three social workers are on site seven days a week for a combined total of 120 hours.
6. The facility has sufficient space and equipment to afford detainee privacy when receiving health care.	Meets Standard	The medical unit is a large, clean, well-lighted and well-maintained area consisting of one large examination room, a lab room, a dental suite, a large nursing station, four negative pressure observation cells with a total of seven beds, a detainee waiting area and multiple offices. The unit has sufficient space and equipment and provides privacy for detainee encounters.
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 secure perimeter.
8. The medical facility entrance includes a holding/waiting room.	Meets Standard	The medical department entrance includes a holding/waiting area.
9. The medical facility's holding/waiting room is under the direct supervision of custodial staff.	Meets Standard	Detainees in the holding area are under the direct supervision of detention staff.
10. Detainees in the holding/waiting room have access to a drinking fountain.	Meets Standard	A water fountain and restroom are available.

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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"> Secured in a locked area within the medical unit; With physical access restricted to authorized medical staff; and Procedurally, no copies made and placed in detainee files. 	Meets Standard	The medical department implemented an electronic medical record (EMR) in August 2013. The EMR is password restricted to authorized medical personnel. Per the HSA, medical record copies are not made and placed in detainee non-medical files.
12. Pharmaceuticals are stored in a secure area.	Meets Standard	Pharmaceuticals are stored in a designated room, with access restricted to medical personnel. The room has cinder block walls from floor to ceiling and the door has a security lock which requires an electronic key card to gain entrance. Schedule II-IV controlled substances are stored in a safe, with access restricted to the medical supervisors. Access to the safe requires electronic password input by two supervisors. Controlled substances, syringes and needles, sharp instruments and medical tools are maintained on perpetual inventories and counted at least daily. Verification of counts for controlled substances, TB syringes and needles, insulin syringes and needles and 30-gauge needles indicated accurate inventories. Two working medication carts used by medical personnel during medication administration are locked and stored in the designated medication room when not in use.

ACCESS TO MEDICAL CARE (Key: 5)

POLICY: 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)
<p>13. Medical screening includes a Tuberculosis (TB) test.</p> <ul style="list-style-type: none"> • Every arriving detainee receives a TB test during the admission process; • Detainee's TB-screening does not occur more than one business day after his/her arrival at the facility; and • Detainees not screened are housed separate from the general population. 	<p>Meets Standard</p>	<p>Each newly arriving detainee is screened for TB unless there is documentation of either a skin test or chest x-ray within the past 12 months, with no break in detention. The screening involves either a TB skin test or a chest x-ray if the detainee had a previously positive skin test. The screening occurs as part of the admission process and no more than one business day after arrival. If a detainee is not screened, he/she would be housed in the booking area and separate from the general population. Per the HSA, this has not occurred in the past year.</p>
<p>14. All detainees receive a mental-health screening upon arrival. It is conducted:</p> <ul style="list-style-type: none"> • By a health care provider or specially trained officer; and • Before a detainee's assignment to a housing unit. 	<p>Meets Standard</p>	<p>All detainees receive a mental health screening by detention and medical personnel upon admission. The screening is conducted prior to the detainee's assignment to a housing unit. Review of 20 medical records indicated the screenings were conducted during intake, with any identified issues immediately addressed. Observation of intake verified this practice.</p>
<p>15. The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.</p>	<p>Meets Standard</p>	<p>Per the HSA, the RN supervisor and booking officers, medical personnel review the completed intake screening forms prior to medical staff completing the follow-up medical and mental health screening.</p>

ACCESS TO MEDICAL CARE (Key: S)

POLICY: 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)
<p>16. The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.</p>	<p>Meets Standard</p>	<p>Per policy, every detainee receives a physical examination/health assessment within 14 days of admission. Per review of 20 ICE detainee medical records, 14 received the examination within 14 days and six were not yet due. The examinations are conducted by an RN. Documentation on file verified she has been trained by the physician to conduct the examinations. Documentation of the examinations revealed some are reviewed by the physician and some by the physician assistant. At the time of the inspection, the HSA amended practice to require that all RN-completed ICE detainee 14-day physical examinations/health appraisals will be reviewed by the physician/medical director.</p>
<p>17. Detainees in the Special Management Unit have access to health care services.</p>	<p>Meets Standard</p>	<p>Detainees in the special management unit (SMU) have the same access to health care services as general population detainees. Detainees can at any time request, complete and submit a sick call request. Requests are collected daily by medical personnel and sick call is conducted daily. Per policy, ICE detainees on SMU status will be visited daily. In the past year, one ICE detainee was placed in disciplinary status. Medical personnel are in the ICE detainee housing area eight times a day.</p>

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
<p>18. Staff provides detainees with health services (sick call) request slips daily, upon request.</p> <ul style="list-style-type: none"> Request slips are available in languages other than English, including every language spoken by a sizeable number of the facility's detainee population. Service-request slips are delivered in a timely fashion to the health care provider. 	Meets Standard	Health services request slips are available upon request in each of the housing areas. Additionally, detainees can obtain a request slip from medical personnel when they are in the housing area. Request slips are printed in both English and Spanish. Completed request slips are placed in a locked medical drop-box located in each housing unit. Medical personnel working the midnight to 8:00 a.m. shift collect and triage the slips daily.
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	Procedures have been developed to address 24-hour emergency health care when immediate outside medical attention is required. Medical personnel are on duty 24 hours a day, seven days a week.
20. The plan includes an on-call provider.	Meets Standard	The physician or physician assistant, as well as the HSA and RN supervisor, are on call 24 hours a day, seven days a week.
21. The plan includes a list of telephone numbers for local ambulance and hospital services.	Meets Standard	A list of telephone numbers for the physician, mental health staff, physician assistant, HSA, RN supervisor and the two local hospitals is available in the medical unit and in 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	The plan addresses security and safety procedures to be followed for emergency health care.

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
23. Detention staff is trained to respond to health-related emergencies within a 4-minute response time.	Meets Standard	Detention personnel are trained in first aid and certified in cardiopulmonary resuscitation and use of the automated external defibrillator operation. Per policy and the training curriculum, detention officers are trained to respond to health-related emergencies within a four-minute response time. Review of training files verified receipt of this training.
24. Where staff is used to distribute medication, a health care provider properly trains these officers.	N/A	Only licensed or certified medical personnel administer medication.
25. The medical unit keeps written records of medication that is distributed.	Meets Standard	The facility uses an electronic medication administration record (MAR) to document each dose of medication administered or refused. At the time of administration, medical personnel document electronically via a laptop on the medication cart. Each MAR is electronically linked to the specific detainee's medical record.
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	The HSA notifies jail administration by email and phone call of any 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	Signed and dated consent to treatment is obtained at the time of intake. Additional procedure-specific consents are obtained as needed. Review of 20 ICE detainee medical records indicated a signed/dated consent to treatment was obtained at the time of admission.
28. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	Meets Standard	The facility utilizes an equivalent form to authorize the release of confidential medical records to outside sources.

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
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 of detainee transfers is received. Detainees are occasionally released without such notification. If this occurs, medical personnel attempt to provide follow-up discharge information and medications, as applicable.
30. Detainee's medical records or a copy thereof, are available and transferred with the detainee.	Meets Standard	Medical transfer summary forms and, when applicable, copies of MARs and any significant medical information/alerts are prepared for transfer with the detainee. Per the HSA, ICE is contacted by telephone regarding any medical or mental health issues that could impact the transfer.
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	Per the HSA, transfer documents are placed in a sealed envelope labeled with the 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)*

Evaluation of the standard was based on review of policy, medical staff credentials, licensures/certifications and job descriptions, staff training files and ICE detainee medical files; on staff member and ICE detainee interviews; on tours of the medical unit, booking area and detainee housing units; on verification of controlled medication, syringe and needle, sharp instrument and medical tool perpetual inventories and count procedures; and on observations of medication administration and ICE detainee intake processes. Onsite medical, mental health and dental services are provided through a combination of full and part-time employees and contract staff. Agreements with community health care providers are in place to provide emergency care and other services beyond the capability of the facility. The medical unit is of sufficient size and appropriately equipped to meet the health care needs of the population.

Review of 20 ICE detainee medical files confirmed intake medical/mental health screening, TB screening and 14-day physical examinations are being conducted within the appropriate timeframes. Informed consent to treatment is obtained at the time of admission and additionally as needed. The HSA/RN, who has been trained by the physician, completes the 14-day health appraisal/physical examination. The standard requires that the physical examination be completed pursuant to the requirements of the National Commission on Correctional Health Care (NCCHC). Per the NCCHC requirements, the results of all physical examinations conducted by a RN are to be reviewed by a physician. Of the 14 completed examinations inspected, nine were reviewed by the physician and five by the physician assistant. At the time of the inspection, practice was amended to reflect that all completed ICE detainee 14-day physical examinations will be reviewed by the physician.

Observation of medication administration indicated appropriate identification of the detainees, appropriate administration, mouth checks and immediate documentation on detainee-specific electronic MARs. Counts of controlled medication, syringes and needles and medical tools indicated accurate perpetual inventories. Observation of ICE detainee intake indicated trained detention personnel complete the electronic screening, the screening is reviewed by medical personnel within one hour of completion, and medical personnel collect additional information, measure vital signs and administer a TB skin test.

Interviews with approximately 20 ICE detainees yielded numerous complaints regarding the timeliness of responses to both routine and emergency health care, the inability to be evaluated by a specialist and sick call being conducted by paramedics rather than registered nurses. A review of medical files and sick call documentation, however, revealed no significant unresolved medical concerns. Per nursing personnel, no medical grievances have been received.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

Reviewer Signature (for printed form submission)

(b)(6); (b)(7)(C)

SUICIDE PREVENTION AND INTERVENTION (Key: T)

POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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 and annually.
2. Training prepares staff to: <ul style="list-style-type: none"> • Recognize potentially suicidal behavior; • Refer potentially suicidal detainees, following facility procedures; and • Understand and apply suicide-prevention techniques. 	Meets Standard	Review of the training curriculum verified that training addresses each of the bulleted requirements of 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"> • Screening does not occur later than one working day after the detainee's arrival. 	Meets Standard	Specially trained officers, as verified in personnel training records, screen all detainees for suicide potential as part of the admission process. Per administrative personnel, the screening is conducted and completed within four hours of the detainee's arrival.
4. Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.	Meets Standard	Written procedures address how to refer at-risk detainees to medical staff. Interviews with detention staff verified knowledge of this policy.
5. The facility has a designated isolation room for evaluation and treatment.	Meets Standard	Per policy, male ICE detainees at risk for suicide are placed in one of five designated observation cells located in F-pod. Female ICE detainees are placed in one of four designated observation cells located in the booking area.

SUICIDE PREVENTION AND INTERVENTION (Key: T)

POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
6. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	Meets Standard	The designated observation cells in both areas do not contain any structures or smaller items that could be used in a suicide attempt. The five cells in F-pod have a full-length clear safety glass door and contain only a metal combination sink/toilet unit. The four cells in the booking area have large windows in the door and contain a metal bed approximately 12 inches off the floor and a metal combination sink/toilet unit. Detainees placed in any of the designated cells are provided a mattress and a suicide-resistant smock and blanket. In both areas, direct observation is used to monitor the detainees. Booking cells #1 and #2 are video monitored. There are no cameras in the other designated cells.
7. Medical staff has approved the room for this purpose.	Meets Standard	Medical personnel have provided verbal approval for use of the designated observation rooms.
8. Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes.	Meets Standard	Per policy, officers observe and document the status of a detainee on suicide watch every ten minutes.

SUICIDE PREVENTION AND INTERVENTION – REVIEWER SUMMARY

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

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)

Evaluation of this standard was determined through review of policy, employee training files and the training curriculum; staff interviews; observation of intake and inspection of the designated observation cells. Policy and procedures are in place for the identification, referral and treatment of suicidal detainees. The facility has implemented a telephone "hot line" that is available 24 hours a day, seven days a week. Detainees can use the "hot line" to report any problem including suicidal ideation. Since the last inspection, there were no reported ICE detainee suicides or suicide attempts. As a result, the inspector was unable to determine if the medical practices of the facility fully comply with the standard as there was no applicable documentation available for review.

There was one non-ICE detainee suicide attempt during the inspection period. On 03/02/2013, a 37 year old white male detainee dropped from the housing unit second tier onto the first tier floor after allegedly making comments he was going to hurt himself. The detainee was transported to a local hospital for evaluation and treatment and returned to the facility the same day with no significant injuries. Upon return, he was placed on suicide precautions and evaluated daily by mental health staff until he left the facility 07/15/2013. When admitted to the facility on 02/21/2013, the detainee's intake screening had indicated no significant issues.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

Reviewer Signature (for printed form submission)

(b)(6); (b)(7)(C)

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	Per the health services administrator (HSA) and ICE personnel, detainees who are chronically or terminally ill would be transferred to an appropriate facility as determined by ICE or to an off-site medical 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"> • The detainee's location; and • The limitations placed on visiting. 	Meets Standard	The HSA notifies ICE, who is responsible for notifying next of kin of the detainee's medical condition, location and visiting limitations.
3. There are guidelines addressing the State Advanced Directive Form for Implementing Living Wills and Advanced Directives. <ul style="list-style-type: none"> • 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. 	Meets Standard	The facility has guidelines addressing advanced directives and living wills. 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 provide the opportunity for the detainee to have a private attorney prepare the documents.
5. There is a policy addressing "Do Not Resuscitate Orders"	Meets Standard	Policy addresses do not resuscitate (DNR) orders.
6. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation?	Meets Standard	Policy reflects that the detainee will receive all therapeutic efforts short of resuscitation.
7. The facility notifies the DIHS Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSA's, this notification is made through the local ICE representative.	Meets Standard	Policy requires that ICE be notified of any detainee with a DNR order in the medical record. Even though there have been none, medical personnel are knowledgeable regarding this requirement.

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)
8. The facility has written procedures to address the issues of organ donation by detainees.	Meets Standard	The facility has a specific policy on 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 requires that ICE immediately be notified concerning any ICE detainee death. ICE is responsible for notifying family members and consulates.
10. The facility has a policy and procedure to address the death of a detainee while in transport.	Meets Standard	Policy addresses the death of a detainee during 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 personnel, the body of a deceased detainee would be disposed of in accordance with the standard.
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"> If the detainee's is a U.S. military veteran, is the Department of Veterans Affairs notified? 	Meets Standard	Per ICE personnel, ICE would make arrangements for an indigent burial if neither the family nor the consulate claimed the remains. If the detainee was a military veteran, the Department of Veterans Affairs would be contacted.
13. An original or certified copy of a detainee's death certificate is placed in the subject's a-file.	Meets Standard	ICE is responsible for placing a copy of the death certificate in the A-file.
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"> Performance of an autopsy; Who will perform the autopsy; Obtaining state approved death certificates; and Local transportation of the body. 	Meets Standard	Policy describes the procedures for contacting the coroner and addresses the bulleted items of this component. All of these issues are coordinated with ICE.
15. ICE staff follows established procedures to properly close the case of a deceased detainee.	Meets Standard	ICE personnel demonstrated knowledge as to the requirements for properly closing the case of a deceased detainee.

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)*

Evaluation of this standard was determined following a review of policy and medical and ICE personnel interviews. Per the HSA, there are currently no active advanced directives/living wills, DNR orders or organ donation requests. There were no reported ICE detainee deaths during the inspection period. There were two non-ICE detainee deaths.

On 04/24/2013, a 42 year old white male detainee expired at a local hospital. Cause of death was determined to be the result of complications due to diabetes, high blood pressure, pancreatitis and obesity. All of these chronic illnesses were identified during intake screening on 12/12/2012 and the detainee was routinely evaluated.

On 07/03/2013, a 50 year old white female expired at a local hospital. Cause of death was listed as a life-threatening cardiac arrhythmia secondary to complications of schizophrenia. Her mental health issues were identified during intake on 06/20/2013 and she was placed on the mental health case load.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

Reviewer Signature (for printed form submission):

(b)(6); (b)(7)(C)

Section III

SECURITY AND CONTROL STANDARDS

CONTRABAND (Key: V)		
POLICY: ALL DETENTION FACILITIES WILL ENSURE THE PROPER HANDLING AND DISPOSAL OF ALL CONTRABAND. DOCUMENTATION OF CONTRABAND DESTRUCTION IS REQUIRED.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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 governs how illegal contraband should be handled and specifies procedures for the inventorying, holding and reporting of contraband.
2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	Meets Standard	Any contraband substances that are confiscated and are government property are retained as evidence for potential disciplinary action or criminal prosecution.
3. Staff returns property not needed as evidence to the proper authority. Written procedures cover the return of such property.	Meets Standard	Policy governs how property not needed for evidence is returned to the appropriate authority.
4. Altered property is destroyed following documentation and using established procedures.	Meets Standard	Any altered property that is confiscated is destroyed utilizing appropriate and established procedures and is properly documented.
5. Before confiscating religious items, the OIC or designated investigator contacts a religious authority.	Meets Standard	Policy requires that before religious items are confiscated, a supervisor must contact a religious authority.
6. Staff follows written procedures when destroying hard contraband that is illegal.	Meets Standard	Policy specifies that the investigations division is responsible for the destruction of hard contraband items.
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"> If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use. 	Meets Standard	Hard contraband substances that are illegal are controlled by a lieutenant who keeps these items secured. Some items are utilized in training classes. Written policy regarding the handling of contraband is followed.

CONTRABAND – REVIEWER SUMMARY
<i>(Use following format for dates: mm/dd/yyyy)</i>
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>This standard was evaluated by reviewing the contraband policy and interviewing one of the lieutenants responsible for handling contraband items. Contraband is handled, disposed of and properly documented as the standard requires. There were no reports of contraband taken from ICE detainees during the inspection period.</p>
<p>Overall Rating: Meets Standard</p>

CONTRABAND – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
Reviewer Name (Printed):	(b)(6); (b)(7)(C)	Completion Date: 1/16/2014
Reviewer Signature (for printed form submission)	(b)(6); (b)(7)(C)	

DETENTION FILES (Key: W)		
POLICY: EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY ICE DETAINEE BOOKED INTO THE FACILITY, EXCLUDING ONLY DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETENTION FILE WILL CONTAIN COPIES AND, IN SOME CASES, THE ORIGINAL OF SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE FACILITY: CLASSIFICATION SHEET, MEDICAL QUESTIONNAIRE, PROPERTY INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC.		
COMPONENTS	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 all detainees upon admission.
2. The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	Meets Standard	Various ICE and local admission forms, such as I-203 and I-216 forms and local property and booking forms, are included in the detention files.
3. The detainee's detention file also contains documents generated during the detainee's custody. <ul style="list-style-type: none"> • Special requests • Any G-589s and/or I-77s closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same 	Meets Standard	
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	Detention files are stored in the records room, outside of the secure perimeter, under the direct supervision of agency employees and inaccessible to detainees or the public.
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	
6. The officer closing the detention file makes a notation that the file is complete and ready to be archived.	Meets Standard	Records clerks conduct a check to ensure the detainee is properly released and then forward the file to an officer who checks for outstanding warrants. After the warrants check, the file is given to a sergeant, who initials the file indicating that the detainee has been legitimately released and all required processes have been accomplished. The file is then sent to the archived records area for storage.

DETENTION FILES (Key: W)		
<p>Policy: EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY ICE DETAINEE BOOKED INTO THE FACILITY, EXCLUDING ONLY DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETENTION FILE WILL CONTAIN COPIES AND, IN SOME CASES, THE ORIGINAL OF SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE FACILITY: CLASSIFICATION SHEET, MEDICAL QUESTIONNAIRE, PROPERTY INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC.</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	Employees and ICE officers who need to access detention files in the course of their official duties have access to detention files. A sign-out log is utilized to track records taken out of the area.

DETENTION FILES – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)</i> (5000 Character Max)</p> <p>Detention files are created for every detainee upon admission. Files include, but are not limited to, documents that verify identity, account for property and validate movement of ICE detainees. To evaluate this standard, active and archived detention files were reviewed, employees were interviewed, file storage areas were inspected, and policy and sign-out logs were reviewed.</p>	
<p>Overall Rating: Meets Standard</p>	
<p>Reviewer Name (Printed): (b)(6); (b)(7)(C)</p>	<p>Completion Date: 1/16/2014</p>
<p>Reviewer Signature (for printed form submission): (b)(6); (b)(7)(C)</p>	

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)
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	Meets Standard	
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	Meets Standard	Policy states that 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"> • corporal punishment • deviations from normal food service • clothing deprivation • bedding deprivation • denial of personal hygiene items • loss of correspondence privileges • deprivation of physical exercise 	Meets Standard	Policy prohibits staff from imposing or permitting the imposition of any of the bulleted items listed in this component.
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	Rules of conduct, sanctions and procedures are posted in the housing units, are included in the detainee handbook and are communicated verbally via a video that is shown regularly in the housing areas.
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"> • Rights and Responsibilities • Prohibited Acts • Disciplinary Severity Scale • Sanctions 	Meets Standard	Rights and responsibilities, prohibited acts, the disciplinary severity scale and sanctions are conspicuously posted in the housing areas in Spanish and English and are included in the detainee handbook.
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	Meets Standard	Pre-service and annual training address informal resolution for minor rule violations. Supervisory personnel also encourage these resolutions.
7. Incident reports and Notice of Charges are promptly forwarded to the designated supervisor.	Meets Standard	Incident reports and the notice of charges are promptly forwarded to the sergeant responsible for processing disciplinary reports.
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	
9. An intermediate disciplinary process is used to adjudicate minor infractions.	Meets Standard	

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)
10. A disciplinary panel (or equivalent in IGSA's) adjudicates infractions. The panel: <ul style="list-style-type: none"> • Conducts hearings on all charges and allegations referred by the UDC; • Considers written reports, statements, physical evidence, and oral testimony; • Hears pleadings by detainees and staff representatives; • Bases its findings on the preponderance of evidence; and • Imposes only authorized sanctions 	Meets Standard	Disciplinary proceedings, including adjudication of major infractions, are handled by a sergeant. He conducts hearings on all charges and allegations referred by unit personnel. The sergeant considers all written reports, statements, oral testimony and physical evidence. In addition, he hears pleadings and statements by both detainees and staff representatives and bases his findings on the preponderance of evidence. Only authorized sanctions are imposed.
11. A staff representative is available if requested for a detainee facing a disciplinary hearing.	Meets Standard	A staff representative is available if requested for a detainee facing a disciplinary hearing.
12. The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	Meets Standard	
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	
14. Written procedures govern the handling of confidential-informant information. Standards include criteria for recognizing "substantial evidence"	Meets Standard	
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	Meets Standard	All forms generated from the disciplinary proceedings are completed and distributed electronically as required.

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)*

This standard was evaluated by reviewing the disciplinary policy, examining forms and interviewing the sergeant responsible for the disciplinary process. Only one ICE detainee has been disciplined at this facility during this inspection period. In August 2013, one ICE detainee spit on another. This inspector reviewed the incident reports; the penalty assessed was 60 days cell restriction, which was later reduced. Per examination of visiting documentation, visits were not restricted. Discipline is administered as required by the standard.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

DISCIPLINARY POLICY – REVIEWER SUMMARY

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

Reviewer Signature (for printed form submission):

(b)(6); (b)(7)(C)

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)
1. Policy precludes detainees or detainee groups from exercising control or authority over other detainees.	Meets Standard	Policy precludes detainees or detainee groups from exercising control or authority over other detainees. This is also listed as one of the facility rules.
2. Detainees are protected from: <ul style="list-style-type: none"> • Personal abuse • Corporal punishment • Personal injury • Disease • Property damage • Harassment from other detainees 	Meets Standard	The emergency contingency plans contain language that covers all of the bulleted items listed in this component.
3. Staff is trained to identify signs of detainee unrest. <ul style="list-style-type: none"> • What type of training and how often? 	Meets Standard	Personnel at this facility receive 24 hours of training annually. Identifying detainee unrest is included in this training.
4. Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Officer In Charge (OIC)	Meets Standard	
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 emergency planning for the facility. He is given sufficient time and assistance for development and implementation of the emergency plans.
6. The plans address the following issues: <ul style="list-style-type: none"> • Confidentiality • Accountability (copies and storage locations) • Annual review procedures and schedule • Revisions 	Meets Standard	The emergency plans contain a section that addresses confidentiality, accountability and annual review procedures and schedules. Revisions are completed as needed, but no less than annually.
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"> • Local law enforcement agencies • State agencies • Federal agencies 	Meets Standard	The facility has reciprocal agreements for cooperative assistance during an emergency with 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 personnel receive training on the hostage management policy during annual in-service training. The hostage policy is located on the facility computer system where it is available to all employees.
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	Personnel are trained to disregard instructions from hostages regardless of rank. This language is also included in the hostage policy. Within 24 hours of release, hostages are to be screened for medical and/or psychological effects.
11. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	Meets Standard	The hostage plan requires emergency medical treatment for facility personnel and detainees during and after an incident.
12. Food service maintains at least 3 days' worth of emergency meals for staff and detainees.	Meets Standard	Food service maintains at least a ten-day supply of emergency meals for employees and detainees.
13. Written plans identify locations of shut-off valves and switches for all utilities (water, gas, electric).	Meets Standard	Emergency plans identify the locations of all shut-off valves and switches for all utilities. The plans include pictures of the shut-off valves and switches and pictures of the areas where they are located.
14. Written procedures cover: <ul style="list-style-type: none"> • Work/Food Strike • Disturbances • Escapes • Bomb Threats • Adverse Weather • Internal Searches • Facility Evacuation • Detainee Transportation System Plan • Internal Hostages • Civil Disturbances 	Meets Standard	

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>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> This facility has developed emergency plans to minimize harm to human life and the destruction of property as required by the standard. To evaluate this standard, the policy was reviewed, training records were examined and employees were interviewed.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6); (b)(7)(C)	Completion Date: 1/16/2014
Reviewer Signature (for printed form submission): (b)(6); (b)(7)(C)	

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	Meets Standard	Policy addresses the system for storing, issuing and maintaining inventories of hazardous materials.
2. Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	Meets Standard	
3. The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. <ul style="list-style-type: none"> • The files list all storage areas, and include a plant diagram and legend. • The MSDSs and other information in the files are available to personnel managing the facility's safety program. 	Meets Standard	The maintenance supervisor maintains a master file of all MSDSs. The file includes the bulleted requirements listed in this component.
4. All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: <ul style="list-style-type: none"> • Wear personal protective equipment; and • Report hazards and spills to the designated official. 	Meets Standard	Personal protective equipment was observed to be available in all areas of the facility where flammable, toxic and/or caustic materials are used and stored. Policy requires staff to report all hazards and spills to the 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"> • Quantities are limited; and • Staff always supervises detainees using these substances. 	Meets Standard	Hazardous materials are diluted prior to being issued to detainees in the housing units. Quantities issued are limited and are used under staff supervision.
7. All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	Meets Standard	
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	
10. Vents return vents, and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility.	Meets Standard	
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 air temperature for the entire facility is set at 72 degrees throughout the year.

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
<p>POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
12. Shower and sink water temperatures do not exceed the industry standard of 120 degrees.	Meets Standard	Water temperatures were observed to be maintained within industry standards. The hot and cold water mixing valves were set at 112 degrees.
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	
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	Products that contain methyl alcohol are not used in this facility.
16. Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.	Meets Standard	
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	
18. A technically qualified officer conducts the fire and safety inspections.	Meets Standard	A sergeant is the safety officer and has received training through the Butler County Sheriff's Office training course on fire safety. He conducts all fire and safety inspections.
19. The Safety Office (or officer) maintains files of inspection reports.	Meets Standard	
20. The facility has an approved fire prevention, control, and evacuation plan.	Meets Standard	The facility fire prevention, control and evacuation plan has been approved by the City of Hamilton Fire Department and was dated 01/13/2014.
21. The plan requires: <ul style="list-style-type: none"> • Monthly fire inspections; • Fire protection equipment strategically located throughout the facility; • Public posting of emergency plans with accessible building/room floor plans; • Exit signs and directional arrows; and • An area-specific exit diagram conspicuously posted in the diagrammed area. 	Meets Standard	All of the bulleted requirements of this component are included in the fire prevention, control and evacuation plan.

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
22. Fire drills are conducted and documented monthly.	Meets Standard	
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	This component was rated as deficient during the last inspection due to the facility not having a designated barber shop. Barbering services are conducted in the dayrooms of the housing units. The facility received a waiver for this component from ICE Headquarters, dated 07/17/2013.
25. The sanitation standards are conspicuously posted in the barbershop.	Meets Standard	The sanitation standards are posted in the area of the housing unit where barbering services take place.
26. Written procedures regulate the handling and disposal of used needles and other sharp objects.	Meets Standard	
27. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	Meets Standard	
28. Standard cleaning practices include: <ul style="list-style-type: none"> Using specified equipment; cleansers; disinfectants and detergents. An established schedule of cleaning and follow-up inspections. 	Meets Standard	Policy covers the bulleted parts of this component.
29. The facility follows standard cleaning procedures.	Meets Standard	
30. Spill kits are readily available.	Meets Standard	Spill kits are available in the medical unit and the intake area.
31. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	Meets Standard	Stericycle, a licensed medical waste contractor, disposes of all infectious/bio-hazardous waste.
32. Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	Meets Standard	The facility has a policy on blood-borne pathogens and employees receive training on this policy.
33. Do the methods for handling/disposing of refuse meet all regulatory requirements?	Meets Standard	

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
34. A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. <ul style="list-style-type: none"> At least monthly. The pest-control program includes preventative spraying for indigenous insects. 	Meets Standard	Pest control services are provided by Orkin, a licensed pest control company. Inspections occur on a monthly basis. Preventative spraying occurs during the monthly inspections.
35. Drinking water and wastewater is routinely tested according to a fixed schedule.	Meets Standard	
36. Emergency power generators are tested at least every two weeks. <ul style="list-style-type: none"> Other emergency systems and equipment receive testing at least quarterly. Testing is followed-up with timely corrective actions (repairs and replacements). 	Meets Standard	Policy and procedures require that emergency power generators are tested under load for 30 minutes every week. Other emergency systems and equipment are tested at least quarterly, with follow-up corrective action as needed.

ENVIRONMENTAL HEALTH AND SAFETY – REVIEWER SUMMARY

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

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

During the evaluation of this standard, employees were interviewed and policy, procedures and documentation were reviewed. The facility has a hazardous materials program that establishes procedures for the control of flammable, toxic and caustic materials. MSDS binders were observed to be up to date and contained the required information.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

Reviewer Signature (for printed form submission) (b)(6); (b)(7)(C)

HOLD ROOMS IN DETENTION FACILITIES (Key: AA)		
POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS, MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSING INTO OR OUT OF THE FACILITY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The hold rooms are situated within the secure perimeter.	Meets Standard	Hold rooms within this facility are located within the secure perimeter in the intake/booking area.
2. The hold rooms are well ventilated well lighted, and all activating switches are located outside the room.	Meets Standard	The hold rooms are well ventilated and well lighted. Activating switches are located on a control panel at the officer's station.
3. The hold rooms contain sufficient seating for the number of detainees held.	Meets Standard	The hold rooms contain sufficient seating 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	Cots, bunks and beds are precluded from use in the hold rooms. Occasionally, when hold rooms are utilized to house special needs detainees from the general population, some sleeping apparatus could be in use. When this occurs, the room is given a different designation and would not be used for processing detainees in or out of the facility.
5. The walls and ceilings of the hold rooms are tamper and escape proof.	Meets Standard	All walls and ceilings of the hold rooms are tamper 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	
8. Detainees under the age of 18 are not held with adult detainees.	Meets Standard	
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	
10. In older facilities, officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.	Meets Standard	All but one of the hold rooms has toilet facilities. That one exception is directly across from assigned personnel who can give any detainee placed in that room immediate access to toilet facilities.
11. All detainees are given a pat down search for weapons or contraband before being placed in the room.	Meets Standard	

HOLD ROOMS IN DETENTION FACILITIES (Key: AA)

POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS, MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSING INTO OR OUT OF THE FACILITY.

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
12. Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring). <ul style="list-style-type: none"> Hold rooms are irregularly monitored every 15 minutes. Unusual behavior or complaints are noted. 	Meets Standard	All of the hold rooms are under constant and direct supervision from personnel assigned to the area. In addition, irregular rounds are made at least every 15 minutes and unusual behavior or complaints are reported.
13. When the last detainee has been removed from the hold room, it is given a thorough inspection.	Meets Standard	
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	Evacuation plans are posted in the intake area. In case of an emergency, the intake supervisor is responsible for evacuation of the detainees.
15. An appropriate emergency service is called immediately upon a determination that a medical emergency may exist.	Meets Standard	If a medical emergency exists, facility health services professionals respond immediately.

HOLD ROOMS IN DETENTION FACILITIES – REVIEWER SUMMARY

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

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

Processing of detainees in or out of this facility is completed in an area that is secure and clean, with all hold rooms under direct and constant supervision by assigned personnel. Processing is usually completed in a timely fashion and never takes longer than 12 hours. Evaluation of this standard was completed by interviewing the lieutenant in charge of intake and a sergeant who supervises intake. Policy and the computerized logging system that records detainee arrival and departure times were reviewed. The processing of detainees in and out of this facility is completed as this standard requires.

Overall Rating: Meets Standard

Reviewer Name (Printed)

(b)(6); (b)(7)(C)

Completion Date: 1/16/2014

Reviewer Signature (for printed form submission):

(b)(6); (b)(7)(C)

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)
1. The security officer[s], or equivalent in IGSA's, has attended an approved locksmith training program.	Meets Standard	A maintenance employee 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 lieutenant is responsible for all administrative duties and responsibilities relating to keys and locks.
3. The security officer, or equivalent in IGSA's, provides training to employees in key control.	Meets Standard	Training in key control is provided during pre-service training.
4. The security officer, or equivalent in IGSA's, maintains inventories of all keys, locks and locking devices.	Meets Standard	A lieutenant maintains inventories of all keys, locks and locking devices.
5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	Meets Standard	
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.	Meets Standard	A policy has been developed to ensure the integrity of safe combinations.
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	Grand master keying systems are not used at this facility.
11. All worn or discarded keys and locks are cut up and properly disposed of.	Meets Standard	Worn or discarded keys and locks are cut up by the maintenance department and properly disposed of offsite.
12. Padlocks and/or chains are prohibited from use on cell doors.	Meets Standard	
13. The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to: <ul style="list-style-type: none"> • Occupational Safety and Environmental Health Manual, Ch. 3; • National Fire Protection Association Life Safety Code 101. 	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 facility has two key boards in the main control center which are sufficient to accommodate all facility keys.

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)
15. Procedures are in place to ensure that key rings are: <ul style="list-style-type: none"> • Identifiable; • The numbers of keys are cited; and • Keys cannot be removed. 	Meets Standard	Key rings were inspected and found to be identifiable, with the number of keys indicated on each ring. Keys cannot be removed as the key rings are locked.
16. Emergency keys are available for all areas of the facility.	Meets Standard	
17. The facilities use a key accountability system.	Meets Standard	Keys are physically counted at the beginning of each shift. In addition, key inventories are checked daily.
18. Authorization is necessary to issue any restricted key.	Meets Standard	Restricted keys can only be authorized for use by a supervisor.
19. Individual gun lockers are provided. <ul style="list-style-type: none"> • They are located in an area that permits constant officer observation. • In an area that does not allow detainee or public access. 	Meets Standard	Gun lockers are located in four areas of the facility. All have either camera or direct supervision. Public and detainee access is restricted in all of these areas.
20. The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	Meets Standard	Keys are physically counted in the control center at the beginning of each shift.
21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> • Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. • When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. • Detainees are not permitted to handle keys assigned to staff. 	Meets Standard	All personnel receive key and lock training during pre-service training and prior to being assigned to duty. The key and lock policy addresses situations where keys are inadvertently taken home, lost, and/or misplaced and requires that supervisors be notified. Detainees are never permitted to handle keys.

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) – REVIEWER SUMMARY

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

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

Keys are accounted for and maintained as required by this standard. Keys are securely stored in the main control center. All keys are counted each shift by the control center officer. To evaluate this standard, a control center officer, the training officer and the lieutenant responsible for key control were interviewed. The key control policy was reviewed, keys were counted and key logs and inventories were inspected.

Overall Rating: Meets Standard

Reviewer Name (Printed)

(b)(6); (b)(7)(C)

Completion Date: 1/16/2014

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) – REVIEWER SUMMARY

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

Reviewer Signature (for printed form submission)

(b)(6); (b)(7)(C)

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	
2. Activities cease or are strictly controlled while a formal count is being conducted.	Meets Standard	All activities cease while a formal count is being conducted.
3. Certain operations cease during formal counts.	Meets Standard	All operations involving detainees cease during formal counts.
4. All movement ceases for the duration of a formal count.	Meets Standard	All detainee movement ceases for the duration of a formal count.
5. Formal counts in all units take place simultaneously.	Meets Standard	Formal counts in all units take place simultaneously.
6. Detainee participation in counts is prohibited.	Meets Standard	Detainee participation in counts is prohibited.
7. A face-to-photo count follows each unsuccessful recount.	Meets Standard	A face-to-photo count follows each unsuccessful recount.
8. Officers positively identify each detainee before counting him/her as present.	Meets Standard	Officers positively identify each detainee before counting him/her present.
9. Written procedures cover informal and emergency counts. <ul style="list-style-type: none"> They are followed during informal counts and emergencies. 	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 intake supervisor 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)

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

Detainees are accounted for around the clock via formal and informal head counts. Formal counts take place at 9:00 a.m., 6:00 p.m. and 11:30 p.m. Detainees wear wristbands with their pictures, which are checked during the formal counts. Informal counts occur at each meal and several times throughout the night as rounds are made. This standard was evaluated by reviewing policy, observing counts and examining count sheets. The training officer and one of the supervisors who conducts counts were interviewed.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

POPULATION COUNTS – REVIEWER SUMMARY

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

Reviewer Signature (for printed form submission):

(b)(6); (b)(7)(C)

POST ORDERS (Key: AD)

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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 computerized and written for each fixed post. The officers receive notice of the latest inserts and revisions and their supervisors receive immediate electronic notification when the changes have been reviewed by the officers.
3. One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.	Meets Standard	The warden is responsible for keeping all post orders current with revisions that take place between reviews.
4. The IGSA maintains a complete set (central file) of post orders.	Meets Standard	
5. The central file is accessible to all staff.	Meets Standard	All post orders are computerized and available to all personnel through the computer system.
6. The OIC or Contract / IGSA equivalent initiates/authorizes all post-order changes.	Meets Standard	All post order changes are authorized by the warden.
7. The OIC or Contract / IGSA equivalent has signed and dated the last page of every section.	Meets Standard	Post orders are signed and dated by the warden.
8. A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.	Meets Standard	
9. Procedures keep post orders and logbooks secure from detainees at all times.	Meets Standard	Post orders are maintained electronically. Detainees do not have access to this system.
10. Every armed-post officer qualifies with the post weapon(s) before assuming post duty.	Meets Standard	All employees required to carry a weapon must qualify before assuming their posts.
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 post orders for housing units track the event schedule.
13. Housing-unit post officers record all detainee activity in a log. The post order includes instructions on maintaining the logbook.	Meets Standard	Officers assigned to housing units must record all detainee activity electronically. The post order includes instructions on maintaining the logbook.

POST ORDERS – REVIEWER SUMMARY

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

POST ORDERS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Post orders at this facility are computerized, are written for each fixed post and are not accessible to detainees. Changes and revisions are easily processed on this system and officers are notified via the computer when these changes occur. A lieutenant maintains a central file of post orders and they are available for review by all staff. Evaluation of this standard was conducted by interviewing the warden, a lieutenant and an officer, and by reviewing policy and post orders.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/16/2014
Reviewer Signature (for printed form submission): (b)(6); (b)(7)(C)	

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)
1. The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> • Posts to be inspected; • Required inspection forms; • Frequency of inspections; • Guidelines for checking security features; and • Procedures for reporting weak spots, inconsistencies, and other areas needing improvement 	Meets Standard	Policy specifies what posts are to be inspected, what forms are to be used and how often the inspections will take place. The policy includes guidelines for checking security features and procedures for reporting weak spots, inconsistencies and other areas needing improvement.
2. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	Meets Standard	All officers are required to inspect their assigned areas on a daily basis and to document the results electronically.
3. Documentation of security inspections is kept on file.	Meets Standard	All documentation of security inspections is logged and maintained in the computer system.
4. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	Meets Standard	Inspection reports are reviewed by the shift supervisors, who report recurring problems and any failure to take corrective action to the appropriate manager.
5. The front-entrance officer checks the ID of everyone entering or exiting the facility.	Meets Standard	
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	Officers assigned to the control center must complete an on-the-job training program prior to starting that assignment.
9. The Control Center is staffed around the clock.	Meets Standard	The control center is staffed around the clock.
10. Policy restricts staff access to the Control Center.	Meets Standard	Policy restricts access to the control center.
11. Detainees are restricted from access to the Control Center.	Meets Standard	Detainees are restricted from access to the control center.
12. Communications are centralized in the Control Center.	Meets Standard	Communications are centralized in the control center.
13. Officers monitor all vehicular traffic entering and leaving the facility.	N/A	Vehicular traffic does not enter the secure perimeter of this facility.

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)
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"> The driver's name; Company represented; Vehicle contents; Delivery date and time; Date and time out; Vehicle license number; and Name of employee responsible for the vehicle during the visit 	N/A	Vehicular traffic does not enter the secure perimeter of this facility.
15. Officers thoroughly search each vehicle entering and leaving the facility.	N/A	Vehicular traffic does not enter the secure perimeter of this 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 being taken into the secure area of the facility are inventoried before entering and prior to departure.
18. The SMU entrance has a sally port.	Meets Standard	
19. Written procedures govern searches of detainee housing units and personal areas.	Meets Standard	Policy dictates how security inspections are to be conducted in both housing and personal areas.
20. Housing area searches occur at irregular times.	Meets Standard	All searches within the housing units occur at irregular times.
21. Every search of the SMU and other housing units is documented.	Meets Standard	
22. Storage and supply rooms, walls, light and plumbing fixtures, accesses, and drains, etc., undergo frequent, irregular searches. These searches are documented.	Meets Standard	
23. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	Meets Standard	
24. Daily procedures include: <ul style="list-style-type: none"> Perimeter alarm system tests; Physical checks of the perimeter fence; and Documenting the results. 	Meets Standard	There is no alarm on the perimeter fence. Checks of the outside perimeter are conducted each shift and the results are documented electronically.
25. Visitation areas receive frequent, irregular inspections.	Meets Standard	

SECURITY INSPECTIONS – REVIEWER SUMMARY

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

SECURITY INSPECTIONS – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Seasoned officers, who are capable of functioning under difficult or stressful conditions, are generally assigned to the more demanding areas of the facility such as the control center, the intake area and the special management units. Security inspections are documented daily and any discrepancies are given immediate attention. This standard was evaluated by interviewing a lieutenant, a corrections officer and the training officer and by reviewing training records, daily activity logs, sanitation reports and inspection reports.</p>	
<p>Overall Rating: Meets Standard</p>	
<p>Reviewer Name (Printed): (b)(6); (b)(7)(C)</p>	<p>Completion Date: 01/16/2014</p>
<p>Reviewer Signature (for printed form submission): (b)(6); (b)(7)(C)</p>	

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. <ul style="list-style-type: none"> • Detainees are placed in the SMU (administrative) in accordance with written criteria. 	Meets Standard	
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"> • A copy of the order given to the detainee within 24 hours. 	Meets Standard	
3. The OIC (or equivalent) regularly reviews the status of detainees in administrative detention. <ul style="list-style-type: none"> • A supervisory officer conducts a review within 72 hours of the detainee's placement in the SMU (administrative). 	Meets Standard	A lieutenant, along with the classification committee, reviews the status of all detainees who are placed in the administrative segregation unit. A supervisory officer conducts an initial review within 72 hours.
4. A supervisory officer conducts another review after the detainee has spent seven days in administrative segregation, and: <ul style="list-style-type: none"> • Every week thereafter for the first month; and • Every 30 days after the first month. • Does each review include an interview with the detainee? • Is a written record made of the decision and the justification? 	Meets Standard	Segregation reviews are conducted by the classification committee every seven days and include an interview with the detainee. A lieutenant supervises this process. The decisions and justifications are documented.
5. The detainee is given a copy of the decision and justification for each review. <ul style="list-style-type: none"> • The detainee is given an opportunity to appeal the reviewer's decision to someone else in the facility. 	Meets Standard	ICE detainees receive copies of the decision and justification for each review. Detainees may appeal any decision to the warden.
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. <ul style="list-style-type: none"> • 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. 	Meets Standard	The lieutenant who supervises the classification committee ensures that the FOD would receive notification any time a detainee's stay in administrative detention exceeded 30 days. The field office would make all other necessary notifications.

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<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"> A written record is made of the decision and the justification. The detainee receives a copy of this record. 	Meets Standard	The lieutenant, along with the classification committee, conducts all the reviews for any detainee who objects to his status after 30 days. A written record is made and the ICE detainee receives a copy.
<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	Detainees are afforded appeal rights for any review conducted. Appeals go to the warden.
<p>9. Administratively segregated detainees enjoy the same general privileges as detainees in the general population.</p>	Meets Standard	Policy requires that detainees in administrative segregation have the same general privileges as detainees in general population.
<p>10. The SMU is:</p> <ul style="list-style-type: none"> Well ventilated; Adequately lighted; Appropriately heated; and Maintained in a sanitary condition. 	Meets Standard	
<p>11. All cells are equipped with beds.</p> <ul style="list-style-type: none"> Every bed is securely fastened to the floor or wall. 	Meets Standard	The beds in single occupancy cells are fastened to the wall. Beds in cells that are double-bunked are fastened to the wall and the floor.
<p>12. The number of detainees in any cell does not exceed the occupancy limit.</p> <ul style="list-style-type: none"> When occupancy exceeds recommended capacity, do basic living standards decline? Do criteria for objectively assessing living standards exist? If yes, are the criteria included in the written procedures? 	Meets Standard	
<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	
<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"> Do detainees eat only with disposable utensils? Is food ever used as punishment? 	Meets Standard	Detainees in administrative segregation receive the same meals as the general population. They eat with disposable utensils. Food is not used as punishment.

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
15. Each detainee maintains a normal level of personal hygiene in the SMU. <ul style="list-style-type: none"> The detainees have the opportunity to shower and shave at least three times a week. If not, explain. 	Meets Standard	Detainees in administrative segregation can shower and shave every day.
16. The detainees are provided: <ul style="list-style-type: none"> Barbering services; Recreation privileges in accordance with the "Detainee Recreation" standard; Non-legal reading material; Religious material; The same correspondence privileges as detainees in the general population; Telephone access similar to that of the general population; and Personal legal material. 	Meets Standard	All bulleted items listed in this component are afforded to detainees in the administrative segregation unit.
17. A health care professional visits every detainee at least three times a week. <ul style="list-style-type: none"> The shift supervisor visits each detainee daily. Weekends and holidays. 	Meets Standard	Policy requires that a health care professional visit every detainee at least three times a week. Although ICE detainees are rarely placed in administrative segregation, the health services administrator stated that a daily face-to-face wellness check would be completed if they are. Policy also requires that a shift supervisor visit each detainee daily, including weekends and holidays. A checklist form has been prepared to properly record these visits in the event an ICE detainee is placed in administrative segregation. No ICE detainees were placed in administrative segregation during this inspection period.
18. Procedures comply with the "Visitation" standard. <ul style="list-style-type: none"> The detainee retains visiting privileges; and The visiting room is available during normal visiting hours. 	Meets Standard	
19. Visits from clergy are allowed.	Meets Standard	

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
<p>POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>20. Detainees have the same law-library access as the general population.</p> <ul style="list-style-type: none"> Are they required to use the law library <input checked="" type="checkbox"/> Separately, or <input type="checkbox"/> As a group? Are legal materials brought to them? 	Meets Standard	The law library materials are on a cart that is brought into the unit as necessary. Detainees in the administrative segregation unit receive the same law library privileges as those in the general population and may be escorted upon request to a unit law library.
<p>21. The SMU maintains a permanent log of detainee-related activity, e.g., meals served, recreation, visitors etc.</p>	Meets Standard	All detainee-related activities occurring within the unit are logged electronically.
<p>22. SPC procedures include completing the SMU Housing Record (I-888) immediately upon a detainee's placement in the SMU.</p> <ul style="list-style-type: none"> Staff completes the form at the end of each shift. CDFs and IGSA facilities use Form I-888 (or local equivalent). 	Meets Standard	A housing record is completed on each detainee placed into administrative segregation. This record stays with the detainee throughout his/her stay in the unit.
<p>23. Staff record whether the detainee ate, showered, exercised, and took any applicable medication during every shift.</p> <ul style="list-style-type: none"> Staff logs record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc; The medical officer/health care professional signs each individual's record during each visit; and The housing officer initials the record when all detainee services are completed or at the end of the shift. 	Meets Standard	All detainee-related activities, including their personal conditions, visits from health care professionals, showers and recreation and all other detainee services are logged on the computer system. All the required documentation listed in this component is recorded electronically.
<p>24. A new record is created for each week the detainee is in Administrative Segregation.</p> <ul style="list-style-type: none"> The weekly records are retained in the SMU until the detainee's return to the general population. 	Meets Standard	Each week a new record is completed on each detainee housed in the administrative segregation unit. Weekly records are maintained until the detainee is released.

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) – REVIEWER SUMMARY
<i>(Use following format for dates: mm/dd/yyyy)</i>
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>No ICE detainee has been placed in administrative segregation status during the inspection period. Evaluation of this standard was completed by reviewing policy, interviewing the lieutenant who supervises the classification committee, interviewing the classification officer and interviewing officers assigned to the housing units. If it becomes necessary to place an ICE detainee in administration segregation, the facility is prepared to manage that event effectively.</p>
<p>Overall Rating: Meets Standard</p>

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
Reviewer Name (Printed)	(b)(6); (b)(7)(C)	Completion Date: 1/16/2014
Reviewer Signature (for printed form submission)	(b)(6); (b)(7)(C)	

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	Policy requires that sanctions for violations committed during one incident be limited to 60 days.
3. A completed Disciplinary Segregation Order accompanies the detainee into the SMU. <ul style="list-style-type: none"> The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation. 	Meets Standard	
4. Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at set intervals. <ul style="list-style-type: none"> After each formal review, the detainee receives a written copy of the decision and supporting reasons. 	Meets Standard	Standard procedures include reviewing the cases of individual detainees in disciplinary detention at set intervals. ICE detainees receive a copy of the decision and supporting reasons after each formal review.
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	Policy states that detainees in disciplinary segregation have fewer privileges than those housed in administrative segregation.
7. Living conditions in disciplinary SMUs remain the same regardless of behavior. <ul style="list-style-type: none"> If no, does staff prepare written documentation for this action? Does the OIC sign to indicate approval. 	Meets Standard	
8. Every detainee in disciplinary segregation receives the same humane treatment, regardless of offense.	Meets Standard	Policy addresses humane treatment and levels of decency for detainees in disciplinary segregation, regardless of the offense that caused their placement.
9. The quarters used for segregation are: <ul style="list-style-type: none"> Well-ventilated. Adequately lighted. Appropriately heated. Maintained in a sanitary condition. 	Meets Standard	The segregation cellblock is well ventilated, adequately lighted, appropriately heated and clean.
10. All cells are equipped with beds that are securely fastened to the floor or wall of the cell.	Meets Standard	

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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"> Does the OIC approve excess occupancy on a temporary basis? 	Meets Standard	
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	
13. Detainees in the SMU have the same opportunities to exchange clothing, bedding, etc., as other detainees.	Meets Standard	
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"> Food is not used as punishment. 	Meets Standard	Detainees in disciplinary segregation receive the same meals as the 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 in disciplinary segregation can shower and shave every day.
16. Detainees receive, unless documented as a threat to security: <ul style="list-style-type: none"> Barbering services; Recreation privileges; Other-than-legal reading material; Religious material; The same correspondence privileges as other detainees; and Personal legal material. 	Meets Standard	Unless documented as a threat to security, detainees in disciplinary segregation receive all of the bulleted items listed in 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"> Calls about the detainee's immigration case or other legal matters; Calls to consular/embassy officials; and Calls during family emergencies (as determined by the OIC/Warden). 	Meets Standard	
18. A health care professional visits every detainee in disciplinary segregation every week day. <ul style="list-style-type: none"> The shift supervisor visits each segregated detainee daily Weekends and holidays. 	Meets Standard	Policy requires that a health care professional visit every detainee in disciplinary segregation every weekday and that shift supervisors visit each segregated detainee daily, including weekends and holidays.
19. SMU detainees are allowed visitors, in accordance with the "Visitation" standard.	Meets Standard	ICE detainees are not restricted from visits when serving disciplinary sanctions.

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)		
POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
20. SMU detainees receive legal visits, as provided in the "Visitation" standard. <ul style="list-style-type: none"> Legal service providers are notified of security concerns arising before a visit. 	Meets Standard	
21. Visits from clergy are allowed. <ul style="list-style-type: none"> The clergy member is given the option of visiting/not visiting the segregated detainee. Violent/uncooperative detainees are denied access to religious services when safety and security would otherwise be affected. 	Meets Standard	
22. SMU detainees have law library access. <ul style="list-style-type: none"> Violent/uncooperative detainees retain access to the law library unless adjudicated a security threat in writing. Legal material brought to individuals in the SMU on a case-by-case basis. Staff documents every incident of denied access to the law library. 	Meets Standard	
23. All detainee-related activities are documented, e.g. meals served, recreation activities, visitors, etc.	Meets Standard	
24. The SPCs, the Special Management Housing Unit Record (I-888 or equivalent), is prepared as soon as the detainee is placed in the SMU. <ul style="list-style-type: none"> All I-888s are filled out by the end of each shift. The CDF/IGSA facility use Form. I-888 (or equivalent local form). 	Meets Standard	This IGSA uses an electronic special management housing unit record that is prepared for every detainee who is placed in the disciplinary segregation unit. The electronic record is perpetually maintained throughout the shift as activities occur.
25. SMU staff record whether the detainee ate, showered, exercised, took medication, etc. <ul style="list-style-type: none"> Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc. The health care official sign individual records after each visit. The housing officer initials the record when all detainee services are completed or at the end of the shift. A new record is created weekly for each detainee in the SMU. The SMU retains these records until the detainee leaves the SMU. 	Meets Standard	All detainee activity is logged into the facility computer system. Details regarding medical status, health care visits and all detainee-related services and activities are included. All items required by this component are documented electronically. New records are created weekly and retained until the detainee is released from SMU status.

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) – REVIEWER SUMMARY
(Use following format for dates: mm/dd/yyyy)

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) -- REVIEWER SUMMARY

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

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

One ICE detainee was placed in disciplinary segregation during the inspection period for spitting on another detainee. Per review of related documentation, the detainee received 60 days cell restriction, but was released from that restriction after 30 days. If ICE detainees are placed in disciplinary segregation, they remain in the ICE housing unit but are put on lock-down status in designated disciplinary cells. Telephone and visiting privileges are continued. To evaluate this standard, policy was reviewed, disciplinary records were examined, visiting records were examined and the sergeant responsible for detainee discipline was interviewed. Detainees are disciplined within the parameters of the standard.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

Reviewer Signature (for printed form submission)

(b)(6); (b)(7)(C)

TOOL CONTROL (Key: AH)		
POLICY: IT IS THE POLICY OF ALL FACILITIES THAT ALL EMPLOYEES SHALL BE RESPONSIBLE FOR COMPLYING WITH THE TOOL CONTROL POLICY. THE MAINTENANCE SUPERVISOR SHALL MAINTAIN A COMPUTER GENERATED OR TYPEWRITTEN MASTER INVENTORY LIST OF TOOLS AND EQUIPMENT AND THE LOCATION IN WHICH TOOLS ARE STORED. THESE INVENTORIES SHALL BE CURRENT, FILED AND READILY AVAILABLE FOR TOOL INVENTORY AND ACCOUNTABILITY DURING AN AUDIT.		
COMPONENTS	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	A lieutenant is responsible for tool control procedures.
2. Department heads are responsible for implementing this standard in their departments.	Meets Standard	Department heads are responsible for the implementation of the tool control standard in their respective areas.
3. Tool inventories are required for the: <ul style="list-style-type: none"> • Maintenance Department; • Medial Department; • Food Service Department; • Electronics Shop; • Recreation Department; and • Armory. 	Meets Standard	Tool inventories are required for the maintenance, medical and food service departments. There is no electronics shop or recreation department and the armory is outside the secure perimeter of the facility.
4. The facility has a policy for the regular inventory of all tools. <ul style="list-style-type: none"> • The policy sets minimum time lines for physical inventory and all necessary documentation. • ICE facilities use AMIS bar code labels when required. 	Meets Standard	
5. The facility has a tool classification system. Tools are classified according to: <ul style="list-style-type: none"> • Restricted (dangerous/hazardous); and • Non-Restricted (non-hazardous). 	Meets Standard	All tools in this facility 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 within their respective areas.
7. The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable.	Meets Standard	All tools within the facility are color-coded for easy recognition.

TOOL CONTROL (Key: AH)		
<p>POLICY: IT IS THE POLICY OF ALL FACILITIES THAT ALL EMPLOYEES SHALL BE RESPONSIBLE FOR COMPLYING WITH THE TOOL CONTROL POLICY. THE MAINTENANCE SUPERVISOR SHALL MAINTAIN A COMPUTER GENERATED OR TYPEWRITTEN MASTER INVENTORY LIST OF TOOLS AND EQUIPMENT AND THE LOCATION IN WHICH TOOLS ARE STORED. THESE INVENTORIES SHALL BE CURRENT, FILED AND READILY AVAILABLE FOR TOOL INVENTORY AND ACCOUNTABILITY DURING AN AUDIT.</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>8. The facility has an approved tool storage system.</p> <ul style="list-style-type: none"> The system ensures that all stored tools are accountable. Commonly used tools (tools that can be mounted) are stored in such a way that missing tool is readily notice. 	Meets Standard	Maintenance tools are secured behind a locked door in the maintenance department and are color-coded and shadow-boarded. Knives and restricted items in the kitchen are maintained in a secure cabinet; other utensils are shadow-boarded. All sharp instruments and dental tools in the medical area are secured and periodically checked by the tool control officer.
9. Each facility has procedures for the issuance of tools to staff and detainees.	Meets Standard	
<p>10. The facility has policies and procedures to address the issue of lost tools. The policy and procedures include:</p> <ul style="list-style-type: none"> Verbal and written notification; Procedures for detainee access; and Necessary documentation/review for all incidents of lost tools. 	Meets Standard	
11. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	Meets Standard	
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 contractors are required by policy to submit tool control inventories prior to entrance into the facility. Inventories are checked upon entry and exit.

TOOL CONTROL – REVIEWER SUMMARY	
<p><i>(Use following format for dates: mm/dd/yyyy)</i></p>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Tool control policy governs the distribution, storage and accountability of tools. The maintenance office maintains an inventory of tools and their storage locations. Those inventories were examined and found to be current. Maintenance employees and the lieutenant responsible for tool control were interviewed. Tools in the maintenance, food service and medical departments were examined and their inventories were checked. Tools at this facility are controlled and inventoried in a manner that assists in preserving the security and safety of the facility, employees and detainees.</p>	
<p>Overall Rating: Meets Standard</p>	
<p>Reviewer Name (Printed): (b)(6); (b)(7)(C)</p>	<p>Completion Date: 1/16/2014</p>
<p>Reviewer Signature (for printed form submission):</p>	<p>(b)(6); (b)(7)(C)</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.	N/A	
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.	N/A	
3. Supervisors maintain records for each vehicle operator.	N/A	
4. Officers use a checklist during every vehicle inspection. <ul style="list-style-type: none"> Officers report deficiencies affecting operability; and Deficiencies are corrected before the vehicle goes back into service. 	N/A	
5. Transporting officers: <ul style="list-style-type: none"> Limit driving time to 10 hours in any 15 hour period; Drive only after eight consecutive off-duty hours; Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours; Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days; During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a safe area—exceeding the 10-hour limit. 	N/A	
6. Two officers with valid CDLs required in any bus transporting detainees. <ul style="list-style-type: none"> When buses travel in tandem with detainees, there are two qualified officers per vehicle. An unaccompanied driver may transport an empty vehicle. 	N/A	
7. Before the start of each detail, the vehicle is thoroughly searched.	N/A	
8. Positive identification of all detainees being transported is confirmed.	N/A	
9. All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.	N/A	
10. The facility ensures that the number of detainees transported does not exceed the vehicles manufacturer's occupancy level.	N/A	

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)
11. Protective vests are provided to all transporting officers.	N/A	
12. The vehicle crew conducts a visual count once all passengers are on board and seated. <ul style="list-style-type: none"> Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop. 	N/A	
13. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	N/A	
14. Officers ensure that no one contacts the detainees. <ul style="list-style-type: none"> One officer remains in the vehicle at all times when detainees are present. 	N/A	
15. Meals are provided during long distance transfers. <ul style="list-style-type: none"> The meals meet the minimum dietary standards, as identified by dieticians utilized by ICE. 	N/A	
16. The vehicle crew inspects all Food Service pickups before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). <ul style="list-style-type: none"> Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative; Basins, latrines, and drinking-water containers/dispensers are cleaned and sanitized on a fixed schedule. 	N/A	
17. Vehicles have: <ul style="list-style-type: none"> Two-way radios; Cellular telephones; and Equipment boxes stocked in accordance with the Use of Force Standard. 	N/A	
18. The vehicles are clean and sanitary at all times.	N/A	
19. Personal property of a detainee transferring to another facility is: <ul style="list-style-type: none"> Inventoried; Inspected; and Accompanies the detainee. 	N/A	

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)
20. The following contingencies are included in the written procedures for vehicle crews: <ul style="list-style-type: none"> • Attack • Escape • Hostage-taking • Detainee sickness • Detainee death • Vehicle fire • Riot • Traffic accident • Mechanical problems • Natural disasters • Severe weather • Passenger list includes women or minors 	N/A	

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)

This facility does not transport ICE detainees.

Overall Rating: N/A

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

Reviewer Signature (for printed form submission): (b)(6); (b)(7)(C)

USE OF FORCE (Key: AJ)

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

COMPONENTS	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 authorizes staff to respond to 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	
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"> • Ranking detention official, health professional, and others confer before every calculated use of force. 	Meets Standard	Confrontation avoidance procedures are utilized pursuant to facility policy. Ranking detention officials, health professionals and others confer prior to every 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"> • Under staff supervision. 	Meets Standard	Policy dictates that when a detainee must be forcibly moved and/or restrained, and when there is time for a planned use of force, the use-of-force team technique should be used under supervision.
6. Staff members are trained in the performance of the Use-of-Force Team Technique.	Meets Standard	Training is provided monthly in performance of use-of-force team technique.
7. All use-of-force incidents are documented and reviewed.	Meets Standard	
8. Staff: <ul style="list-style-type: none"> • Do not use force as punishment; • Attempt to gain the detainee's voluntary cooperation before resorting to force; • Use only as much force as necessary to control the detainee; and • Use restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical. 	Meets Standard	Policy specifies that force is never to be utilized as punishment and that voluntary cooperation is to be gained if possible before resorting to force. Restraints are only to be used when other non-confrontational means of control have failed.
9. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	Meets Standard	

USE OF FORCE (Key: AJ)

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
10. Use-of-Force Team follows written procedures that attempt to prevent injury and exposure to communicable disease(s).	Meets Standard	
11. Standard procedures associated with using four-point restraints include: <ul style="list-style-type: none"> • Soft restraints (e.g., vinyl); • Dressing the detainee appropriately for the temperature; • A bed, mattress, and blanket/sheet; • Checking the detainee at least every 15 minutes; • Logging each check; • Turning the bed-restrained detainee often enough to prevent soreness or stiffness; • Medical evaluation of the restrained detainee twice per eight hour shift; and • When qualified medical staff is not immediately available, staff position the detainee "face-up". 	Meets Standard	This facility uses a restraint chair. Procedures followed include all applicable elements of this component.
12. The shift supervisor monitors the detainee's position/condition every two hours. <ul style="list-style-type: none"> • He/she allows the detainee to use the rest room at these times under safeguards. 	Meets Standard	Policy requires regular checks by medical personnel, officers and supervisors. Detainees may use the restroom during these checks.
13. All detainee checks are logged.	Meets Standard	All detainee checks by medical personnel, officers and supervisors are logged as required by policy.
14. In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	Meets Standard	Policy dictates that medical personnel must be contacted once a detainee is under control.
15. When the OIC authorizes use of non-lethal weapons: <ul style="list-style-type: none"> • Medical staff is consulted before staff use pepper spray/non-lethal weapons. • Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized. 	Meets Standard	Policy specifies that whenever possible, medical staff is to be consulted prior to the use of force on any detainee. Detainee medical files are to be reviewed by medical staff.
16. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> • Medical personnel are consulted 	Meets Standard	
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	

USE OF FORCE (Key: AJ)

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

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
19. It is standard practice to review any use of force and the non-routine application of restraints.	Meets Standard	
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"> Specialized training is given and Officers are certified in all devices they use. 	Meets Standard	All officers receive training in self-defense, confrontation-avoidance techniques and use of force. All special response team members receive training monthly. All officers are certified in any specialized devices they use.
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 Use of Force Incident Report to document uses of force.

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)*

This standard was evaluated by interviewing a lieutenant and the training officer. Chemical agents, Tasers and canines are available, but policy prohibits their use on ICE detainees. There were no use-of-force incidents to review as there were no reported uses of force involving ICE detainees during the inspection period. Log sheets for the restraint chair and reporting forms were examined. Policy is consistent with the appropriate use of force, should it become necessary.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

Reviewer Signature (for printed form submission): (b)(6); (b)(7)(C)

STAFF DETAINEE COMMUNICATIONS (Key: AK)

POLICY: PROCEDURES MUST BE IN PLACE TO ALLOW FOR FORMAL AND INFORMAL CONTACT BETWEEN KEY FACILITY STAFF AND ICE STAFF AND ICE DETAINEE AND TO PERMIT DETAINEES TO MAKE WRITTEN REQUESTS TO ICE STAFF AND RECEIVE AN ANSWER IN AN ACCEPTABLE TIME FRAME.

COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The ICE Field Office Director ensures that weekly announced and unannounced visits occur at the IGSA.	Meets Standard	ICE officers make weekly announced and unannounced visits to the detainee housing units.
2. Detention and Deportation Staff conduct scheduled weekly visits with detainees held in the IGSA.	Meets Standard	
3. Scheduled visits are posted in ICE detainee areas.	Meets Standard	ICE visitation schedules are posted in multiple locations in the housing units.
4. Visiting staff observe and note current climate and conditions of confinement at each IGSA.	Meets Standard	ICE visitation checklists note climate and conditions of confinement in the detainee housing units.
5. ICE information request Forms are available at the IGSA for use by ICE detainees.	Meets Standard	Detainee request forms are available from the housing unit officer upon request.
6. The IGSA treats detainee correspondence to ICE staff as Special Correspondence.	Meets Standard	
7. ICE staff responds to a detainee request from an IGSA within 72 hours.	Meets Standard	
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 local handbook and the National Detainee Handbook both advise detainees that they have the right to correspond directly with ICE.

STAFF DETAINEE COMMUNICATIONS – REVIEWER SUMMARY

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

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

There is a full-time ICE officer assigned to this facility and other ICE officers make weekly visits. Written requests are generally responded to within 72 hours. To evaluate this standard, ICE facility liaison visit checklists were reviewed, housing units were toured, detainee request forms were examined, ICE employees and detainees were interviewed and the detainee handbook was reviewed.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

Reviewer Signature (for printed form submission): (b)(6); (b)(7)(C) ✓

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"> • The notification is recorded in the detainee's file; and • When the A File is not available, notification is noted within DACS 	Meets Standard	
2. Notification includes the reason for the transfer and the location of the new facility.	Meets Standard	
3. The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	Meets Standard	Deportation officers are not restricted in terms of their judgment regarding the timing of transfer notifications.
4. The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	Meets Standard	
5. Facility policy mandates that: <ul style="list-style-type: none"> • Times and transfer plans are never discussed with the detainee prior to transfer; • The detainee is not notified of the transfer until immediately prior to departing the facility; and • The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 	Meets Standard	Policy states that detainees must not be permitted telephone calls or contact with others while being readied for transport. Facility employees have no knowledge of the times of transfer or other transfer plans, negating their ability to discuss them with detainees. Transfer notifications are made by ICE officers immediately prior to transfer, and not by facility staff. These conditions render a facility policy addressing the corresponding requirements of this component as non-applicable.
6. The detainee is provided with a completed Detainee Transfer Notification Form.	Meets Standard	ICE provides the detainee with the written transfer notification form upon arrival at the ICE sub-office or destination facility.
7. Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	Meets Standard	G-391 forms are used by ICE for the removal of detainees from this IGSA facility.

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)
8. For medical transfers: <ul style="list-style-type: none"> The Detainee Immigration Health Service (or IGSA) (DIHS) Medical Director or designee approves the transfer; Medical transfers are coordinated through the local ICE office; and A medical transfer summary is completed and accompanies the detainee. 	Meets Standard	Medical transfers are approved by the assigned IHSC officer. A medical summary document is prepared by facility medical personnel. The document accompanies the detainee.
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	IHSC employees are not stationed at this facility.
10. For medical transfers, transporting officers receive instructions regarding medical issues.	Meets Standard	Transporting ICE officers receive medical information when pertinent to a detainee in transport with a medical need.
11. Detainee's funds, valuables, and property are returned and transferred with the detainee to his/her new location.	Meets Standard	
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	Transport meals are always provided, regardless of the distance of the transfer.
14. An A File or work folder accompanies the detainee when transferred to a different field office or sub-office.	Meets Standard	
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)*

Detainees are provided with ICE notification forms as required. Transfer times are adjusted when necessary to accommodate immigration court hearings. This standard was evaluated via a review of policy, interviews with ICE and facility employees and examination of transfer notification forms.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/16/2014

Reviewer Signature (for printed form submission) (b)(6); (b)(7)(C)

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:	Run Check	Error(s) Found:	0	Items Not Rated:	0
Errors:					
No Errors Found					
Items Not Rated:					
All Items Rated					

Run Indicator:

Condition of Confinement Review Worksheet

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

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



ICE Detention Standards Review Worksheet

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

Facility Information			
Facility Name: Butler County Jail		Review Purpose: Annual	
Facility Type: IGSA Intergovernmental Service Agreement (IGSA), ICE Service Processing Center (SPC), ICE Contract Detention Facility (CDF)			
Address:	705 Hanover Street		
City: Hamilton	State: OH	Zip Code: 45011	
County:	Butler		
CEO Name:	(b)(6); (b)(7)(C)	CEO Title: Warden	
Review Information (Use following format for dates: mm/dd/yyyy)			
Start Date: 01/13/2015	End Date: 1/15/2015	Review Type: Headquarters	
Lead Name:	(b)(6); (b)(7)(C)	Lead Title: LCI	
Review Document Issue Summary (See Document Check Section to Review/Update)			
Error(s) Found:	0	Items Not Rated:	0

ICE HQ USE ONLY: (DO NOT EDIT*)

Form Name: G324A_NDS	Form Key: 10	Form Date: 9/20/2013
Form Type: NDS	Form Review Type: Annual	Form Over/Under 72 Status: 072

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

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

G-324A (NDS) With SA-API (Coded 09202013) Detention Inspection Form Worksheet for IGSA's - Rev: 09/20/2013 - Form Key 10

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DOCUMENT CHECK

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO LEGAL MATERIALS (Key: A)		
POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility provides a designated law library for detainee use.	Meets Standard	The law library operates on a two cart mobile system and the LexisNexis program is also portable on carts with printers.
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	
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. It is quiet, well lit, and has sufficient chairs and workspace for demand.
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 use for legal issues. The computers have the LexisNexis program installed and supplies are available from any staff member 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 LexisNexis software is current, dated November 2014.
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	The facility ICE Liaison Officer and the DOs inspect, update, and maintain/replace legal material and equipment as needed.
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	
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	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO LEGAL MATERIALS (Key: A)		
POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
11. Detainees are permitted to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	Meets Standard	
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 expediter/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 LexisNexis portable computer units are carried to detainees in administrative detention and/or disciplinary segregation status upon request.
15. All denials of access to the law library fully documented.	Meets Standard	The facility indicated that no detainee has been denied library access. The denial would be documented.
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	

ACCESS TO LEGAL MATERIALS – REVIEWER SUMMARY		
<i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Detainees have access to a law library, legal materials, printing and copying services, and the supplies necessary to research and prepare their legal cases. To evaluate this standard, post orders and the local handbook were reviewed, the LexisNexis program on the computer was manipulated, and detainees and employees were interviewed.		
Overall Rating: Meets Standard		
Reviewer Name (Printed):	(b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ADMISSION AND RELEASE (Key: B)		
POLICY: ALL DETAINEES WILL BE ADMITTED AND RELEASED IN A MANNER THAT ENSURES THEIR HEALTH, SAFETY, AND WELFARE. THE ADMISSIONS PROCEDURE WILL, AMONG OTHER THINGS INCLUDE: MEDICAL SCREENING; A FILE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WILL BE INVENTORIED, DOCUMENTED, AND SAFEGUARDED AS NECESSARY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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 occurs during intake and continues in the housing unit. The topics include the items listed in this component. Orientation consists of the issuance of the local handbook and the National Detainee Handbook. The orientation video is on a loop and is shown on the televisions that are located in each of the detainee's rooms inside the housing unit.
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	Intake medical screenings are conducted by trained correctional officers. They complete a medical questionnaire for each detainee immediately upon arrival while the detainees are in the intake area.
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	
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.
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	
6. The "Contraband" standard governs all personal property searches. IGSA's/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 IGSA's for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	Meets Standard	The IGSA facility uses their own forms to report lost or missing property claims.
8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	Meets Standard	

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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	
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 forms.
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>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> During the evaluation of this standard, post orders and forms were reviewed, detention files were inspected, the booking area was toured, and employees were interviewed. Detainees are admitted and released in accordance with the standard.		
Overall Rating: Meets Standard		
Reviewer Name (Printed): (b)(6); (b)(7)(C)		Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

CLASSIFICATION SYSTEM (Key: C)		
POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES		
COMPONENTS	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	Upon admission, detainees are classified and assigned a local classification designation with an objective classification system using all available information.
2. The facility classification system includes: <ul style="list-style-type: none"> • Classifying detainees upon arrival; • Separating from the general population those individuals who cannot be classified upon arrival; and • The first-line supervisor or designated classification specialist reviewing every classification decision. 	Meets Standard	Detainees are classified upon arrival and are separated from general population until such time as they are classified. The booking sergeant reviews all classification assignments.
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	
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	All detainees are afforded the same recreation opportunities and are allowed recreation with detainees of similar classification designations.
7. Detainee work assignments are based upon classification designations.	N/A	ICE detainees are not allowed to work at this facility.
8. The classification process includes reassessment/reclassification. At IGSA's, detainees may request reassessment 60 days after arrival.	Meets Standard	The classification process at this IGSA includes reassessments every 30 days. A detainee may request a review of his/her classification level at any time.
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 allow for a detainee to appeal his/her classification to the deputy warden or the warden, who have the authority to reduce classification levels.
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 warden or his designee.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

CLASSIFICATION SYSTEM (Key: C)		
POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
12. The Detainee Handbook or equivalent for IGSA's explains the classification levels, with the conditions and restrictions applicable to each.	Meets Standard	

CLASSIFICATION SYSTEM – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Evaluation of this standard included reviewing post orders and the local handbook, examining classification documents, touring the housing and booking areas, and interviewing employees and detainees.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

CORRESPONDENCE AND OTHER MAIL (Key: D)		
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	Correspondence and other 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	
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	
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 presence of the detainee. The facility continues to open and inspect 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	
8. Staff is prohibited from reading or copying incoming special correspondence.	Meets Standard	
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	The facility does not inspect outgoing correspondence without cause, as stipulated by this component.
10. Correspondence to a politician or to the media is processed as special correspondence and is not read or copied.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

CORRESPONDENCE AND OTHER MAIL (Key: D)		
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
11. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	N/A	Mail is not rejected at this facility. The censorship or rejected materials received are stored in the detainee property and are given to the detainee when they are released.
12. The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	Meets Standard	Procedures require that the detainee receive written notification of any rejection of outgoing mail.
13. Staff maintains a written record of every item removed from detainee mail.	Meets Standard	
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	A receipt is issued to the detainee indicating the amount of cash received and deposited to his/her account.
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	Identity documents can only be given to detainees when approved by ICE.
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	Illegal contraband is turned over to the investigative branch of the sheriff's office for 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 given three stamped envelopes or stamps per week.
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	
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>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

CORRESPONDENCE AND OTHER MAIL – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> During the evaluation of this standard, staff and detainees were interviewed; the detainee handbook and post orders were reviewed; and the housing units, records and booking areas were toured.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETAINEE HANDBOOK (Key: E)		
<p>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.</p>		
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 receive a facility handbook and the National Detainee Handbook during the intake procedures; both are written in English and Spanish, the two most prevalent languages at the facility.
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	Employees are provided a handbook and content training during initial training.
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 handbook is reviewed and revised annually as necessary. The handbook was revised 08/20/2014. Revisions to the handbook are posted in each of the housing units and provided to staff via memorandum.
5. There an annual review of the handbook by a designated committee or staff member.	Meets Standard	
6. The detainee handbook addresses the following issues: <ul style="list-style-type: none"> • Personal Items permitted to be retained by the detainee; and • Initial issue of clothes, bedding and personal hygiene items. 	Meets Standard	The handbook addresses personal items permitted to be retained by the detainee and the initial issuance of clothes, bedding and personal hygiene items.
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 a medical examination will be given within 14 days of arrival at the facility.
10. The handbook describes the facility, housing units, dayrooms, in-dorm activities, and special housing units.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
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	This component was rated deficient during the last inspection because the handbook did not identify specific times for counts. The facility received a waiver from ICE/ Detention Management Division on 03/25/2014. The facility does not have to state the specific times for counts for security purposes.
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 are allowed to shave prior to appearing in court.
13. The handbook describes barber hours and hair cutting restrictions.	Meets Standard	
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	All elements of this component are outlined in the handbook.
15. The handbook addresses religious programming.	Meets Standard	
16. The handbook states times and procedures for commissary or vending machine usage, where available.	Meets Standard	The handbook outlines the times and procedures for commissary. Detainees do not have access to vending machines at the facility.
17. The handbook describes the detainee voluntary work program.	Meets Standard	The handbook addresses the voluntary work program. ICE detainees are not allowed to work at this facility.
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	
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	Visiting schedules and rules are included in the handbook and are posted in the housing units.
22. The handbook describes the correspondence policy and procedures.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
23. The handbook describes the detainee disciplinary policy and procedures, including: <ul style="list-style-type: none"> • Prohibited acts and severity scale sanctions; • Time limits in the Disciplinary Process; and • Summary of the Disciplinary Process. 	Meets Standard	Each of the listed requirements in this component is addressed in the handbook.
24. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> • Informal (if used) and formal grievance procedures; • The appeals process; • In CDF facilities: procedures for filing an appeal of a grievance with ICE. • Staff/detainee availability to help during the grievance process. • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Homeland Security. 	Meets Standard	Each of the listed requirements in this component is addressed in the 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"> • Outdoor recreation hours. • Indoor recreation hours. 	Meets Standard	The handbook describes the recreation policy and the scheduled hours for indoor/outdoor recreation.
27. The handbook describes the detainee dress code for daily living; and work assignments.	Meets Standard	
28. The handbook specifies the rights and responsibilities of all detainees.	Meets Standard	The handbook outlines the rights and responsibilities of detainees.

DETAINEE HANDBOOK – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> All detainees are given an ICE National Detainee Handbook and a facility handbook upon admission. Each detainee is required to sign for the handbooks. The handbook is written in both English and Spanish and contains essential information relating to the aspects of the detainee's responsibilities, rights and privileges while housed at the facility. The evaluation was based on review of the detainee handbook, policies and procedures, observation and staff and detainee interviews.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

FOOD SERVICE (Key: F)		
POLICY: 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 facility's food services are provided and contracted through the Aramark company. The food service director (FSD) is ServSafe-certified. The responsibilities of the FSD and food service workers are in writing.
2. The Cook Supervisor is on duty on days when the FSA is off duty and vice versa.	Meets Standard	A cook supervisor is on duty on days when the FSD is off-duty and vice versa.
3. The FSA provides food service employees with training that specifically addresses detainee-related issues. <ul style="list-style-type: none"> • In ICE Facilities this includes a review of the ICE "Food Service" standard 	Meets Standard	The FSD provides training to all food service employees. The training also includes a review of the food service standard. The training is documented.
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	
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	Food service employees monitor the conditions and use of knives and dining utensils. All knives, when in use, are secured to work stations using a cable and padlock. There is no secure cutting room in the food service department.
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	
8. The FSA monitors staff implementation of the facility's population counts procedures. Staff is trained in count procedures.	Meets Standard	
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 detainee workers were observed to be neat and clean. Their clothing and grooming complies with the food service standard. ICE detainees do not work at this facility.
10. The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	Meets Standard	

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FOOD SERVICE (Key: F)		
POLICY: 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)
11. The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	Meets Standard	ICE detainees do not work at the facility. Training provided to newly assigned non-ICE detainee workers includes the rules and procedures for the food service department.
12. During orientation and training session(s), the CS explains and demonstrates: <ul style="list-style-type: none"> • Safe work practices and methods; • Safety features of individual products/pieces of equipment; and • Training covers the safe handling of hazardous material[s] the detainees are likely to encounter in their work. 	Meets Standard	ICE detainees do not work at the facility. Non-ICE detainee workers receive training from the FSD for each of the listed requirements in this component.
13. The Cook Supervisor documents all training in individual detainee detention files.	Meets Standard	ICE detainees do not work at the facility. The FSD documents and maintains all training for non-ICE detainee workers in individual files, in the food service office.
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	This is an IGSA facility. Non-ICE detainee workers are compensated according to local rules. ICE detainees do not work in the food service department.
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	At least two hot meals are served daily. The facility meals are served at 5:30 a.m., 11:00 a.m. and 5:00 p.m.
16. For cafeteria style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	N/A	There is no cafeteria-style feeding operation for detainees at this facility.
17. The facility has a standard 35-day menu cycle. IGSA's use a 35 day or similar system for rotating meals.	Meets Standard	A 28-day menu cycle is used at this facility.
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 facility. Examples include chili, tacos, Asian chicken, meatloaf, and spaghetti and meatballs.
19. A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	Meets Standard	
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	Aramark recipes are available for the preparation of prepared food items that are served on the menu.

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FOOD SERVICE (Key: F)		
POLICY: 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)
21. The Cook Foreman has the authority to change menu items if necessary. <ul style="list-style-type: none"> • If yes, documenting each substitution, along with its justification • With copy to FSA 	Meets Standard	The cook supervisors have the authority to change menu items when necessary. All menu changes are documented and justified, and notification forwarded to the FSD is required.
22. All staff and volunteers know and adhere to written "food preparation" procedures.	Meets Standard	
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	Meets Standard	
24. A common-fare menu available to detainees whose dietary requirements cannot be met on the main line. <ul style="list-style-type: none"> • Changes to the planned common-fare menu can be made at the facility level; • Hot entrees are offered three times a week; • The common-fare menus satisfy nutritional recommended daily allowances (RDAs); • Staff routinely provide hot water for instant beverages and foods; • Common-fare meals are served with: • Disposable plates and utensils. • Reusable plates and utensils. • Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items. 	Meets Standard	A common fare menu is available to detainees whose dietary requirements cannot be met on the main line. Each of the listed requirements in this component is addressed in the program.
25. A supervisor at the command level must approve a detainee's removal from the Common-Fare Program.	Meets Standard	The FSD, in conjunction with a shift sergeant, can remove a detainee from the common fare program.
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"> • Muslims fasting during Ramadan receive their meals after sundown. • Jews who observe Passover but do not participate in the Common-Fare Program receive the same Kosher-for- Passover meals as those who do participate. • Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. 	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.
28. The food service program addresses medical diets.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

FOOD SERVICE (Key: F)		
POLICY: 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)
29. Satellite-feeding programs follow guidelines for proper sanitation.	Meets Standard	
30. Hot and cold foods are maintained at the prescribed, "safe" temperature(s) while being served.	Meets Standard	The temperatures of food items served at the lunch meals during this inspection were observed to be within the prescribed safe temperature ranges.
31. All meals are provided in nutritionally adequate portions.	Meets Standard	
32. Food is not used to punish or reward detainees based upon behavior.	Meets Standard	The facility has a disciplinary meal: the "warden's burger." The warden's burger will not be served to ICE detainees, per post orders.
33. The food service staff instructs detainee volunteers on: <ul style="list-style-type: none"> • Personal cleanliness and hygiene; • Sanitary techniques for preparing, storing, and serving food; and • The sanitary operation, care, and maintenance of equipment. 	Meets Standard	The food service orientation program instructs the non-ICE detainee workers on all of the listed requirements in this component. ICE detainees do not work at the facility.
34. Everyone working in the food service department complies with food safety and sanitation requirements.	Meets Standard	
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"> • Who conducts the inspections? 	Meets Standard	The FSD conducts and documents daily inspections of all areas of the food service department.
36. Equipment is inspected for compliance with health and safety codes and regulations. <ul style="list-style-type: none"> • When was the most recent inspection? • Which agency conducted the inspection? 	Meets Standard	The equipment and health and safety codes and regulations for the food service department are routinely inspected by the Ohio Department of Health and Agriculture. The last inspection was on 10/30/2014.
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	Dish machine temperatures are checked and documented after each meal.
39. Staff documents the results of every refrigerator/freezer temperature check.	Meets Standard	Cooler and freezer temperatures are checked and documented at the beginning and the end of each day. Food service employees document the temperature checks in the Aramark log books.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

FOOD SERVICE (Key: F)		
POLICY: 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)
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	The FSD inspects all incoming food shipments for damage, contamination and pest infestation. Damaged, contaminated or infested food items are not accepted.
42. Storage areas are locked when not in use.	Meets Standard	

FOOD SERVICE – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> The food service department provides detainees with nutritious and appetizing menu meals that are certified by a registered dietitian. Medical and special diets are made available to detainees through coordination with the medical department and religious program services. Department employees are knowledgeable in food safety and the ICE food standards, and sanitation levels throughout the kitchen were average during the inspection. The evaluation was based on a review of policies and procedures, observation and staff and detainee interviews.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
1. Detainee funds and valuables are properly separated, stored, and are accessible only by designated supervisor(s).	Meets Standard	All detainee valuables are separated, inventoried and stored in a locked room in the intake area. Only designated employees have access to this 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	
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 baggage and non-valuable property 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 are present during the processing of funds and valuables. Both officers are required to verify funds and valuables.
7. Staff searches arriving detainees and their personal property for contraband.	Meets Standard	Post orders state that staff searches all arriving detainees and their personal property 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	Post orders state that all property discrepancies will be reported to the shift supervisor.
10. Staff follows written procedures when returning property to detainees.	Meets Standard	
11. CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

FUNDS AND PERSONAL PROPERTY (Key: G)		
<p>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.</p>		
<div style="border: 1px solid black; padding: 2px; display: inline-block;">Standard N/A</div>		
<p>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")</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
12. The facility attempts to notify an out-processed detainee that he/she left property in the facility: <ul style="list-style-type: none"> • By sending written notice to the detainee's last known address; • Via certified mail; and • The notice state that the detainee has 30 days in which to claim the property, after which it will be considered abandoned. 	Meets Standard	Post orders state that forgotten property will be forwarded to ICE. ICE will be responsible for attempting to notify the detainee by following the bulleted items listed in this component.
13. The facility disposes of abandoned property in accordance with written procedures. <ul style="list-style-type: none"> • If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE. 	Meets Standard	Post orders state that all abandoned property will be forwarded immediately to ICE.

FUNDS AND PERSONAL PROPERTY – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>The facility's post orders and procedures ensure the secure and safe storage of detainee property. Detainees are pat searched and their property is searched and inventoried during the admission process to ensure contraband is not introduced into the facility. Quarterly audits of personal property are conducted and documented. The evaluation of the standard was based on a review of policies and procedures and staff and detainee interviews.</p>	
<p>Overall Rating: Meets Standard</p>	
<p>Reviewer Name (Printed): (b)(6); (b)(7)(C)</p>	<p>Completion Date: 1/15/2015</p>
<p>Reviewer Signature (for printed form submission):</p>	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETAINEE GRIEVANCE PROCEDURES (Key: H)		
<p>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.</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>1. Written procedures provide for the informal resolution of oral grievances (Not mandatory).</p> <ul style="list-style-type: none"> • If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff. 	Meets Standard	<p>The handbook and written procedures provide for an informal grievance process. Detainees have no time limit after the event to make their concern known to employees.</p>
<p>2. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures.</p> <ul style="list-style-type: none"> • Detainees may seek help from other detainees or facility staff when preparing a grievance. • Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary. 	Meets Standard	<p>Detainees have access to a grievance coordinator and may receive assistance from other detainees or employees when preparing a grievance. A translation service is available to assist non-English speaking detainees. Special assistance is available for those detainees needing additional help due to a disability.</p>
<p>3. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.</p>	Meets Standard	<p>All staff members receive training regarding emergency grievances procedures during initial and refresher training.</p>
<p>4. There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodged a complaint:</p> <ul style="list-style-type: none"> • If yes, explain. 	Meets Standard	<p>There were no substantiated or documented cases of staff harassing detainees who have filed a complaint.</p>
<p>5. Procedures include maintaining a Detainee Grievance Log.</p> <ul style="list-style-type: none"> • If not, an alternative acceptable record keeping system is maintained. • "Nuisance complaints" are identified in the records. • For quality control purposes, staff document nuisance complaints received but not filed. 	Meets Standard	<p>An electronic log is maintained on all ICE detainee grievances. The facility processes and files all grievances and does not consider any grievance to be a nuisance.</p>
<p>6. Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.</p>	Meets Standard	

<p>DETAINEE GRIEVANCE PROCEDURES – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i></p>

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETAINEE GRIEVANCE PROCEDURES – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Post orders and procedures are in place that protect detainee rights and ensure detainees are treated fairly by providing an avenue to file formal grievances and appeals and to receive timely responses. The evaluation of this standard was based on interviews with the grievance coordinator; and a review of post orders, procedures and the grievance log. During the past 12 months, there were two ICE detainee grievances filed at the facility; neither grievance was found in favor of the detainee.</p>	
<p>Overall Rating: Meets Standard</p>	
<p>Reviewer Name (Printed) (b)(6); (b)(7)(C)</p>	<p>Completion Date: 01/15/2015</p>
<p>Reviewer Signature (for printed form submission):</p>	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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.	N/A	
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.	N/A	
3. The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.	N/A	
4. Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	N/A	
5. Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.	N/A	
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.	N/A	
7. Detainees in segregation, unable to attend for security reasons, may request separate sessions with presenters. Such requests are documented.	N/A	
8. Interpreters are admitted when necessary to assist attorneys and other legal representatives.	N/A	
9. Presenters are afforded a minimum of one hour to make the presentation and to conduct a question-and-answer session.	N/A	
10. Staff permits presenters to distribute ICE-approved materials.	N/A	
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.	N/A	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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.	N/A	
13. The facility plays ICE-approved videotaped presentations on legal rights at regular opportunities, at the request of outside organizations.	N/A	
14. A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request	N/A	

GROUP LEGAL RIGHTS PRESENTATIONS – REVIEWER SUMMARY

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

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

There were no group legal rights presentations in the last year.

Overall Rating: N/A

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/15/2015

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

Issuance and Exchange of Clothing, Bedding, and Towels (Key: J)		
POLICY: ICE REQUIRES THAT ALL FACILITIES HOUSING ICE DETAINEES PROVIDE CLEAN CLOTHING, BEDDING, LINENS AND TOWELS TO EVERY ICE DETAINEE UPON ARRIVAL. FURTHER, FACILITIES SHALL PROVIDE ICE DETAINEES WITH REGULAR EXCHANGES OF CLOTHING, LINENS, AND TOWELS FOR AS LONG AS THEY REMAIN IN DETENTION.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>1. The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, and towels.</p> <ul style="list-style-type: none"> • The supply of these items exceeds the minimum required for the number of detainees. 	Meets Standard	The facility uses post orders to outline policy and procedures. The post orders outline the procedures for the issuance and exchange of clothing, bedding, linens and towels. Observation of the supply of these items revealed that on-hand quantities exceed the minimum required for the number of detainees housed at the facility.
<p>2. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive:</p> <ul style="list-style-type: none"> • One uniform shirt and one pair of uniform pants, or one jumpsuit; • One pair of socks; • One pair of underwear (Daily change); and • One pair of facility-issued footwear. 	Meets Standard	During the intake procedure all new detainees receive the standard issue of clothing consisting of two jumpsuits, two pairs of underwear, one pair of socks and one pair of facility-issued footwear. Detainees are issued clean, temperature-appropriate presentable clothing consistent with the requirements of this standard.
<p>3. Additional clothing is available for changing weather conditions, or as seasonally appropriate.</p>	Meets Standard	
<p>4. New detainees are issued clean bedding, linens, and towels. They receive at a minimum:</p> <ul style="list-style-type: none"> • One mattress; • One blanket; • Two sheets; • One pillowcase; • One towel; and • Additional blankets are issued based on local weather conditions. 	Meets Standard	All new detainees receive the items and quantities listed in this component, except for pillowcases. Pillowcases are not issued, as the mattresses include built-in pillows. Additional blankets are available based on local weather conditions.
<p>5. Detainees assigned to special work areas are clothed in accordance with the requirements of the job.</p>	Meets Standard	Non-ICE detainees assigned to special work assignments are issued the required clothing items. ICE detainees do not work at this facility.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

Issuance and Exchange of Clothing, Bedding, and Towels (Key: J)		
POLICY: ICE REQUIRES THAT ALL FACILITIES HOUSING ICE DETAINEES PROVIDE CLEAN CLOTHING, BEDDING, LINENS AND TOWELS TO EVERY ICE DETAINEE UPON ARRIVAL. FURTHER, FACILITIES SHALL PROVIDE ICE DETAINEES WITH REGULAR EXCHANGES OF CLOTHING, LINENS, AND TOWELS FOR AS LONG AS THEY REMAIN IN DETENTION.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
6. Detainees are provided clean clothing, linen and towels. <ul style="list-style-type: none"> • Socks and undergarments - exchanged daily. • Outer garments - twice weekly. • Sheets - weekly. • Towels - weekly. • Pillowcases - weekly. 	Meets Standard	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. Pillowcases are not issued, as mattresses have built-in pillows.
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 outer garments daily. ICE detainees do not work at the facility.
8. Volunteer detainee workers are permitted to exchange outer garments more frequently.	Meets Standard	Non-ICE detainee workers are permitted to exchange outer garments more frequently or as needed. ICE detainees do not work at the facility.

Issuance and Exchange of Clothing, Bedding, and Towels – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> A review of post orders and interviews with employees verified that detainees receive the appropriate quality and quantity of clothing, bedding, linen, and towels.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

Marriage Requests (Key: K)		
POLICY: 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	All ICE detainee marriage requests are forwarded to the local ICE field office for consideration/review 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	
3. It is standard practice to require a written request for permission to marry.	Meets Standard	
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	The warden will generate 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	Post orders require that when permission is denied, the detainee is provided the basis for the decision.
7. The Warden/OIC provides the detainee with a place and time to make wedding arrangements.	Meets Standard	The facility will provide detainees with space and time for marriage ceremonies.

Marriage Requests – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> The facility has written procedures outlining the marriage request process. Detainees are required to submit written marriage requests to the ICE field office. All marriage requests receive case-by-case consideration by the ICE field office. The evaluation was based on a review of policy and procedures and ICE/facility staff member interviews.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) <input type="text" value="(b)(6); (b)(7)(C)"/>	Completion Date: 01/15/2015
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

NON-MEDICAL EMERGENCY ESCORTED TRIPS (Key: L)		
<p>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.</p>		
<div style="border: 1px solid black; padding: 2px; display: inline-block;">Standard N/A</div> <p>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”)</p>		
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"> • Funeral; or • Deathbed 	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"> • Conduct themselves in a manner that does not bring discredit to the ICE; • Do not violate federal, state, or local laws; • Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants; • Make no unauthorized phone calls; and • Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return. 	N/A	
10. Standard procedure requires the immediate return to the facility of any detainee who violates trip rules.	N/A	

<p>NON-MEDICAL EMERGENCY ESCORTED TRIPS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i></p>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

NON-MEDICAL EMERGENCY ESCORTED TRIPS – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> ICE staff is responsible for all non- medical escorted trips.	
Overall Rating: N/A	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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	
2. A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.	Meets Standard	The ICE detainee population during the inspection was 48. The facility is not required to have a recreation specialist. Correctional officers supervise all 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	Correctional officers oversee all recreation activities. ICE detainees are not allowed to work at the facility.
5. The recreational specialist or trainee equivalent oversees recreation programs for special housing units (SHU) and special-needs detainees.	Meets Standard	Trained correctional officers oversee the recreation program for detainees placed in administrative detention and disciplinary segregation status as well as special-needs detainees.
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	Meets Standard	Dayroom activities consist of board games, dominoes, cards, checkers and television.
7. Outside activities are restricted to limited-contact sports.	Meets Standard	
8. Each detainee has the opportunity to participate in daily recreation.	Meets Standard	
9. Detainees have access to recreation activities outside the housing units for at least one hour daily, 5 days a week.	Meets Standard	The outdoor recreation area is attached to each housing unit's dayroom. Detainees are allowed access to outdoor recreation 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	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
14. The facility provides detainees in the SHU at least one hour of outdoor recreation time daily, five times per week.	Meets Standard	Detainees housed in administrative detention and/or disciplinary segregation are allowed access to outdoor recreation for at least one hour a day, five days a week. There were no ICE detainees in either status during the inspection.
15. Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his/her recreation privileges.	Meets Standard	
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 submit to a background check prior to coming into contact with detainees
18. Visitors, relatives or friends are not allowed to serve as volunteers.	Meets Standard	Visitors, relatives or friends of detainees are not allowed to serve as volunteers.
19. If the facility has no outside recreation, are detainees considered for transfer after six months? <ul style="list-style-type: none"> • If yes, written procedures ensure timely review of all eligible detainees. 	N/A	Facility has indoor and outdoor recreation.
20. Case officers make written transfer recommendations about every six-month detainee to the OIC.	N/A	Facility has indoor and outdoor recreation.
21. The OIC documents all detainee-transfer decisions, whether yes or no.	N/A	Facility has indoor and outdoor recreation.
22. The detainee's written decision for or against an offered transfer documented in his/her A-file.	N/A	Facility has indoor and outdoor recreation.
23. Staff notifies the detainee's legal representative of his/her decision to accept/decline a transfer.	N/A	Facility has indoor and outdoor recreation.
24. If no recreation is available, the ICE Districts routinely review transfer eligibility for all detainees after 60 days.	N/A	Facility has indoor and outdoor recreation.
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	Facility has indoor and outdoor recreation.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

RECREATION (Key: M)		
<p>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.</p>		
<div style="border: 1px solid black; padding: 2px; display: inline-block; margin: 5px auto; width: 100px;">Standard N/A</div>		
<p>Click the above button if outdoor recreation is offered. Items 19-26 will be marked "N/A".</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
26. The detainee's legal representative is notified of the detainee's/OIC's decision.	N/A	Facility has indoor and outdoor recreation.

RECREATION – REVIEWER SUMMARY	
<p><i>(Use following format for dates: mm/dd/yyyy)</i></p>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Detainees have access to recreational and exercise programs and activities (indoor and outdoor) within the constraints of safety and security. The evaluation of the standard was based on reviewing post orders, interviewing detainees and employees, and observing and inspecting the recreational areas at the facility.</p>	
<p>Overall Rating: Meets Standard</p>	
<p>Reviewer Name (Printed) (b)(6); (b)(7)(C)</p>	<p>Completion Date: 1/15/2015</p>
<p>Reviewer Signature (for printed form submission):</p>	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

RELIGIOUS PRACTICES (Key: N)		
POLICY: FACILITIES WILL PROVIDE ICE DETAINEES OF ALL FAITHS WITH REASONABLE AND EQUITABLE OPPORTUNITIES TO PARTICIPATE IN THE PRACTICES OF THEIR FAITH, LIMITED ONLY BY THE CONSTRAINTS OF SAFETY, SECURITY, THE ORDERLY OPERATIONS OF THE FACILITY AND BUDGETARY CONSIDERATIONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Detainees are allowed to engage in religious services.	Meets Standard	Detainees are permitted to engage in religious services. Religious services are provided through the efforts of religious the program manager and 48 community religious volunteers.
2. Space is available for detainees to conduct religious services.	Meets Standard	Religious services are conducted in each of the housing unit's multipurpose rooms.
3. The facility allows detainees to observe the major "holy days" of their religious faith. <ul style="list-style-type: none"> List any exceptions. 	Meets Standard	Requests from detainees 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"> Providing special meals, consistent with dietary restrictions; Honoring fasting requirements; Facilitating religious services; and Allowing activity restrictions. 	Meets Standard	Procedures for accommodating recognized holy-day observances include all the listed requirements in this component.
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	Volunteer credentials are checked and verified before coming into contact with detainees and allowing the volunteer to participate in detainee programs. All volunteers are subject to a background check by the State of Ohio Bureau of Criminal Identification and Investigation prior to coming into contact with detainees.
7. Members of faiths not represented by clergy may conduct their own services within security allowances.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

RELIGIOUS PRACTICES (Key: N)		
POLICY: FACILITIES WILL PROVIDE ICE DETAINEES OF ALL FAITHS WITH REASONABLE AND EQUITABLE OPPORTUNITIES TO PARTICIPATE IN THE PRACTICES OF THEIR FAITH, LIMITED ONLY BY THE CONSTRAINTS OF SAFETY, SECURITY, THE ORDERLY OPERATIONS OF THE FACILITY AND BUDGETARY CONSIDERATIONS.		
COMPONENTS	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	Post orders allow for detainees housed in the administrative detention and/or disciplinary segregation status to participate in religious services, providing the service does not interfere with the security and safe and orderly running of the facility.

RELIGIOUS PRACTICES – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> The religious program permits detainees to participate in their respective religious faiths. The program recognizes holy days and offers special meals. One of the facility's corrections sergeants oversees the religious program, utilizing local religious volunteers to coordinate religious activities and services. The evaluation of the standard was based on observation of the religious programs and schedules, staff and detainee interviews and review of post orders and procedures.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETAINEE TELEPHONE ACCESS (Key: O)		
POLICY: 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	Detainees have access to telephones during all out-of-cell and recreation time which is between 8:00 a.m. and 9:00 p.m.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	Meets Standard	Detainees are advised of the telephone procedures via the local handbook which is provided upon admission.
3. Access rules are posted in housing units.	Meets Standard	
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	All posted and published information is available in English and Spanish, the primary languages of the detainees 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 no less than one telephone per every 24 detainees.
6. Telephones are inspected regularly by facility staff to ensure that they are in good working order.	Meets Standard	ICE employees assigned to the facility inspect telephones weekly.
7. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	Meets Standard	
8. The facility administration monitors repair progress and takes appropriate measures to ensure that required repairs are begun and completed timely.	Meets Standard	The facility ICE liaison officer follows up on repairs to ensure their completion.
9. Detainees are afforded a reasonable degree of privacy for legal phone calls.	Meets Standard	
10. A procedure exists to assist a detainee who is having trouble placing a confidential call.	Meets Standard	Detainees may request assistance from the housing unit officer, a facility supervisor, or ICE for confidential calls.
11. The facility provides the detainees with the ability to make non-collect (special access) calls.	Meets Standard	
12. Special Access calls are at no charge to the detainees.	Meets Standard	
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	The inspector was able to reach the OIG via an ICE detainee using the speed dial number programmed into the housing unit telephones.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETAINEE TELEPHONE ACCESS (Key: O)		
POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	The inspector was able to reach the OIG via an ICE detainee using the speed dial number programmed into the housing unit telephones.
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	Detainees may contact on-site ICE staff for approval to call a family member detained at another facility. Once approved, facility staff will assist the detainee with completing the call.
17. Any telephone restrictions are documented.	Meets Standard	
18. The facility has a system for taking and delivering emergency detainee telephone messages.	Meets Standard	Shift supervisors and mental health staff in consultation with ICE will make notification of the message.
19. Emergency phone call messages are immediately given to detainees.	Meets Standard	
20. Detainees are allowed to return emergency phone calls as soon as possible.	Meets Standard	An immediate return telephone call is provided upon approval.
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	Detainees in disciplinary segregation are permitted to make telephone calls during their recreation time and other out of cell times.
22. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	Meets Standard	
23. Detainees in disciplinary segregation are allowed phone calls for family emergencies.	Meets Standard	
24. Detainees in administrative detention and protective custody are afforded the same telephone privileges as those in general population.	Meets Standard	
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	All telephones are labeled with a notice that calls may be monitored and recorded.

DETAINEE TELEPHONE ACCESS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETAINEE TELEPHONE ACCESS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Evaluation of this standard included reviewing post orders and the local handbook, interviewing staff and detainees, and making a telephone call from a housing unit telephone. The telephone service is provided by Combined Public Communications (CPC). A fifteen minute intrastate long distance call cost \$2.75 to connect and \$.36 per minute. A fifteen minute interstate long distance call cost \$2.50 to connect and \$.36 per minute. The telephone calling rates are comparable to those charges incurred by the local community.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

VISITATION (Key: P)		
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. There is a written visitation schedule and hours for general visitation.	Meets Standard	
2. The visitation hours tailored to the detainee population and the demand for visitation.	Meets Standard	
3. The visitation schedule and rules are available to the public.	Meets Standard	Visitation schedules, hours and rules are posted in the visitor entrance lobby of the facility.
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	Visiting rules and schedules are available in hard copy at the visitor entrance lobby from the visiting officer.
6. A general visitation log is maintained.	Meets Standard	The electronic visitation log is completed for every visit and is maintained through the length of the detainee stay.
7. The detainees are permitted to retain personal property items specified in the standard.	Meets Standard	ICE approved property may be retained by detainees.
8. A visitor dress code is available to the public.	Meets Standard	
9. Visitors are searched and identified according to standard requirements.	Meets Standard	Visitors are identified per the standard, but are not searched, as all visits are non-contact. Legal visitors must clear a metal detector prior to contact legal visits.
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 when accompanied by an adult.
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 when accompanied by an adult.
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 visits may occur at any time.
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	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

VISITATION (Key: P)		
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	
18. There are written procedures governing detainee searches.	Meets Standard	Social visits are non-contact and detainees are not searched. Detainees are pat searched after contact legal visits.
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 contact visits.
20. Prior to each visit, legal service providers and assistants are identified per the standard.	Meets Standard	All legal representatives must show their Attorney Bar Card and a government issued identification card.
21. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	Meets Standard	
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	
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 who request to visit with a detainee are referred to the ICE field office for approval.
25. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the OIC or ICE Field Office.	Meets Standard	When a former detainee or alien in proceedings request to visit with a detainee, the warden in conjunction with ICE would approve or deny the visit.
26. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	Meets Standard	

VISITATION – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> During the evaluation of this standard, procedures and the handbook were reviewed, legal visiting rooms were inspected, family visits were observed, and employees and detainees were interviewed.		
Overall Rating: Meets Standard		
Reviewer Name (Printed) (b)(6); (b)(7)(C)		Completion Date: 01/15/2015
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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 work at this facility.

Overall Rating: N/A

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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: 1/15/2015
Reviewer Signature (for printed form submission):		

Section II

Health Service Standards

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

HUNGER STRIKES (Key: R)		
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.		
COMPONENTS	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 post orders, when a detainee has declared a hunger strike or has refused meals for 72 hours, staff members refer the detainee to the medical department.
2. CDFs and IGSAAs immediately report a hunger strike to the ICE.	Meets Standard	Per post orders a detainee on a hunger strike is immediately reported to ICE.
3. The facility has established procedures to ensure staff respond immediately to a hunger strike.	Meets Standard	Procedures for immediate response to an identified hunger strike are provided in policy.
4. Policy and procedure require that staff isolate a hunger-striking detainee from other detainees. <ul style="list-style-type: none"> • If yes, in an observation room? 	Meets Standard	The facility uses post orders to outline policy and procedures. The post orders and procedures require a detainee identified as a hunger striker to be removed from the general population and placed in a secure cell. Per medical staff, there are four observation cells in the medical department designated for use as hunger strike observation cells.
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 detainees identified as hunger strikers in the secure medical observation cell.
6. Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	Meets Standard	Medical treatment and the management of hunger strikers are directed by post orders and clinical protocols, which require that weights and vital signs be measured when detainees are first placed on hunger-strike status and once every 24 hours thereafter for the remainder of the hunger strike.
7. The OIC of the facility obtains a hunger striker's consent before medical treatment.	Meets Standard	Post orders require that a hunger striker's consent is obtained prior to administering medical treatment.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

HUNGER STRIKES (Key: R)		
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
8. A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.	Meets Standard	Post orders require that a detainee sign a Medical Liability Release Form if he or she refuses treatment or evaluation, or that two staff members sign the form indicating the detainee's refusal to sign.
9. During a hunger strike, staff document and provide the hunger-striking detainee three meals a day.	Meets Standard	Officers are directed to deliver three meals per day to the detainee's cell and to document any refusal. Documentation is completed on the detainee's Hunger Strike Monitoring Form.
10. Staff maintains the hunger striker's supply of drinking water/other beverages.	Meets Standard	A hunger striker is provided with a supply of drinking water and other beverages. Per post orders, the independent source of drinking water in the cell is turned off during a hunger strike.
11. During a hunger strike, staff removes all food items from the hunger striker's living area.	Meets Standard	Per post orders and practice, all food items are removed from the hunger striker's cell. Hunger-striking detainees are not permitted to order commissary food items.
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	Post orders require that a hunger striker's fluid intake and food consumption are documented by staff on the detainee's I-839, Hunger Strike Monitoring Form.
13. The medical staff has written procedures for treating hunger strikers.	Meets Standard	Post orders and clinical protocols provide direction for the medical assessment and treatment of a hunger striker and include initial assessment, mental health status evaluation, continued monitoring and consultation with the physician.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

HUNGER STRIKES (Key: R)		
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
14. Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.	Meets Standard	Medical personnel document all treatment attempts and risk counseling encounters in the detainee's medical record, as required by post orders. Medical personnel present and discuss with each ICE detainee on hunger strike an Effects of Starvation form and obtain the detainee's signature to indicate his/her understanding.
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	Officers and other correctional staff members receive hunger-strike training during employee orientation and annually thereafter during refresher training. Medical personnel receive additional hunger-strike training.

HUNGER STRIKE – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Written post orders, procedures and clinical protocols for the identification and management of hunger strikers are in place. Post orders require a medical examination and a mental health evaluation when a detainee has refused food for 72 hours. Post orders, procedures and training documentation indicated personnel are trained in the appropriate response to and management of hunger strikers. There were no hunger strikes reported at this facility during the last 12 months. Because there have been no ICE detainee hunger strikes, no documentation of medical treatment was available for review. Therefore, this inspector was unable to determine if the actual practices of the facility fully comply with the standard. Evaluation of this standard was based on observations, on review of post orders and training records, and on personnel interviews.		
Overall Rating: Meets Standard		
Reviewer Name (Printed): (b)(6); (b)(7)(C)		Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
1. Facilities operate a health care facility in compliance with state and local laws and guidelines.	Meets Standard	Health care personnel who provide services to detainees are appropriately credentialed in accordance with state licensure, certification and/or registration requirements. The facility does not have an onsite pharmacy requiring state licensure.
2. The facility's in-processing procedures for arriving detainees include medical screening.	Meets Standard	All detainees admitted to this facility receive a medical screening conducted by trained correctional officers during the intake process. Review of 20 ICE detainee medical records indicated the screening is consistently completed.
3. All detainees have access to and receive medical care.	Meets Standard	Newly admitted detainees receive information on how to access health services via the detainee handbook and orientation video provided in English and Spanish. Outpatient and emergency services are provided on site. Detainees have access to and receive medical care through intake screenings, physical assessments, scheduled appointments, sick call requests and direct requests to staff for more urgent concerns. Mental health care is provided by referral to mental health professionals as indicated. Emergency and inpatient hospital-based services are available through Fort Hamilton Hospital. Review of medical records and detainee interviews confirmed timely receipt of medical care.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
4. The facility has access to a PHS/DIHS Managed Health Care Coordinator.	Meets Standard	Per the health services administrator (HSA), the facility has access to an IHSC managed care coordinator through the web-based MedPar treatment authorization request system or per phone call for more urgent concerns.
5. The medical staff is large enough to provide, examine, and treat the facility's detainee population.	Meets Standard	Staffing is sufficient to perform the facility's health services mission, consistent with this standard. Medical services are provided by county employees and contract healthcare professionals. Medical services are provided 24-hours per day by two registered nurses (RN) and 21 paramedics. Additional full-time staff includes one health services administrator (HSA) and one medical clerk. Contract personnel include a physician and a physician assistant. Together, they provide onsite services 12 hours a week and are on call 24 hours a day, seven days a week. In addition, a dentist is on site four hours a week and a psychiatrist is on site five hours a week. Four social workers are on site seven days a week for a combined total of 120 hours.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
6. The facility has sufficient space and equipment to afford detainee privacy when receiving health care.	Meets Standard	The medical department consists of one large examination room, a lab room, a dental suite, a large nursing station, four negative pressure observation cells, a detainee waiting area and multiple offices. The examination area is appropriately equipped for the evaluation and treatment of detainees. Detainees waiting to be seen are not within sight or sound of those receiving medical treatment. Privacy is maintained during detainee encounters with medical personnel.
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 unit is located within the secure perimeter. Access is limited to authorized personnel and to detainees, with the approval of authorized personnel, for scheduled health care appointments.
8. The medical facility entrance includes a holding/waiting room.	Meets Standard	Detainees waiting to be seen by medical personnel are held in a waiting area located within the medical department.
9. The medical facility's holding/waiting room is under the direct supervision of custodial staff.	Meets Standard	A correctional officer is assigned for escort of the ICE detainees to the medical unit and maintains continuous observation of detainees in the waiting area.
10. Detainees in the holding/waiting room have access to a drinking fountain.	Meets Standard	Detainees have access to a drinking fountain in the waiting area.
11. Medical records are kept apart from other files. They are: <ul style="list-style-type: none"> • Secured in a locked area within the medical unit; • With physical access restricted to authorized medical staff; and • Procedurally, no copies made and placed in detainee files. 	Meets Standard	The medical department utilizes an electronic medical record (EMR) system. The EMR is password restricted to authorized medical personnel. Per the HSA, medical record copies are not made and placed in detainee non-medical files.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
12. Pharmaceuticals are stored in a secure area.	Meets Standard	Pharmaceuticals are stored within the designated secure pharmacy room. Access is limited to authorized medical personnel. Pharmaceuticals are provided through a contract with Westwood Pharmacy. Controlled pharmaceuticals are stored in a safe, with access restricted to the medical supervisors. Access to the safe requires electronic password input by two supervisors. Controlled substances, syringes and needles, sharp instruments and medical tools are maintained on perpetual inventories and counted at shift change or at least daily. Needles/syringes are stored and dispensed from a secure storage area. Spot checks of the needles/syringes confirmed the accuracy of the documented inventories.
13. Medical screening includes a Tuberculosis (TB) test. <ul style="list-style-type: none"> • Every arriving detainee receives a TB test during the admission process; • Detainee's TB-screening does not occur more than one business day after his/her arrival at the facility; and • Detainees not screened are housed separate from the general population. 	Meets Standard	Per post orders, each detainee receives TB testing and clearance as applicable during the intake process. The facility has chest x-ray capabilities through contracted services. Per review of 20 ICE detainee medical records, detainees receive TB-screening within one business day of his/her arrival at the facility. The facility has four negative airflow/respiratory isolation rooms located within the medical department. Detainees not screened are housed separate from the general population.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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"> • By a health care provider or specially trained officer; and • Before a detainee’s assignment to a housing unit. 	Meets Standard	Mental health screening, per post orders and practice, is completed by trained correctional officers during the intake process and prior to the detainee's assignment to a housing unit. Per review of 20 ICE detainee medical records, an initial mental health screening was consistently timely completed and filed in the detainee's medical record.
15. The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.	Meets Standard	Per post orders and observed practice, all initial medical screenings are reviewed by medical staff in a timely manner. Those screenings which indicate a possible medical or mental health problem are immediately identified and forwarded or scheduled appropriately.
16. The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.	Does Not Meet Standard	Per a review of 20 ICE detainee medical records, nine of the 14-day physical examinations and assessments were not completed within the required timeframe. All physical assessments are completed by registered nurses (RN) and require review by an upper level healthcare provider. Three of the physical assessments reviewed did not have a documented review by the physician.
17. Detainees in the Special Management Unit have access to health care services.	Meets Standard	Segregated detainees have access to health care services through the submission of requests and per direct request to staff members for more urgent concerns. Post orders require medical staff to visit segregated detainees every day and to document contact with each detainee.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
<p>18. Staff provides detainees with health services (sick call) request slips daily, upon request.</p> <ul style="list-style-type: none"> Request slips are available in languages other than English, including every language spoken by a sizeable number of the facility's detainee population. Service-request slips are delivered in a timely fashion to the health care provider. 	Meets Standard	Sick call requests slips are available continuously to ICE detainees in English and Spanish. The submitted requests are picked up daily by medical staff and triaged for appropriate response or appointment.
<p>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.</p>	Meets Standard	The medical department provides 24-hour coverage. The written plan for the delivery of 24-hour emergency health care includes procedures for response by personnel, the provision of emergency treatment on site and ambulance transport to a hospital emergency room if clinically indicated. All correctional and medical personnel receive first aid training and are certified in cardiopulmonary resuscitation (CPR) and automated external defibrillator (AED) use.
<p>20. The plan includes an on-call provider.</p>	Meets Standard	The physician and physician assistant provide on call services when not at the facility; the phone numbers are available in the medical unit. Detainees with dental emergencies are transported to an urgent care facility.
<p>21. The plan includes a list of telephone numbers for local ambulance and hospital services.</p>	Meets Standard	The EMS (emergency medical services) provider is summoned through a 911 call by the control center. Numbers for the medical on-call providers are available in the medical unit. Hospital telephone numbers are also available.
<p>22. The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.</p>	Meets Standard	Emergency health care services are provided while maintaining the security and safety of the facility.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
23. Detention staff is trained to respond to health-related emergencies within a 4-minute response time.	Meets Standard	Staff members are trained to respond to a health-related emergency within a four-minute response time during initial training and annually thereafter. Staff members are also trained in first aid and certified in CPR/AED. Review of the training logs indicated this is practice.
24. Where staff is used to distribute medication, a health care provider properly trains these officers.	N/A	All medications are distributed by medical staff.
25. The medical unit keeps written records of medication that is distributed.	Meets Standard	The administration of all medication is documented on the electronic medication administration record (MAR) by medical staff. When completed, the MAR is maintained in the detainee's electronic medical record.
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	Per the HSA, notification to the warden is made by direct phone call or email 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	Post orders require that a signed and dated medical treatment consent form be completed before medical treatment is administered. General medical treatment consent forms are signed during the intake screening process. A review of 20 active detainee medical records indicated this is practice.
28. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	Meets Standard	Post orders and review of detainee medical records indicated that a Release of Medical Records form is used to authorize the release of confidential medical records to outside sources.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
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, the medical department is given advance notification of a detainee's pending transfer from the facility.
30. Detainee's medical records or a copy thereof, are available and transferred with the detainee.	Meets Standard	A medical transfer summary is prepared and transported with each detainee. Copies of the medical record are provided as required.
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 transferred with a detainee are placed in a sealed and appropriately labeled envelope.

ACCESS TO MEDICAL CARE – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> The facility provides timely access to medical, dental and mental health services through appropriately trained and/or licensed health care professionals for routine care and chronic and emergency conditions. Per review of 20 ICE detainee medical records, medical intake screenings are consistently completed timely. The detainee medical record review indicated the 14-day physical examinations and assessments are not consistently completed within the required timeframe. Detainees submitting medical requests received appropriate medical care in a timely manner. Tuberculosis screening is completed on all detainees during the intake process. The facility has four negative airflow/ respiratory isolation rooms located in the medical department. Written medical treatment consent is consistently obtained prior to treatment. Detainees with chronic illnesses are medically monitored and provided appropriate medical treatment. Prescription medication is provided through a contract pharmacy. Medications are distributed by medical personnel. All needed health care not available on site is provided through the use of community healthcare providers and services. ICE is notified if the medical condition of a detainee already housed in the facility deteriorates and requires a level of medical care beyond the capabilities of this facility. Detainees are not charged medical co-pay fees. Evaluation of the standard was based on observations; on a review of post orders, training records and detainee medical records; and on staff member interviews.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SUICIDE PREVENTION AND INTERVENTION (Key: T)		
POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.	Meets Standard	Per post orders and the training curriculum, all employees receive suicide-prevention training during initial orientation and annually thereafter. A review of training documentation indicated this is practice.
2. Training prepares staff to: <ul style="list-style-type: none"> • Recognize potentially suicidal behavior; • Refer potentially suicidal detainees, following facility procedures; and • Understand and apply suicide-prevention techniques. 	Meets Standard	All employees are trained in suicide prevention and intervention techniques. The training curriculum includes all of the bulleted topics 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"> • Screening does not occur later than one working day after the detainee’s arrival. 	Meets Standard	Mental health screening for suicide potential is completed during the intake process as part of the intake medical screening completed by specially trained officers. Screening does not occur later than one working day after the detainee's arrival.
4. Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.	Meets Standard	Post orders establish procedures for the referral of at-risk detainees to medical personnel. Detainees identified as at risk are referred to and evaluated by mental health staff in a timely manner.
5. The facility has a designated isolation room for evaluation and treatment.	Meets Standard	Four isolation rooms in the booking area and four cells in the F Pod housing unit have been designated for use as isolation rooms for the evaluation and observation of detainees on suicide watch. Female ICE detainees are placed only in the designated isolation cells in the booking area.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SUICIDE PREVENTION AND INTERVENTION (Key: T)		
POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
6. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	Does Not Meet Standard	The isolation room #4 in the booking area has metal assistance railing around the toilet which could be utilized to tie an article to assist a suicide attempt by hanging. There are privacy screens constructed of cement blocks in all of the designated isolation rooms in the booking area, which partially obscure direct observation and are a structural element that could facilitate a suicide attempt. A detainee placed on suicide watch is given a tear-resistant gown and is not permitted to retain possession of clothing or bedding from which strips of cloth could be torn.
7. Medical staff has approved the room for this purpose.	Meets Standard	Medical personnel have approved use of the designated holding cells for detainees placed on suicide watch.
8. Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes.	Meets Standard	A detainee at risk for suicide is moved to the designated observation cell and placed on constant observation. Post orders require documented observation by personnel every 10 minutes. Review of available documentation confirmed this is established practice.

SUICIDE PREVENTION AND INTERVENTION – REVIEWER SUMMARY
(Use following format for dates: mm/dd/yyyy)

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)*

Evaluation of this standard was based on review of established post orders, security logs and training documentation; on interviews with medical and detention personnel; and on observation of the designated isolation cells. Suicide prevention and intervention policies, procedures and training programs are in place to protect detainees at risk for suicide and to intervene appropriately if the situation warrants. The isolation room #4 in the booking area has metal assistance railing around the toilet which could be utilized to tie an article to assist a suicide attempt by hanging. There are privacy screens constructed of cement blocks in all of the designated isolation rooms in the booking area, which partially obscure direct observation and are a structural element that could facilitate a suicide attempt. A detainee placed on suicide watch is given a tear-resistant gown and is not permitted to retain possession of clothing or bedding from which strips of cloth could be torn. Per medical and supervisory personnel, there were no ICE detainee suicides or serious suicide attempts in this facility during the past 12 months. Per a review of the 20 ICE detainee medical records, none of those detainees were identified during intake screening as being in need of a mental health referral or as being at risk for suicide. Medical staff indicated 12 ICE detainees were placed on suicide watch during the last 12 months who were identified by medical or mental health staff as being at risk for suicide. Review of the medical records documentation of those ICE detainees that were on suicide watch indicated practice is consistent with established post orders and procedures.

Overall Rating: Meets Standard

Reviewer Name (Printed):

(b)(6); (b)(7)(C)

Completion Date: 1/15/2015

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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	This facility does not accept detainees known to be severely or terminally ill. ICE would be notified if the medical condition of a detainee already housed in the facility deteriorated and required a level of medical care beyond the onsite capabilities of the facility. The detainee would be transported to a community hospital for emergency and/or inpatient medical care as needed, pending transfer or removal by ICE.
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"> • The detainee's location; and • The limitations placed on visiting. 	Meets Standard	Per post orders, ICE is notified any time an ICE detainee is transported to an outside medical facility. Other notifications are made by ICE in accordance with the requirements of this component.
3. There are guidelines addressing the State Advanced Directive Form for Implementing Living Wills and Advanced Directives. <ul style="list-style-type: none"> • 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. 	Meets Standard	Post orders address the preparation of advance directives and living wills. The state advance directive form is used. 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 post order states that a private attorney can prepare advance directives.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
5. There is a policy addressing "Do Not Resuscitate Orders"	Meets Standard	Post orders appropriately address do not resuscitate (DNR) orders.
6. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation?	Meets Standard	Written procedures governing DNR orders, in accordance with the laws of the state, are addressed in post orders. Detainees housed in this facility with a "Do Not Resuscitate" order would receive maximum therapeutic efforts short of resuscitation.
7. The facility notifies the DIHS Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSA's, this notification is made through the local ICE representative.	Meets Standard	Post orders require that ICE be notified of any detainee with a DNR order in the medical record. Facility medical personnel would notify the ICE representative. ICE personnel would make other required notifications.
8. The facility has written procedures to address the issues of organ donation by detainees.	Meets Standard	Post orders address organ donation and include procedures and guidelines.
9. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.	Meets Standard	Post orders require notification of ICE in the event of a detainee death. Per the assigned ICE officer, ICE would make other notifications in accordance with the requirements of this component.
10. The facility has a policy and procedure to address the death of a detainee while in transport.	Meets Standard	The facility uses post orders to outline its policy and procedures. Post orders establish procedures for managing medical emergencies and the death of a detainee while in transport.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
11. At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	Meets Standard	Per ICE personnel, ICE would ensure disposal of a deceased detainee's remains in accordance with the requirements of the standard.
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"> • If the detainee's is a U.S. military veteran, is the Department of Veterans Affairs notified? 	Meets Standard	Per ICE personnel, ICE would arrange for the burial of an unclaimed detainee's remains in accordance with the requirements of this standard. If the detainee was a U.S. military veteran, the Department of Veterans Affairs would be notified.
13. An original or certified copy of a detainee's death certificate is placed in the subject's a-file.	Meets Standard	ICE would place an original or certified copy of the death certificate in the detainee's A-file in accordance with the requirements of this standard.
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"> • Performance of an autopsy; • Who will perform the autopsy; • Obtaining state approved death certificates; and • Local transportation of the body. 	Meets Standard	Policy establishes procedures for notification of the local coroner, for the ordering of an autopsy as required by state statute, and for other requirements of the component. The coroner produces the death certificate. The facility forwards that death certificate to ICE.
15. ICE staff follows established procedures to properly close the case of a deceased detainee.	Meets Standard	ICE would close the case of a deceased detainee in accordance with the requirements of this standard.

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH – REVIEWER SUMMARY

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

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> In evaluation of this standard, post orders were reviewed, and interviews were conducted with facility medical and administrative personnel and ICE personnel. This facility does not accept or continue to house severely or terminally ill detainees. Per post orders, ICE is notified if the medical condition of a detainee already housed in the facility deteriorates and he or she requires a level of medical care beyond the onsite capabilities of this facility. The detainee would be transported to a community hospital for emergency and/or inpatient medical care as needed, pending transfer or removal by ICE. Procedures for appropriately responding to the death of a detainee in the facility or while in transit are in place. Per facility staff and documentation, there was one non-ICE detainee death during the past 12 months. As there have been no ICE detainee deaths since the last inspection, applicable documentation was not available for review; therefore, the inspector was unable to determine if the actual practices of this facility fully comply with this standard.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):	

Section III

SECURITY AND CONTROL STANDARDS

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

CONTRABAND (Key: V)		
POLICY: ALL DETENTION FACILITIES WILL ENSURE THE PROPER HANDLING AND DISPOSAL OF ALL CONTRABAND. DOCUMENTATION OF CONTRABAND DESTRUCTION IS REQUIRED.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	The facility uses post orders instead of policy for disseminating written instructions to facility personnel. Post orders state illegal contraband is confiscated and tagged as evidence pending a review for prosecution. The contraband is placed in an offsite property room pending final disposition.
2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	Meets Standard	Post orders state contraband that is government property is held and treated as evidence pending 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	Written procedures provide direction on how to return property not needed as evidence to the proper authority.
4. Altered property is destroyed following documentation and using established procedures.	Meets Standard	Post orders provide instructions on how to properly document and dispose of altered property.
5. Before confiscating religious items, the OIC or designated investigator contacts a religious authority.	Meets Standard	Written procedures state a chaplain is to be consulted before confiscating religious items deemed to be contraband.
6. Staff follows written procedures when destroying hard contraband that is illegal.	Meets Standard	
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"> • If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use. 	Meets Standard	Post orders state contraband that may be evidence in connection with a violation of a criminal statute shall be confiscated, inventoried as evidence and stored off site to maintain the chain of custody. If there is no prosecution, the contraband can be returned to the facility to be used as a training aid. Photographs of the contraband may be also be used as a training tool.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

CONTRABAND – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Evaluation of this standard included a review of the contraband post orders, training records and supervisor interviews. Newly employed officers receive training on how to detect, confiscate and report various types of contraband. Written procedures on controlling contraband protects ICE detainees and facility personnel and enhances security and good order by identifying, detecting, controlling, and properly disposing of contraband. There were no recorded incidents of an ICE detainee having contraband in their possession since the previous inspection.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETENTION FILES (Key: W)		
POLICY: EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY ICE DETAINEE BOOKED INTO THE FACILITY, EXCLUDING ONLY DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETENTION FILE WILL CONTAIN COPIES AND, IN SOME CASES, THE ORIGINAL OF SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE FACILITY: CLASSIFICATION SHEET, MEDICAL QUESTIONNAIRE, PROPERTY INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. A detention file is created for every new arrival whose stay will exceed 24 hours.	Meets Standard	Files are created for all newly-admitted detainees.
2. The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	Meets Standard	Detention files contain originals and copies of such documents as Form I-203, Form I-213, classification documents, property inventory forms, identification sheets, and other forms generated during the admission process.
3. The detainee's detention file also contains documents generated during the detainee's custody. <ul style="list-style-type: none"> • Special requests • Any G-589s and/or I-77s closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same 	Meets Standard	
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	Detention files are stored in a secure restricted 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	Five closed and ten active detention files were reviewed and found to contain documents generated during the detainee's stay at the facility.
6. The officer closing the detention file makes a notation that the file is complete and ready to be archived.	Meets Standard	The officer closing the detention file notes on the cover that the file is complete and the file is archived.
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	

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

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETENTION FILES – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Detention files are created for all detainees and serve as the depository for admission forms, ICE forms and other documents. To evaluate this standard, active and archived detention files were reviewed, and employees were interviewed.</p>		
<p>Overall Rating: Meets Standard</p>		
<p>Reviewer Name (Printed): (b)(6); (b)(7)(C)</p>		<p>Completion Date: 1/15/2015</p>
<p>Reviewer Signature (for printed form submission):</p>		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	Meets Standard	Written procedures outline a disciplinary system which uses progressive levels of reviews and appeals.
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	Meets Standard	
3. Written rules prohibit staff from imposing or permitting the following sanctions: <ul style="list-style-type: none"> • corporal punishment • deviations from normal food service • clothing deprivation • bedding deprivation • denial of personal hygiene items • loss of correspondence privileges • deprivation of physical exercise 	Meets Standard	Post orders prohibit officers from permitting the imposition of any of the sanctions listed in this component.
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 disciplinary violations are listed in the handbook and posted in the housing units. An orientation video about these topics is shown to all ICE detainees.
5. The following items are conspicuously posted in Spanish and English, and other dominant languages used in the facility: <ul style="list-style-type: none"> • Rights and Responsibilities • Prohibited Acts • Disciplinary Severity Scale • Sanctions 	Meets Standard	The requirements of the component are posted in the housing units and are included in the ICE detainee handbook. The information is available in both English and Spanish.
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	Meets Standard	Post orders encourage informal attempts to resolve minor infractions. The attempts are documented in a logbook.
7. Incident reports and Notice of Charges are promptly forwarded to the designated supervisor.	Meets Standard	The reporting officer must forward the report to the discipline hearing sergeant prior to the end of the shift.
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	
9. An intermediate disciplinary process is used to adjudicate minor infractions.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
<p>10. A disciplinary panel (or equivalent in IGSA's) adjudicates infractions. The panel:</p> <ul style="list-style-type: none"> • Conducts hearings on all charges and allegations referred by the UDC; • Considers written reports, statements, physical evidence, and oral testimony; • Hears pleadings by detainees and staff representatives; • Bases its findings on the preponderance of evidence; and • Imposes only authorized sanctions 	Meets Standard	At this IGSA facility, a sergeant is designated as the discipline hearing official. This official conducts hearings on all charges and allegations referred for adjudication. The official considers written reports, statements, physical evidence and oral testimony as part of the hearing process. The sergeant also hears pleadings and statements from ICE detainees and staff representatives, determines a finding based on the preponderance of the evidence and imposes authorized sanctions.
11. A staff representative is available if requested for a detainee facing a disciplinary hearing.	Meets Standard	ICE detainees may request a staff representative to assist them in their disciplinary hearings.
12. The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	Meets Standard	
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	The maximum time that can be imposed in disciplinary segregation is 60 days per charge.
14. Written procedures govern the handling of confidential-informant information. Standards include criteria for recognizing "substantial evidence"	Meets Standard	
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	Meets Standard	A copy of the entire disciplinary packet is distributed to pertinent officials at the completion of the disciplinary process and a copy is maintained by the discipline supervisor.

<p>DISCIPLINARY POLICY – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i></p>

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DISCIPLINARY POLICY – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Evaluation of this standard included reviewing post orders, interviewing the discipline hearing sergeant and examining the disciplinary forms used during the disciplinary process for ICE detainees. The disciplinary process promotes a safe and orderly living environment for ICE detainees by establishing a fair and equitable disciplinary system, requiring ICE detainees to comply with facility rules and regulations, and imposing disciplinary sanctions to those who do not comply.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
1. Policy precludes detainees or detainee groups from exercising control or authority over other detainees.	Meets Standard	
2. Detainees are protected from: <ul style="list-style-type: none"> • Personal abuse • Corporal punishment • Personal injury • Disease • Property damage • Harassment from other detainees 	Meets Standard	Post orders address all of the requirements of the component.
3. Staff is trained to identify signs of detainee unrest. <ul style="list-style-type: none"> • What type of training and how often? 	Meets Standard	All facility officers receive communication skills training during pre-service, monthly and annual training. Specifically, officers are trained to identify signs of unrest within the facility and to observe and report unusual behavior to the supervisor.
4. Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Officer In Charge (OIC)	Meets Standard	Post orders require officers to document and report the information required by this component to the shift sergeant. Information is also included in the summary section of the computer-based jail 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 emergency plans and their implementation. Sufficient time for review, adopting changes and implementation of the plans is provided.
6. The plans address the following issues: <ul style="list-style-type: none"> • Confidentiality • Accountability (copies and storage locations) • Annual review procedures and schedule • Revisions 	Meets Standard	
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"> • Local law enforcement agencies • State agencies • Federal agencies 	Meets Standard	The facility has reciprocal agreements for cooperative emergency assistance with local, state and federal law enforcement agencies.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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	The hostage plan and procedures are made available to all new personnel during orientation training.
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	Post orders and training require all employees to disregard instructions from hostages, regardless of their rank. Post orders require that hostages be provided with medical and psychological screenings and care immediately following a hostage incident.
11. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	Meets Standard	Emergency plans include medical treatment for affected personnel and ICE detainees during and after an incident.
12. Food service maintains at least 3 days' worth of emergency meals for staff and detainees.	Meets Standard	Food service maintains a ten day supply of emergency meals for personnel and detainees.
13. Written plans identify locations of shut-off valves and switches for all utilities (water, gas, electric).	Meets Standard	Emergency plans include diagrams, shut-off instructions and photographs of utility locations and switches for all utilities.
14. Written procedures cover: <ul style="list-style-type: none"> • Work/Food Strike • Disturbances • Escapes • Bomb Threats • Adverse Weather • Internal Searches • Facility Evacuation • Detainee Transportation System Plan • Internal Hostages • Civil Disturbances 	Meets Standard	

EMERGENCY (CONTINGENCY) PLANS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Evaluation of this standard included a review of the emergency plans, employee interviews and an on-site inspection of the primary command center. The facility ensures a safe environment for ICE detainees and employees by having contingency plans in place to effectively respond to any emergency outlined in this standard. The plans are considered confidential and are stored accordingly.</p>

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

EMERGENCY (CONTINGENCY) PLANS – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	Meets Standard	Post orders outline the procedures for the inventorying, controlling, handling, storage and use of hazardous materials.
2. Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	Meets Standard	
3. The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. <ul style="list-style-type: none"> • The files list all storage areas, and include a plant diagram and legend. • The MSDSs and other information in the files are available to personnel managing the facility's safety program. 	Meets Standard	The MSDS files are up-to-date for all hazardous substance used in the facility. The file includes a listing of all storage areas including a plant diagram and legend. The MSDS binders are available to staff and detainees in all locations where hazardous chemicals are used or stored.
4. All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: <ul style="list-style-type: none"> • Wear personal protective equipment; and • Report hazards and spills to the designated official. 	Meets Standard	Personal protective equipment is available and used by individuals working with hazardous materials. Post orders require staff to report all hazards and spills to the 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"> • Quantities are limited; and • Staff always supervises detainees using these substances. 	Meets Standard	Personal protective equipment is available and used by individuals working with hazardous materials. Hazardous materials are diluted prior to being issued to detainees in the housing units 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	
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	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
10. Vents return vents, and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility.	Meets Standard	There were no blocked or obstructed vents observed during the inspection.
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	Temperatures for the housing units are set at 70 degrees throughout the year.
12. Shower and sink water temperatures do not exceed the industry standard of 120 degrees.	Meets Standard	Water temperatures for the showers and sinks are set at 110 degrees.
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	
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	Products containing methyl alcohol are not used in this facility.
16. Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.	Meets Standard	
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	
18. A technically qualified officer conducts the fire and safety inspections.	Meets Standard	Monthly fire and safety inspections are conducted by the safety officer who has received fire and safety inspection training.
19. The Safety Office (or officer) maintains files of inspection reports.	Meets Standard	
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 Department on 01/15/2015.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
21. The plan requires: <ul style="list-style-type: none"> • Monthly fire inspections; • Fire protection equipment strategically located throughout the facility; • Public posting of emergency plans with accessible building/room floor plans; • Exit signs and directional arrows; and • An area-specific exit diagram conspicuously posted in the diagrammed area. 	Meets Standard	All the listed requirements in this component are included in the fire prevention, control and evacuation plan.
22. Fire drills are conducted and documented monthly.	Meets Standard	
23. A sanitation program covers barbering operations.	Meets Standard	Post orders describe the sanitation requirements for the barbering operations.
24. The barber shop has the facilities and equipment necessary to meet sanitation requirements.	Meets Standard	Barbering services are performed in the housing unit's dayrooms. The facility has received a waiver for this component from ICE/ Detention Management Division, dated 07/07/2013, allowing barbering services to be conducted in the housing unit'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	Post orders address the handling and disposal of needles and other sharp objects.
27. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	Meets Standard	
28. Standard cleaning practices include: <ul style="list-style-type: none"> • Using specified equipment; cleansers; disinfectants and detergents. • An established schedule of cleaning and follow-up inspections. 	Meets Standard	An established cleaning schedule is followed using specific approved cleansers. Follow-up is provided as needed.
29. The facility follows standard cleaning procedures.	Meets Standard	
30. Spill kits are readily available.	Meets Standard	Spill kits are available in the medical unit and the intake area.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
31. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	Meets Standard	Infectious/bio-hazardous waste is disposed of through a contract with Accu Medical Waste Services, a licensed medical waste contractor.
32. Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	Meets Standard	
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"> • At least monthly. • The pest-control program includes preventative spraying for indigenous insects. 	Meets Standard	Pest control services are provided through a contract with Orkin. Inspections and preventative spraying is conducted on a monthly or as needed basis.
35. Drinking water and wastewater is routinely tested according to a fixed schedule.	Meets Standard	The facility's drinking and wastewater is annually tested by the city of Hamilton, Ohio Water Production.
36. Emergency power generators are tested at least every two weeks. <ul style="list-style-type: none"> • Other emergency systems and equipment receive testing at least quarterly. • Testing is followed-up with timely corrective actions (repairs and replacements). 	Meets Standard	The emergency power generator is tested weekly. Other emergency systems and equipment are tested at least quarterly. All testing is followed up by timely corrective actions, repairs and replacements when needed.

ENVIRONMENTAL HEALTH AND SAFETY – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> The facility is clean and well maintained and provides a safe work environment, appropriate living conditions and control of hazardous materials for both staff and detainees at the facility. This evaluation was based on observations, staff interviews and review of the facility's post orders and procedures.		
Overall Rating: Meets Standard		
Reviewer Name (Printed): (b)(6); (b)(7)(C)		Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

HOLD ROOMS IN DETENTION FACILITIES (Key: AA)		
POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS, MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSING INTO OR OUT OF THE FACILITY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The hold rooms are situated within the secure perimeter.	Meets Standard	The hold rooms are situated 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	The hold rooms are well ventilated and well lighted and 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 contain sufficient seating for the number of ICE detainees held.
4. Bunks, cots, beds, or other related make-shift sleeping apparatus are precluded from use inside hold rooms.	Meets Standard	The hold rooms do not contain any of the items prohibited by this component.
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 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	
8. Detainees under the age of 18 are not held with adult detainees.	Meets Standard	
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	Detainees are issued a personal hygiene kit when they arrive in booking. The kit contains the items required in this component. Drinking water is available in the hold rooms.
10. In older facilities, officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.	Meets Standard	These rooms are equipped with toilets, permitting detainees regular access.
11. All detainees are given a pat down search for weapons or contraband before being placed in the room.	Meets Standard	
12. Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring.). <ul style="list-style-type: none"> • Hold rooms are irregularly monitored every 15 minutes. • Unusual behavior or complaints are noted. 	Meets Standard	
13. When the last detainee has been removed from the hold room, it is given a thorough inspection.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

HOLD ROOMS IN DETENTION FACILITIES (Key: AA)		
POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS, MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSING INTO OR OUT OF THE FACILITY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	There is a written evacuation plan which includes procedures for the booking officers for removing detainees from the hold rooms in the event 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	

HOLD ROOMS IN DETENTION FACILITIES – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Evaluation of this standard included a review of documentation, booking officer interviews and onsite observations of the hold rooms. The facility has written procedures in place to safely maintain hold rooms for the temporary detention of ICE detainees awaiting removal, transfer or other processing into or out of the facility. ICE detainees temporarily held in hold rooms are provided with a safe, secure and comfortable environment.		
Overall Rating: Meets Standard		
Reviewer Name (Printed) (b)(6); (b)(7)(C)		Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
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 is responsible for all administrative duties and responsibilities relating to keys and locks.
3. The security officer, or equivalent in IGSA's, provides training to employees in key control.	Meets Standard	
4. The security officer, or equivalent in IGSA's, maintains inventories of all keys, locks and locking devices.	Meets Standard	The designated sergeant maintains inventories of all keys and related material. The maintenance department keeps records on all lock related devices.
5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	Meets Standard	A preventive maintenance program is followed by the maintenance department. Additionally, the facility uses an outside contractor to inspect and maintain outer emergency exits.
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.	Meets Standard	
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	
11. All worn or discarded keys and locks are cut up and properly disposed of.	Meets Standard	The sergeant destroys all worn or discarded keys and locks.
12. Padlocks and/or chains are prohibited from use on cell doors.	Meets Standard	
13. The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to: <ul style="list-style-type: none"> • Occupational Safety and Environmental Health Manual, Ch. 3; • National Fire Protection Association Life Safety Code 101. 	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
14. The operational key board is sufficient to accommodate all the facility key rings, including keys in use, and is located in a secure area.	Meets Standard	The operational key board located in the control room in a locked key storage cabinet is sufficient to accommodate all facility key rings, including keys in use.
15. Procedures are in place to ensure that key rings are: <ul style="list-style-type: none"> • Identifiable; • The numbers of keys are cited; and • Keys cannot be removed. 	Meets Standard	Individual key rings were inspected and contain a chit identifying the key ring and the number of keys on the ring. The key rings have a barrel lock which prevents keys from being removed from the rings.
16. Emergency keys are available for all areas of the facility.	Meets Standard	Emergency keys for all areas of the facility are located in the control room and the sheriff's office dispatch center.
17. The facilities use a key accountability system.	Meets Standard	
18. Authorization is necessary to issue any restricted key.	Meets Standard	
19. Individual gun lockers are provided. <ul style="list-style-type: none"> • They are located in an area that permits constant officer observation. • In an area that does not allow detainee or public access. 	Meets Standard	Gun lockers are located in areas of the facility located away from detainee and public access. Cameras offer direct supervision of the gun lockers by the control center officer. The public and detainee access is restricted in these areas.
20. The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	Meets Standard	Post orders mandate that all keys are counted each shift.
21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> • Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. • When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. • Detainees are not permitted to handle keys assigned to staff. 	Meets Standard	All employees are trained and held responsible for the proper handling of keys. Employees are responsible to follow all of the procedures listed in this component.

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Evaluation of this standard included interviewing the maintenance supervisor and responsible sergeant, reviewing post orders and inspecting the operational keyboard. All key rings, including the emergency key rings, are stored in secure key boxes in the control center. The keys are signed for when issued and counted each shift. Keys were observed being carried by officers in a safe manner, secured to duty belts.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP I

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	There is one formal count on each of the three shifts each day.
2. Activities cease or are strictly controlled while a formal count is being conducted.	Meets Standard	All activities cease during the conduct of a formal count.
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 ceases for the duration of a formal count.
5. Formal counts in all units take place simultaneously.	Meets Standard	Formal counts occur simultaneously.
6. Detainee participation in counts is prohibited.	Meets Standard	Detainee participation in counts is prohibited.
7. A face-to-photo count follows each unsuccessful recount.	Meets Standard	A face-to-photo count follows each unsuccessful recount.
8. Officers positively identify each detainee before counting him/her as present.	Meets Standard	Officers positively identify each detainee before counting him/her present.
9. Written procedures cover informal and emergency counts. <ul style="list-style-type: none"> • They are followed during informal counts and emergencies. 	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 booking officer maintains the out-count record of all detainees temporarily leaving the facility during each count.
11. This training is documented in each officer's training folder.	Meets Standard	

POPULATION COUNTS – REVIEWER SUMMARY		
<i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i>		
Evaluation of this standard included a review of documentation, interviews with supervisors and an onsite observation of the 9:00 a.m. official count on 01/15/2015. The facility has written procedures in place to ensure around-the-clock accountability of detainees. These procedures protect the community from harm and enhance facility security, safety and good order by establishing an ongoing, effective system of detainee accountability.		
Overall Rating: Meets Standard		
Reviewer Name (Printed):	(b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

POST ORDERS (Key: AD)		
POLICY: ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR CARRYING OUT THEIR DUTIES. THIS GUIDANCE INCLUDES THE POST ORDERS ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST ANNUALLY, AND GIVEN TO EACH OFFICER UPON ASSIGNMENT TO THAT POST.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	Revisions to the post orders, emergency memoranda and bulletins are communicated to correctional personnel via the facility intranet and at pre-shift briefings.
3. One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.	Meets Standard	
4. The IGSA maintains a complete set (central file) of post orders.	Meets Standard	All post orders are included on the facility intranet. This system is accessible to all personnel with a need to know and can be reviewed on the computer at their duty post.
5. The central file is accessible to all staff.	Meets Standard	The administrative sergeant confirmed that a central file of post orders is accessible to all personnel on the facility intranet system.
6. The OIC or Contract / IGSA equivalent initiates/authorizes all post-order changes.	Meets Standard	The warden 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 warden has signed and dated the post orders.
8. A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.	Meets Standard	
9. Procedures keep post orders and logbooks secure from detainees at all times.	Meets Standard	Procedures are in place to ensure post orders and logbooks are kept secure from ICE detainees at all times.
10. Every armed-post officer qualifies with the post weapon(s) before assuming post duty.	Meets Standard	Firearms training and qualification are required of officers before assignment to an armed position.
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	A review of housing unit post orders verified they track the event schedule.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

POST ORDERS (Key: AD)		
POLICY: ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR CARRYING OUT THEIR DUTIES. THIS GUIDANCE INCLUDES THE POST ORDERS ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST ANNUALLY, AND GIVEN TO EACH OFFICER UPON ASSIGNMENT TO THAT POST.		
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	Housing unit officers record detainee activity in a computerized log. The post orders include instructions on maintaining the computerized logs.

POST ORDERS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Evaluation of this standard included a review of documentation and officer interviews which confirmed that officers are provided necessary guidance for carrying out their assigned duties on correctional posts. Post orders have been established for every fixed post and are available electronically.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
1. The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> • Posts to be inspected; • Required inspection forms; • Frequency of inspections; • Guidelines for checking security features; and • Procedures for reporting weak spots, inconsistencies, and other areas needing improvement 	Meets Standard	Post orders outline which posts conduct security inspections in the different areas throughout the facility. An electronic inspection form is used. Written procedures identify the areas to be inspected. Post orders address all the requirements of this component.
2. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	Meets Standard	Officers conduct security checks throughout their shifts. Most officers are required to complete a security check of their respective posts each hour.
3. Documentation of security inspections is kept on file.	Meets Standard	The electronic files are maintained by the accreditation manager.
4. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	Meets Standard	There are procedures for reporting problems on the security inspection forms. Follow-ups on recurring problems are conducted by the shift supervisor.
5. The front-entrance officer checks the ID of everyone entering or exiting the facility.	Meets Standard	All visitors sign a log book in the front entrance.
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	
9. The Control Center is staffed around the clock.	Meets Standard	The control center is manned around the clock.
10. Policy restricts staff access to the Control Center.	Meets Standard	Access to control center is restricted by post orders.
11. Detainees are restricted from access to the Control Center.	Meets Standard	ICE detainees are prohibited from access to the control center.
12. Communications are centralized in the Control Center.	Meets Standard	All communications are 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.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
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"> • The driver's name; • Company represented; • Vehicle contents; • Delivery date and time; • Date and time out; • Vehicle license number; and • Name of employee responsible for the vehicle during the visit 	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	Post orders mandate that contractor tools entering the facility are inventoried before entry or exit is permitted.
18. The SMU entrance has a sally port.	Meets Standard	
19. Written procedures govern searches of detainee housing units and personal areas.	Meets Standard	
20. Housing area searches occur at irregular times.	Meets Standard	Housing areas are searched at irregular times.
21. Every search of the SMU and other housing units is documented.	Meets Standard	Searches of all housing units are documented in the facility's computer system. A review of documentation verified adherence to these procedures.
22. Storage and supply rooms, walls, light and plumbing fixtures, accesses, and drains, etc., undergo frequent, irregular searches. These searches are documented.	Meets Standard	
23. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	Meets Standard	
24. Daily procedures include: <ul style="list-style-type: none"> • Perimeter alarm system tests; • Physical checks of the perimeter fence; and • Documenting the results. 	Meets Standard	An officer conducts a visual check of the perimeter on each shift. The results are documented in the computerized system. There is no perimeter fence or alarm system at this facility.
25. Visitation areas receive frequent, irregular inspections.	Meets Standard	

SECURITY INSPECTIONS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SECURITY INSPECTIONS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> The evaluation of this standard included a review of written procedures, post orders and completed security inspection sheets. Entrance procedures are in place to positively identify contractors entering/exiting the facility. Officers conduct numerous security inspections throughout the shift and make electronic entries each time they complete an inspection of their assigned areas. The security procedures in place ensure the safe and orderly operation of the facility.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. <ul style="list-style-type: none"> • Detainees are placed in the SMU (administrative) in accordance with written criteria. 	Meets Standard	ICE detainees are placed in administrative segregation status within the ICE general population housing unit. This status is a means of providing non-punitive housing for those who cannot live within the general population. ICE detainees are placed in administrative segregation status in accordance with written criteria contained in post orders.
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"> • A copy of the order given to the detainee within 24 hours. 	Meets Standard	
3. The OIC (or equivalent) regularly reviews the status of detainees in administrative detention. <ul style="list-style-type: none"> • A supervisory officer conducts a review within 72 hours of the detainee's placement in the SMU (administrative). 	Meets Standard	The discipline hearing supervisor regularly reviews the status of ICE detainees in administrative segregation especially within 72 hours or less after their placement. The warden reviews and can approve, modify or sustain the supervisor's actions.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>4. A supervisory officer conducts another review after the detainee has spent seven days in administrative segregation, and:</p> <ul style="list-style-type: none"> • Every week thereafter for the first month; and • Every 30 days after the first month. • Does each review include an interview with the detainee? • Is a written record made of the decision and the justification? 	Meets Standard	The discipline sergeant reviews the placement status of ICE detainees in administrative segregation every seven days until they are released from this status. These reviews include interviews with the detainee. A written record is made of the decision and justification using a locally generated segregation review form. The discipline supervisor maintains a log of all ICE detainees in administrative segregation status and the dates of past and future reviews. Completed review forms are maintained in the facility computer system.
<p>5. The detainee is given a copy of the decision and justification for each review.</p> <ul style="list-style-type: none"> • The detainee is given an opportunity to appeal the reviewer's decision to someone else in the facility. 	Meets Standard	ICE detainees are given a written record of each review and may appeal any decision by filing a grievance to the grievance lieutenant.
<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"> • 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. 	Meets Standard	ICE officials are immediately notified whenever an ICE detainee is placed in administrative segregation status. ICE officials from the local field office are telephonically notified and receive a facsimile of the segregation order when the detainee is initially placed in this status and again if segregation lasts longer than 30 and 60 days. There were no ICE detainees in administrative segregation status for this length of time since the last inspection.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
7. The OIC (or equivalent) reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU. <ul style="list-style-type: none"> • A written record is made of the decision and the justification. • The detainee receives a copy of this record. 	Meets Standard	The discipline supervisor reviews the case of any ICE detainee who objects to placement over 30 days. A written record is made of the decision and justification. The detainee receives a copy of the completed review form.
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.	Meets Standard	ICE detainees are given a written record of each seven day review and may appeal any decision by filing a grievance.
9. Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	Meets Standard	
10. The SMU is: <ul style="list-style-type: none"> • Well ventilated; • Adequately lighted; • Appropriately heated; and • Maintained in a sanitary condition. 	Meets Standard	The cells in the special management unit are well ventilated, adequately lighted, appropriately heated and clean.
11. All cells are equipped with beds. <ul style="list-style-type: none"> • Every bed is securely fastened to the floor or wall. 	Meets Standard	All cells are equipped with beds that are securely fastened to the wall.
12. The number of detainees in any cell does not exceed the occupancy limit. <ul style="list-style-type: none"> • When occupancy exceeds recommended capacity, do basic living standards decline? • Do criteria for objectively assessing living standards exist? • If yes, are the criteria included in the written procedures? 	Meets Standard	
13. The segregated detainees have the same opportunities to exchange/laundry clothing, bedding, and linen as detainees in the general population.	Meets Standard	
14. Detainees receive three nutritious meals per day, from the general population's menu of the day. <ul style="list-style-type: none"> • Do detainees eat only with disposable utensils? • Is food ever used as punishment? 	Meets Standard	ICE detainees housed in administrative segregation receive the same meals as the general population. ICE detainees use disposable utensils and food is not used as punishment.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
15. Each detainee maintains a normal level of personal hygiene in the SMU. <ul style="list-style-type: none"> • The detainees have the opportunity to shower and shave at least three times a week. • If not, explain. 	Meets Standard	ICE detainees in administrative segregation have the opportunity to shave and shower daily.
16. The detainees are provided: <ul style="list-style-type: none"> • Barbering services; • Recreation privileges in accordance with the "Detainee Recreation" standard; • Non-legal reading material; • Religious material; • The same correspondence privileges as detainees in the general population; • Telephone access similar to that of the general population; and • Personal legal material. 	Meets Standard	ICE detainees housed in administrative segregation receive all of the services required by this component.
17. A health care professional visits every detainee at least three times a week. <ul style="list-style-type: none"> • The shift supervisor visits each detainee daily. • Weekends and holidays. 	Meets Standard	A health care professional visits every ICE detainee at least daily and a shift supervisor visits each ICE detainee each shift, including weekends and holidays.
18. Procedures comply with the "Visitation" standard. <ul style="list-style-type: none"> • The detainee retains visiting privileges; and • The visiting room is available during normal visiting hours. 	Meets Standard	
19. Visits from clergy are allowed.	Meets Standard	
20. Detainees have the same law-library access as the general population. <ul style="list-style-type: none"> • Are they required to use the law library <input checked="" type="checkbox"/> Separately, or <input type="checkbox"/> As a group? • Are legal materials brought to them? 	Meets Standard	ICE detainees in administrative segregation status have the same law library access as the general population. The portable law library materials, including LexisNexis, are brought to them.
21. The SMU maintains a permanent log of detainee-related activity, e.g., meals served, recreation, visitors etc.	Meets Standard	The officers maintain individual housing unit sheets for each ICE detainee and record all of the daily activities.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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"> • Staff completes the form at the end of each shift. • CDFs and IGSA facilities use Form I-888 (or local equivalent). 	Meets Standard	This IGSA facility initiates an individual housing unit record upon an ICE detainee's placement in administrative segregation status using an equivalent local form. Unit officers complete the form by 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"> • Staff logs record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc; • The medical officer/health care professional signs each individual's record during each visit; and • The housing officer initials the record when all detainee services are completed or at the end of the shift. 	Meets Standard	Officers record all ICE detainee daily activities taking place each shift on individual housing unit records maintained for each detainee in this status. Officers record all pertinent information, such as medical condition, or suicidal or violent behavior, in the log. Medical practitioners sign the segregation log each time they visit the detainee. An officer signs the record when all detainee services are completed or by the end of the shift.
24. A new record is created for each week the detainee is in Administrative Segregation. <ul style="list-style-type: none"> • The weekly records are retained in the SMU until the detainee's return to the general population. 	Meets Standard	A new record is created each week the ICE detainee is in administrative segregation status. The records are retained in the unit until the detainee returns to general population status.

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) – REVIEWER SUMMARY		
<i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i>		
Evaluation of this standard included a review of the post orders, interview with the discipline supervisor and examination of the review sheets and other forms used to place ICE detainees into administrative segregation status. Having a section of the ICE general population housing unit set aside for detainees in administrative segregation status protects detainees, personnel, contractors, volunteers, and other visitors from harm by segregating certain detainees. The housing unit with an administrative segregation section for detainees segregated for administrative reasons also has a section for detainees in disciplinary segregation for disciplinary reasons.		
Overall Rating: Meets Standard		
Reviewer Name (Printed): (b)(6); (b)(7)(C)		Completion Date: 1/15/2015

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) – REVIEWER SUMMARY

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

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)		
POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Officers placing detainees in disciplinary segregation follow written procedures.	Meets Standard	Officers follow written procedures for placing ICE detainees in disciplinary segregation status within the ICE general population housing unit. Cells are set aside for detainees who are placed into disciplinary segregation status.
2. The sanctions for violations committed during one incident are limited to 60 days.	Meets Standard	The discipline post orders limit sanctions to a maximum of 60 days per each serious charge.
3. A completed Disciplinary Segregation Order accompanies the detainee into the SMU. <ul style="list-style-type: none"> The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation. 	Meets Standard	A completed written copy of the disciplinary segregation order is given to the detainee upon placement into 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"> After each formal review, the detainee receives a written copy of the decision and supporting reasons. 	Meets Standard	Post orders state ICE detainees housed in disciplinary segregation will be reviewed at established intervals. Detainees receive a written copy of the reviewer's decision and supporting reasons after each formal review.
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	
7. Living conditions in disciplinary SMUs remain the same regardless of behavior. <ul style="list-style-type: none"> If no, does staff prepare written documentation for this action? Does the OIC sign to indicate approval. 	Meets Standard	
8. Every detainee in disciplinary segregation receives the same humane treatment, regardless of offense.	Meets Standard	All detainees placed in disciplinary segregation status receive the same humane treatment as the general population, regardless of the offense.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)		
POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
9. The quarters used for segregation are: <ul style="list-style-type: none"> Well-ventilated. Adequately lighted. Appropriately heated. Maintained in a sanitary condition. 	Meets Standard	A tour of the disciplinary segregation status cells indicated an environment consistent with the requirements of the component.
10. All cells are equipped with beds that are securely fastened to the floor or wall of the cell.	Meets Standard	Cells are designed for and equipped with beds secured to the floors or walls.
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"> Does the OIC approve excess occupancy on a temporary basis? 	Meets Standard	
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	
13. Detainees in the SMU have the same opportunities to exchange clothing, bedding, etc., as other detainees.	Meets Standard	ICE detainees in segregation status have the same opportunity to exchange clothing, bedding and linens as the 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"> Food is not used as punishment. 	Meets Standard	ICE detainees in segregation status receive the same three meals daily as the general population menu. Post orders prohibit the use of food 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	ICE detainees have the opportunity to shower and shave daily.
16. Detainees receive, unless documented as a threat to security: <ul style="list-style-type: none"> Barbering services; Recreation privileges; Other-than-legal reading material; Religious material; The same correspondence privileges as other detainees; and Personal legal material. 	Meets Standard	ICE detainees in disciplinary segregation status receive all the services required in this component.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)		
POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
17. When phone access is limited by number or type of calls, the following areas are exempt: <ul style="list-style-type: none"> • Calls about the detainee's immigration case or other legal matters; • Calls to consular/embassy officials; and • Calls during family emergencies (as determined by the OIC/Warden). 	Meets Standard	
18. A health care professional visits every detainee in disciplinary segregation every week day. <ul style="list-style-type: none"> • The shift supervisor visits each segregated detainee daily • Weekends and holidays. 	Meets Standard	Written procedures require a medical practitioner and a shift supervisor visit ICE detainees in disciplinary segregation status each day, including weekends and holidays.
19. SMU detainees are allowed visitors, in accordance with the "Visitation" standard.	Meets Standard	ICE detainees in disciplinary segregation status are allowed visitation in accordance with the visitation standard.
20. SMU detainees receive legal visits, as provided in the "Visitation" standard. <ul style="list-style-type: none"> • Legal service providers are notified of security concerns arising before a visit. 	Meets Standard	Legal visits are not restricted. Attorneys will be notified prior to the visit if a threat exists.
21. Visits from clergy are allowed. <ul style="list-style-type: none"> • The clergy member is given the option of visiting/not visiting the segregated detainee. • Violent/uncooperative detainees are denied access to religious services when safety and security would otherwise be affected. 	Meets Standard	
22. SMU detainees have law library access. <ul style="list-style-type: none"> • Violent/uncooperative detainees retain access to the law library unless adjudicated a security threat in writing. • Legal material brought to individuals in the SMU on a case-by-case basis. • Staff documents every incident of denied access to the law library. 	Meets Standard	
23. All detainee-related activities are documented, e.g. meals served, recreation activities, visitors, etc.	Meets Standard	All ICE detainee activities are documented in a housing unit log.
24. The SPCs, the Special Management Housing Unit Record (I-888 or equivalent), is prepared as soon as the detainee is placed in the SMU. <ul style="list-style-type: none"> • All I-888s are filled out by the end of each shift. • The CDF/IGSA facility use Form. • I-888 (or equivalent local form). 	Meets Standard	This IGSA utilizes the local equivalent to Form I-888. The form is prepared upon the detainee's placement into disciplinary segregation status. The form must be filled out by the end of the shift.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)		
POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
25. SMU staff record whether the detainee ate, showered, exercised, took medication, etc. <ul style="list-style-type: none"> • Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc. • The health care official sign individual records after each visit. • The housing officer initials the record when all detainee services are completed or at the end of the shift. • A new record is created weekly for each detainee in the SMU. • The SMU retains these records until the detainee leaves the SMU. 	Meets Standard	Officers record detainee activity during each shift. The documentation required by this component is addressed on the activity record. The forms are created each week and retained in the housing unit until the detainee is released from this status.

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Evaluation of this standard included a review of the post orders and interview with the discipline sergeant. Detainees who receive a disciplinary segregation sanction from the discipline sergeant are placed in a cell set aside for this purpose in the ICE detainee general population housing unit. There were no detainees in this status during the inspection.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

TOOL CONTROL (Key: AH)		
POLICY: IT IS THE POLICY OF ALL FACILITIES THAT ALL EMPLOYEES SHALL BE RESPONSIBLE FOR COMPLYING WITH THE TOOL CONTROL POLICY. THE MAINTENANCE SUPERVISOR SHALL MAINTAIN A COMPUTER GENERATED OR TYPEWRITTEN MASTER INVENTORY LIST OF TOOLS AND EQUIPMENT AND THE LOCATION IN WHICH TOOLS ARE STORED. THESE INVENTORIES SHALL BE CURRENT, FILED AND READILY AVAILABLE FOR TOOL INVENTORY AND ACCOUNTABILITY DURING AN AUDIT.		
COMPONENTS	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 foreman 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 respective departments.
3. Tool inventories are required for the: <ul style="list-style-type: none"> • Maintenance Department; • Medial Department; • Food Service Department; • Electronics Shop; • Recreation Department; and • Armory. 	Meets Standard	The maintenance, medical and food service departments have tool inventories. The armory is located outside the secure perimeter. The facility does not have an electronics shop or recreation department.
4. The facility has a policy for the regular inventory of all tools. <ul style="list-style-type: none"> • The policy sets minimum time lines for physical inventory and all necessary documentation. • ICE facilities use AMIS bar code labels when required. 	Meets Standard	
5. The facility has a tool classification system. Tools are classified according to: <ul style="list-style-type: none"> • Restricted (dangerous/hazardous); and • Non-Restricted (non-hazardous). 	Meets Standard	Post orders established a tool classification system that classified all tools 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 respective 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.
8. The facility has an approved tool storage system. <ul style="list-style-type: none"> • The system ensures that all stored tools are accountable. • Commonly used tools (tools that can be mounted) are stored in such a way that missing tool is readily notice. 	Meets Standard	
9. Each facility has procedures for the issuance of tools to staff and detainees.	Meets Standard	Procedures for issuing tools to employees are in place. Detainees are not issued tools.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

TOOL CONTROL (Key: AH)		
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COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>10. The facility has policies and procedures to address the issue of lost tools. The policy and procedures include:</p> <ul style="list-style-type: none"> • Verbal and written notification; • Procedures for detainee access; and • Necessary documentation/review for all incidents of lost tools. 	Meets Standard	All requirements of the component are addressed in post orders.
<p>11. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.</p>	Meets Standard	
<p>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.</p>	Meets Standard	Written procedures state all outside tools are inventoried prior to admittance or departure from the facility.

TOOL CONTROL – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Evaluation of this standard included a review of the tool control post orders, the master list of all tools and a tour of the tool storage areas. Written procedures prevent tool use by detainees. Employees conduct daily inventories and preserve documentation for all tools. Tool storage areas within the facility were visited and checked for proper markings each week by the responsible maintenance foreman.</p>	
<p>Overall Rating: Meets Standard</p>	
<p>Reviewer Name (Printed): <input type="text" value="(b)(6); (b)(7)(C)"/></p>	<p>Completion Date: 1/15/2015</p>
<p>Reviewer Signature (for printed form submission):</p>	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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	
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 transporting officers have current Commercial Driver's Licenses (CDL).
3. Supervisors maintain records for each vehicle operator.	Meets Standard	
4. Officers use a checklist during every vehicle inspection. <ul style="list-style-type: none"> • Officers report deficiencies affecting operability; and • Deficiencies are corrected before the vehicle goes back into service. 	Meets Standard	Transporting officers conduct a vehicle inspection every time the vehicle is used. Deficiencies are reported immediately to the transportation sergeant. Deficiencies are corrected prior to the vehicle being used again.
5. Transporting officers: <ul style="list-style-type: none"> • Limit driving time to 10 hours in any 15 hour period; • Drive only after eight consecutive off-duty hours; • Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours; • Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days; • During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a safe area—exceeding the 10-hour limit. 	Meets Standard	Transportation officers comply with the bulleted items of this component.
6. Two officers with valid CDLs required in any bus transporting detainees. <ul style="list-style-type: none"> • When buses travel in tandem with detainees, there are two qualified officers per vehicle. • An unaccompanied driver may transport an empty vehicle. 	Meets Standard	
7. Before the start of each detail, the vehicle is thoroughly searched.	Meets Standard	
8. Positive identification of all detainees being transported is confirmed.	Meets Standard	Identification of detainees being transported is confirmed by name, A-number and picture.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
9. All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.	Meets Standard	Transporting officers search every detainee prior to the detainee being placed in the vehicle.
10. The facility ensures that the number of detainees transported does not exceed the vehicles manufacturer's occupancy level.	Meets Standard	
11. Protective vests are provided to all transporting officers.	Meets Standard	All transportation officers are provided with protective vests.
12. The vehicle crew conducts a visual count once all passengers are on board and seated. <ul style="list-style-type: none"> • Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop. 	Meets Standard	
13. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	Meets Standard	Transport officer's post orders outline the use of restraining equipment on the buses.
14. Officers ensure that no one contacts the detainees. <ul style="list-style-type: none"> • One officer remains in the vehicle at all times when detainees are present. 	Meets Standard	
15. Meals are provided during long distance transfers. <ul style="list-style-type: none"> • The meals meet the minimum dietary standards, as identified by dietitians utilized by ICE. 	Meets Standard	Sack lunches that meet the minimum dietary standards would be provided for long distance transports.
16. The vehicle crew inspects all Food Service pickups before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). <ul style="list-style-type: none"> • Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative; • Basins, latrines, and drinking-water containers/dispensers are cleaned and sanitized on a fixed schedule. 	Meets Standard	
17. Vehicles have: <ul style="list-style-type: none"> • Two-way radios; • Cellular telephones; and • Equipment boxes stocked in accordance with the Use of Force Standard. 	Meets Standard	Each transport vehicle has two-way radios and a cell phone. Vehicles have equipment bags stocked in accordance with the Use of Force standard.
18. The vehicles are clean and sanitary at all times.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
19. Personal property of a detainee transferring to another facility is: <ul style="list-style-type: none"> • Inventoried; • Inspected; and • Accompanies the detainee. 	Meets Standard	
20. The following contingencies are included in the written procedures for vehicle crews: <ul style="list-style-type: none"> • Attack • Escape • Hostage-taking • Detainee sickness • Detainee death • Vehicle fire • Riot • Traffic accident • Mechanical problems • Natural disasters • Severe weather • Passenger list includes women or minors 	Meets Standard	The facility's written procedures cover all of the bulleted items listed in this component.

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)*

During the evaluation of this standard, procedures, documentation, and transport officer files were reviewed. Interviews were conducted with staff that supervises the bus operation and the transport officers.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/15/2015

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

USE OF FORCE (Key: AJ)		
<p>POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:</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	Post orders authorize officers to respond to immediate use-of-force incidents to gain control of detainees without the presence of a supervisor.
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	If a detainee's behavior is non-threatening, officers attempt to resolve the conflict without resorting to force.
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"> • Ranking detention official, health professional, and others confer before every calculated use of force. 	Meets Standard	Post orders state that before authorizing a calculated use of force, confrontation avoidance techniques will be used. The supervisor on shift and medical practitioner shall assess the situation, taking into account the detainee's history and the totality of the circumstance.
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"> • Under staff supervision. 	Meets Standard	
6. Staff members are trained in the performance of the Use-of-Force Team Technique.	Meets Standard	All officers receive use-of-force training. A specially trained team will be summoned to conduct a calculated use of force if time permits.
7. All use-of-force incidents are documented and reviewed.	Meets Standard	All use of force incidents are documented and reviewed by an after-action team lead by the warden.
8. Staff: <ul style="list-style-type: none"> • Do not use force as punishment; • Attempt to gain the detainee's voluntary cooperation before resorting to force; • Use only as much force as necessary to control the detainee; and • Use restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical. 	Meets Standard	Post orders require that all of the requirements of the component are followed by officers.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

USE OF FORCE (Key: AJ)		
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COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
9. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	Meets Standard	
10. Use-of-Force Team follows written procedures that attempt to prevent injury and exposure to communicable disease(s).	Meets Standard	
11. Standard procedures associated with using four-point restraints include: <ul style="list-style-type: none"> • Soft restraints (e.g., vinyl); • Dressing the detainee appropriately for the temperature; • A bed, mattress, and blanket/sheet; • Checking the detainee at least every 15 minutes; • Logging each check; • Turning the bed-restrained detainee often enough to prevent soreness or stiffness; • Medical evaluation of the restrained detainee twice per eight hour shift; and • When qualified medical staff is not immediately available, staff position the detainee "face-up". 	Meets Standard	The applicable requirements of the component are followed by officers and supervisors when the restraint chair is used. The restraint chair is used in lieu of the bed-restrained technique. No detainees have been restrained in the past twelve months.
12. The shift supervisor monitors the detainee's position/condition every two hours. <ul style="list-style-type: none"> • He/she allows the detainee to use the rest room at these times under safeguards. 	Meets Standard	
13. All detainee checks are logged.	Meets Standard	
14. In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	Meets Standard	Medical practitioners report as soon as possible to examine detainees in all immediate use-of-force incidents.
15. When the OIC authorizes use of non-lethal weapons: <ul style="list-style-type: none"> • Medical staff is consulted before staff use pepper spray/non-lethal weapons. • Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized. 	Meets Standard	Oleoresin capsicum (OC) is the only authorized less-than-lethal weapon that may be used on ICE detainees. The OC is dispensed using a paint ball gun with small capsules of OC. In calculated use-of-force incidents, medical practitioners are consulted to review the detainee's medical file before the use of OC is authorized.
16. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> • Medical personnel are consulted 	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

USE OF FORCE (Key: AJ)		
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COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
17. Protective gear is worn when restraining detainees with open cuts or wounds.	Meets Standard	Officers are trained to use protective gear to protect themselves from blood and body fluid contamination.
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	The warden conducts an after-action review of all use-of-force incidents and non-routine application of restraints. The review is documented and signed by those conducting the review.
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"> Specialized training is given and Officers are certified in all devices they use. 	Meets Standard	
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	An equivalent use-of-force form is being used at this IGSA facility.

USE OF FORCE – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Evaluation of this standard included a review of the post orders and an interview with the emergency response team sergeant. The warden authorizes all calculated use-of-force scenarios. Written procedures require these moves to be conducted by trained officers. The use of choke holds or unauthorized restraint positions is forbidden. Tasers are not used on ICE detainees. All use of force incidents are documented and reviewed by the warden and management personnel. There were no use of force incidents with ICE detainees during the past 12 months.</p>		
<p>Overall Rating: Meets Standard</p>		
<p>Reviewer Name (Printed): (b)(6); (b)(7)(C)</p>		<p>Completion Date: 1/15/2015</p>
<p>Reviewer Signature (for printed form submission):</p>		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

STAFF DETAINEE COMMUNICATIONS (Key: AK)		
POLICY: PROCEDURES MUST BE IN PLACE TO ALLOW FOR FORMAL AND INFORMAL CONTACT BETWEEN KEY FACILITY STAFF AND ICE STAFF AND ICE DETAINEE AND TO PERMIT DETAINEES TO MAKE WRITTEN REQUESTS TO ICE STAFF AND RECEIVE AN ANSWER IN AN ACCEPTABLE TIME FRAME.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The ICE Field Office Director ensures that weekly announced and unannounced visits occur at the IGSA.	Meets Standard	ICE officers make weekly announced and unannounced visits to the detainee housing units.
2. Detention and Deportation Staff conduct scheduled weekly visits with detainees held in the IGSA.	Meets Standard	
3. Scheduled visits are posted in ICE detainee areas.	Meets Standard	
4. Visiting staff observe and note current climate and conditions of confinement at each IGSA.	Meets Standard	ICE visitation checklist notes climate and conditions of confinement in the detainee housing unit.
5. ICE information request Forms are available at the IGSA for use by ICE detainees.	Meets Standard	Detainee request forms are available from the housing unit officer upon request.
6. The IGSA treats detainee correspondence to ICE staff as Special Correspondence.	Meets Standard	
7. ICE staff responds to a detainee request from an IGSA within 72 hours.	Meets Standard	
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 local handbook which is given to each detainee upon arrival outlines to the detainee their right to correspond with ICE.

STAFF DETAINEE COMMUNICATIONS – REVIEWER SUMMARY		
<i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> During the evaluation of this standard, written procedures were reviewed which included the detainee handbook. ICE staff, facility staff, and detainees were interviewed.		
Overall Rating: Meets Standard		
Reviewer Name (Printed) (b)(6); (b)(7)(C)		Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETAINEE TRANSFER STANDARD (Key: AL)		
<p>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.</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>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.</p> <ul style="list-style-type: none"> • The notification is recorded in the detainee’s file; and • When the A File is not available, notification is noted within DACS 	Meets Standard	ICE staff ensures the detainee’s legal representative of record is advised of the detainee’s transfer.
<p>2. Notification includes the reason for the transfer and the location of the new facility.</p>	Meets Standard	
<p>3. The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.</p>	Meets Standard	
<p>4. The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.</p>	Meets Standard	
<p>5. Facility policy mandates that:</p> <ul style="list-style-type: none"> • Times and transfer plans are never discussed with the detainee prior to transfer; • The detainee is not notified of the transfer until immediately prior to departing the facility; and • The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 	Meets Standard	The facility policy and procedures address the bulleted parts of the component.
<p>6. The detainee is provided with a completed Detainee Transfer Notification Form.</p>	Meets Standard	Detainees are provided a copy of a completed Detainee Transfer Notification Form prior to transfer.
<p>7. Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.</p>	Meets Standard	The facility uses Form I-203, Order to Detain or Release a Detainee, to authorize the removal of a detainee from the facility.
<p>8. For medical transfers:</p> <ul style="list-style-type: none"> • The Detainee Immigration Health Service (or IGSA) (DIHS) Medical Director or designee approves the transfer; • Medical transfers are coordinated through the local ICE office; and • A medical transfer summary is completed and accompanies the detainee. 	Meets Standard	When an ICE detainee is being considered for a medical transfer, procedures include the bulleted items listed in this component.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

DETAINEE TRANSFER STANDARD (Key: AL)		
<p>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.</p>		
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	The facility does not have IHSC staff.
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	When a detainee is being transferred, all funds, valuables and property are returned and transferred with the detainee to the new location.
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	Detainees are provided with sack lunches when transfers occur during normally scheduled meal times.
14. An A File or work folder accompanies the detainee when transferred to a different field office or sub-office.	Meets Standard	
15. Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.	Meets Standard	Files are forwarded to the receiving office by overnight mail by the next business day.

DETAINEE TRANSFER STANDARD – REVIEWER SUMMARY		
<i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> ICE adheres to all requirements and completes all mandated notifications when transferring detainees. This standard was evaluated via ICE and facility staff interviews, as well the review of supportive documentation.		
Overall Rating: Meets Standard		
Reviewer Name (Printed):	(b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (Key: AM)		
POLICY: 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.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a Sexual Abuse and Assault Prevention and Intervention Program consistent with the ICE Zero Tolerance Policy.	Meets Standard	The facility has a sexual abuse and assault prevention and intervention (SAAPI) zero tolerance program as outlined in facility post orders.
2. The facility administrator has designated a Sexual Abuse and Assault Prevention and Intervention Program coordinator for the facility.	Meets Standard	The warden has assigned a SAAPI program coordinator.
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	Per the program coordinator and review of training documentation, orientation and annual refresher training is in place for employees.
4. The facility maintains written documentation verifying employee, volunteer, and contractor training.	Meets Standard	Training records are maintained for all personnel, including volunteers and contract employees.
5. Detainees are informed about the program in facility orientation and the detainee handbook (or equivalent).	Meets Standard	Detainees are informed about the program during their orientation via the orientation video, postings in the housing units, the Sexual Assault Awareness Notice, and local handbook. All information is provided in English and Spanish.
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	Sexual Assault Awareness Notices were observed in the housing units. The name of the local SAAPI program coordinator and information on local organizations that can assist detainees who have been victims of sexual assault was provided.
7. The Sexual Assault Awareness Information brochure is distributed to detainees.	Meets Standard	A Sexual Assault Awareness Information brochure is not distributed separately to each detainee during the intake process; however the detailed information is incorporated in the local handbook.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (Key: AM)		
POLICY: 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.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
8. Detainees are screened upon arrival for "high risk" sexual assaultive and sexual victimization potential and housed and counseled accordingly.	Meets Standard	Post orders require screening for "high risk" sexual assaultive and sexual victimization potential to be completed during intake screening and housing and counseling to be provided accordingly. Per review of 20 ICE detainee medical records, this is established practice.
9. A detainee who is subjected to sexual abuse or assault is not returned to general population until proper re-classification, taking into consideration any increased vulnerability of the detainee as a result of the sexual abuse or assault, is completed.	Meets Standard	Per post orders, the re-classification of a detainee who is subjected to sexual abuse or assault is completed prior to his/her return to general population.
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	Per established procedures, prompt and effective intervention and chain-of-command reporting are in place and ICE would be notified immediately.
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	Per the program coordinator and a review of post orders, the facility has in place a coordinated, multidisciplinary team to respond to sexual abuse or assault. The team is comprised of facility personnel and outside resources to provide all areas of expertise noted in this component. The Butler County Sheriff's Office Detective Division serves as the investigative entity.
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	Per the program coordinator and a review of post orders, procedures for placing a victimized detainee in a supportive environment that represents the least restrictive housing option possible are in place.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (Key: AM)		
POLICY: 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.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	Per post orders, procedures are in place to remove personnel suspected of perpetrating sexual abuse or assault from duties requiring detainee contact pending the outcome of an investigation.
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	Per existing procedures, a victim of sexual assault would be referred to Fort Hamilton Hospital for treatment and the gathering of evidence. The Butler County Sheriff's Office Detective Division serves as the investigative entity.
15. When there is an alleged or proven sexual assault, the required notifications are promptly made to facility supervisors and ICE management.	Meets Standard	Per the program coordinator and post orders, the required notifications are promptly made to facility administration and ICE management.
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	Per the program coordinator and post orders, victims of sexual abuse or assault are referred to Fort Hamilton Hospital and other community resources as indicated for treatment and gathering of evidence.
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	Per post orders and the program coordinator, procedures have been established for the logging, maintenance and tracking of records associated with allegations of sexual abuse or assault as required by the component. There have been no reported allegations of sexual assault during the last 12 months.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (Key: AM)		
POLICY: 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.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	Per the program coordinator, procedures have been established for the annual review of aggregate data regarding incidents of sexual abuse or assault to be presented to the FOD and ICE/ERO HQ for use in determining whether changes are needed to existing policies or practice.
19. Tracking statistics and reports are readily available for review by the inspectors.	Meets Standard	The tracking and reporting system was readily available for review during this inspection. There were no ICE detainee allegations of sexual abuse or assault during the last 12 months.

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION – REVIEWER SUMMARY		
<i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> The facility has a comprehensive zero tolerance sexual abuse and assault prevention and intervention program. The facility has a designated sexual abuse and assault prevention and intervention (SAAPI) program coordinator. All employees receive related training during orientation and annual refresher training. Procedures are in place to prevent sexual assault and abuse on detainees and to provide prompt and effective intervention and treatment for victims. Detainees receive information regarding the program during intake procedures, via the local and ICE detainee handbooks, orientation video, handouts and postings in the housing units. Detainees are screened for high-risk sexual assaultive and sexual victimization potential during the intake process. Evaluation of this standard was based on review of policy, training documentation and training presentations; interviews with medical staff, ICE personnel and the SAAPI program coordinator; and observation of housing unit postings.		
Overall Rating: Meets Standard		
Reviewer Name (Printed):	(b)(6); (b)(7)(C)	Completion Date: 1/15/2015
Reviewer Signature (for printed form submission):		

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
Errors:					
No Errors Found					
Items Not Rated:					
All Items Rated					

Run Indicator:



DATE: January 15, 2015

TO: (b)(6); (b)(7)(C)
Assistant Director for Detention Management

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

SUBJECT: Annual Detention Inspection of Butler County Jail

VIA: E-mail

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE National Detention Standards (NDS) of the Butler County Jail in Hamilton, OH during the period of January 13-15, 2015. This is an IGSA facility.

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

Subject Matter Field	Team Member
Security	(b)(6); (b)(7)(C)
Medical Care	
Food Service/Safety	

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. The facility received a previous rating of “Acceptable” during the January 2014 inspection.

Inspection Summary

The Butler County Jail is currently accredited by:

- The American Correctional Association (ACA) - No
- The National Commission on Correctional Health Care (NCCCHC) - No
- The Joint Commission (TJC) – No

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 2014 and 2015 NDS compliance annual inspections:

2014 Inspection		2015 Inspection	
Compliant	35	Compliant	37
Deficient	0	Deficient	0
At-Risk	0	At-Risk	0
Repeat Deficiency	0	Repeat Deficiency	0
Not Applicable	3	Not Applicable	2

The inspection team found three (3) deficient components in the following three (3) standards:

- Correspondence and Other Mail – 1, which is a repeat deficiency
- Access to Medical Care -1
- Suicide Prevention and Intervention -1

LCI Issues and Concerns

There were no issues or concerns identified during this inspection.

Significant Observations

There were no significant observations made during this inspection.

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-324A 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 David Deweese, SDDO Paul Brown, and IEA John Moorman from the Detroit Field Office; Facility Staff: Warden Dennis Adams, Deputy Warden Rob Clendenin, Lt. Scott Brown, Lt. David Reynolds, Corrections Specialist Melinda Weddle, Sgt. Carol Seals, Medical Administrator Curt New, Medical Supervisor Randall Oney, Medical Supervisor Carla Estep, and Registered Nurse Sukhween Patrick.

(b)(6); (b)(7)(C)

Signature

(b)(6); (b)(7)(C)

Lead Compliance Inspector

01/15/2015

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
01/13/2015 - 01/15/2015

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
01/14/2014 - 01/16/2014
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.)
(b)(6); (b)(7)(C)
Telephone # (Include Area Code)
(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 / 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); / **Safety/Food Service SME / Nakamoto**
Name of Team Member / Title / Duty Location
(b)(6); (b)(7)(C) / **Security SME / Nakamoto**
Name of Team Member / Title / Duty Location
/ /

F. CDF/IGSA Information Only

Contract Number
(b)(6); (b)(7)(C) Date of Contract or IGSA
12-16-03
Basic Rates per Man-Day
(b)(7)(E)
Other Charges: (If None, Indicate N/A)
N/A

Estimated Man-days Per Year:
297110

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
Date New Construction / Bed space Added
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
12612
Total ICE Man-days for Previous 12 months
29376

K. Classification Level (ICE SPCs and CDFs Only)

	L-1	L-2	L-3
Adult Male	N/A	N/A	N/A
Adult Female	N/A	N/A	N/A

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	78	142	453
Adult Female	2	6	135

N. Facility Staffing Level

Security:
(b)(7)(E) Support:
48

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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 ¹	Types (Sexual ² , Physical, etc.)	P	P	P	0
	With Weapon	0	0	0	0
	Without Weapon	2	1	1	0
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	P	P	0	0
	With Weapon	0	0	0	0
	Without Weapon	1	1	0	0
Number of Forced Moves, incl. Forced Cell moves ³		0	0	0	0
Disturbances ⁴		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)	V-38	V-49	V-16	V-34
	Type (C=Chair, B=Bed, BB=Board, O=Other)	C	C	C	C
Offender / Detainee Medical Referrals as a result of injuries sustained.		15	12	8	10
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	67	64	43	46
	# Resolved in favor of Offender/Detainee	15	8	6	4
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	A	I	A	0
	Number	1	1	3	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	10	9	11	12
	# Psychiatric Cases referred for Outside Care	0	0	0	0

¹ Any attempted physical contact or physical contact that involves two or more offenders

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

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

⁴ 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.

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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) (b)(6); (b)(7)(C)	Signature (b)(6); (b)(7)(C)
Title & Duty Location The Nakamoto Group, Inc.	Date 01/15/2015

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

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

Comments: The Sexual Abuse and Assault Prevention and Intervention Standard was reviewed during this inspection, but is not referenced in the Standards Review Summary Report. The Standard was rated as Meets Standard for this inspection.

The Butler County Jail falls under the jurisdiction of the Butler County Sheriff. The facility consists of housing units and is operated under the direct supervision model. The facility houses male and female detainees for ICE, U.S. Marshals Service and local agencies. On 01/13/2015, the total population was 707, which included 47 male ICE detainees, and one female ICE detainee. The average length of stay for an ICE detainee is 14 days.

The statistics provided by the facility on the Significant Incident Summary Worksheet reflects the total population. The facility uses a restraint chair in lieu of four/five point bed restraints. The facility does not deploy canines or Tasers on ICE detainees. The chemical agent oleoresin capsicum (OC) is authorized for use on ICE detainees and the officers authorized to use it are all trained. There have been no instances where chemical agents have been used on ICE detainees in the last year.

ICE detainees are not charged medical co-pay fees. There were no ICE detainee deaths, serious suicide attempts or escapes reported for this inspection period. There have been no allegations of sexual assault and/or abuse in the last year.

There was one death of a non-ICE detainee during the inspection period. On 04/03/2014, a 50 year old male non-ICE detainee was found unresponsive in the housing unit, emergency medical response and CPR was initiated. The detainee was transported to the local emergency room and pronounced dead. An autopsy determined the detainee died of a heart attack secondary to chronic cocaine abuse and existing medical complications.

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

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
01/12/2016 - 01/14/2016

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
01/13/2015 - 01/15/2015
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.)
(b)(6); (b)(7)(C) Warden
Telephone # (Include Area Code)
(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
/ /

F. CDF/IGSA Information Only

Contract Number
(b)(7)(E) Date of Contract or IGSA
12-16-03
Basic Rates per Man-Day
(b)(4)
Other Charges: (If None, Indicate N/A)
NA

Estimated Man-days Per Year:
285,848

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
N/A
Date New Construction / Bed space Added
N/A
Future Construction Planned
 Yes No Date: **N/A**
Current Bed space **848** Future Bed space (# New Beds only)
Number: **N/A** Date: **N/A**

J. Total Facility Population

Total Facility Intake for previous 12 months
12,580
Total ICE Man-days for Previous 12 months
19,619

K. Classification Level (ICE SPCs and CDFs Only)

	L-1	L-2	L-3
Adult Male	N/A	N/A	N/A
Adult Female	N/A	N/A	N/A

L. Facility Capacity

	Rated	Operational	Emergency
Adult Male	720	720	720
Adult Female	128	128	128

Facility holds Juveniles Offenders 16 and older as Adults

M. Average Daily Population

	ICE	USMS	Other
Adult Male	50	111	456
Adult Female	4	5	318

N. Facility Staffing Level

Security:
(b)(7)(E) Support:
42

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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 ¹	Types (Sexual ² , Physical, etc.)	0	2S/1P	0	0
	With Weapon	0	0	0	0
	Without Weapon	0	3	0	0
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	0	0	0	0
	With Weapon	0	0	0	0
	Without Weapon	0	0	0	0
Number of Forced Moves, incl. Forced Cell moves ³		0	0	0	0
Disturbances ⁴		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	1	0	0
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	0	5	1	1
	# Resolved in favor of Offender/Detainee	0	0	0	0
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	0	0	0	0
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	103	124	115	125
	# Psychiatric Cases referred for Outside Care	0	0	0	0

¹ Any attempted physical contact or physical contact that involves two or more offenders

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

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

⁴ 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.

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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) (b)(6); (b)(7)(C)	Signature (b)(6); (b)(7)(C)
Title & Duty Location Lead Compliance Inspector, The Nakamoto Group, Inc.	Date 01/14/2016

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

Recommended Rating:

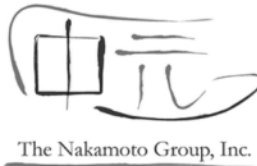
Superior
 Good
 Acceptable
 Deficient
 At-Risk

Comments: The Detention Standards Review Summary report includes data for ICE detainees, with the exception of the Medical Referrals. The facility was not able to separate the referral numbers. The Sexual Abuse and Assault Prevention and Intervention Standard was inspected during this inspection, but is not referenced in the Detention Standards Review Summary Report. The standard was rated as Meets Standards for this inspection. There were two reports of sexual harassment/sexual assault involving ICE detainees during the past year. One case was determined to be unfounded and the other was unsubstantiated. The incidents were investigated, reported, and logged as required by the standard. There were no deaths or serious suicide attempts during the inspection period.

The facility does not deploy canines in the presence of ICE detainees. Tasers are carried by shift supervisors, but post orders prohibit the use of Tasers on ICE detainees. Chemical agent dispensers are located in the shift supervisor's officer and will be deployed on ICE detainees, if necessary. There were no incidents that involved the use of force on ICE detainees during this inspection period. There were no escapes or attempted escapes during this inspection period.

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January 14, 2016

TO: (b)(6); (b)(7)(C)
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) of the Butler County Jail in Hamilton, Ohio during the period of January 12-14, 2016. This is an ISGA facility.

The annual inspection was performed under the guidance of Marie J. Carter Calvin, Lead Compliance Inspector. Team Members were:

Subject Matter Field	Team Member
Security	(b)(6); (b)(7)(C)
Detainee Rights	
Medical Care	
Safety	

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. The facility received a previous rating of Acceptable during the January 2015 inspection.

Inspection Summary

The Butler County Jail is currently accredited by:

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

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 2015 and 2016 NDS compliance annual inspections:



The Nakamoto Group, Inc.

2015 Inspection		2016 Inspection	
Meets Standards	37	Meets Standards	37
Deficient	0	Deficient	0
At-Risk	0	At-Risk	0
Repeat Finding	0	Repeat Finding	0
Not Applicable	2	Not Applicable	2

The inspection team identified eighteen (18) deficient components in the following eight (8) standards:

- Correspondence and Other Mail -1, which is a repeat deficiency
- Detainee Handbook - 6
- Food Service - 3
- Issuance and Exchange of Clothing, bedding and Towels - 2
- Access to Medical Care - 1, which is a repeat deficiency
- Environmental Health and Safety - 1
- Population Counts - 1
- Staff Detainee Communications - 3

Facility Snapshot/Description

The Butler County Jail (BCJ) is owned and operated by Butler County Sheriff's Office located in Hamilton, Ohio which is approximately 25 miles northwest of Cincinnati, Ohio. The facility houses low and medium custody adult male and female detainees for ICE. In addition, the facility houses U.S. Marshals detainees and various other county prisoners. On January 12, 2016 the total count was 791, of which 64 were ICE detainees – 53 males and 11 females. The average length of stay for an ICE detainee is 17 days.

The facility is a one story building with eight general housing units and one special housing unit along a single hallway. Each of the general housing units is two- story with 48 cells. Two of the units have two cells to accommodate disabilities. The jail was opened in 2002 and there have been no further renovations to the building. The BCJ operates on a direct supervision design.

Every detainee room 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 outside recreation area is attached to the housing unit. The atmosphere is relaxed and detainees interact with staff and other detainees freely. The facility houses all the support systems for the facility to include, but not limited to, food service, commissary, laundry, visiting, etc. The inspection team found the environment to be low-tension, with detainees freely approaching inspectors to converse. Detainee interviews left the impression that the ICE population was less than satisfied with the quality and quantity of the food provided by Aramark. Additionally, the sanitation level in the kitchen was below average. However, the sanitation level was above average throughout the remainder of the facility.

It should be noted that the menu has been certified by a registered dietician and contains on average 2800 calories daily. In addition, it was reported to the inspectors that the facility has secured a new food service contract with ABL Management, Inc. which will take effect on February 14, 2016.

The staff gave every indication of standardized, professional conduct, and displayed a clear understanding of the concept of civil detention and the NDS Standards. The facility has very few employees that are bilingual and they depend on the language line to assist with booking and classification of the non-English speaking detainees. Confidential interviews revealed only issues with food service. The inspection team interviewed 45 ICE detainees during the course of the inspection and all stated that the facility was safe.



The Nakamoto Group, Inc.

Areas of Concern/Significant Observations

There were no areas of concern 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-324A 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 – SDDC (b)(6); (b)(7)(C) SDDC (b)(6); (b)(7)(C) and DO (b)(6); (b)(7)(C) from the Detroit Field Office
- Facility Staff – Major (b)(6); (b)(7)(C) Captain (b)(6); (b)(7)(C), Lt. (b)(6); (b)(7)(C) Lt. (b)(6); (b)(7)(C) Lt. (b)(6); (b)(7)(C) Sgt. (b)(6); (b)(7)(C) Sgt. (b)(6); (b)(7)(C) and HSA (b)(6); (b)(7)(C)

(b)(6); (b)(7)(C)

(b)(6); (b)(7)(C)

Lead Compliance Inspector

January 14, 2016

Printed Name of LCI

Date

Condition of Confinement Review Worksheet

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

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



ICE Detention Standards Review Worksheet

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

Facility Information			
Facility Name: Butler County Jail		Review Purpose: Annual	
Facility Type: IGSA Intergovernmental Service Agreement (IGSA), ICE Service Processing Center (SPC), ICE Contract Detention Facility (CDF)			
Address:	705 Hanover Street		
City: Hamilton	State: OH	Zip Code: 45011	
County:	Butler		
CEO Name: (b)(6); (b)(7)(C)	CEO Title: Warden		
Review Information (Use following format for dates: mm/dd/yyyy)			
Start Date: 01/12/2016	End Date: 1/14/2016	Review Type: Headquarters	
Lead Name: (b)(6); (b)(7)(C)	Lead Title: LCI		
Review Document Issue Summary (See Document Check Section to Review/Update)			
Error(s) Found:	0	Items Not Rated:	0

ICE HQ USE ONLY: (DO NOT EDIT*)

Form Name: G324A_NDS	Form Key: 10	Form Date: 9/20/2013
Form Type: NDS	Form Review Type: Annual	Form Over/Under 72 Status: 072

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

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G-324A (NDS) With SAAPI (Coded 09202013) Detention Inspection Form Worksheet for IGSA's - Rev: 09/20/2013 – Form Key 10

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DOCUMENT CHECK

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

ACCESS TO LEGAL MATERIALS (Key: A)		
POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility provides a designated law library for detainee use.	Meets Standard	The law library operates on a two cart mobile system. 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.
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. It is quiet, well lit, and has sufficient chairs and workspace for demand.
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 use for legal issues. The computers have the LexisNexis program and word processing capabilities. Supplies are available from any staff member 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 01/11/2016, according to the shift sergeant.
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	The facility ICE Liaison Officer and the DOs inspect, update, and maintain/replace legal material and equipment as needed.
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	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO LEGAL MATERIALS (Key: A)		
POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	
11. Detainees are permitted to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	Meets Standard	
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 expediter/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 LexisNexis portable computer units are carried to detainees in administrative detention and/or disciplinary segregation status upon request.
15. All denials of access to the law library fully documented.	Meets Standard	The facility indicated that no detainee has been denied library access. The denial would be documented.
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	

<p>ACCESS TO LEGAL MATERIALS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i></p>

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

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)*

Each detainee has the opportunity to research his/her legal status and is provided the necessary equipment and materials. 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. There have been no outside organization requests or detainee requests for additional legal materials in the last year.

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.

Detainees obtain photocopies of legal material from the housing unit officer. Requests for photocopies of legal material are denied only 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 and/or the request is clearly abusive or excessive. Staff does not read a document that on its face is clearly related to a legal proceeding involving the detainee.

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 have access to a law library, legal materials, printing and copying services, and the supplies necessary to research and prepare their legal cases. To evaluate this standard, post orders and the local handbook were reviewed; the LexisNexis program on the computers was manipulated; and detainees and employees were interviewed.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/14/2016

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP I

ADMISSION AND RELEASE (Key: B)		
POLICY: ALL DETAINEES WILL BE ADMITTED AND RELEASED IN A MANNER THAT ENSURES THEIR HEALTH, SAFETY, AND WELFARE. THE ADMISSIONS PROCEDURE WILL, AMONG OTHER THINGS INCLUDE: MEDICAL SCREENING; A FILE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WILL BE INVENTORIED, DOCUMENTED, AND SAFEGUARDED AS NECESSARY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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 occurs during intake and continues in the housing unit. The topics include the items listed in this component. Orientation consists of the issuance of the local handbook and the National Detainee Handbook. The orientation video is on a loop and is shown on the televisions that are located in each of the detainee's rooms inside the housing unit.
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	Intake medical screenings are conducted by trained correctional officers. They complete a medical questionnaire for each detainee immediately upon arrival while the detainees are in the intake area.
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	
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.
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	Post orders state that ICE detainees are strip searched only when there is reasonable suspicion to believe that the detainee is concealing contraband.
6. The "Contraband" standard governs all personal property searches. IGSA's/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 IGSA's for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	Meets Standard	This IGSA facility uses their own forms to report lost or missing property claims.
8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ADMISSION AND RELEASE (Key: B)		
POLICY: ALL DETAINEES WILL BE ADMITTED AND RELEASED IN A MANNER THAT ENSURES THEIR HEALTH, SAFETY, AND WELFARE. THE ADMISSIONS PROCEDURE WILL, AMONG OTHER THINGS INCLUDE: MEDICAL SCREENING; A FILE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WILL BE INVENTORIED, DOCUMENTED, AND SAFEGUARDED AS NECESSARY.		
COMPONENTS	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	
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>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Procedures are in place to protect the community, detainees, staff, volunteers and contractors by ensuring secure and orderly operations when detainees are admitted to or transferred from the facility. The orientation video meets the standards of quality established and is approved by the ICE field office, according to the ICE officer. The video is available in English and Spanish. A telephonically based language line-VOCALINK provides interpretation services when needed. Institutional clothing, including undergarments, is provided to the detainees. Personal clothing is not permitted. Feminine hygiene items are provided. The evaluation of this standard included review of post orders, detention files, the detainee handbooks and orientation materials; observation of the intake area; and interviews with detainees, ICE and facility staff.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP I

CLASSIFICATION SYSTEM (Key: C)		
POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES		
COMPONENTS	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	Upon admission, detainees are classified and assigned a local classification designation with an objective classification system using all available information.
2. The facility classification system includes: <ul style="list-style-type: none"> • Classifying detainees upon arrival; • Separating from the general population those individuals who cannot be classified upon arrival; and • The first-line supervisor or designated classification specialist reviewing every classification decision. 	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.
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	
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	All detainees are afforded the same recreation opportunities and are allowed recreation with detainees of similar classification designations.
7. Detainee work assignments are based upon classification designations.	N/A	ICE detainees are not allowed to work at this facility.
8. The classification process includes reassessment/reclassification. At IGSA's, detainees may request reassessment 60 days after arrival.	Meets Standard	The classification process at this IGSA includes reassessments every thirty days. A detainee may request a review of his/her classification level at any time.
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 allow for a detainee to appeal his/her classification. The classification officer, along with the lieutenant, has the authority to reduce classification levels.
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 his designee.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

CLASSIFICATION SYSTEM (Key: C)		
POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
12. The Detainee Handbook or equivalent for IGSA's explains the classification levels, with the conditions and restrictions applicable to each.	Meets Standard	

CLASSIFICATION SYSTEM – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> The booking officers have been trained in the classification and admission process. ICE detainees are assigned different color uniforms that designate their classification level. The majority of ICE detainees are classified medium security. A detainee is classified as maximum when an event triggers a higher security classification. There were no ICE detainees classified as maximum security during the inspection. To evaluate this standard, ICE officers, a sergeant, a lieutenant, and the classification officer were interviewed; post orders, handbooks, classification forms were reviewed; and housing units were inspected, including the booking area. Reviewed documentation confirmed detainees are classified according to the guidelines of the standard. Detainees interviewed revealed that they felt safe in their surroundings and knew how to access programs and services.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6); (b)(7)(C)	Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP I

CORRESPONDENCE AND OTHER MAIL (Key: D)		
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	Correspondence and other 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	
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	
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 presence of the detainee. The facility continues to open and inspect 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	
8. Staff is prohibited from reading or copying incoming special correspondence.	Meets Standard	
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	The facility does not inspect outgoing correspondence without cause, as stipulated by this component.
10. Correspondence to a politician or to the media is processed as special correspondence and is not read or copied.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

CORRESPONDENCE AND OTHER MAIL (Key: D)		
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
11. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	N/A	Mail is not rejected at this facility. The censored or rejected materials received are stored in the detainee property and are given to the detainee when they are released.
12. The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	Meets Standard	Procedures require that the detainee receive written notification of any rejection of outgoing mail.
13. Staff maintains a written record of every item removed from detainee mail.	Meets Standard	
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.	N/A	The facility does not accept any cash through the mail. If cash is received in the mail, the detainee is notified of the amount of cash in the mail and the cash is returned to the sender.
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	Identity documents can only be given to detainees when approved by ICE.
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	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.
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	
21. The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

CORRESPONDENCE AND OTHER MAIL – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Correspondence and other mail is being handled in accordance with the standard. 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. Detainees receive guidance that includes the definition of special correspondence and instructions on the proper labeling for special correspondence. The guidance also states that it is the detainee's responsibility to inform senders of special mail of the labeling requirement. Detainee correspondence and other mail are delivered to the detainee and to the postal service on regular schedules. Incoming correspondence is distributed to detainees within 24 hours of receipt by the facility and outgoing correspondence is delivered to the postal service no later than the day after it is received by facility staff or placed by the detainee in a designated mail depository, excluding weekends and holidays.</p> <p>Outgoing special correspondence is not opened, inspected, or read. The facility has procedures in place to reject incoming and outgoing general correspondence and other mail to protect the security, good order, or discipline of the institution; to protect the public; or to deter criminal activity.</p> <p>The evaluation of this standard included review of post orders, and the handbook; observation of postings in the housing units; and interviews with personnel and detainees.</p>		
Overall Rating: Meets Standard		
Reviewer Name (Printed)	(b)(6); (b)(7)(C)	Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETAINEE HANDBOOK (Key: E)		
<p>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.</p>		
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 the National Detainee Handbook and a site-specific handbook during admission. Both handbooks are available in English and Spanish, the most prevalent languages spoken at the facility.
2. The handbook is supplemented by the facility orientation video, where one is provided.	Meets Standard	The handbook is supplemented with an orientation video, which is shown during admission in English and Spanish.
3. All staff members receive a handbook and training regarding the handbook contents.	Meets Standard	
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 handbook is revised as necessary. Procedures are in place for the immediate communication of changes to personnel and detainees. The handbook was last revised in January 2016.
5. There an annual review of the handbook by a designated committee or staff member.	Meets Standard	The handbook is reviewed quarterly by select personnel appointed by the OIC.
6. The detainee handbook addresses the following issues: <ul style="list-style-type: none"> • Personal Items permitted to be retained by the detainee; and • Initial issue of clothes, bedding and personal hygiene items. 	Meets Standard	The handbook addresses both of 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 a medical examination will be conducted within fourteen days of arrival.
10. The handbook describes the facility, housing units, dayrooms, in-dorm activities, and special housing units.	Does Not Meet Standard	The handbook describes in-dorm activities, but fails to describe housing units, dayrooms and special housing units.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
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.	Does Not Meet 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	Disposable razors are made available daily by unit personnel. Practice indicates detainees attending court are afforded the opportunity to shave first as described in the National Detainee Handbook.
13. The handbook describes barber hours and hair cutting restrictions.	Does Not Meet Standard	Barber hours are described in the handbook; however, hair cutting restrictions are not addressed.
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 handbook addresses all the elements listed in this component except direct and free calls which are described in the National Detainee Handbook. A debit card system is not utilized.
15. The handbook addresses religious programming.	Meets Standard	
16. The handbook states times and procedures for commissary or vending machine usage, where available.	Does Not Meet Standard	Commissary schedules are described in the handbook. Commissary procedures are not addressed. There are no vending machines available for detainee use.
17. The handbook describes the detainee voluntary work program.	Does Not Meet Standard	The voluntary work program is not described in the handbook. ICE detainees, however, do not participate in the voluntary work program.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

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)
18. The handbook describes the library location and hours of operation, and law library procedures and schedules.	Meets Standard	Detainees have daily access to general library books that are delivered by book cart to the housing units on a rotating basis.
19. The handbook describes attorney and regular visitation hours, policies, and procedures.	Meets Standard	
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"> • Prohibited acts and severity scale sanctions; • Time limits in the Disciplinary Process; and • Summary of the Disciplinary Process. 	Meets Standard	The handbook describes the disciplinary policy and procedures, including the three bulleted items listed in this component.
24. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> • Informal (if used) and formal grievance procedures; • The appeals process; • In CDF facilities: procedures for filing an appeal of a grievance with ICE. • Staff/detainee availability to help during the grievance process. • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Homeland Security. 	Meets Standard	All of the bulleted items required for an IGSA facility are addressed in the handbook.
25. The detainee handbook describes the medical sick call procedures for general population and segregation.	Meets Standard	Sick call procedures for all housing units are addressed in the handbook. Detainees are required to submit a request form as part of the protocol.
26. The handbook describes the facility recreation policy including: <ul style="list-style-type: none"> • Outdoor recreation hours. • Indoor recreation hours. 	Does Not Meet Standard	The handbook addresses the recreation policy and hours of operation for indoor recreation but does not address outdoor recreation.
27. The handbook describes the detainee dress code for daily living; and work assignments.	Meets Standard	
28. The handbook specifies the rights and responsibilities of all detainees.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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 receive a copy of the National Detainee Handbook and the site-specific handbook during the admission process. The 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 OIC ensures translation assistance is available to detainees exhibiting literacy or language problems, and to those who request it. If a detainee cannot read or does not understand the language of the handbook, the OIC ensures the handbook and orientation materials are presented to the detainee in a manner he/she can understand.

The National Detainee Handbook describes routine searches of the detainee's person, property and common areas; unscheduled searches are conducted when deemed necessary; and there are occasions when random searches are conducted when detainees enter or leave the building or area.

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.

The handbook is free from derogatory or insensitive statements about detainee religion or culture. Evaluation of this standard was based on review of the handbooks and interviews with personnel and detainees.

Overall Rating: Meets Standard

Reviewer Name (Printed):

(b)(6); (b)(7)(C)

Completion Date: 1/14/2016

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

FOOD SERVICE (Key: F)		
POLICY: 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	Food service is provided under contract by Aramark Corporation (Aramark). The food service director (FSD) is professionally trained through Aramark and is ServSafe certified. The FSD provides the training and written policies for all food service personnel.
2. The Cook Supervisor is on duty on days when the FSA is off duty and vice versa.	Meets Standard	A food service supervisor is on duty when the FSD is not on duty.
3. The FSA provides food service employees with training that specifically addresses detainee-related issues. <ul style="list-style-type: none"> In ICE Facilities this includes a review of the ICE "Food Service" standard 	Meets Standard	The FSD provides training to personnel relative to their assigned duties and responsibilities. The training includes detainee-related issues and a review of the ICE food service standard. 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	Knives are maintained in a locked cabinet in the supervisor's office under the control of the FSD or the supervisor on duty.
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 in the food service department. Knives are physically secured to the workstations and the 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	
8. The FSA monitors staff implementation of the facility's population counts procedures. Staff is trained in count procedures.	Does Not Meet Standard	Policy requires all counts are conducted by trained officers. On 01/13/2016, it was observed that non-ICE detainees working in the food service department were not physically counted during the 9:00 a.m. count.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

FOOD SERVICE (Key: F)		
POLICY: 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)
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 observed to be 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 worker job descriptions were reviewed and updated on 01/13/2016 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	
12. During orientation and training session(s), the CS explains and demonstrates: <ul style="list-style-type: none"> • Safe work practices and methods; • Safety features of individual products/pieces of equipment; and • Training covers the safe handling of hazardous material[s] the detainees are likely to encounter in their work. 	Meets Standard	Training provided to the non-ICE detainee workers assigned to food service includes all of 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	Training for non-ICE detainees is documented and maintained in an individual training binder in the FSD's office. ICE detainees do not participate in the voluntary work program.
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 detainee workers at this IGSA facility are not compensated monetarily. All work is considered voluntary. ICE detainees do not participate in the voluntary work program.
15. Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.	Meets Standard	The menu calls for a hot item in at least two of the three meals served each day. The feeding schedule reflected fewer than fourteen hours between meals.
16. For cafeteria style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	N/A	There are no cafeteria-style operations. All detainees are served meals in the housing units.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

FOOD SERVICE (Key: F)		
POLICY: 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)
17. The facility has a standard 35-day menu cycle. IGSA's use a 35 day or similar system for rotating meals.	Meets Standard	This IGSA facility uses a 28-day menu cycle.
18. The FSA or facility considers the ethnic diversity of the facility's detainee population when developing menu cycles (Provide examples).	Meets Standard	The FSD considers the ethnic diversity of the facility's population when developing cycle menus. A varied menu is provided. Items such as goulash, spaghetti, stroganoff, tamale pie, Asian fried rice and Spanish rice are offered.
19. A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	Meets Standard	All menus have been certified by a registered dietitian. Any revisions require the menus to be re-certified by the dietitian.
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"> • If yes, documenting each substitution, along with its justification • With copy to FSA 	Meets Standard	A food service supervisor has the authority to change menu items if necessary. All menu changes are documented with justification and a copy is forwarded to the FSD.
22. All staff and volunteers know and adhere to written "food preparation" procedures.	Meets Standard	
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	Meets Standard	Requests for religious diets are forwarded to a designated sergeant for review.
24. A common-fare menu available to detainees whose dietary requirements cannot be met on the main line. <ul style="list-style-type: none"> • Changes to the planned common-fare menu can be made at the facility level; • Hot entrees are offered three times a week; • The common-fare menus satisfy nutritional recommended daily allowances (RDAs); • Staff routinely provide hot water for instant beverages and foods; • Common-fare meals are served with: <ul style="list-style-type: none"> • Disposable plates and utensils. • Reusable plates and utensils. • Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items. 	Meets Standard	A common-fare menu that includes the bulleted items listed in this component is used to accommodate detainees whose religious dietary requirements cannot be met on the main menu. At the time of the inspection, five detainees were participating in the common-fare program.
25. A supervisor at the command level must approve a detainee's removal from the Common-Fare Program.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

FOOD SERVICE (Key: F)		
POLICY: 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)
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	All schedules are provided by Aramark in conjunction with the OIC.
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"> • Muslims fasting during Ramadan receive their meals after sundown. • Jews who observe Passover but do not participate in the Common-Fare Program receive the same Kosher-for- Passover meals as those who do participate. • Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. 	Meets Standard	The facility provides Ramadan meals, kosher meals and meatless meals as required for Lent.
28. The food service program addresses medical diets.	Meets Standard	
29. Satellite-feeding programs follow guidelines for proper sanitation.	Does Not Meet Standard	Following preparation, meals are delivered to the housing units in unsecured food carts and dispensed under staff supervision. The standard requires that food carts have locking devices.
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 01/12/2016. 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. Observed portion sizes were adequate.
32. Food is not used to punish or reward detainees based upon behavior.	Meets Standard	The facility has a special diet for disciplinary action that consists of a "warden's burger" meal. Policy prohibits ICE detainees from receiving this meal.
33. The food service staff instructs detainee volunteers on: <ul style="list-style-type: none"> • Personal cleanliness and hygiene; • Sanitary techniques for preparing, storing, and serving food; and • The sanitary operation, care, and maintenance of equipment. 	Meets Standard	All of 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.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

FOOD SERVICE (Key: F)		
POLICY: 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)
34. Everyone working in the food service department complies with food safety and sanitation requirements.	Does Not Meet Standard	The floor had cracked tiles and missing grout in different areas. Food debris was observed on the floors and under equipment throughout the area. The oven handle had a buildup of baked on food and there was rust on the floors and walls. The dry storage area had bugs on sticky traps and a mouse was observed running around on a bottom shelf.
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"> Who conducts the inspections? 	Meets Standard	A daily/weekly inspection of the food service area is conducted and documented by the FSD or designee.
36. Equipment is inspected for compliance with health and safety codes and regulations. <ul style="list-style-type: none"> When was the most recent inspection? Which agency conducted the inspection? 	Meets Standard	Food service areas are inspected for compliance with health and safety codes and regulations annually by the Ohio Department of Health and Agriculture. The last inspection was conducted on 12/16/2015.
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	Logs documenting the temperatures of the dishwashing machine indicated these checks are completed as required. Appropriate temperatures were observed during the inspection.
39. Staff documents the results of every refrigerator/freezer temperature check.	Meets Standard	The refrigerator/freezer temperature checks are recorded as required. The previous month of documentation was reviewed, with no discrepancies found.
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	All incoming food shipments are inspected by food service personnel for contraband, invoice accuracy, pest infestation and quality.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

FOOD SERVICE (Key: F)		
POLICY: 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)
42. Storage areas are locked when not in use.	Meets Standard	All storage areas were observed to be secured when not in use.

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

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

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 and staffed by the Aramark Corporation. The food service program is providing detainees with nutritious and attractively presented meals. Interviews with detainees revealed numerous complaints regarding the quality and quantity of the food being served. The meals were observed to be prepared, plated and served within the proper time and temperature requirements and observed portion sizes were adequate. The menus have been nutritionally analyzed, certified and approved by a registered dietitian.

The freezers and coolers were clean and organized. The dry storage area had sanitation concerns including bugs on sticky traps and a mouse was observed running around on a bottom shelf.

Aramark policy requires their employees receive pre-employment physicals prior to being assigned to the job. However, the facility was unable to provide documentation of medical clearance from Aramark. Non-ICE detainees are cleared by the medical department prior to working in food service and are monitored on a daily basis for duty fitness. ICE detainees do not work in the food service department. The FSD ensures that all menu items are fit for consumption, that sanitary guidelines are observed and that food temperatures are maintained within industry standards. Food is prepared with minimal manual contact. Taste tests are made with clean or disposable utensils. Servers use spoons, ladles, scoops and other approved utensils when handling/serving food items and do not serve food with their hands. Employees supervise the serving line to ensure proper tray preparation and delivery. All leftovers were labeled to identify the product, preparation date and time. Sack meals are of the same nutritional value as other meals prepared by food service. The food service area was well-lit but had sanitation concerns in the main kitchen area. The floor had cracked tiles and missing grout in different areas. Food debris was observed on the floors and under equipment throughout the area. The oven handle had a buildup of baked on food and there was rust on the floors and walls. 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 had sufficient capacity for the volume.

Manufacturer's information about the operation, cleaning and care of the equipment is maintained by the FSD. All equipment was installed in accordance with the manufacturer's recommendations and approved engineering practices. A three compartment sink was not labeled as required by the standard. However, this deficiency was corrected during the inspection. The three compartments, all with hot and cold water, are utilized for manually washing, rinsing and sanitizing pots, pans, utensils and equipment. Each compartment has the capacity to accommodate items to be cleaned and industry standards are followed. The dishwashing machine includes automatic dispensers and is maintained in good working order, maintaining appropriate temperatures and water pressure. Plates, cups, utensils and equipment placed in the machine are exposed to all cycles. General safety guidelines are followed. Light fixtures, vent covers and similar equipment are attached to the walls and ceilings and in good repair. A fixed fire suppression system is installed. An external qualified company inspects each system as required. The fire suppression system is equipped with an audible alarm and is connected to the control center's annunciator panel. All keys are maintained in the control center utilizing a chit system for accountability purposes.

The lavatory was in need of general cleaning and repairs. The door was not operational as a metal strip was used to jimmy the lock so the door could be opened and the area inspected. A sink with hot and cold water, a trash receptacle, soap and towels is maintained just outside the lavatory for general hygienic practice by the non-ICE detainee workers. Only those chemicals and hazardous materials required for sanitary maintenance of the food service area, equipment and utensils are used and stored in the food service department. These materials are securely stored away from food and MSDS files are accessible to all personnel and non-ICE detainees. Chemical inventories were not up-to-date but were corrected during the inspection.

The facility maintains a two to three week supply of food. Inventory levels are established, monitored and periodically adjusted to correct excesses or shortages. An official inventory of items on hand is not taken annually with the FSD and a member of the financial management department as required by the standard. During evaluation of this standard, documentation was examined, employees and detainees were interviewed, food service areas were inspected, temperatures were checked and the food preparation process was observe

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

FOOD SERVICE – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Rating: Meets Standard		
Reviewer Name (Printed):	(b)(6); (b)(7)(C)	Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

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)
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. The detainee is provided a receipt for the items. 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	Personnel at this IGSA facility itemize detainee baggage and personal property using an electronic form that is comparable to the ICE property form. Detainees are provided a copy of the completed inventory form.
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	Detainee funds and valuables are inventoried and verified in the presence of two officers. All processing of funds and valuables is performed under recorded video surveillance.
7. Staff searches arriving detainees and their personal property for contraband.	Meets Standard	All new admissions and their property are searched 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	Property discrepancies are immediately reported to a supervisor and forwarded to ICE.
10. Staff follows written procedures when returning property to detainees.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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	
12. The facility attempts to notify an out-processed detainee that he/she left property in the facility: <ul style="list-style-type: none"> • By sending written notice to the detainee's last known address; • Via certified mail; and • The notice state that the detainee has 30 days in which to claim the property, after which it will be considered abandoned. 	Meets Standard	All forgotten detainee property is forwarded to ICE. ICE personnel attempt to return the property to the detainee using established protocols and in accordance with the requirements of the standard.
13. The facility disposes of abandoned property in accordance with written procedures. <ul style="list-style-type: none"> • If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE. 	Meets Standard	Written procedures at this IGSA facility require that abandoned ICE detainee property is 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 and procedures are in place to control and safeguard detainee personal property. All detainee funds, (except coins) valuables and other personal property are properly searched, inventoried, receipted and secured. A review of ICE detainee funds transactions verified funds surrendered during admission are accurately deposited into the detainees' accounts and receipts are issued. Detainees have access to these funds immediately through the commissary system. During normal working hours, inmate accounts pick up the funds from the booking safe, ensure the accuracy, document the funds and directly deposit them at a bank. Copies of all transactions are maintained on file. All coins are receipted and maintained as property in the secure property room.

The property area was maintained in a clean and orderly manner and inspected as necessary to protect detainee property. All excess property is handled in conjunction with ICE personnel. Any property that is removed from the facility is inventoried with a copy of the record placed in the detainee's detention file. Detainees may keep a reasonable amount of personal property in their possession, providing the property poses no threat to facility safety or security. Once assigned to a housing unit, detainees are allocated non-securable space for their authorized personal property. Identity documents are maintained by ICE in the detainee's A-file. Upon request, ICE personnel will provide a certified copy to the detainee.

Upon release, any detainee missing funds or property may file a claim. The claim will be investigated by designated personnel. The facility does not arbitrarily impose a ceiling on the amount to be reimbursed for a validated claim. The OIC or designee will immediately notify ICE of all claims and outcomes. Claims are paid immediately after the conclusion of the investigation.

During the evaluation of this standard, personnel and detainees were interviewed, policy was reviewed and the admission process was observed.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

FUNDS AND PERSONAL PROPERTY – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Rating: Meets Standard		
Reviewer Name (Printed):	(b)(6); (b)(7)(C)	Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

DETAINEE GRIEVANCE PROCEDURES (Key: H)		
<p>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.</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>1. Written procedures provide for the informal resolution of oral grievances (Not mandatory).</p> <ul style="list-style-type: none"> If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff. 	Meets Standard	Policy addresses and authorizes the resolution of grievances through informal or formal measures. There is no time limit in which a detainee can make their concern known.
<p>2. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures.</p> <ul style="list-style-type: none"> Detainees may seek help from other detainees or facility staff when preparing a grievance. Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary. 	Meets Standard	All of the requirements listed in this component are addressed in policy and practice. Grievance procedures are addressed in the handbook.
<p>3. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.</p>	Meets Standard	
<p>4. There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodged a complaint:</p> <ul style="list-style-type: none"> If yes, explain. 	Meets Standard	There have been no substantiated or documented cases of staff members harassing detainees who have filed complaints.
<p>5. Procedures include maintaining a Detainee Grievance Log.</p> <ul style="list-style-type: none"> If not, an alternative acceptable record keeping system is maintained. "Nuisance complaints" are identified in the records. For quality control purposes, staff document nuisance complaints received but not filed. 	Meets Standard	A detainee grievance log is maintained by the inmate services liaison. The liaison processes and files all grievances and does not consider any grievances to be nuisance complaints.
<p>6. Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.</p>	Meets Standard	A lieutenant indicated that any complaint of officer misconduct is immediately forwarded to the OIC and ICE for review and disposition. Per ICE personnel assigned to the facility, they monitor all grievances. There were three grievances filed alleging officer misconduct during the last twelve months.

<p>DETAINEE GRIEVANCE PROCEDURES – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i></p>

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETAINEE GRIEVANCE PROCEDURES – REVIEWER SUMMARY

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

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

Policies and procedures protect detainee rights and ensure they are treated fairly by providing a procedure for them to use to file grievances and appeals relating to their detention without fear of reprisal.

The facility makes every effort to resolve a detainee's complaint or grievance at the lowest level possible, in an orderly and timely manner. An informal grievance procedure offers the detainee the opportunity to resolve their grievance before resorting to a more time consuming and bureaucratic formal procedure, which requires that all communication between the detainee and the facility be in written form. The detainee is free to bypass or terminate the informal process at any time and move directly to a formal grievance stage or to ICE personnel. 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. The handbook includes information on the grievance procedures.

During the past twelve months, seven grievances were filed by ICE detainees, none were medical. The grievance log and copies of the grievances were reviewed for accuracy, resolution and to ensure time frames were followed, with no discrepancies noted. The three grievances alleging officer misconduct were for one incident, by one officer involving three detainees for a verbal confrontation. ICE was notified and appropriate action taken. The evaluation of this standard was based on a review of policies, procedures and logs, and on interviews with the grievance coordinator and detainees.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 01/14/2016

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

GROUP LEGAL RIGHTS PRESENTATIONS (Key: I)		
<p>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.</p>		
<p><input type="button" value="Standard N/A"/></p> <p>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")</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The Field Office is responsive to requests by attorneys and accredited representatives for group presentations.	N/A	
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.	N/A	
3. The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.	N/A	
4. Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	N/A	
5. Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.	N/A	
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.	N/A	
7. Detainees in segregation, unable to attend for security reasons, may request separate sessions with presenters. Such requests are documented.	N/A	
8. Interpreters are admitted when necessary to assist attorneys and other legal representatives.	N/A	
9. Presenters are afforded a minimum of one hour to make the presentation and to conduct a question-and-answer session.	N/A	
10. Staff permits presenters to distribute ICE-approved materials.	N/A	
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.	N/A	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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.	N/A	
13. The facility plays ICE-approved videotaped presentations on legal rights at regular opportunities, at the request of outside organizations.	N/A	
14. A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request	N/A	

GROUP LEGAL RIGHTS PRESENTATIONS – REVIEWER SUMMARY

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

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

There have been no group legal rights presentations in the last year.

Overall Rating: N/A

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/14/2016

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

Issuance and Exchange of Clothing, Bedding, and Towels (Key: J)		
POLICY: ICE REQUIRES THAT ALL FACILITIES HOUSING ICE DETAINEES PROVIDE CLEAN CLOTHING, BEDDING, LINENS AND TOWELS TO EVERY ICE DETAINEE UPON ARRIVAL. FURTHER, FACILITIES SHALL PROVIDE ICE DETAINEES WITH REGULAR EXCHANGES OF CLOTHING, LINENS, AND TOWELS FOR AS LONG AS THEY REMAIN IN DETENTION.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>1. The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, and towels.</p> <ul style="list-style-type: none"> The supply of these items exceeds the minimum required for the number of detainees. 	Meets Standard	Policy addresses the issuance and exchange of clothing, bedding, linens and towels. Observation of the supply of these items revealed that on-hand quantities are sufficient for the detainee population.
<p>2. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive:</p> <ul style="list-style-type: none"> One uniform shirt and one pair of uniform pants, or one jumpsuit; One pair of socks; One pair of underwear (Daily change); and One pair of facility-issued footwear. 	Meets Standard	Detainees are issued clean, seasonal clothing during in-processing. Items issued include one shirt, one pair of pants, two pairs of undergarments, one pair of socks; and one pair of footwear.
<p>3. Additional clothing is available for changing weather conditions, or as seasonally appropriate.</p>	Meets Standard	
<p>4. New detainees are issued clean bedding, linens, and towels. They receive at a minimum:</p> <ul style="list-style-type: none"> One mattress; One blanket; Two sheets; One pillowcase; One towel; and Additional blankets are issued based on local weather conditions. 	Does Not Meet Standard	All of the bulleted items listed in the component are issued to new detainees, except for a pillowcase. Pillowcases are not required because pillows are not issued. Additional clothing and bedding are provided to address temperature changes or medical needs.
<p>5. Detainees assigned to special work areas are clothed in accordance with the requirements of the job.</p>	Meets Standard	Non-ICE detainee workers are clothed in accordance with the requirements of the job. ICE detainees do not participate in the voluntary work program.
<p>6. Detainees are provided clean clothing, linen and towels.</p> <ul style="list-style-type: none"> Socks and undergarments - exchanged daily. Outer garments - twice weekly. Sheets - weekly. Towels - weekly. Pillowcases - weekly. 	Does Not Meet Standard	The laundry schedule and the amount of clothing, linens and towels issued is adequate to ensure that detainees are provided exchanges of the items consistent with the bulleted requirements listed in this component except socks and pillowcases.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

Issuance and Exchange of Clothing, Bedding, and Towels (Key: J)		
POLICY: ICE REQUIRES THAT ALL FACILITIES HOUSING ICE DETAINEES PROVIDE CLEAN CLOTHING, BEDDING, LINENS AND TOWELS TO EVERY ICE DETAINEE UPON ARRIVAL. FURTHER, FACILITIES SHALL PROVIDE ICE DETAINEES WITH REGULAR EXCHANGES OF CLOTHING, LINENS, AND TOWELS FOR AS LONG AS THEY REMAIN IN DETENTION.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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 are not assigned to work in the food service department.
8. Volunteer detainee workers are permitted to exchange outer garments more frequently.	Meets Standard	Non-ICE detainee workers may exchange outer garments as 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>		
Overall Remarks: <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 that supports the practice of good personal hygiene with the exception of socks and pillowcases. If a detainee wants to exchange his/her socks daily, they are required to send the socks to the laundry and go without socks until the laundry is returned. During the inspection, policy was changed to provide two pairs of socks to ensure daily exchange. Pillows and pillowcases are not provided. Washing and drying equipment is not available in the housing units. The evaluation of this standard was based on review of policy and procedures, observations of laundry and clothing issue processes, and interviews with officers and detainees.		
Overall Rating: Meets Standard		
Reviewer Name (Printed): (b)(6); (b)(7)(C)		Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

Marriage Requests (Key: K)		
POLICY: 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	Interviews with ICE personnel indicated the ICE field office considers 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 reviews each request and will document approval/denial in writing.
3. It is standard practice to require a written request for permission to marry.	Meets Standard	
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	All requests are forwarded to the ICE field office for approval. Marriage request decisions made by ICE are provided to all parties involved.
6. When permission is denied, the Warden/OIC states the basis for his/her decision.	Meets Standard	ICE is the approving authority for all marriage requests submitted by ICE detainees. Written decisions, provided to each detainee submitting a request, cite reasons for the action.
7. The Warden/OIC provides the detainee with a place and time to make wedding arrangements.	Meets Standard	The OIC provides time and a venue for conducting ICE approved marriages.

Marriage Requests – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)*

Detainees are informed about the marriage request procedures through the National Detainee Handbook. Detainees may seek legal assistance throughout the marriage application process. Guidelines for denying a detainee's marriage request include 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, an 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.

When a request is approved, the detainee, legal representative or other individual acting on the detainee's behalf makes all the marriage arrangements, including, but not limited to, blood tests, obtaining marriage license, and retaining an official to perform the marriage ceremony. ICE and facility 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 made are consistent with the security and orderly operation of the facility according to the following stipulations: the ceremony shall take place inside the facility; all expenses relating to the marriage shall be borne by the detainee or person acting on the detainee's behalf; and the ceremony shall be private with no media publicity and only individuals essential for the marriage ceremony may attend. The OIC in conjunction with the FOD has the right of final approval concerning the time, place and manner of all arrangements. 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.

ICE ensures that all paperwork associated with the marriage is filed accordingly. There were no marriage requests during the previous twelve months. The evaluation of this standard was based on the review of procedures and on interviews with the OIC and ICE personnel.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 01/14/2016

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

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"> • Funeral; or • Deathbed 	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"> • Conduct themselves in a manner that does not bring discredit to the ICE; • Do not violate federal, state, or local laws; • Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants; • Make no unauthorized phone calls; and • Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return. 	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)

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

NON-MEDICAL EMERGENCY ESCORTED TRIPS – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> ICE handles non-medical emergency escorted trips for ICE detainees.	
Overall Rating: N/A	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 01/14/2016
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

RECREATION (Key: M)		
<p>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.</p>		
<div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 5px;">Standard N/A</div> <p>Click the above button if outdoor recreation is offered. Items 19-26 will be marked "N/A".</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a recreation program and facility.	Meets Standard	The recreation program includes activities within the housing unit dayrooms and the outdoor recreation area.
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 population did not exceed 350 detainees. Housing unit 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	Detainee recreation workers are not utilized.
5. The recreational specialist or trainee equivalent oversees recreation programs for special housing units (SHU) and special-needs detainees.	Meets Standard	Officers supervise detainee recreational activities in all housing units. There were no special-needs detainees in the facility during the inspection.
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	Meets Standard	In each housing unit dayroom, detainees have access to television, cards and various board games.
7. Outside activities are restricted to limited-contact sports.	Meets Standard	Outside activities include basketball, soccer, walking and calisthenics.
8. Each detainee has the opportunity to participate in daily recreation.	Meets Standard	
9. Detainees have access to recreation activities outside the housing units for at least one hour daily, 5 days a week.	Meets Standard	Detainees are offered an opportunity to participate in daily recreational activities outside the housing units during out-of-cell time.
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	Recreation areas are under constant supervision by officers and via video monitoring.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

RECREATION (Key: M)		
<p>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.</p>		
<div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 5px;">Standard N/A</div> <p>Click the above button if outdoor recreation is offered. Items 19-26 will be marked "N/A".</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	ICE detainees are not placed in the special housing unit (SHU). ICE detainees on administrative or disciplinary segregation status remain in their assigned housing unit with restrictive privileges. Detainees placed on this status are provided one hour of outdoor recreation daily. There were no detainees in either status during the inspection.
15. Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his/her recreation privileges.	Meets Standard	A written explanation would be provided if recreation privileges are revoked for safety or security reasons. There have been no such revocations during the past twelve months.
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 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	Any individual with a relationship of any kind with a detainee is 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"> • If yes, written procedures ensure timely review of all eligible detainees. 	N/A	Facility has indoor and outdoor recreation.
20. Case officers make written transfer recommendations about every six-month detainee to the OIC.	N/A	Facility has indoor and outdoor recreation.
21. The OIC documents all detainee-transfer decisions, whether yes or no.	N/A	Facility has indoor and outdoor recreation.
22. The detainee's written decision for or against an offered transfer documented in his/her A-file.	N/A	Facility has indoor and outdoor recreation.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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.		
<div style="border: 1px solid black; display: inline-block; padding: 2px 5px; margin-bottom: 5px;">Standard N/A</div> <p>Click the above button if outdoor recreation is offered. Items 19-26 will be marked "N/A".</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
23. Staff notifies the detainee's legal representative of his/her decision to accept/decline a transfer.	N/A	Facility has indoor and outdoor recreation.
24. If no recreation is available, the ICE Districts routinely review transfer eligibility for all detainees after 60 days.	N/A	Facility has indoor and outdoor recreation.
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	Facility has indoor and outdoor recreation.
26. The detainee's legal representative is notified of the detainee's/OIC's decision.	N/A	Facility has indoor and outdoor recreation.

RECREATION – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>This inspector observed recreation, reviewed policy and interviewed detainees and personnel. Detainees have access to recreational and exercise programs and activities within the constraints of safety and security.</p> <p>There are outdoor recreational areas attached to each housing unit. The outdoor recreation area has three solid walls and a ceiling and has a three foot by fifteen foot window located about twenty feet above the floor. The design of the room allows for natural light and a free exchange of outdoor air sufficient to reflect the outside climate and time of day. These recreational areas are accessible to each housing unit during out-of-cell time. Additional sedentary activities are offered in the housing unit's dayrooms on a daily basis. Detainees were observed on the phone, playing cards, and using the kiosk. There is a kiosk in each housing unit which is available for ordering commissary and phone cards.</p> <p>ICE detainees housed on administrative or disciplinary status recreate apart from general population detainees. They are afforded outdoor recreation daily for one hour. Procedures are in place to ensure that detainees who must be kept separate never participate in activities in the same location at the same time. Special attention is given to detainees in protective custody. A detainee on administrative status, a special needs detainee or a detainee in protective custody may be denied access to recreation when such action would create an immediate and serious threat to the safety or security of the detainee, other detainees or staff members. A detainee may be denied recreation privileges only with the written authorization of the OIC. The written authorization would indicate the reason why the detainee poses an unreasonable risk even when recreating alone. A written explanation would be provided if recreation privileges are revoked for safety or security reasons. There have been no such revocations during the past twelve months as no detainees have been placed on this status.</p> <p>The recreation areas were observed to be clean and in good repair with no noted deficiencies. The equipment provided was in proper working condition with no noted defects or concerns. The facility provides the necessary equipment and space to meet the recreational needs of the detainees.</p>	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/14/2016

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

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

RELIGIOUS PRACTICES (Key: N)		
POLICY: FACILITIES WILL PROVIDE ICE DETAINEES OF ALL FAITHS WITH REASONABLE AND EQUITABLE OPPORTUNITIES TO PARTICIPATE IN THE PRACTICES OF THEIR FAITH, LIMITED ONLY BY THE CONSTRAINTS OF SAFETY, SECURITY, THE ORDERLY OPERATIONS OF THE FACILITY AND BUDGETARY CONSIDERATIONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Detainees are allowed to engage in religious services.	Meets Standard	Detainees are permitted to participate in religious programs on a voluntary basis.
2. Space is available for detainees to conduct religious services.	Meets Standard	Religious services are conducted in the multi-purpose room in each housing unit. This area provides ample space for religious activities.
3. The facility allows detainees to observe the major "holy days" of their religious faith. <ul style="list-style-type: none"> • List any exceptions. 	Meets Standard	Different religious faiths and their holy days are accommodated, with no noted exceptions.
4. The facility accommodates recognized holy-day observances by: <ul style="list-style-type: none"> • Providing special meals, consistent with dietary restrictions; • Honoring fasting requirements; • Facilitating religious services; and • Allowing activity restrictions. 	Meets Standard	Procedures for accommodating recognized holy-day observances include the bulleted items listed in this component.
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	Volunteer credentials are checked and verified. All volunteers are required to pass a background investigation before participating in detainee programs.
7. Members of faiths not represented by clergy may conduct their own services within security allowances.	Meets Standard	
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	ICE detainees are not placed in special management units at this facility. The jail services coordinator facilitates pastoral visits by clergy to detainees unable to participate in regular religious practices due to safety or security concerns.

RELIGIOUS PRACTICES – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

RELIGIOUS PRACTICES – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Detainees of different religious beliefs are provided reasonable and equitable opportunities to participate in the practice of their respective faiths, limited only by concerns about safety, security and the orderly operation of the facility.</p> <p>Employees are prohibited from disparaging religious beliefs of a detainee and coercing or harassing a detainee to change religious affiliation. Attendance at all religious activities is voluntary and, unless otherwise specified by the OIC, is open to all. The facility does not require a detainee to profess a religious belief.</p> <p>The religious program is under the general direction of a jail services coordinator. The jail services coordinator organizes the religious program and recruits volunteers to conduct religious programs as required. The jail services coordinator ensures the equitable delivery of religious services to all faith groups. During the evaluation of this standard, the jail services coordinator was interviewed, policy was reviewed and the area where services are held was visited.</p>	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

DETAINEE TELEPHONE ACCESS (Key: O)		
POLICY: 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	
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	Meets Standard	Detainees are made aware of the telephone access policy during the orientation process. Information is also available in the detainee handbook.
3. Access rules are posted in housing units.	Meets Standard	
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	Key information is available 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 in the housing units at a ratio of one telephone for every twelve detainees.
6. Telephones are inspected regularly by facility staff to ensure that they are in good working order.	Meets Standard	ICE employees and facility staff inspect the telephones at least once a week.
7. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	Meets Standard	
8. The facility administration monitors repair progress and takes appropriate measures to ensure that required repairs are begun and completed timely.	Meets Standard	The facility ICE liaison officer follows up on repairs to ensure their completion.
9. Detainees are afforded a reasonable degree of privacy for legal phone calls.	Meets Standard	
10. A procedure exists to assist a detainee who is having trouble placing a confidential call.	Meets Standard	Detainees may request assistance from the housing unit officer, a facility supervisor, or ICE for confidential calls.
11. The facility provides the detainees with the ability to make non-collect (special access) calls.	Meets Standard	
12. Special Access calls are at no charge to the detainees.	Meets Standard	
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	The inspector was able to reach the OIG via an ICE detainee using the speed dial number 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	The OIG number is programmed into the detainee phone system.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

DETAINEE TELEPHONE ACCESS (Key: O)		
POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	Detainees may contact on-site ICE staff for approval to call a family member detained at another facility. Once approved, facility staff will assist the detainee with completing the call.
17. Any telephone restrictions are documented.	Meets Standard	Telephone restrictions are documented via the incident reporting system. There have been no telephone restrictions during the last year.
18. The facility has a system for taking and delivering emergency detainee telephone messages.	Meets Standard	According to the lieutenant, the shift sergeant ensures that emergency messages are delivered to the detainee.
19. Emergency phone call messages are immediately given to detainees.	Meets Standard	
20. Detainees are allowed to return emergency phone calls as soon as possible.	Meets Standard	
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	Detainees in disciplinary segregation status are permitted to make telephone calls during their recreation time and other out of cell times.
22. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	Meets Standard	
23. Detainees in disciplinary segregation are allowed phone calls for family emergencies.	Meets Standard	
24. Detainees in administrative detention and protective custody are afforded the same telephone privileges as those in general population.	Meets Standard	
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	All telephones are labeled with a notice that calls may be monitored and recorded.

DETAINEE TELEPHONE ACCESS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)*

The facility permits detainees to make direct calls to the local immigration court and the Board of Immigration Appeals; Federal and State courts where the detainee is or may become involved in a legal proceeding; to consular officials; to legal service providers, in pursuit of legal representation or to engage in consultation concerning his/her expedited removal case; to a government office, to obtain documents relevant to his/her immigration case; and in a personal or family emergency, or when the detainee can otherwise demonstrate a compelling need.

The OIC has established local institutional rules for the equitable allocation of telephone time. Telephone calls from housing unit telephones are limited to twenty minutes in duration in order to allow all detainees an opportunity to use the telephones. Telephone privileges may be suspended entirely during an emergency, but only with the authorization of the OIC or designee, and only for the briefest period necessary under the circumstances.

The facility permits indigent detainees to return emergency telephone calls free of charge.

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.

To evaluate this standard, policy was reviewed, interviews with ICE personnel, facility personnel and ICE detainees were conducted; the OIG speed dial number was tested; and telephones were checked in the housing units. Interviews with LEP detainees indicated that they understood the telephone procedures.

Overall Rating: Meets Standard

Reviewer Name (Printed)

(b)(6); (b)(7)(C)

Completion Date: 1/14/2016

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

VISITATION (Key: P)		
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. There is a written visitation schedule and hours for general visitation.	Meets Standard	The visitation schedule is available on the facility's website, in the local detainee handbook and is posted in the front lobby of the facility.
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	Visitation schedules, hours and rules are posted in the visitor entrance lobby of the facility.
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	The schedule and rules are available in the facility lobby and the facility website.
6. A general visitation log is maintained.	Meets Standard	
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 are not searched since visiting is primarily conducted through video visitation. 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 will be subject to search.
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.
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.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

VISITATION (Key: P)		
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	During any legal visit, detainees are given the option of continuing to meet with a legal representative through a scheduled meal period. If this happens, a meal will be provided at the conclusion of the meeting.
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	Contact visiting rooms are available for attorney meetings where 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.	Meets Standard	ICE detainees are not strip searched after contact visits with legal representatives.
20. Prior to each visit, legal service providers and assistants are identified per the standard.	Meets Standard	Legal visitors must present a valid identification that confirms their qualification as a legal visitor.
21. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	Meets Standard	
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	
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 ICE approval 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	
26. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	Meets Standard	Examinations by independent medical service providers and/or experts require prior approval from ICE officials. Review and approval procedures are consistent with the requirements of the standard.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

VISITATION – 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 has written procedures regarding incoming property and money for detainees. Social visitations are conducted via video and in person contact if approval by the OIC. Visitors may deposit money into a detainee's account in the lobby kiosk. Policy provides that any violation of the visitation rules may result in disciplinary action against the detainee, which may entail loss of visitation privileges. Visiting privileges are revoked only through the formal detainee disciplinary process. There have been no visits revoked during the last twelve months. Detainees are informed of the video visitation options through the detainee handbook.

Detainees are required to submit a visitor request form. A supervisor is authorized to deny or cancel a visit for inappropriate behavior by the detainee or visitor. In those cases, the supervisor is required to justify his/her action in a memorandum sent, through official channels, to the OIC.

Consultation visitation, both by telephone and face-to-face, is permitted. Detainees subject to expedited removal may consult whomever they choose, in person or by phone, at any time, during the first 48 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 ICE officer shall arrange for consultation by telephone.

The news media has access to the facility and ICE detainees, subject to the approval of the FOD. Media representatives are required to make advance appointments for tours and interviews. Requests for tours and interviews must be approved by the FOD. The OIC advises both media representatives and detainees that use of any detainee's name, identifiable photo or recorded voices require his/her permission. Media representatives must obtain a signed release from the detainee before photographing or recording his/her voice. Signed release forms are maintained in the detention files and a copy forwarded to ICE for inclusion in the A-file. Media representatives must comply with the facility's rules and regulations.

To evaluate this standard, ICE officers and employees were interviewed; visitation logs, post orders, postings, the county website, and the handbook were reviewed; and the visitation areas were observed.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 01/14/2016

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

VOLUNTARY WORK PROGRAM – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Reviewer Name (Printed): Daniel R. Henry	Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):	

Section II

Health Service Standards

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

HUNGER STRIKES (Key: R)		
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.		
COMPONENTS	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	Post orders require officers to refer detainees who refuse food for 72 hours to medical personnel.
2. CDFs and IGSAAs immediately report a hunger strike to the ICE.	Meets Standard	Post orders require the facility to report any ICE detainee hunger strike to ICE personnel.
3. The facility has established procedures to ensure staff respond immediately to a hunger strike.	Meets Standard	Post orders outline procedures for correctional and medical personnel to immediately respond to hunger strikes.
4. Policy and procedure require that staff isolate a hunger-striking detainee from other detainees. <ul style="list-style-type: none"> • If yes, in an observation room? 	Meets Standard	Post orders require employees to isolate hunger striking detainees in an observation room in their housing unit, in health services or in the intake area.
5. Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	Meets Standard	Medical personnel may house hunger striking detainees in a locked room in the health services unit.
6. Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	Meets Standard	Post orders require the documenting of daily weights and vital signs of hunger strikers on the hunger strike monitoring form.
7. The OIC of the facility obtains a hunger striker's consent before medical treatment.	Meets Standard	Post orders require that a hunger striker's consent is obtained prior to administering medical treatment.
8. A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.	Meets Standard	Detainees on hunger strike are asked to sign a treatment refusal form when rejecting medical evaluation and treatment.
9. During a hunger strike, staff document and provide the hunger-striking detainee three meals a day.	Meets Standard	Post orders require officers to deliver three meals each day to detainees on hunger strikes, irrespective of a verbal refusal of the meal.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

HUNGER STRIKES (Key: R)		
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
10. Staff maintains the hunger striker's supply of drinking water/other beverages.	Meets Standard	Hunger strikers are housed in a dry cell. Officers maintain the hunger striker's supply of water and other beverages. Detainees on hunger strike receive water or other beverages upon request.
11. During a hunger strike, staff removes all food items from the hunger striker's living area.	Meets Standard	All food and edible commissary items are removed from a hunger striker's cell.
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	Officers record food and fluid intake on Hunger Strike Monitoring Form, I-389.
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 upon 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.
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	The review of training documentation confirmed that officers and other personnel receive hunger-strike training during employee orientation and annually during refresher training. Medical personnel receive additional hunger-strike protocol training.
<p align="center">HUNGER STRIKE – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i></p>		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

HUNGER STRIKE – REVIEWER SUMMARY

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

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

Post orders establish procedures to protect the health and well-being of hunger strikers. Hunger strike procedures conform to the detention standards. Detention personnel are trained in the recognition, referral and monitoring of detainees engaging in a hunger strike. Medical personnel receive additional training in the medical management of hunger strikes. Mental health providers evaluate hunger striking detainees to determine whether the detainee's action is reasoned and deliberate or the manifestation of a mental illness. When a detainee is engaging in a hunger strike due to a mental condition, appropriate medical procedures are instituted. Treatment refusal would be documented in the medical record. Staff make reasonable efforts to convince detainees to voluntarily accept evaluation and treatment before involuntary procedures are administered against the detainee's will. Involuntary medical treatment is administered in accordance with applicable laws and only after medical personnel determines that the detainee's life or long term health is at risk. Before instituting involuntary treatment for an ICE detainee, the facility, in conjunction with appropriate ICE personnel would seek a federal court order to administer the treatment. The physician orders detainee release from hunger strike evaluation and treatment and documents it in the medical record.

Full compliance with the standard could not be determined as there have been no ICE detainee hunger strikes within the facility during the previous twelve months; therefore documentation of actual practices could not be inspected. Evaluation of this standard was based upon review of policies and interviews with staff.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/14/2016

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
1. Facilities operate a health care facility in compliance with state and local laws and guidelines.	Meets Standard	The licenses/certifications of health care professionals were reviewed and were current and valid. The facility complies with the minimum standards for jails in Ohio. The last inspection by the Ohio Department of Rehabilitation and Correction was conducted in June 2015.
2. The facility's in-processing procedures for arriving detainees include medical screening.	Meets Standard	The review of twenty ICE detainee medical records confirmed that in-processing procedures include medical screening by a trained officer. An additional medical screening is conducted by a medical provider, usually within 24 hours of the detainee's arrival.
3. All detainees have access to and receive medical care.	Meets Standard	Detainees access health care by completing a Request for Inmate Care form and placing the form in a locked box located in the housing unit. The forms are collected and reviewed by medical personnel at least once each day. Appointments with health care providers are scheduled based upon urgency of need. Detainees can request urgent care by contacting any staff member. Detainees are informed about the process orally during in-processing and also in the detainee handbook.
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 Service Corps (IHSC) Field Case Managers. Medical personnel also have telephonic contact with the Detroit IHSC Field Case Manager.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
5. The medical staff is large enough to provide, examine, and treat the facility's detainee population.	Meets Standard	Medical staffing includes one health services administrator (paramedic); a physician who provides onsite services three days every two weeks; a physician assistant who provides onsite services three days every two weeks; one registered nurse; three full-time paramedics; twenty part-time paramedics; one part-time licensed practical nurse; a part-time dentist who provides onsite services one day per week and a psychiatrist who provides onsite services one day per week. Contract mental health providers include five mental health providers. Staffing is adequate to provide necessary services to the detainee population. Medical personnel are onsite at all times.
6. The facility has sufficient space and equipment to afford detainee privacy when receiving health care.	Meets Standard	The health services unit includes one examination room, a dental suite, a medication storage room and a laboratory specimen collection room. There is sufficient space and equipment to provide privacy when delivering health care. Mental health encounters are conducted in private rooms within the housing units or in the forensics pod.
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 health services unit is its own restricted access area that is within the secure perimeter of the facility.
8. The medical facility entrance includes a holding/waiting room.	Meets Standard	A waiting room is adjacent to the health services unit.
9. The medical facility's holding/waiting room is under the direct supervision of custodial staff.	Meets Standard	The waiting room is under the supervision of a correctional officer when detainees are present.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
10. Detainees in the holding/waiting room have access to a drinking fountain.	Meets Standard	The waiting room includes a bathroom and a water fountain.
11. Medical records are kept apart from other files. They are: <ul style="list-style-type: none"> • Secured in a locked area within the medical unit; • With physical access restricted to authorized medical staff; and • Procedurally, no copies made and placed in detainee files. 	Meets Standard	Health services personnel use a computerized medical record to document patient encounters and record medical data. Access to health care information in the record is User ID and password protected and restricted to authorized health care personnel. Copies of medical records are not placed in detainee files.
12. Pharmaceuticals are stored in a secure area.	Meets Standard	Pharmaceuticals are stored in a locked room constructed of concrete walls from the floor to the true ceiling. The door to the room is metal and has a high security locking device. Access to the medication storage room is limited to authorized medical personnel.
13. Medical screening includes a Tuberculosis (TB) test. <ul style="list-style-type: none"> • Every arriving detainee receives a TB test during the admission process; • Detainee's TB-screening does not occur more than one business day after his/her arrival at the facility; and • Detainees not screened are housed separate from the general population. 	Meets Standard	The review of twenty ICE detainee medical records confirmed that symptomatic screening for TB is conducted during in processing procedures. Many of the detainees arrive with evidence of recent TB testing prior to their arrival. Detainees arriving without evidence of testing receive a TB skin test or chest x-ray within one business day of their arrival. Detainees who are not screened are housed separately from the general population. The facility has four negative airflow respiratory isolation rooms.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
<p>14. All detainees receive a mental-health screening upon arrival. It is conducted:</p> <ul style="list-style-type: none"> • By a health care provider or specially trained officer; and • Before a detainee’s assignment to a housing unit. 	Meets Standard	<p>The review of twenty ICE detainee medical records confirmed that trained officers conduct mental health screening on all detainees during in processing procedures. Additional mental health screening is conducted by medical providers, usually within 24 hours of the detainee's arrival. Screening occurs before a detainee's assignment to a housing unit.</p>
<p>15. The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.</p>	Meets Standard	<p>The review of twenty ICE detainee medical records confirmed that medical providers review all intake screening forms.</p>
<p>16. The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.</p>	Does Not Meet Standard	<p>This component was rated deficient during the last inspection. The review of twenty ICE detainee medical records confirmed that all detainees had a physical assessment conducted by a registered nurse (RN) within ten days of their arrival. Evidence was provided to show that the RN had received training by a physician to perform the assessments. The record review confirmed that a physician reviewed the assessments. However, there was no electronic signature by the physician noted on half of the assessments that were completed. The lack of documentation of physician review of physical assessments completed by a registered nurse was identified as a concern on the previous inspection. This is a repeat deficiency.</p>

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
17. Detainees in the Special Management Unit have access to health care services.	Meets Standard	Detainees housed in the special management unit have the same 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"> • Request slips are available in languages other than English, including every language spoken by a sizeable number of the facility's detainee population. • Service-request slips are delivered in a timely fashion to the health care provider. 	Meets Standard	The Request for Inmate Care form is available in English and Spanish. The form is available from officers in the housing units. Detainees place the completed forms in a locked box within each housing unit. The forms are collected daily by medical personnel.
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	Written post orders address delivering emergency health care when immediate outside medical attention is needed. Health care personnel are onsite at all times.
20. The plan includes an on-call provider.	Meets Standard	The physician and physician assistant provide on-call services when they are not at the facility. Their telephone numbers are available in the medical unit and central control.
21. The plan includes a list of telephone numbers for local ambulance and hospital services.	Meets Standard	The telephone numbers for the ambulance and hospital are located in the health services unit and in central control.
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 consistent with security and safety.
23. Detention staff is trained to respond to health-related emergencies within a 4-minute response time.	Meets Standard	The review of training documents confirmed that all officers are trained in cardiopulmonary resuscitation, first aid and the use of an automated external defibrillator. There is no place within the facility that cannot be accessed by trained employees in less than two minutes.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
24. Where staff is used to distribute medication, a health care provider properly trains these officers.	Meets Standard	All medications are distributed by medical personnel. Officers do not distribute medications.
25. The medical unit keeps written records of medication that is distributed.	Meets Standard	Health care personnel document distribution of medications in a computerized medication administration record.
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	Health services unit personnel notify the warden or facility personnel via a telephone or entries in the computerized jail management system when a detainee has medical needs that require accommodation.
27. A signed and dated consent form is obtained from a detainee before medical treatment is administered.	Meets Standard	The review of twenty ICE detainee medical records confirmed that detainees sign a general consent for medical treatment as part of in processing procedures. Additional consents are obtained for invasive procedures.
28. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	Meets Standard	Post orders require detainees to sign a Release of Medical Records form to authorize the release of confidential medical records to outside sources. Signed releases were noted on review of ICE detainee medical records.
29. The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	Meets Standard	Per the health services administrator, health services personnel receive adequate advance notice prior to the release, transfer or removal of an ICE detainee.
30. Detainee's medical records or a copy thereof, are available and transferred with the detainee.	Meets Standard	A medical summary accompanies all transferring ICE detainees. Copies of medical records are available for transfer with detainees if required for continuity of care.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
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	A medical summary form is transferred with each detainee. The forms are placed in a sealed and appropriately labeled envelope.

ACCESS TO MEDICAL CARE – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i>	
<p>Medical care in the facility is provided by employees or contractors of Butler County Correctional Center. Mental health services are provided through a contract with Transitional Living, Inc. Mental health personnel are present in the facility seven days per week and have their offices in a housing unit that is primarily dedicated to detainees with mental health concerns. Dental care is delivered by a contract dentist who is onsite one day each week. The facility provides out-patient and emergent medical services. Medical record reviews confirmed that detainees requesting health care by completing a request form were routinely evaluated within one to three days. Sick call is conducted seven days a week. Detainees with chronic illnesses or requiring regular or more frequent monitoring are identified through the intake screening and physical assessment processes. Regular evaluation and medical treatment are provided by licensed health care providers. Health care needs that are beyond the scope of services available within the facility are obtained through providers in the local community. Hospitals in the community also provide in-patient services, when required. Diagnostic imaging services are provided through a mobile imaging company.</p> <p>Detainees are not used in medical, pharmaceutical or cosmetic experiments or research. Detainees reporting the use of or dependence on mood or mind-altering substances are evaluated by medical and mental health providers. The physician has established guidelines for evaluation and treatment of new arrivals that require detoxification, including hospitalization, if necessary. Telephonic translation services are available.</p> <p>Detainees with symptoms suggestive of TB are placed in one of four negative air flow isolation rooms located in the medical observation unit. The diagnosis of AIDS is only made by a licensed physician. Detainees with HIV are only isolated or hospitalized when clinically indicated. When required, HIV diagnoses are reported to governmental bodies. Detainees with active TB disease are evaluated for HIV infection.</p> <p>The evaluation of this standard was based on a review of written post orders, twenty ICE detainee medical records, training documents and the facility detainee handbook; on observations in the medical unit and detainee housing units; and on interviews with medical and detention staff, and with the detainees. An inspection of the housing units, medical unit, forensic unit and the facility overall revealed a very clean, quiet and well maintained environment. Observed encounters between medical providers and detainees were professional. Interviews with ICE detainees revealed concerns regarding the quality of the food. There were no concerns voiced to this inspector regarding medical care or other issues regarding the conditions of confinement. ICE detainees are not charged co-pay for medical, dental, or mental health services. There are also no fees for medications ordered by a health care provider.</p>	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SUICIDE PREVENTION AND INTERVENTION (Key: T)		
POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.	Meets Standard	The review of training records confirmed that all new employees receive suicide prevention and intervention training during new employee orientation and annual refresher training.
2. Training prepares staff to: <ul style="list-style-type: none"> • Recognize potentially suicidal behavior; • Refer potentially suicidal detainees, following facility procedures; and • Understand and apply suicide-prevention techniques. 	Meets Standard	The review of the training PowerPoint presentation for suicide prevention and intervention confirmed that training addresses the bulleted items of the 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"> • Screening does not occur later than one working day after the detainee's arrival. 	Meets Standard	The review of twenty ICE detainee medical records confirmed that specially trained officers screen all detainees for suicide potential during in processing procedures. The screening occurs within twelve hours of the detainee's arrival.
4. Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.	Meets Standard	Post orders establish procedures for the referral of at-risk detainees to medical personnel. Detainees identified as at risk are referred to and evaluated by mental health providers in a timely manner.
5. The facility has a designated isolation room for evaluation and treatment.	Meets Standard	Female ICE detainees who are identified as having suicide potential are isolated in one of four cells in the intake area. Male ICE detainees who are identified as having suicide potential are isolated in one of four cells in the forensics (F) housing unit.
6. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	Meets Standard	As confirmed by observation, the designated isolation rooms do not contain any structures or small items that could be used in a suicide attempt.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SUICIDE PREVENTION AND INTERVENTION (Key: T)		
POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
7. Medical staff has approved the room for this purpose.	Meets Standard	The health services administrator stated that the rooms are approved for use as suicide watch cells.
8. Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes.	Meets Standard	As confirmed by observation, officers document their observations of detainees on suicide watch at least once every ten minutes.

SUICIDE PREVENTION AND INTERVENTION – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Suicide prevention and intervention post orders, procedures and training programs are in place to protect detainees at risk for suicide and to intervene appropriately if the situation warrants. A detainee placed on suicide watch is given a tear-resistant gown and is not permitted to retain possession of clothing or bedding from which strips of cloth could be torn. Per the review of the twenty ICE detainee medical records and the observation of in processing procedures, all detainees are screened for suicide potential. Review of the medical records documentation of those ICE detainees that were on suicide watch indicated practice is consistent with established post orders and procedures. Medical and security personnel can place a detainee on suicide watch with contract licensed mental health providers being contacted to conduct an assessment as soon as practical. Mental health providers determine the least restrictive precautions while the detainee is on suicide watch. The OIC reports to ICE any detainee clinically diagnosed as suicidal or requiring special housing for suicide risk. Only licensed mental health providers may release a detainee from suicide watch. When there is imminent risk of bodily injury or death, the mental health providers may make a recommendation for community hospitalization for evaluation and treatment. If the detainee refuses, facility administration, in consultation with licensed mental health providers and ICE, petitions the appropriate federal court to intervene against the detainee's will for hospitalization and treatment. There were no ICE detainee or non-ICE detainee suicides, or serious suicide attempts by ICE detainees over the last twelve months. The evaluation of this standard was based on the review of post orders and training documentation, observations, and interviews with medical, mental health and detention personnel.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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	The facility does not routinely accept ICE detainees who are seriously or terminally ill. ICE personnel are notified when ICE detainees develop health care concerns that are beyond the scope of services provided by the facility. At that time, the detainee would be transported to a more appropriate facility in the community, pending transport to a more appropriate detention center.
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"> The detainee's location; and The limitations placed on visiting. 	Meets Standard	Per the onsite ICE agent, the facility would notify ICE personnel when a detainee is housed at an offsite 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"> 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. 	Meets Standard	Post orders establish procedures for the preparation of advance directives and living wills. The state advance directive form is used. 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	Post orders reflect that a detainee may have a private attorney assist in the preparation of the documents.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
5. There is a policy addressing "Do Not Resuscitate Orders"	Meets Standard	Post orders address do not resuscitate (DNR) orders.
6. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation?	Meets Standard	Post orders specify that detainees housed in this facility with a validated DRN order would receive maximum therapeutic efforts short of resuscitation.
7. The facility notifies the DIHS Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSA's, this notification is made through the local ICE representative.	Meets Standard	Post orders require medical personnel to notify ICE personnel when an ICE detainee has a DNR order in his/her medical record. An ICE representative would make all other notifications.
8. The facility has written procedures to address the issues of organ donation by detainees.	Meets Standard	Post orders establish procedures addressing organ donation by ICE detainees. The procedures are identical to the requirements of the standard.
9. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.	Meets Standard	Post orders require the facility to notify ICE personnel when an ICE detainee dies while in service. Per the onsite ICE agent, ICE would make other notifications to the deceased detainee's family and consulates.
10. The facility has a policy and procedure to address the death of a detainee while in transport.	Meets Standard	Post orders establish procedures for managing medical emergencies and 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	The facility is not an ICE location. Per the onsite ICE agent, the detainee's remains would be disposed of in accordance with the provisions of the standard.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
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"> • If the detainee's is a U.S. military veteran, is the Department of Veterans Affairs notified? 	Meets Standard	Per the onsite ICE agent, ICE would provide an indigent's burial if neither the family nor consulate claims the deceased detainee's remains. ICE would also notify the Department of Veterans Affairs if the detainee was a U.S. military veteran.
13. An original or certified copy of a detainee's death certificate is placed in the subject's a-file.	Meets Standard	Per the onsite ICE agent, an original or certified copy of a detainee's death certificate would be placed in the detainee's a-file. Full compliance with the component could not be determined, as there were no ICE detainee deaths since the previous twelve months
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"> • Performance of an autopsy; • Who will perform the autopsy; • Obtaining state approved death certificates; and • Local transportation of the body. 	Meets Standard	Post orders establish procedures addressing the bulleted items of the component. Full compliance with the component could not be determined, as there were no ICE detainee deaths since the previous twelve months.
15. ICE staff follows established procedures to properly close the case of a deceased detainee.	Meets Standard	There have been no ICE detainee deaths in the previous twelve months. Per the onsite ICE agent, ICE would follow established procedures to close the case of a deceased detainee.

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH – REVIEWER SUMMARY

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

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)*

The facility is not staffed or equipped to house seriously or terminally ill detainees. If a detainee were to become seriously or terminally ill while housed at this facility, ICE is notified immediately to arrange the detainee's transfer to a local hospital or to a more appropriate detention facility.

Procedures are in place for appropriately responding to the death of a detainee in the facility or while in transit. Per detention and medical personnel, there were no detainee deaths in the prior twelve months.

DNR policies include the following: a DNR order can only be written by the physician, who is the CD; basic patient rights are protected; the decision to withhold resuscitative services is considered when the detainee has requested or strongly endorsed the decision, the detainee is diagnosed with a terminal illness or injury, the DNR is consistent with sound medical practice and not in any way associated with any measures to hasten death; the medical file includes explicit DNR directions, forms and memoranda recording diagnosis and prognosis, express wishes of the detainee, immediate family's wishes, consensual decisions and medical professional recommendations, mental competency evaluation (as appropriate), and informed consent; there are written procedures for notifying medical staff of the DNR order; and the facility notifies the IHSC medical director and other ICE officials of the name and basic circumstances of any detainee with a DNR order. No ICE detainees with a DNR have been housed at this facility. As there have been no ICE detainee deaths at this facility in the last twelve months, this inspector was unable to review medical record documentation to determine if the facility is in full compliance with the standard. The evaluation of this standard was based on a review of established post orders and training documentation, and on interviews with facility medical and detention personnel.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/14/2016

Reviewer Signature (for printed form submission):

Section III

SECURITY AND CONTROL STANDARDS

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

CONTRABAND (Key: V)		
POLICY: ALL DETENTION FACILITIES WILL ENSURE THE PROPER HANDLING AND DISPOSAL OF ALL CONTRABAND. DOCUMENTATION OF CONTRABAND DESTRUCTION IS REQUIRED.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	Post orders describe how illegal contraband is to be confiscated and documented as evidence pending a review for disciplinary action and/or prosecution. The contraband is placed in a safe in the shift supervisor's office and an incident report is prepared by the officer who discovered it.
2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	Meets Standard	Post orders require contraband that is government property be held and treated as evidence pending 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	Post orders provide direction on how to return property not needed as evidence to the proper authority.
4. Altered property is destroyed following documentation and using established procedures.	Meets Standard	Post orders provide instructions on how to properly document and dispose of altered property.
5. Before confiscating religious items, the OIC or designated investigator contacts a religious authority.	Meets Standard	Post orders require that a religious authority be consulted before confiscating religious items deemed to be contraband.
6. Staff follows written procedures when destroying hard contraband that is illegal.	Meets Standard	
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"> • If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use. 	Meets Standard	Post orders state that contraband that may be evidence in connection with a violation of a criminal statute shall be 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.

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

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

CONTRABAND – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Evaluation of this standard included a review of the post orders on contraband and interviews with a shift supervisor, a training officer and a lieutenant. During pre-service and annual training, officers receive instruction on how to detect, confiscate and report various types of contraband.</p> <p>Detainees are advised of the rules and procedures governing contraband via the local handbook and an orientation video. All medication brought into the facility at the time of booking is forwarded to the medical department for disposition. Medication found in the possession of a detainee for whom it was not prescribed is considered hard contraband and confiscated and forwarded to the medical department. Officers consult with a medical professional if they are uncertain as to whether the medication was prescribed to that detainee.</p> <p>Excess property is disposed of in accordance with post orders or forwarded to ICE if the property was abandoned by the detainee. Post orders outline the procedures that must be followed to determine if an item will be destroyed and the process for destruction if appropriate. Contraband that is not designated as "hard" is logged and stored with the detainee's property in a locked property room.</p> <p>No ICE detainee has been required to send out excess property, and none have been discovered with contraband in their possession during the last twelve months. Contraband at this facility is searched for, confiscated, documented and disposed of as this standard requires.</p>		
Overall Rating: Meets Standard		
Reviewer Name (Printed):	(b)(6); (b)(7)(C)	Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETENTION FILES (Key: W)		
POLICY: EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY ICE DETAINEE BOOKED INTO THE FACILITY, EXCLUDING ONLY DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETENTION FILE WILL CONTAIN COPIES AND, IN SOME CASES, THE ORIGINAL OF SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE FACILITY: CLASSIFICATION SHEET, MEDICAL QUESTIONNAIRE, PROPERTY INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. A detention file is created for every new arrival whose stay will exceed 24 hours.	Meets Standard	Detention files are created for every detainee during the admission process.
2. The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	Meets Standard	Detention files contain originals and copies of such documents as Form I-203, Form I-213, classification documents, property inventory forms, identification sheets, and other forms generated during the admission process.
3. The detainee's detention file also contains documents generated during the detainee's custody. <ul style="list-style-type: none"> • Special requests • Any G-589s and/or I-77s closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same 	Meets Standard	Electronic and manual copies of detention files are maintained. Special requests, disciplinary reports and grievances are filed electronically in the jail management system. The other bulleted items are contained in the manual file.
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 file cabinets 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	
6. The officer closing the detention file makes a notation that the file is complete and ready to be archived.	Meets Standard	The officer closing the detention file adds the release documents and initials the file before sending it to be archived.
7. Staff makes copies and sends documents from the file when properly requested by supervisory personnel at the receiving facility or office.	Meets Standard	Copies of documents will be sent upon receipt of a written request or court order.
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	Only authorized employees have access to detention files. The files are signed out and in electronically within the jail management system.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETENTION FILES – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>A detention file is created for each detainee and maintained at the facility. Electronic records are password protected. The files reviewed contained the required admission and transfer documentation and copies of other documents created during the detainees' stay at the facility. The IGSA forwards all documents relating to the individual's detention to the receiving facility for inclusion into the A-file, when applicable. The inspector reviewed six active files that did not contain the Form I-203 that gave the facility the authority to detain. The 203s were corrected during the inspection. The review of six inactive files revealed that all files contained the appropriate release paper work as outlined in the standard.</p> <p>The evaluation of this standard was based on reviews of detention files; observation of the records room; and interviews with facility and ICE staff.</p>	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 01/14/2016
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	Meets Standard	Written procedures outline a disciplinary system which uses progressive levels of reviews and appeals.
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	Meets Standard	
3. Written rules prohibit staff from imposing or permitting the following sanctions: <ul style="list-style-type: none"> • corporal punishment • deviations from normal food service • clothing deprivation • bedding deprivation • denial of personal hygiene items • loss of correspondence privileges • deprivation of physical exercise 	Meets Standard	Post orders prohibit officers from permitting the imposition of any of the sanctions listed in this component.
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 disciplinary violations are listed in the handbook and posted in the housing units. An orientation video which includes these topics is shown to all detainees.
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"> • Rights and Responsibilities • Prohibited Acts • Disciplinary Severity Scale • Sanctions 	Meets Standard	The requirements of this component are posted in the housing units and are included in the detainee handbook. The information is available in both English and Spanish.
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	Meets Standard	Post orders encourage informal attempts to resolve minor infractions. The attempts are documented electronically.
7. Incident reports and Notice of Charges are promptly forwarded to the designated supervisor.	Meets Standard	The reporting officer must forward the report to the disciplinary hearing sergeant prior to the end of the shift.
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	
9. An intermediate disciplinary process is used to adjudicate minor infractions.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
10. A disciplinary panel (or equivalent in IGSA's) adjudicates infractions. The panel: <ul style="list-style-type: none"> • Conducts hearings on all charges and allegations referred by the UDC; • Considers written reports, statements, physical evidence, and oral testimony; • Hears pleadings by detainees and staff representatives; • Bases its findings on the preponderance of evidence; and • Imposes only authorized sanctions 	Meets Standard	At this IGSA facility, a sergeant is designated as the disciplinary hearing official. This official conducts hearings on all charges and allegations referred for adjudication. The official considers written reports, statements, physical evidence and oral testimony as part of the hearing process. The sergeant also hears pleadings and statements from the detainees and staff representatives, and determines a finding based on substantial evidence and imposes authorized sanctions.
11. A staff representative is available if requested for a detainee facing a disciplinary hearing.	Meets Standard	Detainees may request a staff representative to assist them in their disciplinary hearings.
12. The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	Meets Standard	
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	The maximum time that can be imposed in disciplinary segregation is 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	
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	Meets Standard	

DISCIPLINARY POLICY – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)*

In evaluating this standard, the disciplinary hearing officer and a shift supervisor were interviewed, policy and the local handbook were reviewed and disciplinary report packets were examined. The rules regarding conduct and detainee rights are in the local handbook and in postings in the housing units and common areas. The local handbook notifies detainees of the disciplinary process, the prohibited acts and disciplinary severity scale and the procedure for appealing disciplinary findings. Informal resolutions for minor infractions are encouraged. A detainee is not held accountable for misconduct if medical staff finds him/her mentally incompetent. Detainees who lack the ability to understand the nature of the disciplinary proceedings are considered incompetent and this opinion is documented.

A sergeant conducts the disciplinary hearing and all appeals are heard by a lieutenant. Time served in segregation pending the outcome of the proceedings may be credited to the number of days to be spent in the segregation unit after the infraction is adjudicated. The disciplinary report and accompanying documents are not placed in the file of a detainee who is found not guilty. The facility retains discipline material in its own files.

Two ICE detainees were cited for rule violations during the last twelve months and the documentation for both of those incidents was reviewed. On 01/21/2015, an ICE detainee refused to comply with directives given to him in the hold room area. He was written up for this violation, waived his right to a hearing and was given a fifteen day commissary restriction. On 03/01/2015 another ICE detainee was charged with assaulting another detainee, resulting in the victim requiring sutures for his injuries. During the disciplinary process, he was given thirty days in disciplinary segregation, but was transferred from the facility before the sanction could be imposed. No ICE detainee has been placed in disciplinary segregation during the last twelve months.

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: 1/14/2016
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Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
1. Policy precludes detainees or detainee groups from exercising control or authority over other detainees.	Meets Standard	
2. Detainees are protected from: <ul style="list-style-type: none"> • Personal abuse • Corporal punishment • Personal injury • Disease • Property damage • Harassment from other detainees 	Meets Standard	Policy and post orders address all of the requirements of the component.
3. Staff is trained to identify signs of detainee unrest. <ul style="list-style-type: none"> • What type of training and how often? 	Meets Standard	All officers receive instruction on identifying signs of detainee unrest during pre-service and annual training. Officers are trained to identify these signs of unrest and to observe and 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	Post orders require officers to document and report the information required by this component to the shift supervisor. Information is also included in the summary section of the computer-based jail 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 emergency plans and their implementation. Sufficient time for review, adopting changes and implementation of the plans is provided.
6. The plans address the following issues: <ul style="list-style-type: none"> • Confidentiality • Accountability (copies and storage locations) • Annual review procedures and schedule • Revisions 	Meets Standard	
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"> • Local law enforcement agencies • State agencies • Federal agencies 	Meets Standard	The facility has agreements for cooperative emergency assistance with local, state and federal law enforcement agencies.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

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	The hostage plan and procedures are made available to all new personnel during pre-service training and are available to all employees on the facility computer system.
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	Post orders and training require all employees to disregard instructions from hostages, regardless of their rank. Post orders require that hostages be provided with medical and psychological screenings immediately following a hostage incident.
11. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	Meets Standard	Emergency plans include medical treatment for affected personnel and detainees during and after an incident.
12. Food service maintains at least 3 days' worth of emergency meals for staff and detainees.	Meets Standard	Food service maintains a two to three week supply of emergency meals for personnel and detainees.
13. Written plans identify locations of shut-off valves and switches for all utilities (water, gas, electric).	Meets Standard	Emergency plans include diagrams, shut-off instructions and photographs of utility locations and switches for all utilities.
14. Written procedures cover: <ul style="list-style-type: none"> • Work/Food Strike • Disturbances • Escapes • Bomb Threats • Adverse Weather • Internal Searches • Facility Evacuation • Detainee Transportation System Plan • Internal Hostages • Civil Disturbances 	Meets Standard	
EMERGENCY (CONTINGENCY) PLANS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

EMERGENCY (CONTINGENCY) PLANS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i>	
<p>A lieutenant is responsible for the development and implementation of the emergency plans. All department heads are required to review all policies, including emergency plans, annually. A master copy of the plan is maintained in the lieutenant's office and all plans, with the exception of sensitive information, are accessible to staff on the facility computer system. 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 computer system.</p> <p>The facility has agreements with local police and fire departments and other state and federal agencies as required by this standard. In the emergency plans, there is a letter from a local fire official, dated 01/14/2015 that states that all emergency plans, including the evacuation plan have been reviewed and approved. There have been no incidents during the last twelve months that resulted in the use of any emergency plan.</p> <p>A review of policy and training documentation; interviews with officers, a shift supervisor and a lieutenant; and onsite observations confirmed that the facility ensures a safe environment for detainees and staff by having contingency plans in place to effectively respond to emergencies. The plans have been created to minimize the harming of human life and the destruction of property as this standard requires.</p>	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	Meets Standard	Policy establishes procedures for storing, issuing and maintaining inventories of hazardous materials.
2. Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	Does Not Meet Standard	Inventories of all toxic and caustic substances stored in maintenance, food service and the laundry area were not up-to-date. All flammable substances are stored outside the secure perimeter.
3. The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. <ul style="list-style-type: none"> The files list all storage areas, and include a plant diagram and legend. The MSDSs and other information in the files are available to personnel managing the facility's safety program. 	Meets Standard	The MSDS binders were complete, with all of the bulleted requirements listed in this component included. The master file is maintained by the maintenance supervisor and lieutenant.
4. All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: <ul style="list-style-type: none"> Wear personal protective equipment; and Report hazards and spills to the designated official. 	Meets Standard	It was observed that personal protective equipment is available in all areas where chemicals are dispensed. Interviews with officers confirmed that all spills would be reported to a supervisor.
5. The MSDSs are readily accessible to staff and detainees in work areas.	Meets Standard	MSDS binders were available in all work areas where chemicals are used.
6. Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> Quantities are limited; and Staff always supervises detainees using these substances. 	Meets Standard	Quantities of chemicals utilized in the housing units are limited and their use is supervised by officers. All chemicals used in the housing units are diluted prior to use.
7. All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	N/A	All flammable and combustible materials are stored outside the secure perimeter and therefore, were not inspected. Detainees do not have access to these materials.
8. Lighting fixtures and electrical equipment installed in storage rooms and other hazardous areas meet National Electrical Code requirements.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
9. The facility has sufficient ventilation, and provides and ensures clean air exchanges throughout all buildings.	Meets Standard	
10. Vents return vents, and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility.	Meets Standard	During the inspection, no vents or ducts were observed to be blocked or obstructed.
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 facility is centrally heated and air-conditioned and maintains the required temperature ranges for seasonal comfort. Temperatures taken during the inspection were within industry standards.
12. Shower and sink water temperatures do not exceed the industry standard of 120 degrees.	Meets Standard	Water temperatures taken in the housing units were within industry standards.
13. All toxic and caustic materials are stored in their original containers in a secure area.	Meets Standard	Observation of secured chemical storage areas indicated that all toxic and caustic materials are stored in their original containers.
14. Excess flammables, combustibles, and toxic liquids are disposed of properly and in accordance with MSDSs.	Meets Standard	Interviews with the maintenance supervisor indicated that all chemicals are disposed of according to MSDS requirements.
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 maintenance supervisor reported that the facility does not use products which contain methyl alcohol. None were observed during the inspection.
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 in the use, storage and disposal of hazardous materials. The food service dishwashing machine and laundry machines have remote dispensing features. ICE detainees are not authorized to have access to or work with flammable, toxic or caustic materials.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	
18. A technically qualified officer conducts the fire and safety inspections.	Meets Standard	The environmental supervisor has 23 years' experience as a fire chief. He conducts all fire and safety inspections.
19. The Safety Office (or officer) maintains files of inspection reports.	Meets Standard	
20. The facility has an approved fire prevention, control, and evacuation plan.	Meets Standard	The fire prevention, control and evacuation plan was reviewed and approved by the City of Hamilton Fire Department on 01/14/2015.
21. The plan requires: <ul style="list-style-type: none"> • Monthly fire inspections; • Fire protection equipment strategically located throughout the facility; • Public posting of emergency plans with accessible building/room floor plans; • Exit signs and directional arrows; and • An area-specific exit diagram conspicuously posted in the diagrammed area. 	Meets Standard	The fire prevention, control and evacuation plan includes the required elements listed in this component. The area-specific exit diagrams are in English and Spanish.
22. Fire drills are conducted and documented monthly.	Meets Standard	A review of documentation and interviews with personnel indicated that fire drills are conducted as required. Fire drills include emergency key drills.
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 units. 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 unit's dayroom common area.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
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COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
25. The sanitation standards are conspicuously posted in the barbershop.	Meets Standard	There is no dedicated barber shop; however, sanitation standards are posted in the common area of each housing unit where barbering services are conducted.
26. Written procedures regulate the handling and disposal of used needles and other sharp objects.	Meets Standard	
27. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	Meets Standard	
28. Standard cleaning practices include: <ul style="list-style-type: none"> • Using specified equipment; cleansers; disinfectants and detergents. • An established schedule of cleaning and follow-up inspections. 	Meets Standard	Specified equipment, cleansers, disinfectants and detergents are used in the cleaning processes. The facility has an established cleaning and inspection schedule. The observed cleaning practices incorporate the items listed in 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	A private licensed and certified company is contracted to remove infectious/bio-hazardous waste from the facility.
32. Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	Meets Standard	
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"> • At least monthly. • The pest-control program includes preventative spraying for indigenous insects. 	Meets Standard	A licensed pest control company is contracted to conduct monthly exterminating services, including preventative spraying for indigenous insects.
35. Drinking water and wastewater is routinely tested according to a fixed schedule.	Meets Standard	The City of Hamilton conducts routine testing of drinking water and wastewater requirements. There have been no reported problems with water contamination during the inspection period.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
36. Emergency power generators are tested at least every two weeks. <ul style="list-style-type: none"> • Other emergency systems and equipment receive testing at least quarterly. • Testing is followed-up with timely corrective actions (repairs and replacements). 	Meets Standard	The emergency power generator is tested for mechanical readiness weekly for thirty minutes. It is inspected and maintained by an external generator service company quarterly, with repairs and preventive maintenance completed as necessary. All other emergency equipment is tested as required.

ENVIRONMENTAL HEALTH AND SAFETY – REVIEWER SUMMARY
(Use following format for dates: mm/dd/yyyy)

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ENVIRONMENTAL HEALTH AND SAFETY – REVIEWER SUMMARY

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

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

Environmental health and safety policy protects detainees, personnel, contractors and volunteers from injury and illness by ensuring high standards of cleanliness and sanitation are maintained. During evaluation of this standard, MSDS master and storage site files were inspected and policy on fire suppression, evacuations, inspections and drills was reviewed. The physical plant and the hazardous materials storage areas were inspected, personnel were interviewed, inspection results and appropriate files were reviewed, and overall sanitation was observed.

The facility provides a safe environment for detainees through comprehensive fire prevention practices and the control of hazardous materials. The sheriff's office has installed a fire alarm and detection system that includes an automatic sprinkler system for fire suppression in all areas that meet local and national fire safety codes. Fire drills are scheduled so that employees on each shift participate in drills. Current exit diagrams do not identify or explain areas of safe refuge. Inspection, testing, and maintenance of fire protection equipment, in accordance with NFPA codes, are performed.

The maintenance supervisor compiles a master index of all hazardous substances in the facility including locations and a master file of all MSDSs utilized. The master index includes a comprehensive up-to-date list of emergency phone numbers, a semi-annual review form and the local fire department has access to an approved copy. Chemical inventories were not up-to-date in different storage sites. The inventories were corrected during the inspection. All flammable substances are stored outside the secure perimeter. All storage areas were observed to be within OSHA standards. OSHA approved eyewash stations were observed in designated areas in the facility.

Environmental health conditions are maintained at a high level that meets recognized standards of hygiene. General cleaning procedures include isolation cleaning, terminal cleaning, blood and body fluid clean-up and the selection and use of disinfectants. Infectious waste is clearly labeled and bagged. Red infectious waste bags are used and are impermeable and specifically for bio-hazardous waste storage. Universal precautions are followed by all personnel when handling untreated infectious waste.

The facility has developed an exposure-control plan. Should an individual become exposed while handling potentially contaminated sharp instruments, the individual is counseled regarding baseline testing for HBV and HIV and referred to their health care source. 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.

The environmental supervisor and designated personnel conduct special investigations and comprehensive surveys of environmental health conditions. They provide advisory, consultative, inspection and training services regarding environmental health conditions as needed and provide recommendations to the OIC and ICE concerning environmental health conditions.

The housing units were observed to be very clean, sanitary and in good repair. Individual cells were clean, organized with no clutter or graffiti observed. The toilets and sinks were clean and operational with hot and cold running water. The showers were clean, mold, mildew and rust free with hot and cold running water. An inspection of the facility overall reflected a positive environment, clean conditions, and no issues being noted with the conditions of confinement. The facility has a working system to control its hazardous materials and has established safety protocols to address any emergencies that occur.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 01/14/2016

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

HOLD ROOMS IN DETENTION FACILITIES (Key: AA)		
POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS, MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSING INTO OR OUT OF THE FACILITY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The hold rooms are situated within the secure perimeter.	Meets Standard	The hold rooms are situated 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	The hold rooms are well ventilated and well lighted and 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 contain sufficient seating 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	The hold rooms used to process detainees in and out of this facility do not contain any of the items prohibited by this component.
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 and escape proof.
6. Individuals are not held in hold rooms for more than 12 hours.	Meets Standard	Post orders prohibit detainees from being held in the hold rooms for more than twelve hours.
7. Male and females are segregated from each other.	Meets Standard	
8. Detainees under the age of 18 are not held with adult detainees.	Meets Standard	
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	
10. In older facilities, officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.	Meets Standard	The hold rooms are equipped with toilets, permitting detainees access on a regular basis.
11. All detainees are given a pat down search for weapons or contraband before being placed in the room.	Meets Standard	
12. Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring.). <ul style="list-style-type: none"> • Hold rooms are irregularly monitored every 15 minutes. • Unusual behavior or complaints are noted. 	Meets Standard	
13. When the last detainee has been removed from the hold room, it is given a thorough inspection.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

HOLD ROOMS IN DETENTION FACILITIES (Key: AA)		
POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS, MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSING INTO OR OUT OF THE FACILITY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	There is a written evacuation plan which includes procedures for removing detainees from the hold rooms in the event of fire and/or building evacuation. The supervisor of this area is responsible for the evacuation.
15. An appropriate emergency service is called immediately upon a determination that a medical emergency may exist.	Meets Standard	

HOLD ROOMS IN DETENTION FACILITIES – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i>	
<p>Evaluation of this standard included a review of documentation, interviews with officers and the supervisor in the hold room area and onsite observations of the hold room. This facility houses male and female detainees and surveillance of the hold room is by direct supervision through observation windows.</p> <p>Officers inspect parcels, suitcases, bags, bundles, boxes and other property before accepting any item brought by the detainees. Sharp objects and items considered contraband are removed from the detainee's possession. All newly arriving detainees undergo a pat search by an officer of the same gender as the detainee. Detainees are also required to be screened by the BOSS (Body Orifice Security Scanner).</p> <p>An officer looks at every individual before placing him/her in the hold room, checking for obvious mental or physical conditions. Apparent symptoms are referred to the medical department. Officers provide a meal to detainees held in the hold room for more than six hours or are in the hold room during a meal. They also question the detainees about when they last had a meal and provide a meal then, if appropriate. Officers are trained to be sensitive to the cultural/religious culinary restrictions and/or differences of detainees whenever possible. The supervisor is notified regarding unusual detainee behavior or complaints. Detainees are not permitted to smoke in the hold room or any area in the facility.</p> <p>No officer enters the hold room unless another officer is stationed outside the door (b)(7)(E)</p> <p>(b)(7)(E) Any evidence of tampering with doors, locks, windows, plumbing or fixtures discovered during a hold room inspection is reported to the supervisor for corrective action or repair.</p> <p>Officers notify the supervisor immediately of medical emergencies. When the detainee is removed from the hold room for outside treatment, policy requires that officers accompany and remain with the detainee until doctors determine whether the condition will require hospitalization, and then either return the detainee to the facility or notify the shift supervisor and await further instructions.</p> <p>During this inspection, two of the hold rooms had mattresses and blankets. The intake supervisor explained that the rooms were being used for suicide watches and not for processing ICE detainees in or out of the facility. ICE detainees are given priority during intake and are placed in a large hold room that affords constant supervision. There is a television in this room that shows the orientation video to the detainees while they wait processing. Post orders prohibit ICE detainees from being held in this area for longer than twelve hours.</p>	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/14/2016

HOLD ROOMS IN DETENTION FACILITIES – REVIEWER SUMMARY

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

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP I

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)
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 is responsible for all administrative duties and responsibilities relating to keys and locks.
3. The security officer, or equivalent in IGSA's, provides training to employees in key control.	Meets Standard	
4. The security officer, or equivalent in IGSA's, maintains inventories of all keys, locks and locking devices.	Meets Standard	The designated sergeant maintains inventories of all keys and related material. The maintenance department keeps records on all lock related devices.
5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	Meets Standard	A preventive maintenance program is followed by the maintenance department.
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.	Meets Standard	Post orders require that combinations for safes be changed annually.
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	
11. All worn or discarded keys and locks are cut up and properly disposed of.	Meets Standard	The maintenance supervisor destroys all worn or discarded keys and locks.
12. Padlocks and/or chains are prohibited from use on cell doors.	Meets Standard	
13. The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to: <ul style="list-style-type: none"> • Occupational Safety and Environmental Health Manual, Ch. 3; • National Fire Protection Association Life Safety Code 101. 	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

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)
14. The operational key board is sufficient to accommodate all the facility key rings, including keys in use, and is located in a secure area.	Meets Standard	The operational key board located in the control room in a locked key storage cabinet is sufficient to accommodate all facility key rings, including keys in use.
15. Procedures are in place to ensure that key rings are: <ul style="list-style-type: none"> • Identifiable; • The numbers of keys are cited; and • Keys cannot be removed. 	Meets Standard	Individual key rings were inspected and contain a chit identifying the key ring and the number of keys on the ring. The key rings have a barrel lock which prevents keys from being removed from the rings.
16. Emergency keys are available for all areas of the facility.	Meets Standard	Emergency keys for all areas of the facility are located in the control room and the sheriff's office dispatch center.
17. The facilities use a key accountability system.	Meets Standard	
18. Authorization is necessary to issue any restricted key.	Meets Standard	
19. Individual gun lockers are provided. <ul style="list-style-type: none"> • They are located in an area that permits constant officer observation. • In an area that does not allow detainee or public access. 	Meets Standard	Gun lockers are in four areas of the facility located away from detainee and public access. Cameras offer direct supervision of the gun lockers by the control center officer.
20. The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	Meets Standard	Post orders mandate that all keys are counted each shift.
21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> • Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. • When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. • Detainees are not permitted to handle keys assigned to staff. 	Meets Standard	All employees are trained and held responsible for the proper handling of keys. Employees are required to follow all of the procedures listed in this component.

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Evaluation of this standard included interviews with a lieutenant, the maintenance supervisor and the sergeant assigned key control responsibilities and a control center officer. It also included review of post orders and inspection of the keyboards and key rings in the control center, inspection of the location of gun lockers and review of preventive maintenance documentation. All key rings, including the emergency key rings, are stored in a secure key box in the control center.</p> <p>Housing unit officers exchange keys when they relieve each other during shift change. The control center officer calls them and confirms that they have the proper number of keys during his required daily accounting of all facility keys. The control center officer completes a report of his accounting of all of the keys electronically on the facility computer system.</p> <p>The OIC has developed written procedures authorizing the use of restricted keys. Policy requires that all safe combinations be changed annually to ensure their integrity. Keys and locks are maintained, accounted for and secured as this standard requires.</p>	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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	There is one formal count on each of the three shifts each day.
2. Activities cease or are strictly controlled while a formal count is being conducted.	Meets Standard	All activities cease during the formal count.
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 ceases for the duration of a formal count.
5. Formal counts in all units take place simultaneously.	Meets Standard	Formal counts occur simultaneously.
6. Detainee participation in counts is prohibited.	Meets Standard	Detainee participation in counts is prohibited.
7. A face-to-photo count follows each unsuccessful recount.	Meets Standard	A face-to-photo count follows each unsuccessful recount.
8. Officers positively identify each detainee before counting him/her as present.	Does Not Meet Standard	Officers do not positively identify the detainees assigned to food service before counting them present.
9. Written procedures cover informal and emergency counts. <ul style="list-style-type: none"> • They are followed during informal counts and emergencies. 	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 intake supervisor maintains the out-count of all detainees temporarily leaving the facility during each count.
11. This training is documented in each officer's training folder.	Meets Standard	

POPULATION COUNTS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

POPULATION COUNTS – REVIEWER SUMMARY

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

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

In evaluating this standard, post orders were reviewed, a formal count was observed in a housing unit, and the count reconciliation process was observed in the shift supervisor's office. Formal and informal counts are conducted to ensure accountability for all detainees and officers are trained to make a positive identification of a living body. The shift supervisor verifies the accuracy of formal counts. The shift supervisor records counts on a count sheet and then electronically by area, as they are reported. In the event a detainee is unaccounted for following a face-to-photo count, the supervisor on duty would initiate the escape policy. If area counts are incorrect, the officers are required to recount. In the event the recount results are incorrect, the OIC is notified and additional officers are directed to the area to assist in the recount. The count is not formally cleared until the error is identified and corrective action is taken. The shift supervisor maintains the master count.

During the 9:00 a.m. count on the second day of this inspection, it was observed that the count for non-ICE detainees assigned to work in food service was not taken. Post orders require that an officer from the intake area go to food service and count the detainees, ensure that the number of detainees reported on the out-count is accurate and report the count at that area to the shift supervisor. Food service employees related that no officer comes there during count. This is a violation of the standard that requires all detainees to be positively identified before counting them present and the practice has not been followed as required by the post orders.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/14/2016

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

POST ORDERS (Key: AD)		
POLICY: ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR CARRYING OUT THEIR DUTIES. THIS GUIDANCE INCLUDES THE POST ORDERS ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST ANNUALLY, AND GIVEN TO EACH OFFICER UPON ASSIGNMENT TO THAT POST.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	Revisions to the post orders, emergency memoranda and bulletins are communicated to correctional personnel via the facility computer system and at pre-shift briefings.
3. One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.	Meets Standard	
4. The IGSA maintains a complete set (central file) of post orders.	Meets Standard	All post orders are available on the facility computer system. This system is accessible to all personnel with a need to know and can be reviewed on the computer at their duty post.
5. The central file is accessible to all staff.	Meets Standard	A shift supervisor confirmed that a central file of post orders is accessible to all personnel on the facility computer system.
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 has signed and dated the post orders.
8. A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.	Meets Standard	
9. Procedures keep post orders and logbooks secure from detainees at all times.	Meets Standard	Procedures are in place to ensure post orders and logbooks are kept secure from detainees at all times.
10. Every armed-post officer qualifies with the post weapon(s) before assuming post duty.	Meets Standard	The only armed- posts are the transportation officers who must qualify with the post weapons before assuming post duty.
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 post orders for housing units track the event schedule.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

POST ORDERS (Key: AD)		
POLICY: ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR CARRYING OUT THEIR DUTIES. THIS GUIDANCE INCLUDES THE POST ORDERS ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST ANNUALLY, AND GIVEN TO EACH OFFICER UPON ASSIGNMENT TO THAT POST.		
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	Housing unit officers record detainee activity in a computerized log. The post orders include instructions on maintaining the computerized logs.

POST ORDERS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> The evaluation of this standard included a review of policy and post orders and staff interviews. The OIC is responsible for updating and approving all post orders and the revisions are made and stored on a computer in the OIC's office. Copies of post orders are available on each fixed post electronically and hard copies of the post orders are available in the OIC's office, the shift supervisor's office and central control. Officers are provided comprehensive written direction for carrying out their duties with the post orders and those who were observed and interviewed had a working knowledge of unit operations. Policy provides official on-duty time for officers to read their post orders prior to assuming their post. The shift supervisor is responsible for ensuring that officers understand the post orders for the post they are assigned, regardless of whether the assignment is temporary, permanent or due to an emergency.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) <input type="text" value="(b)(6); (b)(7)(C)"/>	Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
1. The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> • Posts to be inspected; • Required inspection forms; • Frequency of inspections; • Guidelines for checking security features; and • Procedures for reporting weak spots, inconsistencies, and other areas needing improvement 	Meets Standard	Post orders outline which posts conduct security inspections in the different areas throughout the facility. An electronic inspection form is used. Written procedures identify the areas to be inspected. Post orders address all the requirements of this component.
2. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	Meets Standard	Officers conduct security checks throughout their shifts. Most officers are required to complete a security check of their respective posts each hour.
3. Documentation of security inspections is kept on file.	Meets Standard	The security inspections are kept on file electronically.
4. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	Meets Standard	There are procedures for reporting problems on the security inspection forms. Follow-ups on recurring problems are conducted by the shift supervisor.
5. The front-entrance officer checks the ID of everyone entering or exiting the facility.	Meets Standard	All visitors sign a log book in the front entrance.
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	
9. The Control Center is staffed around the clock.	Meets Standard	The control center is staffed around the clock.
10. Policy restricts staff access to the Control Center.	Meets Standard	Access to control center is restricted by post orders.
11. Detainees are restricted from access to the Control Center.	Meets Standard	Detainees are prohibited from access to the control center.
12. Communications are centralized in the Control Center.	Meets Standard	All communications are 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.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
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"> • The driver's name; • Company represented; • Vehicle contents; • Delivery date and time; • Date and time out; • Vehicle license number; and • Name of employee responsible for the vehicle during the visit 	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	Post orders mandate that contractor tools entering the facility are inventoried before entry or exit is permitted.
18. The SMU entrance has a sally port.	Meets Standard	
19. Written procedures govern searches of detainee housing units and personal areas.	Meets Standard	
20. Housing area searches occur at irregular times.	Meets Standard	Policy requires that housing areas are searched at irregular times.
21. Every search of the SMU and other housing units is documented.	Meets Standard	Searches of all housing units are documented in the facility's computer system. A review of documentation verified adherence to these procedures.
22. Storage and supply rooms, walls, light and plumbing fixtures, accesses, and drains, etc., undergo frequent, irregular searches. These searches are documented.	Meets Standard	
23. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	Meets Standard	
24. Daily procedures include: <ul style="list-style-type: none"> • Perimeter alarm system tests; • Physical checks of the perimeter fence; and • Documenting the results. 	Meets Standard	An officer conducts a visual check of the perimeter on each shift. The results are documented in the computerized system. There is no perimeter fence or alarm system at this facility.
25. Visitation areas receive frequent, irregular inspections.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SECURITY INSPECTIONS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <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 officers and a shift supervisor and a review of written procedures and post orders. The shift supervisors are responsible for the inspection process that includes all areas of the facility. The facility front entrance into the secure area of the facility has a sally port with electronic interlocking doors. Entrance procedures are in place to positively identify contractors/visitors entering/exiting the facility. Entrance/lobby personnel have constant visual contact with the public and check the identification documents of every visitor, employee and other person entering or leaving the facility.</p> <p>During the inspection, the officers observed were professional and knowledgeable. The housing units were very clean and the cells were not cluttered with excess property. No graffiti was observed in the housing units. Each cell, except those used for disciplinary or administrative segregation, is equipped with a television with multiple cable channels that can be viewed from 5:00 a.m. until midnight. This is a highly respected privilege and according to the officers, accounts for the few disciplinary incidents in the housing area where ICE detainees are held. There is also an intercom system in each cell that allows the detainees to communicate directly with the officer. ICE detainees interviewed generally disliked the food served but voiced no complaints about medical service. They knew how to use the phones and how to contact ICE personnel and other staff. None expressed any fear of placement at this facility and all interviewed believed they were safe here.</p> <p>Security procedures are in place to ensure the safe and orderly operation of the facility with regular inspections for sanitation and safety issues as this standard requires.</p>	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6); (b)(7)(C)	Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. <ul style="list-style-type: none"> • Detainees are placed in the SMU (administrative) in accordance with written criteria. 	Meets Standard	ICE detainees are placed in administrative segregation status within the ICE general population housing unit. This status is a means of providing non-punitive housing for those who cannot live within the general population. ICE detainees are placed in administrative segregation status in accordance with written criteria contained in post orders.
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"> • A copy of the order given to the detainee within 24 hours. 	Meets Standard	
3. The OIC (or equivalent) regularly reviews the status of detainees in administrative detention. <ul style="list-style-type: none"> • A supervisory officer conducts a review within 72 hours of the detainee's placement in the SMU (administrative). 	Meets Standard	The disciplinary hearing supervisor regularly reviews the status of ICE detainees in administrative segregation within 72 hours or less after their placement. The OIC reviews and can approve, modify or sustain the supervisor's actions.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>4. A supervisory officer conducts another review after the detainee has spent seven days in administrative segregation, and:</p> <ul style="list-style-type: none"> • Every week thereafter for the first month; and • Every 30 days after the first month. • Does each review include an interview with the detainee? • Is a written record made of the decision and the justification? 	Meets Standard	The disciplinary hearing supervisor is required to review the placement status of ICE detainees in administrative segregation every seven days until they are released from this status. These reviews include interviews with the detainee. A written record is made of the decision and justification using a locally generated segregation review form. The disciplinary hearing supervisor maintains a log of all ICE detainees in administrative segregation status and the dates of past and future reviews. Completed review forms are maintained in the facility computer system.
<p>5. The detainee is given a copy of the decision and justification for each review.</p> <ul style="list-style-type: none"> • The detainee is given an opportunity to appeal the reviewer's decision to someone else in the facility. 	Meets Standard	ICE detainees are given a written record of each review and may appeal any decision by filing a grievance to one of the lieutenants.
<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"> • 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. 	Meets Standard	Post orders require that ICE officials are immediately notified whenever an ICE detainee is placed in administrative segregation status. ICE officials from the local field office are telephonically notified and receive a facsimile of the segregation order when the detainee is initially placed in this status and again if segregation lasts longer than thirty and sixty days. There were no ICE detainees in administrative segregation status during the last twelve months.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
7. The OIC (or equivalent) reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU. <ul style="list-style-type: none"> • A written record is made of the decision and the justification. • The detainee receives a copy of this record. 	Meets Standard	The disciplinary hearing supervisor reviews the case of any ICE detainee who objects to placement over thirty days. A written record is made of the decision and justification. The detainee receives a copy of the completed review form.
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.	Meets Standard	ICE detainees are given a written record of each seven day review and may appeal any decision by filing a grievance.
9. Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	Meets Standard	
10. The SMU is: <ul style="list-style-type: none"> • Well ventilated; • Adequately lighted; • Appropriately heated; and • Maintained in a sanitary condition. 	Meets Standard	The cells in the special management unit are well ventilated, adequately lighted, appropriately heated and clean.
11. All cells are equipped with beds. <ul style="list-style-type: none"> • Every bed is securely fastened to the floor or wall. 	Meets Standard	All cells are equipped with beds that are securely fastened to the wall.
12. The number of detainees in any cell does not exceed the occupancy limit. <ul style="list-style-type: none"> • When occupancy exceeds recommended capacity, do basic living standards decline? • Do criteria for objectively assessing living standards exist? • If yes, are the criteria included in the written procedures? 	Meets Standard	
13. The segregated detainees have the same opportunities to exchange/laundry clothing, bedding, and linen as detainees in the general population.	Meets Standard	
14. Detainees receive three nutritious meals per day, from the general population's menu of the day. <ul style="list-style-type: none"> • Do detainees eat only with disposable utensils? • Is food ever used as punishment? 	Meets Standard	Detainees housed in administrative segregation receive the same meals as the general population. Detainees use disposable utensils and food is not used as punishment.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
15. Each detainee maintains a normal level of personal hygiene in the SMU. <ul style="list-style-type: none"> The detainees have the opportunity to shower and shave at least three times a week. If not, explain. 	Meets Standard	Detainees in administrative segregation have the opportunity to shave and shower daily.
16. The detainees are provided: <ul style="list-style-type: none"> Barbering services; Recreation privileges in accordance with the "Detainee Recreation" standard; Non-legal reading material; Religious material; The same correspondence privileges as detainees in the general population; Telephone access similar to that of the general population; and Personal legal material. 	Meets Standard	Detainees housed in administrative segregation receive all of the services required by this component.
17. A health care professional visits every detainee at least three times a week. <ul style="list-style-type: none"> The shift supervisor visits each detainee daily. Weekends and holidays. 	Meets Standard	Post orders require that a health care professional visit every ICE detainee at least three days a week and a shift supervisor visits each ICE detainee each shift, including weekends and holidays.
18. Procedures comply with the "Visitation" standard. <ul style="list-style-type: none"> The detainee retains visiting privileges; and The visiting room is available during normal visiting hours. 	Meets Standard	
19. Visits from clergy are allowed.	Meets Standard	
20. Detainees have the same law-library access as the general population. <ul style="list-style-type: none"> Are they required to use the law library <input checked="" type="checkbox"/> Separately, or <input type="checkbox"/> As a group? Are legal materials brought to them? 	Meets Standard	Detainees in administrative segregation status have the same law library access as the general population. The portable law library materials, including LexisNexis, are brought to them.
21. The SMU maintains a permanent log of detainee-related activity, e.g., meals served, recreation, visitors etc.	Meets Standard	Post orders require the officers to use the I-888 form for ICE detainees and record all of the daily activities.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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"> • Staff completes the form at the end of each shift. • CDFs and IGSA facilities use Form I-888 (or local equivalent). 	Meets Standard	This IGSA facility uses the I-888 form upon an ICE detainee's placement in administrative segregation status. Unit officers complete the form by 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"> • Staff logs record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc; • The medical officer/health care professional signs each individual's record during each visit; and • The housing officer initials the record when all detainee services are completed or at the end of the shift. 	Meets Standard	Officers record all ICE detainee daily activities taking place each shift on individual housing unit records maintained for each detainee in this status. Officers record all pertinent information, such as medical condition, or suicidal or violent behavior, in the log. Medical practitioners sign the segregation log each time they visit the detainee. An officer signs the record when all detainee services are completed or by the end of the shift.
24. A new record is created for each week the detainee is in Administrative Segregation. <ul style="list-style-type: none"> • The weekly records are retained in the SMU until the detainee's return to the general population. 	Meets Standard	A new record is created each week the ICE detainee is in administrative segregation status. The records are retained in the unit until the detainee returns to general population status.

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>To evaluate this standard, the ICE detainee housing area was inspected and policy, logs and forms were reviewed and a shift supervisor and a housing unit officer was interviewed. If an ICE detainee needs to be placed in administrative segregation, that placement is made in the same housing unit except the detainee is not permitted out of his cell except for recreation, showering and shaving. During the last twelve months there were no ICE detainees assigned administrative segregation status.</p> <p>Detainees in administrative segregation are provided clothing and bedding consistent with the standard for linen and clothing exchange. Detainees are allowed to retain a reasonable amount of legal material. Detainees in administrative segregation may not be denied legal visitation, but reasonable security precautions will be taken when necessary. Legal service providers and assistants will be notified of any security concerns prior to the meeting. Members of the clergy may visit detainees in administrative segregation unless it is determined that this presents a security risk.</p> <p>If it becomes necessary to place an ICE detainee in administration segregation, the placement will be managed as this standard requires.</p>	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6); (b)(7)(C)	Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)		
POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Officers placing detainees in disciplinary segregation follow written procedures.	Meets Standard	Officers follow written procedures for placing ICE detainees in disciplinary segregation status within the ICE general population housing unit. Cells are set aside for detainees who are placed into disciplinary segregation status.
2. The sanctions for violations committed during one incident are limited to 60 days.	Meets Standard	The discipline post orders limit sanctions to a maximum of sixty days per each serious charge.
3. A completed Disciplinary Segregation Order accompanies the detainee into the SMU. <ul style="list-style-type: none"> The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation. 	Meets Standard	A completed written copy of the disciplinary segregation order is given to the detainee upon placement into 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"> After each formal review, the detainee receives a written copy of the decision and supporting reasons. 	Meets Standard	Post orders state that ICE detainees housed in disciplinary segregation will be reviewed at established intervals. Detainees receive a written copy of the reviewer's decision and supporting reasons after each formal review.
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	
7. Living conditions in disciplinary SMUs remain the same regardless of behavior. <ul style="list-style-type: none"> If no, does staff prepare written documentation for this action? Does the OIC sign to indicate approval. 	Meets Standard	
8. Every detainee in disciplinary segregation receives the same humane treatment, regardless of offense.	Meets Standard	All detainees placed in disciplinary segregation status receive the same humane treatment as the general population, regardless of the offense.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)		
POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
9. The quarters used for segregation are: <ul style="list-style-type: none"> • Well-ventilated. • Adequately lighted. • Appropriately heated. • Maintained in a sanitary condition. 	Meets Standard	
10. All cells are equipped with beds that are securely fastened to the floor or wall of the cell.	Meets Standard	Cells are designed for and equipped with beds secured to the floors or walls.
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"> • Does the OIC approve excess occupancy on a temporary basis? 	Meets Standard	
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	
13. Detainees in the SMU have the same opportunities to exchange clothing, bedding, etc., as other detainees.	Meets Standard	ICE detainees in segregation status have the same opportunity to exchange clothing, bedding and linens as the 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"> • Food is not used as punishment. 	Meets Standard	ICE detainees in segregation status receive the same three meals daily as the general population menu. Post orders prohibit the use of food 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	ICE detainees have the opportunity to shower and shave daily.
16. Detainees receive, unless documented as a threat to security: <ul style="list-style-type: none"> • Barbering services; • Recreation privileges; • Other-than-legal reading material; • Religious material; • The same correspondence privileges as other detainees; and • Personal legal material. 	Meets Standard	ICE detainees in disciplinary segregation status receive all the services required in this component.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)		
POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
17. When phone access is limited by number or type of calls, the following areas are exempt: <ul style="list-style-type: none"> • Calls about the detainee's immigration case or other legal matters; • Calls to consular/embassy officials; and • Calls during family emergencies (as determined by the OIC/Warden). 	Meets Standard	
18. A health care professional visits every detainee in disciplinary segregation every week day. <ul style="list-style-type: none"> • The shift supervisor visits each segregated detainee daily • Weekends and holidays. 	Meets Standard	Post orders require a medical practitioner to visit each week day and a shift supervisor to visit ICE detainees in disciplinary segregation each day, including weekends and holidays.
19. SMU detainees are allowed visitors, in accordance with the "Visitation" standard.	Meets Standard	ICE detainees in disciplinary segregation status are allowed visitation in accordance with the visitation standard.
20. SMU detainees receive legal visits, as provided in the "Visitation" standard. <ul style="list-style-type: none"> • Legal service providers are notified of security concerns arising before a visit. 	Meets Standard	Legal visits are not restricted. Attorneys will be notified prior to the visit if a threat exists.
21. Visits from clergy are allowed. <ul style="list-style-type: none"> • The clergy member is given the option of visiting/not visiting the segregated detainee. • Violent/uncooperative detainees are denied access to religious services when safety and security would otherwise be affected. 	Meets Standard	
22. SMU detainees have law library access. <ul style="list-style-type: none"> • Violent/uncooperative detainees retain access to the law library unless adjudicated a security threat in writing. • Legal material brought to individuals in the SMU on a case-by-case basis. • Staff documents every incident of denied access to the law library. 	Meets Standard	
23. All detainee-related activities are documented, e.g. meals served, recreation activities, visitors, etc.	Meets Standard	All ICE detainee activities are documented in a housing unit log.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP I

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)		
POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
24. The SPCs, the Special Management Housing Unit Record (I-888 or equivalent), is prepared as soon as the detainee is placed in the SMU. <ul style="list-style-type: none"> • All I-888s are filled out by the end of each shift. • The CDF/IGSA facility use Form. • I-888 (or equivalent local form). 	Meets Standard	Policy requires this IGSA to use Form I-888 when ICE detainees are placed in disciplinary segregation. The form is prepared upon the detainee's placement into disciplinary segregation status. The form must be filled out by the end of the shift.
25. SMU staff record whether the detainee ate, showered, exercised, took medication, etc. <ul style="list-style-type: none"> • Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc. • The health care official sign individual records after each visit. • The housing officer initials the record when all detainee services are completed or at the end of the shift. • A new record is created weekly for each detainee in the SMU. • The SMU retains these records until the detainee leaves the SMU. 	Meets Standard	Officers record detainee activity during each shift. The documentation required by this component is addressed on the activity record. The forms are created each week and retained in the housing unit until the detainee is released from this status.

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) – REVIEWER SUMMARY		
<i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i>		
Evaluation of this standard included a review of the policy and post orders, an interview with the OIC and a physical inspection of the housing unit where ICE detainees would be held for disciplinary segregation. Detainees would be placed in disciplinary segregation status following the findings of a disciplinary hearing officer pursuant to written policy. Detainees in disciplinary segregation have the opportunity to maintain a normal level of personal hygiene, with daily showers and shaves. Clothing and bedding is issued to detainees consistent with detainees in general population. Standard living conditions in disciplinary segregation are not modified for disciplinary reasons except the televisions are removed from the cells. All cells have an intercom and the detainees can communicate directly with the officer assigned to the housing unit. No ICE detainee has been placed in a cell for disciplinary reasons during the last twelve months.		
Overall Rating: Meets Standard		
Reviewer Name (Printed):	(b)(6); (b)(7)(C)	Completion Date: 01/14/2016
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

TOOL CONTROL (Key: AH)		
POLICY: IT IS THE POLICY OF ALL FACILITIES THAT ALL EMPLOYEES SHALL BE RESPONSIBLE FOR COMPLYING WITH THE TOOL CONTROL POLICY. THE MAINTENANCE SUPERVISOR SHALL MAINTAIN A COMPUTER GENERATED OR TYPEWRITTEN MASTER INVENTORY LIST OF TOOLS AND EQUIPMENT AND THE LOCATION IN WHICH TOOLS ARE STORED. THESE INVENTORIES SHALL BE CURRENT, FILED AND READILY AVAILABLE FOR TOOL INVENTORY AND ACCOUNTABILITY DURING AN AUDIT.		
COMPONENTS	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 respective departments.
3. Tool inventories are required for the: <ul style="list-style-type: none"> • Maintenance Department; • Medial Department; • Food Service Department; • Electronics Shop; • Recreation Department; and • Armory. 	Meets Standard	The maintenance, medical and food service departments have tool inventories. The armory is located outside the secure perimeter. The facility does not have an electronics shop or recreation department.
4. The facility has a policy for the regular inventory of all tools. <ul style="list-style-type: none"> • The policy sets minimum time lines for physical inventory and all necessary documentation. • ICE facilities use AMIS bar code labels when required. 	Meets Standard	
5. The facility has a tool classification system. Tools are classified according to: <ul style="list-style-type: none"> • Restricted (dangerous/hazardous); and • Non-Restricted (non-hazardous). 	Meets Standard	Post orders established a tool classification system that classified all tools 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 respective 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.
8. The facility has an approved tool storage system. <ul style="list-style-type: none"> • The system ensures that all stored tools are accountable. • Commonly used tools (tools that can be mounted) are stored in such a way that missing tool is readily notice. 	Meets Standard	
9. Each facility has procedures for the issuance of tools to staff and detainees.	Meets Standard	Procedures for issuing tools to employees are in place. Detainees are not issued tools except in the kitchen.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

TOOL CONTROL (Key: AH)		
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COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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"> • Verbal and written notification; • Procedures for detainee access; and • Necessary documentation/review for all incidents of lost tools. 	Meets Standard	All requirements of the component are addressed in post orders.
11. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	Meets Standard	
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	Post orders require that all tools used by contractors or other visitors must be inventoried prior to admittance or departure from the facility.

TOOL CONTROL – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Evaluation of this standard was based on a review of policy, inspection of the maintenance department tool storage, medical tool storage, and food service tool storage. The maintenance supervisor, the food service director and the health supervisor were interviewed. Tools brought into the secure area of the facility by contractors or visitors must be inventoried upon entering and exiting the secure area of the facility. All staff is required to immediately report missing and/or lost tools to a supervisor who will ultimately report the lost tool to the OIC. Tools are not issued to detainees except in food service. Knives used in that area are properly tethered.		
Overall Rating: Meets Standard		
Reviewer Name (Printed) (b)(6); (b)(7)(C)		Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP I

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 lieutenant maintains employee records documenting officer compliance with applicable 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 and there are two officers that have their CDL to operate the vehicle.
3. Supervisors maintain records for each vehicle operator.	Meets Standard	
4. Officers use a checklist during every vehicle inspection. <ul style="list-style-type: none"> • Officers report deficiencies affecting operability; and • Deficiencies are corrected before the vehicle goes back into service. 	Meets Standard	
5. Transporting officers: <ul style="list-style-type: none"> • Limit driving time to 10 hours in any 15 hour period; • Drive only after eight consecutive off-duty hours; • Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours; • Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days; • During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a safe area—exceeding the 10-hour limit. 	N/A	According to the lieutenant, the sheriff's office does not do long distance transports of ICE detainees. Roundtrip transport does not exceed 360 miles.
6. Two officers with valid CDLs required in any bus transporting detainees. <ul style="list-style-type: none"> • When buses travel in tandem with detainees, there are two qualified officers per vehicle. • An unaccompanied driver may transport an empty vehicle. 	Meets Standard	
7. Before the start of each detail, the vehicle is thoroughly searched.	Meets Standard	
8. Positive identification of all detainees being transported is confirmed.	Meets Standard	Identification of detainees being transported is confirmed by name, A-number and picture.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

TRANSPORTATION (Land Transportation) (Key: AI)

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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)
9. All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.	Meets Standard	Transporting officers search every detainee prior to the detainee being placed in the vehicle.
10. The facility ensures that the number of detainees transported does not exceed the vehicles manufacturer's occupancy level.	Meets Standard	
11. Protective vests are provided to all transporting officers.	Meets Standard	All transportation officers are provided with protective vests.
12. The vehicle crew conducts a visual count once all passengers are on board and seated. <ul style="list-style-type: none"> • Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop. 	Meets Standard	
13. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	Meets Standard	Transport officer's post orders outline the use of restraining equipment on the buses.
14. Officers ensure that no one contacts the detainees. <ul style="list-style-type: none"> • One officer remains in the vehicle at all times when detainees are present. 	Meets Standard	
15. Meals are provided during long distance transfers. <ul style="list-style-type: none"> • The meals meet the minimum dietary standards, as identified by dieticians utilized by ICE. 	Meets Standard	Sack lunches that meet the minimum dietary standards would be provided for long distance transports.
16. The vehicle crew inspects all Food Service pickups before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). <ul style="list-style-type: none"> • Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative; • Basins, latrines, and drinking-water containers/dispensers are cleaned and sanitized on a fixed schedule. 	Meets Standard	
17. Vehicles have: <ul style="list-style-type: none"> • Two-way radios; • Cellular telephones; and • Equipment boxes stocked in accordance with the Use of Force Standard. 	Meets Standard	Each transport vehicle has two-way radios and a cell phone. Vehicles have equipment bags stocked in accordance with the Use of Force standard.
18. The vehicles are clean and sanitary at all times.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
19. Personal property of a detainee transferring to another facility is: <ul style="list-style-type: none"> • Inventoried; • Inspected; and • Accompanies the detainee. 	Meets Standard	
20. The following contingencies are included in the written procedures for vehicle crews: <ul style="list-style-type: none"> • Attack • Escape • Hostage-taking • Detainee sickness • Detainee death • Vehicle fire • Riot • Traffic accident • Mechanical problems • Natural disasters • Severe weather • Passenger list includes women or minors 	Meets Standard	The facility's written procedures cover all of the bulleted items listed in this component.

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 manner that preserves the safety and security of the vehicles and occupants, and provides protection to the public.

The standard was evaluated by reviewing post orders, transportation logs, vehicle mileage log, and transportation count log; and interviewing the jail administrator and transportation supervisor.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/14/2016

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

USE OF FORCE (Key: AJ)		
POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:		
COMPONENTS	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	Post orders authorize officers to respond to immediate use-of-force situations without the presence of a supervisor.
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	If a detainee's behavior is non-threatening, officers are required to attempt to resolve the conflict without resorting to force.
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"> • Ranking detention official, health professional, and others confer before every calculated use of force. 	Meets Standard	Post orders require that before authorizing a planned use of force, confrontation avoidance techniques must be used. The supervisor on shift and medical practitioner are required to assess the situation, taking into account 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"> • Under staff supervision. 	Meets Standard	
6. Staff members are trained in the performance of the Use-of-Force Team Technique.	Meets Standard	All officers receive use-of-force team technique training. A specially trained team can be summoned to conduct a planned use of force, if time permits.
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, the OIC and the sheriff's designee.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

USE OF FORCE (Key: AJ)		
POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
8. Staff: <ul style="list-style-type: none"> • Do not use force as punishment; • Attempt to gain the detainee's voluntary cooperation before resorting to force; • Use only as much force as necessary to control the detainee; and • Use restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical. 	Meets Standard	Post orders require that all of the requirements of the component are followed by officers.
9. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	Meets Standard	
10. Use-of-Force Team follows written procedures that attempt to prevent injury and exposure to communicable disease(s).	Meets Standard	
11. Standard procedures associated with using four-point restraints include: <ul style="list-style-type: none"> • Soft restraints (e.g., vinyl); • Dressing the detainee appropriately for the temperature; • A bed, mattress, and blanket/sheet; • Checking the detainee at least every 15 minutes; • Logging each check; • Turning the bed-restrained detainee often enough to prevent soreness or stiffness; • Medical evaluation of the restrained detainee twice per eight hour shift; and • When qualified medical staff is not immediately available, staff position the detainee "face-up". 	Meets Standard	The restraint chair is used at this facility instead of four-point bed restraints. The applicable requirements of the component are followed by officers and supervisors when the restraint chair is used. No ICE detainees have been restrained during this inspection period.
12. The shift supervisor monitors the detainee's position/condition every two hours. <ul style="list-style-type: none"> • He/she allows the detainee to use the rest room at these times under safeguards. 	Meets Standard	
13. All detainee checks are logged.	Meets Standard	
14. In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	Meets Standard	Medical practitioners report as soon as possible to examine detainees in all immediate use-of-force incidents.
15. When the OIC authorizes use of non-lethal weapons: <ul style="list-style-type: none"> • Medical staff is consulted before staff use pepper spray/non-lethal weapons. • Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized. 	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

USE OF FORCE (Key: AJ)		
<p>POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
16. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> • Medical personnel are consulted 	Meets Standard	
17. Protective gear is worn when restraining detainees with open cuts or wounds.	Meets Standard	Officers are trained to use protective gear to protect themselves from blood and body fluid contamination.
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	The OIC conducts an after-action review of all use-of-force incidents and non-routine application of restraints. The review is documented and signed by those conducting the review.
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"> • Specialized training is given and Officers are certified in all devices they use. 	Meets Standard	
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	An equivalent use-of-force form is being used at this IGSA facility.

<p>USE OF FORCE – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i></p>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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 review of policy and interviews with the OIC, a shift supervisor and officers. Post orders are in place that authorize staff to use necessary force only after all reasonable efforts to otherwise resolve a situation have failed. Post orders require that 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, and 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 incidents and is then forwarded to a lieutenant for review. The lieutenant reviews the report and forwards it to the OIC.

All planned 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. This facility does not have any pepper spray or batons but tasers are carried by supervisors and pepper balls are available in the shift supervisor's office. Post orders prohibit the use of tasers on ICE detainees. Canines are used for searches but never in the presence of ICE detainees. Unauthorized less-than-lethal force devices such as blackjacks, sap gloves, and/or chemical agents are not permitted. Post orders and training address the prohibition of any type of choke or carotid hold or use of restraint equipment to apply a choke hold.

The facility reported that there were no incidents that involved the use of force on ICE detainees during this inspection period. There were no escapes or attempted escapes during this inspection period.

If force becomes necessary at this facility it is managed, documented and reviewed as this standard requires.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/14/2016

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

STAFF DETAINEE COMMUNICATIONS (Key: AK)		
POLICY: PROCEDURES MUST BE IN PLACE TO ALLOW FOR FORMAL AND INFORMAL CONTACT BETWEEN KEY FACILITY STAFF AND ICE STAFF AND ICE DETAINEE AND TO PERMIT DETAINEES TO MAKE WRITTEN REQUESTS TO ICE STAFF AND RECEIVE AN ANSWER IN AN ACCEPTABLE TIME FRAME.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The ICE Field Office Director ensures that weekly announced and unannounced visits occur at the IGSA.	Does Not Meet Standard	Announced and unannounced visits by ICE personnel did not occur weekly during this inspection period.
2. Detention and Deportation Staff conduct scheduled weekly visits with detainees held in the IGSA.	Does Not Meet Standard	Weekly visits did not occur every week during this inspection period according to the documentation provided by the ICE officers and the documentation by facility staff.
3. Scheduled visits are posted in ICE detainee areas.	Meets Standard	
4. Visiting staff observe and note current climate and conditions of confinement at each IGSA.	Meets Standard	A review of Facility Liaison Checklists confirmed that current climate and conditions of confinement are observed and documented.
5. ICE information request Forms are available at the IGSA for use by ICE detainees.	Meets Standard	
6. The IGSA treats detainee correspondence to ICE staff as Special Correspondence.	Meets Standard	
7. ICE staff responds to a detainee request from an IGSA within 72 hours.	Does Not Meet Standard	The logbook was incomplete listing only three requests; two in May 2015 and one in December 2015. The ICE officer interviewed stated that he has picked up requests every week, however; they were not being logged. As a result, there was not enough information to determine if detainees are receiving responses within 72 hours.
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	

STAFF DETAINEE COMMUNICATIONS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

STAFF DETAINEE COMMUNICATIONS – REVIEWER SUMMARY		
<i>(Use following format for dates: mm/dd/yyyy)</i>		
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>ICE officers and facility staff members make announced and unannounced visits to the facility’s housing units and activity areas to encourage informal communication among all staff and detainees. The facility does not have a standard required method to document the unannounced visits. ICE officers document their visits on the Facility Liaison Checklist. The ICE officers have not been consistent with their visits to the facility.</p> <p>Requests from detainees to ICE officials have not been logged on a regular basis. The log contains the date the request was received, the detainee's name and A-number. The log does not contain the name of the ICE officer logging the request, the date of the response and the date returned to the detainee. The log also did not contain the nationality of the detainee. Requests were not consistently returned to the detainee within the standard required 72 hours.</p> <p>During the evaluation of this standard, written procedures were reviewed which included the detainee handbook. ICE and facility personnel were interviewed. ICE detainees indicated during the inspection that ICE staff does not consistently visit the units, and when they do visit, they only want to speak with detainees on their list. The facility does not require ICE staff to sign into the facility. The facility runs a video court and most of the ICE personnel are entering the facility for that program.</p> <p>Evaluation of this standard included reviewing post orders and detainee handbooks; inspecting the ICE detainee request form log; touring the housing units; examining the Facility Liaison Checklists; and interviewing ICE officers and facility staff.</p>		
<p>Overall Rating: Meets Standard</p>		
Reviewer Name (Printed)	(b)(6); (b)(7)(C)	Completion Date: 1/14/2016
<p>Reviewer Signature (for printed form submission):</p>		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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"> • The notification is recorded in the detainee’s file; and • When the A File is not available, notification is noted within DACS 	Meets Standard	The ICE officer ensures that the detainee's legal representative of record is advised of the detainee's transfer. The notification is recorded in the detainee's file.
2. Notification includes the reason for the transfer and the location of the new facility.	Meets Standard	Transfer notifications include the required information. In the interest of safety and security, the notification does not include specific travel details.
3. The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	Meets Standard	Deportation officers may make transfer notifications at their discretion.
4. The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	Meets Standard	
5. Facility policy mandates that: <ul style="list-style-type: none"> • Times and transfer plans are never discussed with the detainee prior to transfer; • The detainee is not notified of the transfer until immediately prior to departing the facility; and • The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 	Meets Standard	
6. The detainee is provided with a completed Detainee Transfer Notification Form.	Meets Standard	The detainee is provided a copy of the detainee transfer notification form, according to the ICE officer.
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"> • The Detainee Immigration Health Service (or IGSA) (DIHS) Medical Director or designee approves the transfer; • Medical transfers are coordinated through the local ICE office; and • A medical transfer summary is completed and accompanies the detainee. 	Meets Standard	When an ICE detainee is being considered for a medical transfer, procedures include the bulleted items listed in this component.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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POLICY: ICE WILL MAKE ALL NECESSARY NOTIFICATIONS WHEN A DETAINEE IS TRANSFERRED. IF A DETAINEE IS BEING TRANSFERRED VIA THE JUSTICE PRISONER ALIEN TRANSPORTATION SYSTEM (JPATS), ICE WILL ADHERE TO JPATS PROTOCOLS. IN DECIDING WHETHER TO TRANSFER A DETAINEE, ICE WILL TAKE INTO CONSIDERATION WHETHER THE DETAINEE IS REPRESENTED BEFORE THE IMMIGRATION COURT. IN SUCH CASES, THE FIELD OFFICE DIRECTOR WILL CONSIDER THE DETAINEE'S STAGE WITHIN THE REMOVAL PROCESS, WHETHER THE DETAINEE'S ATTORNEY IS LOCATED WITHIN REASONABLE DRIVING DISTANCE OF THE FACILITY, AND WHERE THE IMMIGRATION COURT PROCEEDINGS ARE TAKING PLACE.		
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	This IGSA facility does not have IHSC staff.
10. For medical transfers, transporting officers receive instructions regarding medical issues.	Meets Standard	When a detainee is being transferred, all funds, valuables and property are returned and transferred with the detainee to the new location.
11. Detainee's funds, valuables, and property are returned and transferred with the detainee to his/her new location.	Meets Standard	
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	
14. An A File or work folder accompanies the detainee when transferred to a different field office or sub-office.	Meets Standard	
15. Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.	Meets Standard	Files are forwarded to the receiving office by overnight mail by the next business day.

DETAINEE TRANSFER STANDARD – REVIEWER SUMMARY		
<i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Detainee transfers are handled in accordance with the standard. Transfers are approved and facilitated with consideration for the safety and security of the staff, detainees and the public. Policy and procedures address notifications, detainee records and the protection of detainee funds and property. According to the ICE officer, transferring detainees are given a telephone call at the government's expense upon arrival at their final destination. To evaluate this standard, facility policy and procedures were reviewed. Interviews were conducted with the ICE officers and facility staff.		
Overall Rating: Meets Standard		
Reviewer Name (Printed)	(b)(6); (b)(7)(C)	Completion Date: 1/14/2016
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (Key: AM)		
POLICY: 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.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a Sexual Abuse and Assault Prevention and Intervention Program consistent with the ICE Zero Tolerance Policy.	Meets Standard	The review of post orders confirmed that the facility has a sexual abuse and assault prevention and intervention (SAAPI) program that includes zero-tolerance for all forms of sexual abuse and sexual harassment.
2. The facility administrator has designated a Sexual Abuse and Assault Prevention and Intervention Program coordinator for the facility.	Meets Standard	The warden has assigned a deputy warden as the SAAPI program coordinator.
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	The review of training documents confirmed that all personnel receive training regarding SAAPI standards during new employee orientation and annual refresher training.
4. The facility maintains written documentation verifying employee, volunteer, and contractor training.	Meets Standard	The review of training documents confirmed that all employees, volunteers and contractors received appropriate SAAPI training.
5. Detainees are informed about the program in facility orientation and the detainee handbook (or equivalent).	Meets Standard	As confirmed by review of the detainee handbook, observation of the facility orientation video and postings in the housing units, detainees are informed about the SAAPI program.
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	As confirmed by observation, the sexual assault awareness notice and the name and contact information for the SAAPI program coordinator are posted on the housing unit bulletin boards.
7. The Sexual Assault Awareness Information brochure is distributed to detainees.	Meets Standard	The SAAPI information brochure is not distributed separately to each detainee during the intake process; however, the detailed information is incorporated in the local handbook.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (Key: AM)		
POLICY: 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.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
8. Detainees are screened upon arrival for “high risk” sexual assaultive and sexual victimization potential and housed and counseled accordingly.	Meets Standard	As confirmed by observation and review of intake screening documentation, all detainees are screened upon arrival for sexual assaultive and/or victimization potential and housed and counseled accordingly.
9. A detainee who is subjected to sexual abuse or assault is not returned to general population until proper re-classification, taking into consideration any increased vulnerability of the detainee as a result of the sexual abuse or assault, is completed.	Meets Standard	Post orders require the re-classification of a detainee who is subjected to sexual abuse or assault be completed prior to his/her return to general population.
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	Post orders establish procedures for the prompt and effective intervention and chain-of-command reporting of sexual abuse/harassment. ICE personnel would be notified immediately.
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	Post orders describe a multidisciplinary coordinated response to allegations of sexual abuse/harassment. The multidisciplinary team is comprised of security personnel, medical and mental health providers, facility administrative investigators and victim advocates, if requested. Criminal investigations are referred to the Butler County Sheriff's Office, Detective Division.
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	Post orders establish procedures for placing a victimized detainee in a supportive environment that represents the least restrictive housing option possible are in place.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (Key: AM)		
POLICY: 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.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	Post orders establish procedures for removing employees suspected of perpetrating sexual abuse or assault from all duties involving detainee contact, pending the results of an investigation.
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	When there is an alleged sexual assault, officers gather and maintain evidence and refer the criminal investigation to the Butler County Sheriff's Department, Detective Division for criminal investigation.
15. When there is an alleged or proven sexual assault, the required notifications are promptly made to facility supervisors and ICE management.	Meets Standard	Post orders require the facility supervisors to be notified when there is an allegation of sexual abuse/harassment. Post orders also require the facility to notify ICE personnel when there is an alleged or proven sexual assault involving an ICE detainee.
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	Victims of sexual assault are transported to Fort Hamilton Hospital for medical examination, treatment and forensic evidence gathering.
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	As confirmed by observation, the SAAPI program coordinator tracks logs and maintains records associated with allegations of sexual abuse or assault. There have been no reported allegations of sexual assault by ICE detainees since the previous twelve months.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (Key: AM)		
POLICY: 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.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	As confirmed by review of documentation and interviews with the warden, the SAAPI program coordinator conducts an annual review of aggregate data regarding incidents of sexual abuse or assault. The report is forwarded to the OIC and the OIC forwards the report the field office.
19. Tracking statistics and reports are readily available for review by the inspectors.	Meets Standard	Tracking statistics and reports were available for review by this inspector.

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION – REVIEWER SUMMARY
(Use following format for dates: mm/dd/yyyy)

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SEXUAL ABUSE AND ASSAULT 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)*

The facility has a comprehensive sexual abuse and assault prevention and intervention program that includes zero-tolerance for all forms of sexual abuse and harassment. The facility has a designated sexual abuse and assault prevention and intervention (SAAPI) program coordinator who is also the deputy OIC. All employees, volunteers and contractors receive related training during orientation and annual refresher training. Procedures are in place to prevent sexual assault and abuse on detainees and to provide prompt and effective intervention and treatment for victims. Detainees receive information regarding the program during in processing procedures; via the local and ICE national detainee handbooks; the orientation video, handouts and postings in the housing units. Information is provided in English and Spanish. Translation services are available for detainees who do not speak English and Spanish. Detainees are screened for high-risk sexual assaultive and sexual victimization potential during the intake process. The screening is conducted by a classification officer. Approved post orders ensure immediate protection to victims of sexual abuse and include prevention of retaliation. Established procedures assure medical and mental health referrals for alleged victims. Procedures permit and encourage detainees to report allegations to any employee, volunteer or contractor and offer alternative reporting methods, including anonymous and third party reporting.

The SAAPI coordinator is assigned to be responsible for employee training and detainee education regarding issues pertaining to sexual assault. The SAAPI coordinator assists with the development of written post orders, procedures and training protocols and serves as a liaison with other agencies. Detainees are provided instructions on how to contact DHS/OIG or ICE to confidentially report sexual abuse or assault. Employee, contractor and volunteer training include all of the topics listed in the Standard. Following the intake process, detainees are educated on the SAAPI program and on topics as detailed in the Standard. Statements from detainees claiming to be victims of sexual assaults are taken seriously and professionally responded to. Detainees who are victims of prior sexual abuse and or have a history of prior sexual assaultive behavior are offered mental health evaluation and counseling. Sexual assault victims are transported to Fort Hamilton Hospital where a Sexual Assault Nurse Examiners (SANE) conducts an examination and performs forensic evidence gathering using an approved kit. Forensic evidence is secured and the chain of custody is maintained. Sexually transmitted disease testing is conducted and referrals for counseling are made as appropriate. Prophylactic treatment, emergency contraception and follow-up examinations for sexually transmitted diseases are offered. Full time mental health services are available for crisis intervention and long term counseling while detainees are housed in the facility. The facility's forensics discharge planner arranges for long-term follow-up counseling when the detainee is released or deported. During the community forensic exam, the victim may choose to have an outside advocate present. When the detainee has been transferred, the OIC is notified. SAAPI case records include general files and administrative investigative files and are maintained chronologically, in accordance with medical care and detention standards and applicable policies, and retained in accordance with established schedules. The coordinator maintains computerized and paper records. Law enforcement sensitive documents or evidence are not stored at the facility.

Evaluation of this standard was based on review of post orders, training documentation and training presentations; interviews with the warden, medical and mental health providers, ICE personnel and the SAAPI program coordinator; and observation of housing unit postings.

There were two allegations of sexual abuse made by ICE detainees over the last twelve months. There was one allegation of staff on detainee sexual abuse. The detainee alleged inappropriate touching by an officer during a pat down search. The allegation was investigated and was determined to be unfounded. The second allegation involved detainee on detainee sexual abuse and also alleged inappropriate touching. The allegation was investigated and was determined to be unsubstantiated.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/14/2016

Reviewer Signature (for printed form submission):

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
Errors:					
No Errors Found					
Items Not Rated:					
All Items Rated					

Run Indicator:

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
01/10/2017- 01/12/2017

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
01/12/2016- 01/14/2016
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.)
(b)(6); (b)(7)(C) Warden
Telephone # (Include Area Code)
(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) / QMC SME / Nakamoto

F. CDF/IGSA Information Only

Contract Number
(b)(7)(E) Date of Contract or IGSA
12/16/2003
Basic Rates per Man-Day
(b)(4)
Other Charges: (If None, Indicate N/A)
NA

Estimated Man-days Per Year:
330889

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
NA
Date New Construction / Bed space Added
NA
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
13911
Total ICE Man-days for Previous 12 months
34745

K. Classification Level (ICE SPCs and CDFs Only)

	L-1	L-2	L-3
Adult Male	N/A	N/A	N/A
Adult Female	N/A	N/A	N/A

L. Facility Capacity

	Rated	Operational	Emergency
Adult Male	720	720	720
Adult Female	128	128	128

Facility holds Juveniles Offenders 16 and older as Adults

M. Average Daily Population

	ICE	USMS	Other
Adult Male	86	132	524
Adult Female	11	11	178

N. Facility Staffing Level

Security:
(b)(7)(E) Support:
47

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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 ¹	Types (Sexual ² , Physical, etc.)	P	P	P	P
	With Weapon	0	1	0	1
	Without Weapon	3	1	1	1
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	P	P	P	P
	With Weapon	0	0	0	0
	Without Weapon	3	2	1	2
Number of Forced Moves, incl. Forced Cell moves ³		0	0	0	0
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		2	2	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)	V-30	V-31	V-15	V-20
	Type (C=Chair, B=Bed, BB=Board, O=Other)	C	C	C	C
Offender / Detainee Medical Referrals as a result of injuries sustained.		3	2	1	2
Escapes	Attempted	0	0	0	0
	Actual	0	0	2	0
Grievances:	# Received	3	1	0	0
	# Resolved in favor of Offender/Detainee	2	1	0	0
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	A	A	A	A
	Number	2	3	3	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	148	93	110	101
	# Psychiatric Cases referred for Outside Care	0	0	0	0

¹ Any attempted physical contact or physical contact that involves two or more offenders

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

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

⁴ 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) (b)(6); (b)(7)(C)	Signature (b)(6); (b)(7)(C)
Title & Duty Location Lead Compliance Inspector, The Nakamoto Group, Inc.	Date 01/12/2017

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

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 were no calculated nor immediate use of force incidents involving ICE detainees during the inspection period. The facility authorizes trained officers to carry oleoresin capsicum (OC) spray. OC may be used on ICE detainees, if necessary. Shift supervisors carry Tasers. Tasers may not be used on ICE detainees. Canines are used for contraband detection and are not used in the presence of ICE detainees. Only ICE approved restraint equipment is authorized and used to restrain detainees. Whenever possible, staff applies ambulatory restraints. If the detainee's behavior makes use of more restrictive or secure restraints necessary, the shift commander decides on the appropriate restraint method.

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

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

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

Condition of Confinement Review Worksheet

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

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



ICE Detention Standards Review Worksheet

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

Facility Information			
Facility Name: Butler County Jail		Review Purpose: Annual	
Facility Type: IGSA Intergovernmental Service Agreement (IGSA), ICE Service Processing Center (SPC), ICE Contract Detention Facility (CDF)			
Address:	705 Hanover Street		
City: Hamilton	State: OH	Zip Code: 45011	
County:	Butler		
CEO Name:	(b)(6); (b)(7)(C)	CEO Title: Warden	
Review Information (Use following format for dates: mm/dd/yyyy)			
Start Date: 1/10/2017	End Date: 1/12/2017	Review Type: Headquarters	
Lead Name:	(b)(6); (b)(7)(C)	Lead Title: LCI	
Review Document Issue Summary (See Document Check Section to Review/Update)			
Error(s) Found:	0	Items Not Rated:	0

ICE HQ USE ONLY: (DO NOT EDIT*)

Form Name: G324A_NDS	Form Key: 10	Form Date: 9/20/2013
Form Type: NDS	Form Review Type: Annual	Form Over/Under 72 Status: 072

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

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

G-324A (NDS) With SAAPI (Coded 09202013) Detention Inspection Form Worksheet for IGSA's - Rev: 09/20/2013 – Form Key 10

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DOCUMENT CHECK

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

ACCESS TO LEGAL MATERIALS (Key: A)		
POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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. Posting the listing of materials is not required.
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 sufficient chairs and workspace for demand.
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 any staff member 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 12/15/2016, according to the sergeant.
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 sergeant 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	
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	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO LEGAL MATERIALS (Key: A)		
POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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.
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 <i>(Use following format for dates: mm/dd/yyyy)</i>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)*

The portable law library carts provide legal material access to detainees within the parameters of 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. There have been no outside organization requests or detainee requests for additional legal materials in the past year.

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.

Detainees obtain photocopies of legal material from the inmate services liaison. Requests for photocopies of legal material are denied only 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 and/or the request is clearly abusive or excessive. Staff does not read a document that is clearly related to a legal proceeding involving the detainee.

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 have access to a law library, legal materials, printing and copying services, and the supplies necessary to research and prepare their legal cases. To evaluate this standard, the detainee handbook was reviewed; the LexisNexis program was manipulated; and detainees and employees were interviewed.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/12/2017

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP I

ADMISSION AND RELEASE (Key: B)		
POLICY: ALL DETAINEES WILL BE ADMITTED AND RELEASED IN A MANNER THAT ENSURES THEIR HEALTH, SAFETY, AND WELFARE. THE ADMISSIONS PROCEDURE WILL, AMONG OTHER THINGS INCLUDE: MEDICAL SCREENING; A FILE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WILL BE INVENTORIED, DOCUMENTED, AND SAFEGUARDED AS NECESSARY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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.
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	
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 metal detector and B.O.S.S. chair 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	
6. The "Contraband" standard governs all personal property searches. IGSA's/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 IGSA's 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.
8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	Meets Standard	
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	
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	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ADMISSION AND RELEASE – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>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.</p> <p>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.</p> <p>This standard was evaluated via a review of post orders, detention files, and the national and local detainee handbooks; observation of the intake process; and interviews with staff and detainees.</p>	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/12/2017
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

CLASSIFICATION SYSTEM (Key: C)		
POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES		
COMPONENTS	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"> • Classifying detainees upon arrival; • Separating from the general population those individuals who cannot be classified upon arrival; and • The first-line supervisor or designated classification specialist reviewing every classification decision. 	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.
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	
5. Housing assignments are based on classification-level.	Meets Standard	ICE population housing units are all medium (level 2) security level. Some detainees in the level 2 classification have violent offense records, contrary to the requirement of the standard.
6. A detainee's classification-level does not affect his/her recreation opportunities. Detainees recreate with persons of similar classification designations.	Meets Standard	
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.
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 allow 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.
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.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

CLASSIFICATION SYSTEM (Key: C)		
POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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 his designee, or ICE.
12. The Detainee Handbook or equivalent for IGSA's explains the classification levels, with the conditions and restrictions applicable to each.	Meets Standard	

CLASSIFICATION SYSTEM – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Detainees arrive at the facility with ICE classifications and are then classified locally. The local system designates the majority of ICE detainees as medium security level, regardless of whether the detainees have violent histories, in contrast to the requirements of the standard. The booking officers have been trained in the classification and admission process. ICE detainees are assigned different color uniforms that designate their classification level. The majority of ICE detainees are classified medium security. A detainee is classified as maximum when an event triggers a higher security classification. Maximum custody detainees are always monitored and escorted. During the evaluation of this standard, employees and detainees were interviewed; classification forms were inspected; and housing units and the intake area were toured, and the detainee handbook was reviewed. Detainees indicated that they feel safe in their surroundings and know how to access programs and services.	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6); (b)(7)(C)	Completion Date: 1/12/2017
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

CORRESPONDENCE AND OTHER MAIL (Key: D)		
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	
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 presence of the detainee. 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	
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	
10. Correspondence to a politician or to the media is processed as special correspondence and is not read or copied.	Meets Standard	
11. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	Meets Standard	Rejected mail is returned to the sender. A rejection letter is sent to the detainee and the sender.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

CORRESPONDENCE AND OTHER MAIL (Key: D)		
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	
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 either returned to the sender or placed on the detainee's account. If 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	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.
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>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

CORRESPONDENCE AND OTHER MAIL – REVIEWER SUMMARY

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

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

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 does not state: That identity documents are contraband and may be used by ICE as evidence or as otherwise appropriate; that detainees may not keep identity documents in their possession; and they will be provided with a copy of an identity document, upon request to ICE, at which time ICE will furnish a true and correct copy. 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.

Policy states that correspondence and publications may be rejected. This may include: material that depicts, describes, or encourages activities that could lead to physical violence or group disruption, e.g., material dealing with the subjects of self-defense or survival, weaponry, armaments, explosives, or incendiary devices; information regarding escape plots, plans to commit illegal activities or to violate ICE rules or facility guidelines; information regarding the production of drugs or alcohol; sexually explicit material; threats, extortion, obscenity, or gratuitous profanity; a code; or other contraband.

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 if the envelope is properly labeled with the name, title, and office of the media representative, clearly indicating its "special" nature.

To evaluate this standard, employees and detainees were interviewed and forms, policy and the local and national detainee handbooks were reviewed.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/12/2017

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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	ICE detainees are issued the National Detainee Handbook and local handbook upon arrival at the facility. Both 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	The orientation video serves as a supplement to the handbook and is available in English and Spanish. The orientation video is shown to the detainee during the admission process.
3. All staff members receive a handbook and training regarding the handbook contents.	Meets Standard	Training on the site specific handbook and National Detainee Handbook is provided to every staff member during their initial orientation training to the facility and annual refresher training sessions.
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 handbook is reviewed and revised as necessary. The new revisions are communicated to employees via email and posted in the housing pods. The last revision was January 2016.
5. There an annual review of the handbook by a designated committee or staff member.	Meets Standard	The handbook is reviewed quarterly by a select committee appointed by the OIC.
6. The detainee handbook addresses the following issues: <ul style="list-style-type: none"> • Personal Items permitted to be retained by the detainee; and • Initial issue of clothes, bedding and personal hygiene items. 	Meets Standard	The handbook addresses personal items permitted to be retained by the detainee and the initial issuance of clothing, bedding and personal hygiene items.
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	The handbook addresses the methods of classification, explains each of the classification levels in detail and appeals process.

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<p>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.</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
9. The handbook states when a medical examination will be conducted.	Meets Standard	The handbook states a medical examination will be given within fourteen days of arrival.
10. The handbook describes the facility, housing units, dayrooms, in-dorm activities, and special housing units.	Does Not Meet Standard	This component was rated deficient during the last inspection due to the handbook not describing housing pods, dayrooms and special housing units' activities. The handbook still does not describe the housing pods, dayrooms and special housing units. The handbook does describe the in-dorm activities. This is a repeat finding.
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.
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 addresses the procedure for obtaining disposable razors and giving ICE detainees the opportunity to shave first prior to court appearances.
13. The handbook describes barber hours and hair cutting restrictions.	Does Not Meet Standard	This component was rated deficient during the last inspection due to the handbook not describing hair cutting restrictions. The handbook describes the barber hours, but still does not describe hair cutting restrictions. This is a repeat finding
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 handbook addresses all of the requirements listed in this component.

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COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
15. The handbook addresses religious programming.	Meets Standard	
16. The handbook states times and procedures for commissary or vending machine usage, where available.	Does Not Meet Standard	This component was rated deficient during the last inspection due to the handbook not addressing commissary procedures. This deficiency has not been corrected. This is a repeat finding.
17. The handbook describes the detainee voluntary work program.	Does Not Meet Standard	This component was rated deficient during the last inspection due to the handbook not describing the voluntary work program. The handbook still does not describe the voluntary 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	
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	Visiting schedules and rules are addressed in the handbook and posted in the housing pods.
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"> • Prohibited acts and severity scale sanctions; • Time limits in the Disciplinary Process; and • Summary of the Disciplinary Process. 	Meets Standard	The disciplinary process is outlined in the handbook, to include the listed requirements in this component.
24. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> • Informal (if used) and formal grievance procedures; • The appeals process; • In CDF facilities: procedures for filing an appeal of a grievance with ICE. • Staff/detainee availability to help during the grievance process. • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Homeland Security. 	Meets Standard	This is an IGSA facility. All the items listed in this component are addressed in the handbook.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
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"> • Outdoor recreation hours. • Indoor recreation hours. 	Does Not Meet Standard	This component was rated deficient during the last inspection due to the handbook not describing the policy and hours for outdoor recreation. The handbook only describes the policy and schedule for indoor recreation. This is a repeat finding.
27. The handbook describes the detainee dress code for daily living; and work assignments.	Meets Standard	
28. The handbook specifies the rights and responsibilities of all detainees.	Meets Standard	The handbook addresses rights and responsibilities of detainees.

DETAINEE HANDBOOK – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i>	
<p>The local handbook contains essential information relating to responsibilities, rights and privileges while detained at the facility. The handbook describes the individual programs, services and rules and specifies the rules, regulations, policies, and procedures. The facility provides translation assistance to detainees who request help or are exhibiting literacy or language problems.</p> <p>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. The detainee handbook is free from derogatory or insensitive statements about detainee religion or culture. This inspector conducted multiple detainee interviews, each of whom volunteered to participate. None of the detainees made allegations of mistreatment, abuse, or discrimination. The majority of detainees reported being satisfied with facility services.</p> <p>Evacuation drills are addressed in the handbook. The housing pods have posted diagrams showing the location of all fire exits and which exit to use in the event of an emergency. The evaluation of this standard was based on review of the detainee handbook, policies and procedures; observation; and staff and ICE detainees’ interviews.</p>	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6); (b)(7)(C)	Completion Date: 1/12/2017
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

FOOD SERVICE (Key: F)		
POLICY: 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 ABL Management, Inc. (ABL). The food service department is under the supervision of a professionally trained food service director (FSD), who is ServSafe certified. The responsibilities of the FSD and food service workers are in writing.
2. The Cook Supervisor is on duty on days when the FSA is off duty and vice versa.	Meets Standard	A food service supervisor (FSS) 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"> • In ICE Facilities this includes a review of the ICE "Food Service" standard 	Meets Standard	The FSD provides training to all food service employees. The training also includes a review of the ICE food service standard.
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	Knives are maintained in a locked cabinet in the FSD's office under the control of the FSD.
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	
8. The FSA monitors staff implementation of the facility's population counts procedures. Staff is trained in count procedures.	Meets Standard	This component was rated deficient during the last inspection due to the facility staff not physically counting the food service workers during the 9:00 a.m. count. During this inspection it was observed that counts are being conducted by officers, who have been trained in count procedures.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

FOOD SERVICE (Key: F)		
POLICY: 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)
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	Workers were dressed in accordance with the food service standard. Servers wore food grade plastic gloves and hair nets, and served the food using utensils. ICE detainees do not work in food service.
10. The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	Meets Standard	A review of the documentation concerning the detainee job descriptions revealed the FSD maintains annual, accurate and up-to-date records. ICE detainees do not work in food service.
11. The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	Meets Standard	Training is provided by the FSD to newly assigned detainee workers that include the rules and procedures for the food service department. ICE detainees do not work in food service.
12. During orientation and training session(s), the CS explains and demonstrates: <ul style="list-style-type: none"> • Safe work practices and methods; • Safety features of individual products/pieces of equipment; and • Training covers the safe handling of hazardous material[s] the detainees are likely to encounter in their work. 	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.
13. The Cook Supervisor documents all training in individual detainee detention files.	Meets Standard	The FSD documents and maintains up-to-date files of all training for worker in the FSD's office. ICE detainees do not work in the food service department.
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.
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 breakfast.
16. For cafeteria style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	N/A	The food service department does not have a cafeteria-style feeding operation.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

FOOD SERVICE (Key: F)		
POLICY: 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)
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 28-day menu cycle 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, spaghetti, 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	The master-cycle menu is 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"> • If yes, documenting each substitution, along with its justification • With copy to FSA 	Meets Standard	Menu items may be changed by the FSS with the approval of the FSD. The change and its justification are documented and a copy of the action is forwarded to the OIC.
22. All staff and volunteers know and adhere to written "food preparation" procedures.	Meets Standard	Observation of food preparation, serving and its transportation indicated proper sanitary guidelines are followed. Food temperatures observed during the inspection were maintained within prescribed safe ranges.
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).

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP I

FOOD SERVICE (Key: F)		
POLICY: 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)
<p>24. A common-fare menu available to detainees whose dietary requirements cannot be met on the main line.</p> <ul style="list-style-type: none"> • Changes to the planned common-fare menu can be made at the facility level; • Hot entrees are offered three times a week; • The common-fare menus satisfy nutritional recommended daily allowances (RDAs); • Staff routinely provide hot water for instant beverages and foods; • Common-fare meals are served with: • Disposable plates and utensils. • Reusable plates and utensils. • Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items. 	Meets Standard	A common fare menu is available to detainees whose dietary requirements cannot be met on the main line. Each of the listed requirements in this component is addressed.
<p>25. A supervisor at the command level must approve a detainee's removal from the Common-Fare Program.</p>	Meets Standard	
<p>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.</p>	Meets Standard	A ceremonial meal schedule has been developed by ABL, in conjunction with the OIC.
<p>27. The common-fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year.</p> <ul style="list-style-type: none"> • Muslims fasting during Ramadan receive their meals after sundown. • Jews who observe Passover but do not participate in the Common-Fare Program receive the same Kosher-for- Passover meals as those who do participate. • Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. 	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.
<p>28. The food service program addresses medical diets.</p>	Meets Standard	The food service department provides medical diets as prescribed by the medical department. There were thirty detainees receiving medical diets during the inspection.
<p>29. Satellite-feeding programs follow guidelines for proper sanitation.</p>	Meets Standard	
<p>30. Hot and cold foods are maintained at the prescribed, "safe" temperature(s) while being served.</p>	Meets Standard	The temperatures of food items served at the lunch meals during this inspection were observed to be within the prescribed safe temperature ranges.

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FOOD SERVICE (Key: F)		
POLICY: 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)
31. All meals are provided in nutritionally adequate portions.	Meets Standard	All meal menus have been certified by a registered dietitian to be nutritionally adequate. Meals served provide the detainees with approximately 2900 calories daily.
32. Food is not used to punish or reward detainees based upon behavior.	Meets Standard	The facility has a warden burger (nutra loaf) that is served to non-ICE detainees in the special housing unit. Per policy, the warden burger is not served to ICE detainees.
33. The food service staff instructs detainee volunteers on: <ul style="list-style-type: none"> • Personal cleanliness and hygiene; • Sanitary techniques for preparing, storing, and serving food; and • The sanitary operation, care, and maintenance of equipment. 	Meets Standard	The food service orientation program given by the FSD instructs the assigned workers on all of the listed requirements in this component. ICE detainees do not work in food service.
34. Everyone working in the food service department complies with food safety and sanitation requirements.	Does Not Meet 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. The kitchen floor has been replaced with a new epoxy-floor, but the daily cleaning/sanitation in the kitchen is still lacking. Dirt and food debris were observed on baseboards and floors throughout the kitchen. The ventilation hoods were dirty, with grease and dust build-up. This is a repeat finding.
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"> • Who conducts the inspections? 	Meets Standard	Daily and weekly inspections of food service areas are conducted and documented by the FSD. Documentation indicated these weekly inspections are being conducted.
36. Equipment is inspected for compliance with health and safety codes and regulations. <ul style="list-style-type: none"> • When was the most recent inspection? • Which agency conducted the inspection? 	Meets Standard	The Ohio Department of Health and Agriculture inspects the food service department annually for compliance with health and safety codes and regulations. The last inspection was conducted on 11/29/2016.

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COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	Dish machine temperatures are checked and documented after each meal.
39. Staff documents the results of every refrigerator/freezer temperature check.	Meets Standard	Cooler and freezer temperatures are checked and documented at the beginning and the end of each day.
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	
42. Storage areas are locked when not in use.	Meets Standard	All storage areas were observed to be locked and secure when not in use.

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

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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 provides nutritious and appetizing meals that are certified by a registered dietitian. Medical and special diets are made available through coordination with the medical department and the PS who oversees the religious service program.

A review of the approved menus revealed that the meals being served during the inspection were being served in accordance with the approved menus.

There is an established meal schedule for detainee food service workers. Workers receive the same fare as other detainees. The meals are served in as unregimented manner as possible. The satellite feeding program facilitates free seating, ease of movement, and supervision in each of the housing pods. The food carts used to transport meals to the housing pods do not have a locking device.

Prepared food items which have not been placed on the serving line are retained for no more than 24 hours. Leftovers offered for service a second time are not retained for later use, but are discarded immediately after offering. All leftovers are labeled identifying the product, preparation date, and time.

The FSD does not issue special diet identification cards at this IGSA facility. A roster of detainees receiving religious or medical diets is approved by the programs supervisor and medical department, respectively, and is maintained by the FSD.

The FSD prepares quarterly cost estimates for the common fare program.

Moist cloths for wiping food spills on kitchenware and food-contact surfaces on equipment are clean, rinsed frequently and soaked in approved sanitizing solution between uses. The sanitizing solution is at the appropriate parts per million (ppm) levels.

Dishwashers and automatic dispensers for detergents, wetting agents, and liquid sanitizer are maintained in good repair. Utensils and equipment placed in the machine are exposed to all cycles. A three compartment sink with three labeled compartments is used for manually washing, rinsing, and sanitizing utensils and equipment. Chemicals used for sanitizing are auto-dispensed at the appropriate chemical concentration level and temperature.

Adequate and conveniently located toilet facilities are provided to all food service staff and workers.

The FSD is responsible for pest control in the food service department.

Inventory levels are established, monitored, and periodically adjusted to correct excesses or shortages. The evaluation of this standard was based on a review of policies and procedures, observation and staff interviews.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/12/2017

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

FUNDS AND PERSONAL PROPERTY (Key: G)		
<p>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.</p>		
<p align="center">Standard N/A</p>		
<p>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")</p>		
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	Funds are placed into the detainee's commissary account and valuables separated, inventoried and stored in a tamperproof plastic evidence bag inside a secure locked property room. Only designated personnel and supervisors have access to this 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	Officers working in the booking area use a local property inventory receipt form to itemize and categorize baggage, personal property, funds and valuables. At this IGSA the form is comparable to the ICE property form and is consistent with the requirements of the standard.
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	A review of the property audit log revealed that audits of detainee baggage and other non-valuable property are being conducted quarterly.
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 sign and verify the inventory form for funds and valuables received from detainees during the intake process.
7. Staff searches arriving detainees and their personal property for contraband.	Meets Standard	All arriving detainees and their personal property are searched for contraband upon admission.
8. Staff procedures follow written policy for returning forgotten property to detainees.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

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)
9. Property discrepancies are immediately reported to the CDEO or Chief of Security.	Meets Standard	Per policy, all property discrepancies are reported to the shift supervisor and then forwarded up the facility's chain of command.
10. Staff follows written procedures when returning property to detainees.	Meets Standard	
11. CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.	Meets Standard	
12. The facility attempts to notify an out-processed detainee that he/she left property in the facility: <ul style="list-style-type: none"> • By sending written notice to the detainee's last known address; • Via certified mail; and • The notice state that the detainee has 30 days in which to claim the property, after which it will be considered abandoned. 	Meets Standard	Policy requires that all forgotten or abandoned property be forwarded immediately to ICE. ICE will attempt to notify detainees of property left at the facility.
13. The facility disposes of abandoned property in accordance with written procedures. <ul style="list-style-type: none"> • If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE. 	Meets Standard	Policy requires that all abandoned property be forwarded immediately to ICE.

FUNDS AND PERSONAL PROPERTY – REVIEWER SUMMARY

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

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)*

Policies and procedures ensure the secure and safe storage of property. The local handbook notifies the detainees of the policies and procedures concerning funds and personal property, to include items they may retain in their possession.

When detainees receive money or property in the mail, the items are receipted and the money or property is placed in the appropriate account/property storage. Detainees are permitted to keep in their possession reasonable quantities of personal property, if the particular items do not pose a threat to the security or good order of the facility. Detainees wishing to send money to family are cautioned not to send cash through the mail. Detainees may contact the business manager, who makes arrangements to purchase a money order for the detainee to send to their family. There is a commissary where detainees can purchase store items.

Identity documents are maintained in the detainee's A-file. Upon written request, ICE will provide the detainee ICE/ERO certified true and correct copies of his/her identity documents.

This IGSA facility provides each detainee with non-securable storage space for detainees to maintain authorized personal property. The number of containers available is equal to the number of detainees assigned to the housing pod. 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 detainees' detention file.

Lost/missing property claims are investigated by the shift supervisor. The facility does not arbitrarily impose a ceiling on the amount to be reimbursed for a validated claim. The OIC will notify ICE of all claims and outcomes. Claims are paid immediately following the conclusion of the investigation. The evaluation of the standard was based on a review of policies and procedures, and ICE and facility staff interviews.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/12/2017
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Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETAINEE GRIEVANCE PROCEDURES (Key: H)		
<p>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.</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>1. Written procedures provide for the informal resolution of oral grievances (Not mandatory).</p> <ul style="list-style-type: none"> • If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff. 	Meets Standard	<p>The handbook and written procedures provide for an informal grievance process. Detainees have five days after the event to make their concern known to employees.</p>
<p>2. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures.</p> <ul style="list-style-type: none"> • Detainees may seek help from other detainees or facility staff when preparing a grievance. • Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary. 	Meets Standard	<p>Detainees have access to the grievance procedure through the grievance coordinator. 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.</p>
<p>3. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.</p>	Meets Standard	<p>During the facility's initial orientation training and annual refresher training, all personnel receive instruction on how to identify and expedite emergency grievances. The handbook addresses emergency grievances and the procedures for expediting them.</p>
<p>4. There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodged a complaint:</p> <ul style="list-style-type: none"> • If yes, explain. 	Meets Standard	<p>There were no substantiated or documented cases of staff harassing detainees who have filed a complaint.</p>

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETAINEE GRIEVANCE PROCEDURES (Key: H)		
<p>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.</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>5. Procedures include maintaining a Detainee Grievance Log.</p> <ul style="list-style-type: none"> • If not, an alternative acceptable record keeping system is maintained. • "Nuisance complaints" are identified in the records. • For quality control purposes, staff document nuisance complaints received but not filed. 	Meets Standard	<p>An electronic grievance log is maintained that includes the documentation listed in this component. Per policy, a copy of the grievance disposition is given to the detainee and another copy is placed in the detainee's detention or medical file, as applicable. All grievances are processed and filed. The facility does not consider any grievances to be nuisance complaints.</p>
<p>6. Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.</p>	Meets Standard	<p>Per policy, grievances that include staff misconduct are handled as emergency grievances and will be forwarded to ICE.</p>

DETAINEE GRIEVANCE PROCEDURES – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>The grievance program establishes the grievance process, protects detainee rights and ensures that detainees are treated fairly. There have been four grievances filed since the last inspection, with three of the grievances found in favor of the detainee.</p> <p>The facility has policy and procedures for detainees to appeal grievances to the grievance coordinator and to the OIC. A written decision will be given to the detainee within five days of receiving the appeal. The facility allows dissatisfied detainees to appeal to ICE. Any grievances filed by ICE detainees are recorded in the grievance log that is reviewed by ICE during scheduled ICE visits.</p> <p>The evaluation of this standard was based on interviews with the grievance coordinator, a review of policy and procedures, and review of the grievance log.</p>	
<p>Overall Rating: Meets Standard</p>	
<p>Reviewer Name (Printed) (b)(6); (b)(7)(C)</p>	<p>Completion Date: 01/12/2017</p>
<p>Reviewer Signature (for printed form submission):</p>	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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.	N/A	
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.	N/A	
3. The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.	N/A	
4. Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	N/A	
5. Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.	N/A	
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.	N/A	
7. Detainees in segregation, unable to attend for security reasons, may request separate sessions with presenters. Such requests are documented.	N/A	
8. Interpreters are admitted when necessary to assist attorneys and other legal representatives.	N/A	
9. Presenters are afforded a minimum of one hour to make the presentation and to conduct a question-and-answer session.	N/A	
10. Staff permits presenters to distribute ICE-approved materials.	N/A	
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.	N/A	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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.	N/A	
13. The facility plays ICE-approved videotaped presentations on legal rights at regular opportunities, at the request of outside organizations.	N/A	
14. A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request	N/A	

GROUP LEGAL RIGHTS PRESENTATIONS – REVIEWER SUMMARY

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

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

There have been no group legal rights presentations during the inspection period.

Overall Rating: N/A

Reviewer Name (Printed)

(b)(6); (b)(7)(C)

Completion Date: 1/12/2017

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

Issuance and Exchange of Clothing, Bedding, and Towels (Key: J)		
POLICY: ICE REQUIRES THAT ALL FACILITIES HOUSING ICE DETAINEES PROVIDE CLEAN CLOTHING, BEDDING, LINENS AND TOWELS TO EVERY ICE DETAINEE UPON ARRIVAL. FURTHER, FACILITIES SHALL PROVIDE ICE DETAINEES WITH REGULAR EXCHANGES OF CLOTHING, LINENS, AND TOWELS FOR AS LONG AS THEY REMAIN IN DETENTION.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>1. The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, and towels.</p> <ul style="list-style-type: none"> The supply of these items exceeds the minimum required for the number of detainees. 	Meets Standard	Policy outlines the procedures for the issuance and exchange of clothing, bedding, linens and towels. Observation of the supply of these items revealed that on-hand quantities exceed the minimum required for the number of detainees housed at the facility.
<p>2. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive:</p> <ul style="list-style-type: none"> One uniform shirt and one pair of uniform pants, or one jumpsuit; One pair of socks; One pair of underwear (Daily change); and One pair of facility-issued footwear. 	Meets Standard	During the booking procedure all new detainees receive the standard issue of clothing consisting of one shirt, one pair of pants, two pairs of underwear, two pairs of socks and one pair of shoes. Detainees are issued clean, temperature-appropriate presentable clothing consistent with the requirements of this component.
<p>3. Additional clothing is available for changing weather conditions, or as seasonally appropriate.</p>	Meets Standard	
<p>4. New detainees are issued clean bedding, linens, and towels. They receive at a minimum:</p> <ul style="list-style-type: none"> One mattress; One blanket; Two sheets; One pillowcase; One towel; and Additional blankets are issued based on local weather conditions. 	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.
<p>5. Detainees assigned to special work areas are clothed in accordance with the requirements of the job.</p>	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

Issuance and Exchange of Clothing, Bedding, and Towels (Key: J)		
POLICY: ICE REQUIRES THAT ALL FACILITIES HOUSING ICE DETAINEES PROVIDE CLEAN CLOTHING, BEDDING, LINENS AND TOWELS TO EVERY ICE DETAINEE UPON ARRIVAL. FURTHER, FACILITIES SHALL PROVIDE ICE DETAINEES WITH REGULAR EXCHANGES OF CLOTHING, LINENS, AND TOWELS FOR AS LONG AS THEY REMAIN IN DETENTION.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
6. Detainees are provided clean clothing, linen and towels. <ul style="list-style-type: none"> • Socks and undergarments - exchanged daily. • Outer garments - twice weekly. • Sheets - weekly. • Towels - weekly. • Pillowcases - weekly. 	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, 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	Food service workers are permitted to exchange outer garments daily. ICE detainees do not participate in the volunteer work program.
8. Volunteer detainee workers are permitted to exchange outer garments more frequently.	Meets Standard	Workers are permitted to exchange outer garments more frequently or as 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>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i>		
<p>The issuance and exchange of clothing, bedding, and towels is conducted in accordance with the standard. Detainees receive clean and appropriate quality and quantity of clothing, bedding, linen, and towels.</p> <p>Detainees are provided gender appropriate hygiene items, which are replenished as needed, and which are not used as reward or punishment.</p> <p>Clothing exchanges are provided on a one-for-one basis to prevent hoarding and otherwise ensure an adequate supply of clothing.</p> <p>Detainees are not permitted to wash clothing, bedding, linens, canvas shoes or other items in the housing pods at this IGSA facility. The evaluation of this standard was based on review of policy and procedures, observations and interviews with staff and ICE detainees.</p>		
Overall Rating: Meets Standard		
Reviewer Name (Printed)	(b)(6); (b)(7)(C)	Completion Date: 1/12/2017
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

Marriage Requests (Key: K)		
POLICY: 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	All marriage requests are forwarded to the ICE field office for consideration/review 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 reviews all requests and documents approval or denial in writing.
3. It is standard practice to require a written request for permission to marry.	Meets Standard	
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	
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 marriage ceremony is held in a timely manner at the facility.

<p>Marriage Requests – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i></p>

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

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)*

There are written policy and procedures outlining the marriage request process. The handbook outlines the marriage request procedures. ICE notifies the detainee in writing of the reasons for the denial within thirty days from the date of request. During the inspection ICE personnel informed this inspector there have been four marriage requests filed with one being approved, since the last inspection.

Guidelines for denying the marriage request include the following: the detainee is not legally eligible to be married; the detainee is not mentally competent; the intended spouse has not affirmed, in writing, their 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. When a request is approved, the detainee, legal representative or other individual acting on the detainee's behalf makes all the marriage arrangements, including, but not limited to, blood tests, obtaining the 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.

All arrangements are consistent with the security and orderly operation of the facility according to the following stipulations: the ceremony will take place at the facility, all expenses relating to the marriage are the responsibility of the detainee or person acting on their behalf, the ceremony is conducted in private with no media publicity, and only individuals essential for the marriage ceremony may attend.

The FOD has the right of final approval concerning the time, place and manner of all arrangements. The FOD can revoke approval of a marriage request for good cause and notifies the detainee in writing in those cases. The detainee can file an appeal in such a case. The evaluation of this standard was based on a review of policy and procedures, and ICE and facility staff member interviews.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 01/12/2017

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

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"> • Funeral; or • Deathbed 	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"> • Conduct themselves in a manner that does not bring discredit to the ICE; • Do not violate federal, state, or local laws; • Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants; • Make no unauthorized phone calls; and • Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return. 	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)

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

NON-MEDICAL EMERGENCY ESCORTED TRIPS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> ICE handles all non-medical emergency escorted trips for ICE detainees.	
Overall Rating: N/A	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/12/2017
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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	
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 124. 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	The facility does not use detainee workers in the recreation program.
5. The recreational specialist or trainee equivalent oversees recreation programs for special housing units (SHU) and special-needs detainees.	Meets Standard	Trained officers oversee the recreation program for detainees placed in special management units (SMU) and special-needs detainees.
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	Meets Standard	Dayroom activities consist of board games, dominoes, cards, checkers 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	
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 during out-of-cell time. The average daily out-of-cell time is seven hours.
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	All recreation is under constant supervision by officers.
13. Supervising staff is equipped with radios.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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.		
<div style="border: 1px solid black; padding: 2px; display: inline-block;">Standard N/A</div>		
Click the above button if outdoor recreation is offered. Items 19-26 will be marked "N/A".		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	All volunteers are required to sign a waiver of liability and submit to a background check prior to coming into contact with detainees.
18. Visitors, relatives or friends are not allowed to serve as volunteers.	Meets Standard	Visitors, relatives or friends cannot serve as volunteers.
19. If the facility has no outside recreation, are detainees considered for transfer after six months? <ul style="list-style-type: none"> • If yes, written procedures ensure timely review of all eligible detainees. 	N/A	
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	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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.		
<div style="border: 1px solid black; display: inline-block; padding: 2px 5px; margin-bottom: 5px;">Standard N/A</div> <p>Click the above button if outdoor recreation is offered. Items 19-26 will be marked "N/A".</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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 <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>The recreation program ensures detainees have access to recreational and exercise activities. 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.</p> <p>Both the indoor and outdoor recreation areas provide the appropriate space for detainees to comfortably participate in recreation at the facility.</p> <p>There are no intramural activities offered at the facility.</p> <p>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. The evaluation of this standard was based on reviewing policy and procedures, interviewing employees and ICE detainees and observing and inspecting the recreational areas.</p>	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6); (b)(7)(C)	Completion Date: 1/12/2017
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

RELIGIOUS PRACTICES (Key: N)		
POLICY: FACILITIES WILL PROVIDE ICE DETAINEES OF ALL FAITHS WITH REASONABLE AND EQUITABLE OPPORTUNITIES TO PARTICIPATE IN THE PRACTICES OF THEIR FAITH, LIMITED ONLY BY THE CONSTRAINTS OF SAFETY, SECURITY, THE ORDERLY OPERATIONS OF THE FACILITY AND BUDGETARY CONSIDERATIONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Detainees are allowed to engage in religious services.	Meets Standard	Per policy, detainees are allowed the opportunity to participate in practices of their own faith.
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"> List any exceptions. 	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"> Providing special meals, consistent with dietary restrictions; Honoring fasting requirements; Facilitating religious services; and Allowing activity restrictions. 	Meets Standard	Holy day observances are accommodated by honoring fasting requirements, providing special meals, and allowing for activity restrictions and/or special religious services.
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	All volunteers undergo a background check and credentials are verified before coming into contact with detainees and being allowed to participate in detainee programs.
7. Members of faiths not represented by clergy may conduct their own services within security allowances.	Meets Standard	
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

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

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

RELIGIOUS PRACTICES – REVIEWER SUMMARY

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

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

The religious program permits detainees to participate in their respective religious faiths. The program recognizes holy days and offers special meals. The program supervisor (PS) oversees the religious program at the facility. The religious program is also assisted by eighty 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 their religious affiliation.

When necessary for the security or good order of the facility, the OIC can limit attendance at or discontinue a religious activity.

The facility does not require a detainee to profess a religious belief. A detainee can designate any or no religious preference during the intake process. By notifying the PS in writing, a detainee can request to change their designation at any time and the change is effected in a timely fashion.

In the interest of maintaining the security and orderly operation of the facility and to prevent abuse or disrespect by detainees of religious practices or observances. The PS monitors patterns of changes in declarations of religious preference.

In determining whether to allow a detainee to participate in specific religious activities, employees refer to the information contained both on the initial classification forms and the detainee's religious designation. Detainees showing "No Preference" can be restricted from participating in those activities deemed appropriate for members only. The intake officers enter the religious designation during the intake process. When the PS, with consultation from the local religious volunteers, approves a request for change of religious preference, the PS makes the necessary change in the detention file.

The facility does not have a dedicated chapel for religious activities. Religious services are held in the housing pod's multi-purpose rooms. These areas are sufficient to accommodate the needs of all religious groups in the detainee population fairly and equitably. The religious service area is maintained in a neutral fashion suitable for use by various faith groups. Staff restroom facilities are available for volunteers. The PS's office is used for storage space for items used in religious programs.

Current program schedules are posted in the housing pods. When scheduling approved religious activities, the PS in cooperation with the OIC consider both the availability of staff supervision and the need to allot time and space equitably among the different groups.

The facility has local religious volunteers and contractors who provide the religious services not provided by the facility. Detainees may request spiritual counselors or advisers for religious needs other than those of a specific faith tradition, and the specific needs of special needs detainees are considered.

Detainees can request the introduction of new or unfamiliar religious components to the program. The PS in consultation with religious volunteers from the community will ask the detainees to provide additional data in order to make an informed decision to include or exclude the practice from the religious services program. Upon completing the review, the PS forwards the recommendation to the OIC for concurrence. The decision by the OIC, in consultation with the PS and local religious volunteers, is communicated to the detainee. The decisions regarding the expansion of the religious services program are subject to the parameters for maintaining a safe and secure operation and the availability of staff for supervision.

If requested, the PS will facilitate arrangements for pastoral visits by a clergyperson or representative of a detainee's faith. Pastoral visits ordinarily take place in the multi-purpose rooms with accommodations made for privacy, if requested. Community religious volunteer groups and individuals provide detainees with religious services and counseling. The evaluation of the standard was based on observation of the religious programs and schedules, staff interviews, and review of policy and procedures.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

RELIGIOUS PRACTICES – REVIEWER SUMMARY	
<i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Rating: Meets Standard	
Reviewer Name (Printed):	Completion Date: 1/12/2017
(b)(6); (b)(7)(C)	
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

DETAINEE TELEPHONE ACCESS (Key: O)		
POLICY: 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 from 7:00 a.m. until 11:00 p.m.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	Meets Standard	Detainees are made aware of the telephone access policy during the orientation process. Information is also available in the detainee handbook.
3. Access rules are posted in housing units.	Meets Standard	
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	Key information is available 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 in the housing units at a ratio one telephone per twelve detainees.
6. Telephones are inspected regularly by facility staff to ensure that they are in good working order.	Meets Standard	
7. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	Meets Standard	
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	
10. A procedure exists to assist a detainee who is having trouble placing a confidential call.	Meets Standard	A detainee having trouble placing a confidential telephone call is provided a staff attendant to facilitate the contact.
11. The facility provides the detainees with the ability to make non-collect (special access) calls.	Meets Standard	
12. Special Access calls are at no charge to the detainees.	Meets Standard	
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 was able to reach the OIG auto-attendant via the speed dial number programmed into the housing unit telephones on the second day of the inspection.
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	The facility fully meets this requirement.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETAINEE TELEPHONE ACCESS (Key: O)		
POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	Staff members coordinate with ICE to arrange these calls.
17. Any telephone restrictions are documented.	Meets Standard	
18. The facility has a system for taking and delivering emergency detainee telephone messages.	Meets Standard	
19. Emergency phone call messages are immediately given to detainees.	Meets Standard	Emergency telephone messages are delivered to detainees by the shift supervisor immediately after verification.
20. Detainees are allowed to return emergency phone calls as soon as possible.	Meets Standard	An immediate return telephone call is provided upon approval of the shift supervisor.
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	Detainees in disciplinary segregation are permitted to make telephone calls relating to their immigration case or other legal matters.
22. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	Meets Standard	
23. Detainees in disciplinary segregation are allowed phone calls for family emergencies.	Meets Standard	
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/or protective custody have the same telephone privileges as those in general population.
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	The notice that telephone calls may be monitored and recorded is posted near every telephone. Special access calls are not monitored.

<p>DETAINEE TELEPHONE ACCESS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i></p>

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)*

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 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 in duration to fifteen minutes 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.

Evaluation of this standard included reviewing policy, procedures, and the local handbook; interviewing staff; and observing the phones in several housing units.

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.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/12/2017

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

VISITATION (Key: P)		
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	
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 are not searched since visiting is primarily conducted through video visitation. 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 will be subject to search.
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.
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.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

VISITATION (Key: P)		
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	
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.	Meets Standard	
20. Prior to each visit, legal service providers and assistants are identified per the standard.	Meets Standard	
21. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	Meets Standard	
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.
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 requires that examinations by independent medical service providers and/or experts require prior approval from ICE officials. Review and approval procedures are consistent with the requirements of the standard.

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

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

VISITATION – REVIEWER SUMMARY

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

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

The local handbook addresses visiting rules and hours. Legal visitors and social visitors are logged on separate logs. The visitation schedule and rules are posted in the visitor entrance lobby. 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. Family and friends may visit detainees. Detainees may visit other family members who are detained at this facility by special arrangement.

Legal visitors may be accompanied by interpreters. Legal visitors are not required to know the detainee's A-number in order to visit and policy permits legal visitors to 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 visitation if private consultation rooms are not available. Documents exchanged between detainees and their legal visitors may be inspected by employees, but not read. Legal visiting policy is available upon request. Consultation visitation, asylum officer visits, and consular officer visits are managed within the stipulations of the standard.

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. Policy prohibits personal property, which includes pets, from entering the visitation areas.

This standard was evaluated via policy and handbook review, interviews with staff members and inspection of the visitation areas.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/12/2017

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

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: 1/12/2017
Reviewer Signature (for printed form submission):		

Section II

Health Service Standards

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

HUNGER STRIKES (Key: R)		
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.		
COMPONENTS	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 IGSAAs immediately report a hunger strike to the ICE.	Meets Standard	At this IGSA facility, a hunger strike is immediately reported to administration who immediately contacts 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"> • If yes, in an observation room? 	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, 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	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.
9. During a hunger strike, staff document and provide the hunger-striking detainee three meals a day.	Meets Standard	Per policy, during a hunger strike, personnel document and provide hunger-striking detainee three meals a day.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

HUNGER STRIKES (Key: R)		
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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.
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
(Use following format for dates: mm/dd/yyyy)

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

HUNGER STRIKE – 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 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.

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.

Food and water intake and output is measured and recorded for any detainee participating in a hunger strike.

Release from hunger strike evaluation and treatment is only determined by the physician with the order clearly documented in the detainee's medical record.

Since the last inspection, there have been no hunger strikes.

Evaluation of the standard was determined following a review of policy, training records, observations and interviews with medical and security personnel.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/12/2017

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
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.
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 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 manager. Medical personnel also have telephonic contact with the field office case manager.
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.
6. The facility has sufficient space and equipment to afford detainee privacy when receiving health care.	Meets Standard	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.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
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 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.
11. Medical records are kept apart from other files. They are: <ul style="list-style-type: none"> • Secured in a locked area within the medical unit; • With physical access restricted to authorized medical staff; and • Procedurally, no copies made and placed in detainee files. 	Meets Standard	The facility uses an electronic medical record (EMR) 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.
13. Medical screening includes a Tuberculosis (TB) test. <ul style="list-style-type: none"> • Every arriving detainee receives a TB test during the admission process; • Detainee's TB-screening does not occur more than one business day after his/her arrival at the facility; and • Detainees not screened are housed separate from the general population. 	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 are housed separately from the general population. The facility has four negative airflow respiratory isolation rooms located in the medical department.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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"> • By a health care provider or specially trained officer; and • Before a detainee’s assignment to a housing unit. 	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 their admission.
17. Detainees in the Special Management Unit have access to health care services.	Meets Standard	Detainees housed in the special management unit 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"> • Request slips are available in languages other than English, including every language spoken by a sizeable number of the facility’s detainee population. • Service-request slips are delivered in a timely fashion to the health care provider. 	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 daily.
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.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
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.
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	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.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

ACCESS TO MEDICAL CARE (Key: S)		
POLICY: 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)
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 first shift medical department supervisor, 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".

<p>ACCESS TO MEDICAL CARE – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i></p>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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. 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 are 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 two AEDs available in 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.

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. On-site staffing consists of a paramedic health services administrator, two paramedic shift supervisors, four full-time paramedics, sixteen part-time paramedics, two part-time LPNs, one part-time RN and one psychiatrist on-site five hours a week. Contractual personnel consist of one physician on-site three days every two weeks and on-call, and one physician assistant on-site three days a week and on-call when the physician is absent, a dentist on-site four hours a week and mental health personnel on-site seven days a week. The one part-time RN performs all the required ICE functions. The RN reported the physician reviews all completed 14-day physical examinations/assessments; however, physician review was difficult to determine in reviewing the electronic medical record.

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.

G-324A (NDS) With SAAPI (Coded 09202013) Detention Inspection Form Worksheet for IGSA's - Rev: 09/20/2013 – Form Key 10

2020-ICLI-00042 454

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

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ACCESS TO MEDICAL CARE – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Rating: Meets Standard		
Reviewer Name (Printed)	(b)(6); (b)(7)(C)	Completion Date: 1/12/2017
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SUICIDE PREVENTION AND INTERVENTION (Key: T)		
POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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"> • Recognize potentially suicidal behavior; • Refer potentially suicidal detainees, following facility procedures; and • Understand and apply suicide-prevention techniques. 	Meets Standard	Curriculum review verified employees are trained in each of the 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"> • Screening does not occur later than one working day after the detainee’s arrival. 	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.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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

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. 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 serious suicide attempts and one ICE detainee on suicide watch as follows. A 35-year old Haitian female was admitted to the facility 12/10/2016. In-processing screening indicated a previous suicide attempt history. The detainee was evaluated by mental health personnel who cleared the detainee for general population placement. On 12/22/2016, the detainee began voicing suicidal thoughts, was evaluated by mental health personnel and placed on suicide observation with at least ten-minute documentation. The detainee remained on suicide observation until 01/10/2017, when ICE removed her from the facility.

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: 1/12/2017

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

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 severely 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 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"> The detainee's location; and The limitations placed on visiting. 	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"> 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. 	Meets Standard	There are guidelines addressing the Ohio advanced directive form for implementing living wills and advanced directives. The guidelines include instructions for detainees who wish to have a living will other than the generic form 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.
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.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
7. The facility notifies the DIHS Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of 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"> • If the detainee's is a U.S. military veteran, is the Department of Veterans Affairs notified? 	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.
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 whoever claims the detainee remains.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
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"> • Performance of an autopsy; • Who will perform the autopsy; • Obtaining state approved death certificates; and • Local transportation of the body. 	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)

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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 deaths.

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: 1/12/2017

Reviewer Signature (for printed form submission):

Section III

SECURITY AND CONTROL STANDARDS

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

CONTRABAND (Key: V)		
POLICY: ALL DETENTION FACILITIES WILL ENSURE THE PROPER HANDLING AND DISPOSAL OF ALL CONTRABAND. DOCUMENTATION OF CONTRABAND DESTRUCTION IS REQUIRED.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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 and post orders describe how illegal contraband is to be confiscated and documented as evidence pending a review for disciplinary action and/or prosecution. The contraband is placed in a safe in the shift supervisor's office and an incident report is prepared by the officer who made the discovery.
2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	Meets Standard	Policy and post orders require contraband that is government property be held and treated as evidence pending 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	Policy and post orders provide direction on how to return property not needed as evidence to the proper authority.
4. Altered property is destroyed following documentation and using established procedures.	Meets Standard	Policy and post orders provide instructions on how to properly document and dispose of altered property.
5. Before confiscating religious items, the OIC or designated investigator contacts a religious authority.	Meets Standard	Policy and post orders require that a religious authority be consulted before confiscating religious items deemed to be contraband.
6. Staff follows written procedures when destroying hard contraband that is illegal.	Meets Standard	
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"> • If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use. 	Meets Standard	Policy and post orders state that contraband that may be evidence in connection with a violation of a criminal statute shall be 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.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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 included a review of the policy and post orders on contraband and interviews with a shift supervisor, a training officer and a lieutenant. During pre-service and annual training, officers receive instruction on how to detect, confiscate and report various types of contraband.

Detainees are advised of the rules and procedures governing contraband via the local handbook and an orientation video. All medication brought into the facility at the time of booking is forwarded to the medical department for disposition. Medication found in the possession of a detainee for whom it was not prescribed is considered hard contraband and confiscated and forwarded to the medical department. Officers consult with a medical professional if they are uncertain as to whether the medication was prescribed for that detainee.

Excess property is disposed of in accordance with post orders or forwarded to ICE if the property was abandoned by the detainee. Post orders outline the procedures that must be followed to determine if an item will be destroyed and the process for destruction if appropriate. Contraband that is not designated as "hard" is logged and stored with the detainee's property in a locked property room.

No ICE detainee has been required to send out excess property during this inspection period. A review of the disciplinary files for ICE detainees revealed that six ICE detainees were cited for excessive personal property and received minor restrictions during this inspection period.

Contraband at this facility 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: 1/12/2017

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETENTION FILES (Key: W)		
POLICY: EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY ICE DETAINEE BOOKED INTO THE FACILITY, EXCLUDING ONLY DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETENTION FILE WILL CONTAIN COPIES AND, IN SOME CASES, THE ORIGINAL OF SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE FACILITY: CLASSIFICATION SHEET, MEDICAL QUESTIONNAIRE, PROPERTY INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC.		
COMPONENTS	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	Reviewed archived files contained originals and copies of documents generated during admission, e.g., property inventories, classification check lists and ICE-203 forms.
3. The detainee's detention file also contains documents generated during the detainee's custody. <ul style="list-style-type: none"> • Special requests • Any G-589s and/or I-77s closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same 	Meets Standard	Detention files contain applicable documents 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 file cabinets 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 filing cabinet.
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	

DETENTION FILES – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

DETENTION FILES – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <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 DO, the field office maintains A-files but does not maintain a detention file. The A-file transfers with the detainee whenever he/she leaves and/or changes field office jurisdictions.</p> <p>During the evaluation of this standard, detention files, policies and log were reviewed; and facility and ICE employees were interviewed.</p>	
<p>Overall Rating: Meets Standard</p>	
<p>Reviewer Name (Printed): (b)(6); (b)(7)(C)</p>	<p>Completion Date: 1/12/2017</p>
<p>Reviewer Signature (for printed form submission):</p>	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	Meets Standard	Written procedures outline a disciplinary system which uses progressive levels of reviews and appeals.
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	Meets Standard	
3. Written rules prohibit staff from imposing or permitting the following sanctions: <ul style="list-style-type: none"> • corporal punishment • deviations from normal food service • clothing deprivation • bedding deprivation • denial of personal hygiene items • loss of correspondence privileges • deprivation of physical exercise 	Meets Standard	Post orders prohibit officers from permitting the imposition of any of the sanctions listed in this component.
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 disciplinary violations are listed in the handbook and posted in the housing units. An orientation video which includes these topics is shown to all detainees.
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"> • Rights and Responsibilities • Prohibited Acts • Disciplinary Severity Scale • Sanctions 	Meets Standard	The requirements of this component are posted in the housing units and are included in the detainee handbook. The information is available in both English and Spanish.
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	Meets Standard	Training, supervisors and post orders encourage informal attempts to resolve minor infractions. Informal resolutions are documented electronically.
7. Incident reports and Notice of Charges are promptly forwarded to the designated supervisor.	Meets Standard	The reporting officer must forward incident reports and notice of charges to the disciplinary hearing sergeant prior to the end of the shift.
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	
9. An intermediate disciplinary process is used to adjudicate minor infractions.	Meets Standard	

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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)
10. A disciplinary panel (or equivalent in IGSA's) adjudicates infractions. The panel: <ul style="list-style-type: none"> • Conducts hearings on all charges and allegations referred by the UDC; • Considers written reports, statements, physical evidence, and oral testimony; • Hears pleadings by detainees and staff representatives; • Bases its findings on the preponderance of evidence; and • Imposes only authorized sanctions 	Meets Standard	At this IGSA facility, a sergeant is designated as the disciplinary hearing officer. He conducts hearings on all charges and allegations referred for adjudication. He considers written reports, statements, physical evidence and oral testimony as part of the hearing process. The sergeant also hears pleadings and statements from the detainees and staff representatives, and determines a finding based on substantial evidence and imposes authorized sanctions.
11. A staff representative is available if requested for a detainee facing a disciplinary hearing.	Meets Standard	Detainees may request a staff representative to assist them in their disciplinary hearings.
12. The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	Meets Standard	
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	The maximum time that can be imposed in disciplinary segregation is 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	
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	Meets Standard	

<p>DISCIPLINARY POLICY – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i></p>

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

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)*

In order to evaluate this standard, the disciplinary hearing officer, the training officer and a shift supervisor were interviewed, policy and the local handbook were reviewed and disciplinary report packets were examined. The rules regarding conduct and detainee rights are in the local handbook and in postings in the housing units and common areas. The local handbook notifies detainees of the disciplinary process, the prohibited acts and disciplinary severity scale and the procedure for appealing disciplinary findings. Informal resolutions for minor infractions are encouraged. A detainee is not held accountable for misconduct if medical staff finds him/her mentally incompetent. Detainees who lack the ability to understand the nature of the disciplinary proceedings are considered incompetent and this opinion is documented.

A sergeant conducts the disciplinary hearing and all appeals are heard by a lieutenant. Time served in segregation pending the outcome of the proceedings may be credited to the number of days to be spent in the segregation unit after the infraction is adjudicated. The disciplinary report and accompanying documents are not placed in the file of a detainee who is found not guilty. The facility retains discipline material in its own files.

Twenty-three ICE detainees were cited for rule violations during this inspection period and a random selection of the documentation for those incidents was reviewed. Most of the violations were for having excessive personal property or some other minor offense. There was one ICE detainee in disciplinary segregation during this inspection for making threats toward staff and other detainees. He refused to be interviewed by this inspector.

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: 1/12/2017

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
1. Policy precludes detainees or detainee groups from exercising control or authority over other detainees.	Meets Standard	
2. Detainees are protected from: <ul style="list-style-type: none"> • Personal abuse • Corporal punishment • Personal injury • Disease • Property damage • Harassment from other detainees 	Meets Standard	Policy and post orders address all of the requirements of the component.
3. Staff is trained to identify signs of detainee unrest. <ul style="list-style-type: none"> • What type of training and how often? 	Meets Standard	All officers receive instruction on identifying signs of detainee unrest during pre-service and annual training. Officers are trained to identify these signs of unrest and to observe and 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	Post orders require officers to document and report the information required by this component to the shift supervisor.
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 for review, making changes and implementation of the plans is provided.
6. The plans address the following issues: <ul style="list-style-type: none"> • Confidentiality • Accountability (copies and storage locations) • Annual review procedures and schedule • Revisions 	Meets Standard	
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"> • Local law enforcement agencies • State agencies • Federal agencies 	Meets Standard	The facility has agreements for cooperative emergency assistance with local, state and federal law enforcement agencies.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

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	The hostage plan and procedures are made available to all new personnel during pre-service training and are available to all employees on the facility computer system.
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	Post orders and training require all employees to disregard instructions from hostages, regardless of their rank. Policy requires that hostages be provided with medical and psychological screenings immediately following a hostage incident.
11. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	Meets Standard	Emergency plans include medical treatment for affected personnel and detainees during and after an incident.
12. Food service maintains at least 3 days' worth of emergency meals for staff and detainees.	Meets Standard	Food service maintains at least a three day supply of emergency meals for personnel and detainees.
13. Written plans identify locations of shut-off valves and switches for all utilities (water, gas, electric).	Meets Standard	Emergency plans include diagrams, shut-off instructions and photographs of utility locations and switches for all utilities.
14. Written procedures cover: <ul style="list-style-type: none"> • Work/Food Strike • Disturbances • Escapes • Bomb Threats • Adverse Weather • Internal Searches • Facility Evacuation • Detainee Transportation System Plan • Internal Hostages • Civil Disturbances 	Meets Standard	
EMERGENCY (CONTINGENCY) PLANS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

EMERGENCY (CONTINGENCY) PLANS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>A lieutenant is responsible for the development and implementation of the emergency plans. All department heads are required to review all policies, including emergency plans, annually. A master copy of the plan is maintained in the lieutenant's office and all plans, with the exception of sensitive information, are accessible to staff on the facility computer system. 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 computer system.</p> <p>The facility has agreements with local police and fire departments and other state and federal agencies as required by this standard. In the emergency plans, there is a letter from a local fire official, dated 01/05/17 that states that all emergency plans, including the evacuation plan have been reviewed and approved. There have been no incidents during this inspection period that resulted in the use of any emergency plan.</p> <p>A review of policy and training documentation, interviews with officers, a shift supervisor and a lieutenant and onsite observations confirmed that the facility ensures a safe environment for detainees and staff by having contingency plans in place to effectively respond to emergencies. The plans have been created to minimize the harming of human life and the destruction of property as this standard requires.</p>	
Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6); (b)(7)(C)	Completion Date: 1/12/2017
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	Meets Standard	Facility policy outlines a procedure for the storing, issuing and maintaining inventories of hazardous materials.
2. Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	Meets Standard	This component was rated deficient during the last inspection due to inventories of all toxic and caustic substances stored in maintenance; food service and the laundry area were not up-to-date. This deficiency has been corrected; a review of inventory logs in each of the above areas revealed, up-to-date, accurate on-going inventories of all toxic and caustic substances. All flammable substances are stored outside the secure perimeter.
3. The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. <ul style="list-style-type: none"> • The files list all storage areas, and include a plant diagram and legend. • The MSDSs and other information in the files are available to personnel managing the facility's safety program. 	Meets Standard	The environmental supervisor (ES) and the administrative lieutenant maintain master copies of the Material Safety Data Sheets (MSDS) files in their offices. 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"> • Wear personal protective equipment; and • Report hazards and spills to the designated official. 	Meets Standard	Flammable materials are maintained in secure flammable storage containers outside the facility. All employees receive hazardous communication training. Personnel wear protective equipment and follow prescribed procedures when handling flammable, toxic and/or caustic substances. Hazardous spills are reported to the shift supervisor.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
5. The MSDSs are readily accessible to staff and detainees in work areas.	Meets Standard	MSDS files are readily accessible to all staff and detainees in areas where hazardous materials are stored and used.
6. Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> • Quantities are limited; and • Staff always supervises detainees using these substances. 	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.	N/A	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	
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 and air conditioning system is programmed to maintain temperatures at 72 degrees year around.
12. Shower and sink water temperatures do not exceed the industry standard of 120 degrees.	Meets Standard	The facility maintains sink and shower water settings at temperatures between 108 and 112 degrees Fahrenheit.
13. All toxic and caustic materials are stored in their original containers in a secure area.	Meets Standard	Observation of secured chemical storage areas revealed that hazardous materials are maintained in their original containers.
14. Excess flammables, combustibles, and toxic liquids are disposed of properly and in accordance with MSDSs.	Meets Standard	
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	Products containing methyl alcohol are not used in this facility.

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COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
16. Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.	Meets Standard	
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	
18. A technically qualified officer conducts the fire and safety inspections.	Meets Standard	Fire and safety inspections are conducted by the ES who has training in fire and safety and OSHA regulations.
19. The Safety Office (or officer) maintains files of inspection reports.	Meets Standard	
20. The facility has an approved fire prevention, control, and evacuation plan.	Meets Standard	The facility's fire prevention, control and evacuation plan was approved by the approved by the City of Hamilton Fire Department on 01/05/2017.
21. The plan requires: <ul style="list-style-type: none"> • Monthly fire inspections; • Fire protection equipment strategically located throughout the facility; • Public posting of emergency plans with accessible building/room floor plans; • Exit signs and directional arrows; and • An area-specific exit diagram conspicuously posted in the diagrammed area. 	Meets Standard	All the listed requirements in this component are included in the fire prevention, control and evacuation plan.
22. Fire drills are conducted and documented monthly.	Meets Standard	Fire drills are conducted monthly in all areas of the facility, to include the administrative area. Results of the drills are documented.
23. A sanitation program covers barbering operations.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
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COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	There is no dedicated barber shop; however, sanitation standards are posted in the common area of each housing pod where barbering services are conducted.
26. Written procedures regulate the handling and disposal of used needles and other sharp objects.	Meets Standard	
27. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	Meets Standard	
28. Standard cleaning practices include: <ul style="list-style-type: none"> • Using specified equipment; cleansers; disinfectants and detergents. • An established schedule of cleaning and follow-up inspections. 	Meets Standard	Standard cleaning practices incorporate the subject matter listed in this component. Cleaning is performed on a regular schedule with follow-up inspections.
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	Accu Medical, a licensed medical waste contractor, disposes of infectious/bio-hazardous waste.
32. Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	Meets Standard	
33. Do the methods for handling/disposing of refuse meet all regulatory requirements?	Meets Standard	Solid waste is disposed of through a contract with Rumpke Consolidation that meets the regulatory requirements.

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ENVIRONMENTAL HEALTH AND SAFETY (Key: Z)		
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COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
34. A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. <ul style="list-style-type: none"> • At least monthly. • The pest-control program includes preventative spraying for indigenous insects. 	Meets Standard	Pest control services are provided through a contract with the licensed pest control company, Orkin. Inspections are conducted monthly and as needed. The service includes preventative spraying.
35. Drinking water and wastewater is routinely tested according to a fixed schedule.	Meets Standard	Routine testing of drinking and wastewater is performed by the City of Hamilton.
36. Emergency power generators are tested at least every two weeks. <ul style="list-style-type: none"> • Other emergency systems and equipment receive testing at least quarterly. • Testing is followed-up with timely corrective actions (repairs and replacements). 	Meets Standard	Emergency power generators are tested weekly. Emergency systems and equipment are tested at least quarterly. All testing of the emergency generator and emergency systems and equipment is followed up by timely corrective actions, repairs and replacements when needed.

ENVIRONMENTAL HEALTH AND SAFETY – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

ENVIRONMENTAL HEALTH AND SAFETY – 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 sanitation and maintenance was being maintained at an adequate level during the inspection providing a safe work environment, appropriate living conditions and control of hazardous materials for both staff and detainees. Policy and procedures protect detainees, employees, contractors and volunteers from injury and illness by ensuring reasonable standards of cleanliness and sanitation. Both detainees and employees who were interviewed stated that the facility is a clean and safe facility in which to live and work.

Fire drills are scheduled so that employees on all shifts participate in an annual drill. Detainees are evacuated except in areas where safety or security could be jeopardized. Emergency keys are drawn and one set of emergency doors, not in daily use, is unlocked within four and one half minutes. Exit diagrams are written in English and Spanish, including “you are here” markers, emergency equipment locations, and areas of safe refuge.

The facility has developed an exposure-control plan. Sharps identified include hypodermic needles and syringes, scalpel blades, glass vials or ampules containing materials deemed to be infectious, burrs, glass cartridges, and lancets. Per policy, if an individual is exposed while handling a potentially contaminated sharp object, the individual is counseled regarding baseline testing for HBV and HIV and referred to their health care source. 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.

Environmental health conditions are maintained at a level that meets recognized standards of hygiene. General cleaning procedures include isolation cleaning, terminal cleaning, blood and body fluid clean-up and the selection and use of disinfectants. Infectious waste is clearly labeled and doubled-bagged in red bags, which are impermeable and specifically designed for bio-hazardous waste storage.

Universal precautions are followed by all personnel when handling untreated infectious waste. Policy and procedures detail an environmental health program that evaluates and eliminates or controls, as necessary, both sources and modes of transmission of agents or vectors of communicable disease and of injuries.

The facility has forwarded a copy of the MSDS file to the local fire department.

The ES in conjunction with the maintenance supervisor is responsible for providing appropriate training, to include discussions on any special investigations and allow for consultation regarding environmental health conditions. Staff receives information regarding environmental health conditions during shift briefings from their respective supervisors. The evaluation of this standard was based on observations, staff and ICE detainee interviews, and review of policies and procedures.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/12/2017

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

HOLD ROOMS IN DETENTION FACILITIES (Key: AA)		
POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS, MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSING INTO OR OUT OF THE FACILITY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The hold rooms are situated within the secure perimeter.	Meets Standard	The hold rooms are situated 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	The hold rooms are well ventilated and well lighted and 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 contain sufficient seating 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	The hold rooms used to process detainees in and out of this facility do not contain any of the items prohibited by this component. Some rooms in the intake area did have sleeping apparatus but the supervisor explained that they were being used for reasons other than intake (suicide and medical watches) and never for ICE detainee processing.
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 and escape proof.
6. Individuals are not held in hold rooms for more than 12 hours.	Meets Standard	Policy and post orders prohibit detainees from being held in the hold rooms for more than twelve hours.
7. Male and females are segregated from each other.	Meets Standard	
8. Detainees under the age of 18 are not held with adult detainees.	Meets Standard	
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	
10. In older facilities, officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.	Meets Standard	All but one hold room is equipped with a toilet, permitting detainees access on a regular basis. One large hold room used to show the orientation video does not have a restroom but is within direct visual range of intake officers.
11. All detainees are given a pat down search for weapons or contraband before being placed in the room.	Meets Standard	

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HOLD ROOMS IN DETENTION FACILITIES (Key: AA)		
POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS, MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSING INTO OR OUT OF THE FACILITY.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
12. Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring.). <ul style="list-style-type: none"> • Hold rooms are irregularly monitored every 15 minutes. • Unusual behavior or complaints are noted. 	Meets Standard	Officers closely supervise the hold rooms and monitor them irregularly every ten minutes. Unusual behavior or complaints are reported to the supervisor.
13. When the last detainee has been removed from the hold room, it is given a thorough inspection.	Meets Standard	
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	There is a written evacuation plan which includes procedures for removing detainees from the hold rooms in the event of fire and/or building evacuation. The supervisor of this area is responsible for the evacuation.
15. An appropriate emergency service is called immediately upon a determination that a medical emergency may exist.	Meets Standard	

<p>HOLD ROOMS IN DETENTION FACILITIES – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i></p>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

HOLD ROOMS IN DETENTION FACILITIES – REVIEWER SUMMARY

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

Evaluation of this standard included a review of documentation, interviews with officers and the supervisor in the hold room area and onsite observations of the hold rooms. This facility houses male and female detainees and surveillance of the hold rooms is by direct supervision through observation windows. Officers were observed monitoring the hold rooms every ten minutes.

Officers inspect parcels, suitcases, bags, bundles, boxes and other property before accepting any item brought by the detainees. Sharp objects and items considered contraband are removed from the detainee's possession. All newly arriving detainees undergo a pat search by an officer of the same gender as the detainee. Detainees are also required to be screened by the BOSS (Body Orifice Security Scanner). An officer looks at every individual before placing him/her in the hold room, checking for obvious mental or physical conditions. Apparent symptoms are referred to the medical department. Officers provide a meal to detainees held in the hold room for more than six hours or are in the hold room during a meal. They also question the detainees about when they last had a meal and provide a meal then, if appropriate. Officers are trained to be sensitive to the cultural/religious culinary restrictions and/or differences of detainees whenever possible. The supervisor is notified regarding unusual detainee behavior or complaints. Detainees are not permitted to smoke in the hold room or any area in the facility.

No officer enters the hold room unless another officer is stationed outside the door. (b)(7)(E)

(b)(7)(E). Any evidence of tampering with doors, locks, windows, plumbing or fixtures discovered during a hold room inspection is reported to the supervisor for corrective action or repair.

Officers notify the supervisor immediately of medical emergencies. When the detainee is removed from the hold room for outside treatment, policy requires that officers accompany and remain with the detainee until doctors determine whether the condition will require hospitalization, and then either return the detainee to the facility or notify the shift supervisor and await further instructions

During this inspection, some of the hold rooms had mattresses and blankets. The intake supervisor explained that the rooms were being used for suicide watches and not for processing ICE detainees in or out of the facility. ICE detainees are given priority during intake and are placed in a large hold room that affords constant supervision. There is a television in this room that shows the orientation video to the detainees while they wait processing. Post orders prohibit ICE detainees from being held in this area for longer than twelve hours and review of documentation confirmed this practice.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/12/2017

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
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 is responsible for all administrative duties and responsibilities relating to keys and locks.
3. The security officer, or equivalent in IGSA's, provides training to employees in key control.	Meets Standard	
4. The security officer, or equivalent in IGSA's, maintains inventories of all keys, locks and locking devices.	Meets Standard	The designated sergeant maintains inventories of all keys and related material.
5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	Meets Standard	A preventive maintenance program is followed by the maintenance department. Documentation of preventive maintenance is kept electronically.
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.	Meets Standard	Post orders require that combinations for safes be changed annually.
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	Grand master keying systems are prohibited at this facility.
11. All worn or discarded keys and locks are cut up and properly disposed of.	Meets Standard	The maintenance supervisor destroys all worn or discarded keys and locks.
12. Padlocks and/or chains are prohibited from use on cell doors.	Meets Standard	
13. The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to: <ul style="list-style-type: none"> • Occupational Safety and Environmental Health Manual, Ch. 3; • National Fire Protection Association Life Safety Code 101. 	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP I

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)
14. The operational key board is sufficient to accommodate all the facility key rings, including keys in use, and is located in a secure area.	Meets Standard	The operational key board located in the control room in a locked key storage cabinet is sufficient to accommodate all facility key rings, including keys in use.
15. Procedures are in place to ensure that key rings are: <ul style="list-style-type: none"> • Identifiable; • The numbers of keys are cited; and • Keys cannot be removed. 	Meets Standard	Individual key rings were inspected and contain a chit identifying the key ring and the number of keys on the ring. The key rings have a barrel lock which prevents keys from being removed from the rings.
16. Emergency keys are available for all areas of the facility.	Meets Standard	Emergency keys for all areas of the facility are located in the control room and the sheriff's office dispatch center.
17. The facilities use a key accountability system.	Meets Standard	All keys are accounted for in central control every shift.
18. Authorization is necessary to issue any restricted key.	Meets Standard	
19. Individual gun lockers are provided. <ul style="list-style-type: none"> • They are located in an area that permits constant officer observation. • In an area that does not allow detainee or public access. 	Meets Standard	Gun lockers are in four areas of the facility located away from detainee and public access. Cameras offer direct supervision of the gun lockers by the control center officer.
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 require that all keys are physically counted each shift.
21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> • Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. • When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. • Detainees are not permitted to handle keys assigned to staff. 	Meets Standard	All employees are trained and held responsible for the proper handling of keys. Employees are required to follow all of the procedures listed in this component.

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Evaluation of this standard included interviews with a lieutenant, the maintenance supervisor and the sergeant assigned key control responsibilities and a control center officer. It also included review of post orders and inspection of the keyboards and key rings in the control center, inspection of the location of gun lockers and review of preventive maintenance documentation. A certificate for completion of an approved locksmith training program by the maintenance supervisor was also examined. All key rings, including the emergency key rings, are stored in secure key boxes in the control center.</p> <p>Housing unit officers exchange keys when they relieve each other during shift change. The control center officer calls them and confirms that they have the proper number of keys during his required daily accounting of all facility keys. The control center officer completes a report of his accounting of all of the keys electronically on the facility computer system.</p> <p>The OIC has developed written procedures authorizing the use of restricted keys. Policy requires that all safe combinations be changed annually to ensure their integrity. Keys and locks are maintained, accounted for and secured as this standard requires.</p>		
Overall Rating: Meets Standard		
Reviewer Name (Printed):	(b)(6); (b)(7)(C)	Completion Date: 1/12/2017
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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	There is one formal count on each of the three shifts each day.
2. Activities cease or are strictly controlled while a formal count is being conducted.	Meets Standard	All activities cease during the formal count.
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 ceases for the duration of a formal count.
5. Formal counts in all units take place simultaneously.	Meets Standard	Formal counts occur simultaneously.
6. Detainee participation in counts is prohibited.	Meets Standard	Detainee participation in counts is prohibited.
7. A face-to-photo count follows each unsuccessful recount.	Meets Standard	A face-to-photo count follows each unsuccessful recount.
8. Officers positively identify each detainee before counting him/her as present.	Meets Standard	This component was rated deficient during the last inspection because officers did not positively identify the detainees assigned to food service before counting them present. During this inspection an officer was observed positively identifying detainees assigned to food service.
9. Written procedures cover informal and emergency counts. <ul style="list-style-type: none"> • They are followed during informal counts and emergencies. 	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 intake supervisor maintains the out-count of all detainees temporarily leaving the facility during each count.
11. This training is documented in each officer’s training folder.	Meets Standard	

POPULATION COUNTS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

POPULATION COUNTS – REVIEWER SUMMARY

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

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

In order to evaluate this standard, post orders were reviewed, a formal count was observed in a housing unit, and in the shift supervisor's office. A formal count was also observed in the food service area. Formal and informal counts are conducted to ensure accountability for all detainees and officers are trained to make a positive identification of a living body. During observation of the count process in the ICE housing area an officer was observed making positive identification of a living breathing body. The shift supervisor verifies the accuracy of formal counts. The shift supervisor records counts on a count sheet and then electronically by area, as they are reported. In the event a detainee is unaccounted for following a face-to-photo count, the supervisor on duty would initiate the escape policy. If area counts are incorrect, the officers are required to recount. In the event the recount results are incorrect, the OIC is notified and additional officers are directed to the area to assist in the recount. The count is not formally cleared until the error is identified and corrective action is taken. The shift supervisor maintains the master count.

Policy and post orders require that an officer from the intake area go to food service and count the detainees, ensure that the number of detainees reported on the out-count is accurate and report the count of that area to the shift supervisor. During the last inspection, food service employees reported that no officer comes there during count. This was a violation of the standard that requires all detainees to be positively identified before counting them present. This violation was corrected and during this inspection detainees in that area were accounted for as the standard requires.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/12/2017

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

POST ORDERS (Key: AD)		
POLICY: ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR CARRYING OUT THEIR DUTIES. THIS GUIDANCE INCLUDES THE POST ORDERS ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST ANNUALLY, AND GIVEN TO EACH OFFICER UPON ASSIGNMENT TO THAT POST.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	Revisions to the post orders, emergency memoranda and bulletins are communicated to correctional personnel via the facility computer system and at pre-shift briefings.
3. One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.	Meets Standard	The OIC is responsible for keeping all post-orders current with revisions that take place between reviews.
4. The IGSA maintains a complete set (central file) of post orders.	Meets Standard	All post orders are available on the facility computer system. This system is accessible to all personnel with a need to know and can be reviewed on the computer at their duty post.
5. The central file is accessible to all staff.	Meets Standard	A shift supervisor confirmed that a central file of post orders is accessible to all personnel on the facility computer system.
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 has signed and dated the post orders.
8. A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.	Meets Standard	The OIC completed the annual review of post orders on 01/04/2017.
9. Procedures keep post orders and logbooks secure from detainees at all times.	Meets Standard	Procedures are in place to ensure post orders and logbooks are kept secure from detainees at all times.
10. Every armed-post officer qualifies with the post weapon(s) before assuming post duty.	Meets Standard	The only armed-posts are the transportation officers who must qualify with the post weapons before assuming post duty.
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 post orders for housing units track the event schedule.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

POST ORDERS (Key: AD)		
POLICY: ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR CARRYING OUT THEIR DUTIES. THIS GUIDANCE INCLUDES THE POST ORDERS ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST ANNUALLY, AND GIVEN TO EACH OFFICER UPON ASSIGNMENT TO THAT POST.		
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	Housing unit officers record detainee activity in a computerized log. The post orders include instructions on maintaining the computerized logs.

POST ORDERS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Evaluation of this standard included a review of policy and post orders and staff interviews. This inspector also attended a pre-shift briefing. The OIC is responsible for updating and approving all post orders and the revisions are made and stored on a computer in the OIC's office. Copies of post orders are available on each fixed post electronically and hard copies of the post orders are available in the OIC's office, the shift supervisor's office and central control. Officers are provided comprehensive written direction for carrying out their duties with the post orders and those who were observed and interviewed had a working knowledge of unit operations. Policy provides official on-duty time for officers to read their post orders prior to assuming their post. The shift supervisor is responsible for ensuring that officers understand the post orders for the post they are assigned, regardless of whether the assignment is temporary, permanent or due to an emergency. Post orders at this facility have been created to provide officers with the necessary guidance to perform their duties as required by this standard.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/12/2017
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
1. The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> • Posts to be inspected; • Required inspection forms; • Frequency of inspections; • Guidelines for checking security features; and • Procedures for reporting weak spots, inconsistencies, and other areas needing improvement 	Meets Standard	Post orders outline which posts conduct security inspections in the different areas throughout the facility. An electronic inspection form is used to perform and report these inspections. Written procedures identify the areas to be inspected and policy and post orders address all the other requirements of this component.
2. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	Meets Standard	Officers conduct security checks throughout their shifts. Most officers are required to complete a security check of their respective posts each hour. The officers use a key to activate an electronic device, located in several areas of the housing units, that records who and when the security checks were made.
3. Documentation of security inspections is kept on file.	Meets Standard	The security inspections are kept on file electronically.
4. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	Meets Standard	There are procedures for reporting problems on the security inspection forms. Follow-ups on recurring problems are conducted by a shift supervisor.
5. The front-entrance officer checks the ID of everyone entering or exiting the facility.	Meets Standard	All visitors sign a log book in the front entrance after their ID is checked.
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	
9. The Control Center is staffed around the clock.	Meets Standard	The control center is staffed around the clock.
10. Policy restricts staff access to the Control Center.	Meets Standard	Access to control center is restricted by post orders.
11. Detainees are restricted from access to the Control Center.	Meets Standard	Detainees are prohibited from access to the control center.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
12. Communications are centralized in the Control Center.	Meets Standard	All communications are 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"> • The driver's name; • Company represented; • Vehicle contents; • Delivery date and time; • Date and time out; • Vehicle license number; and • Name of employee responsible for the vehicle during the visit 	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	Policy and post orders mandate that contractor tools entering the facility are inventoried before entry or exit is permitted.
18. The SMU entrance has a sally port.	Meets Standard	
19. Written procedures govern searches of detainee housing units and personal areas.	Meets Standard	
20. Housing area searches occur at irregular times.	Meets Standard	Policy requires that housing areas are searched at irregular times.
21. Every search of the SMU and other housing units is documented.	Meets Standard	Searches of all housing units are documented in the facility's computer system. A review of documentation verified adherence to these procedures.
22. Storage and supply rooms, walls, light and plumbing fixtures, accesses, and drains, etc., undergo frequent, irregular searches. These searches are documented.	Meets Standard	
23. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

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"> • Perimeter alarm system tests; • Physical checks of the perimeter fence; and • Documenting the results. 	Meets Standard	An officer conducts a visual check of the perimeter on each shift. The results are documented in the computerized system. There is no perimeter fence or alarm system at this facility.
25. Visitation areas receive frequent, irregular inspections.	Meets Standard	

SECURITY INSPECTIONS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i>		
<p>The evaluation of this standard was based on interviews with officers and a shift supervisor and a review of written procedures and post orders. The shift supervisors are responsible for the inspection process that includes all areas of the facility. The facility front entrance into the secure area of the facility has a sally port with electronic interlocking doors. Entrance procedures are in place to positively identify contractors/visitors entering/exiting the facility. Entrance/lobby personnel have constant visual contact with the public and check the identification documents of every visitor, employee and other person entering or leaving the facility.</p> <p>During the inspection, the officers assigned to the ICE housing units were observed to be professional and knowledgeable. The housing units were clean and the cells were not cluttered with excess property. No graffiti was observed in the housing units. Each cell, except those used for disciplinary segregation, is equipped with a television with multiple cable channels that can be viewed from 5:00 a.m. until midnight. This is a highly respected privilege and according to the officers, accounts for the few disciplinary incidents in the housing area where ICE detainees are held. There is also an intercom system in each cell that allows the detainees to communicate directly with the officer. Officers use a keying device that electronically records when rounds are made and supervisors can check that these rounds are made in a timely fashion. ICE detainees interviewed voiced no complaints about medical service but several complained about the food. They knew how to use the phones and how to contact ICE personnel and other staff. None expressed any fear of placement at this facility and all interviewed believed they were safe here.</p> <p>Security procedures are in place to ensure the safe and orderly operation of the facility with regular inspections for sanitation and safety issues as this standard requires.</p>		
Overall Rating: Meets Standard		
Reviewer Name (Printed)	(b)(6); (b)(7)(C)	Completion Date: 1/12/2017
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. <ul style="list-style-type: none"> • Detainees are placed in the SMU (administrative) in accordance with written criteria. 	Meets Standard	ICE detainees are placed in administrative segregation status within the ICE general population housing unit. This status is a means of providing non-punitive housing for those who cannot live within the general population. ICE detainees are placed in administrative segregation status in accordance with written criteria contained in post orders.
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"> • A copy of the order given to the detainee within 24 hours. 	Meets Standard	
3. The OIC (or equivalent) regularly reviews the status of detainees in administrative detention. <ul style="list-style-type: none"> • A supervisory officer conducts a review within 72 hours of the detainee's placement in the SMU (administrative). 	Meets Standard	The disciplinary hearing supervisor regularly reviews the status of ICE detainees in administrative segregation within 72 hours or less after their placement. The OIC reviews and can approve, modify or sustain the supervisor's actions.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>4. A supervisory officer conducts another review after the detainee has spent seven days in administrative segregation, and:</p> <ul style="list-style-type: none"> • Every week thereafter for the first month; and • Every 30 days after the first month. • Does each review include an interview with the detainee? • Is a written record made of the decision and the justification? 	Meets Standard	The disciplinary hearing supervisor is required to review the placement status of ICE detainees in administrative segregation every seven days until they are released from this status. These reviews include interviews with the detainee. A written record is made of the decision and justification using a locally generated segregation review form. The disciplinary hearing supervisor maintains a log of all ICE detainees in administrative segregation status and the dates of past and future reviews. Completed review forms are maintained in the facility computer system.
<p>5. The detainee is given a copy of the decision and justification for each review.</p> <ul style="list-style-type: none"> • The detainee is given an opportunity to appeal the reviewer's decision to someone else in the facility. 	Meets Standard	ICE detainees are given a written record of each review and may appeal any decision by filing a grievance to one of the lieutenants.
<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"> • 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. 	Meets Standard	Post orders require that ICE officials are immediately notified whenever an ICE detainee is placed in administrative segregation status. ICE officials from the local field office are telephonically notified and receive a facsimile of the segregation order when the detainee is initially placed in this status and again if segregation lasts longer than thirty and sixty days. There were no ICE detainees in administrative segregation status during this inspection period.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
7. The OIC (or equivalent) reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU. <ul style="list-style-type: none"> • A written record is made of the decision and the justification. • The detainee receives a copy of this record. 	Meets Standard	The disciplinary hearing supervisor reviews the case of any ICE detainee who objects to placement over thirty days. A written record is made of the decision and justification. The detainee receives a copy of the completed review form.
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.	Meets Standard	ICE detainees are given a written record of each seven day review and may appeal any decision by filing a grievance.
9. Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	Meets Standard	
10. The SMU is: <ul style="list-style-type: none"> • Well ventilated; • Adequately lighted; • Appropriately heated; and • Maintained in a sanitary condition. 	Meets Standard	The cells in the special management unit are well ventilated, adequately lighted, appropriately heated and clean.
11. All cells are equipped with beds. <ul style="list-style-type: none"> • Every bed is securely fastened to the floor or wall. 	Meets Standard	All cells are equipped with beds that are securely fastened to the wall.
12. The number of detainees in any cell does not exceed the occupancy limit. <ul style="list-style-type: none"> • When occupancy exceeds recommended capacity, do basic living standards decline? • Do criteria for objectively assessing living standards exist? • If yes, are the criteria included in the written procedures? 	Meets Standard	
13. The segregated detainees have the same opportunities to exchange/laundry clothing, bedding, and linen as detainees in the general population.	Meets Standard	
14. Detainees receive three nutritious meals per day, from the general population's menu of the day. <ul style="list-style-type: none"> • Do detainees eat only with disposable utensils? • Is food ever used as punishment? 	Meets Standard	Detainees housed in administrative segregation receive the same meals as the general population. Detainees use disposable utensils and food is not used as punishment.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
15. Each detainee maintains a normal level of personal hygiene in the SMU. <ul style="list-style-type: none"> The detainees have the opportunity to shower and shave at least three times a week. If not, explain. 	Meets Standard	Detainees in administrative segregation have the opportunity to shave and shower daily.
16. The detainees are provided: <ul style="list-style-type: none"> Barbering services; Recreation privileges in accordance with the "Detainee Recreation" standard; Non-legal reading material; Religious material; The same correspondence privileges as detainees in the general population; Telephone access similar to that of the general population; and Personal legal material. 	Meets Standard	Detainees housed in administrative segregation receive all of the services required by this component.
17. A health care professional visits every detainee at least three times a week. <ul style="list-style-type: none"> The shift supervisor visits each detainee daily. Weekends and holidays. 	Meets Standard	Policy and post orders require that a health care professional visit every ICE detainee at least three days a week and a shift supervisor visits each ICE detainee each shift, including weekends and holidays.
18. Procedures comply with the "Visitation" standard. <ul style="list-style-type: none"> The detainee retains visiting privileges; and The visiting room is available during normal visiting hours. 	Meets Standard	
19. Visits from clergy are allowed.	Meets Standard	
20. Detainees have the same law-library access as the general population. <ul style="list-style-type: none"> Are they required to use the law library <input checked="" type="checkbox"/> Separately, or <input type="checkbox"/> As a group? Are legal materials brought to them? 	Meets Standard	Detainees in administrative segregation status have the same law library access as the general population. The portable law library materials, including LexisNexis, are brought to them.
21. The SMU maintains a permanent log of detainee-related activity, e.g., meals served, recreation, visitors etc.	Meets Standard	
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"> Staff completes the form at the end of each shift. CDFs and IGSA facilities use Form I-888 (or local equivalent). 	Meets Standard	This IGSA facility uses a form equivalent to the I-888 form upon an ICE detainee's placement in administrative segregation status. Unit officers complete the form by the end of each shift.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) (Key: AF)		
POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
23. Staff record whether the detainee ate, showered, exercised, and took any applicable medication during every shift. <ul style="list-style-type: none"> • Staff logs record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc; • The medical officer/health care professional signs each individual's record during each visit; and • The housing officer initials the record when all detainee services are completed or at the end of the shift. 	Meets Standard	Officers record all ICE detainee daily activities taking place each shift on individual housing unit records maintained for each detainee in this status. Officers record all pertinent information, such as medical condition, or suicidal or violent behavior, in the log. Medical practitioners sign the segregation log each time they visit the detainee. An officer signs the record when all detainee services are completed or by the end of the shift.
24. A new record is created for each week the detainee is in Administrative Segregation. <ul style="list-style-type: none"> • The weekly records are retained in the SMU until the detainee's return to the general population. 	Meets Standard	A new record is created each week the ICE detainee is in administrative segregation status. The records are retained in the unit until the detainee returns to general population status.

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> In order to evaluate this standard, the ICE detainee housing area was inspected and policy, logs and forms were reviewed. A shift supervisor, ICE representatives and a housing unit officer were also interviewed. If an ICE detainee needs to be placed in administrative segregation, that placement is made in the same housing unit except the detainee is not permitted out of his cell except for recreation, showering and shaving. During this inspection period there were no ICE detainees assigned administrative segregation status. Detainees in administrative segregation are provided clothing and bedding consistent with the standard for linen and clothing exchange. Detainees are allowed to retain a reasonable amount of legal material. Detainees in administrative segregation may not be denied legal visitation, but reasonable security precautions will be taken when necessary. Legal service providers and assistants will be notified of any security concerns prior to any meeting. Members of the clergy may visit detainees in administrative segregation unless it is determined that this presents a security risk. If it becomes necessary to place an ICE detainee in administration segregation, the placement will be managed as this standard requires.		
Overall Rating: Meets Standard		
Reviewer Name (Printed):	(b)(6); (b)(7)(C)	Completion Date: 1/12/2017

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation) – REVIEWER SUMMARY

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

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)		
POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. Officers placing detainees in disciplinary segregation follow written procedures.	Meets Standard	Officers follow written procedures for placing ICE detainees in disciplinary segregation status within the ICE general population housing unit. Cells are set aside for detainees who are placed into disciplinary segregation status.
2. The sanctions for violations committed during one incident are limited to 60 days.	Meets Standard	The discipline post orders limit sanctions to a maximum of sixty days.
3. A completed Disciplinary Segregation Order accompanies the detainee into the SMU. <ul style="list-style-type: none"> The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation. 	Meets Standard	A completed written copy of the disciplinary segregation order is given to the detainee upon placement into 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"> After each formal review, the detainee receives a written copy of the decision and supporting reasons. 	Meets Standard	Policy and post orders state that ICE detainees housed in disciplinary segregation will be reviewed every week. Detainees receive a written copy of the reviewer's decision and supporting reasons after each formal review.
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	ICE detainees in disciplinary segregation lose only the privilege of the television in their cell.
7. Living conditions in disciplinary SMUs remain the same regardless of behavior. <ul style="list-style-type: none"> If no, does staff prepare written documentation for this action? Does the OIC sign to indicate approval. 	Meets Standard	
8. Every detainee in disciplinary segregation receives the same humane treatment, regardless of offense.	Meets Standard	All detainees placed in disciplinary segregation status receive the same humane treatment as the general population, regardless of the offense.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)		
POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
9. The quarters used for segregation are: <ul style="list-style-type: none"> • Well-ventilated. • Adequately lighted. • Appropriately heated. • Maintained in a sanitary condition. 	Meets Standard	
10. All cells are equipped with beds that are securely fastened to the floor or wall of the cell.	Meets Standard	Cells are designed and equipped with beds secured to the walls.
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"> • Does the OIC approve excess occupancy on a temporary basis? 	Meets Standard	
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	
13. Detainees in the SMU have the same opportunities to exchange clothing, bedding, etc., as other detainees.	Meets Standard	ICE detainees in segregation status have the same opportunity to exchange clothing, bedding and linens as the 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"> • Food is not used as punishment. 	Meets Standard	ICE detainees in segregation status receive the same three meals daily as the general population menu. Post orders prohibit the use of food 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	ICE detainees have the opportunity to shower and shave daily.
16. Detainees receive, unless documented as a threat to security: <ul style="list-style-type: none"> • Barbering services; • Recreation privileges; • Other-than-legal reading material; • Religious material; • The same correspondence privileges as other detainees; and • Personal legal material. 	Meets Standard	ICE detainees in disciplinary segregation status receive all the services required in this component.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)		
POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
17. When phone access is limited by number or type of calls, the following areas are exempt: <ul style="list-style-type: none"> • Calls about the detainee's immigration case or other legal matters; • Calls to consular/embassy officials; and • Calls during family emergencies (as determined by the OIC/Warden). 	Meets Standard	
18. A health care professional visits every detainee in disciplinary segregation every week day. <ul style="list-style-type: none"> • The shift supervisor visits each segregated detainee daily • Weekends and holidays. 	Meets Standard	Policy and post orders require a medical practitioner to visit each week day and a shift supervisor to visit ICE detainees in disciplinary segregation each day, including weekends and holidays.
19. SMU detainees are allowed visitors, in accordance with the "Visitation" standard.	Meets Standard	ICE detainees in disciplinary segregation status are allowed visitation in accordance with the visitation standard.
20. SMU detainees receive legal visits, as provided in the "Visitation" standard. <ul style="list-style-type: none"> • Legal service providers are notified of security concerns arising before a visit. 	Meets Standard	Legal visits are not restricted. Attorneys will be notified prior to the visit if a threat exists.
21. Visits from clergy are allowed. <ul style="list-style-type: none"> • The clergy member is given the option of visiting/not visiting the segregated detainee. • Violent/uncooperative detainees are denied access to religious services when safety and security would otherwise be affected. 	Meets Standard	
22. SMU detainees have law library access. <ul style="list-style-type: none"> • Violent/uncooperative detainees retain access to the law library unless adjudicated a security threat in writing. • Legal material brought to individuals in the SMU on a case-by-case basis. • Staff documents every incident of denied access to the law library. 	Meets Standard	
23. All detainee-related activities are documented, e.g. meals served, recreation activities, visitors, etc.	Meets Standard	All ICE detainee activities are documented in a housing unit log.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) (Key: AG)		
POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
24. The SPCs, the Special Management Housing Unit Record (I-888 or equivalent), is prepared as soon as the detainee is placed in the SMU. <ul style="list-style-type: none"> • All I-888s are filled out by the end of each shift. • The CDF/IGSA facility use Form. • I-888 (or equivalent local form). 	Meets Standard	Policy requires this IGSA to use a local document, equivalent to the Form I-888 when ICE detainees are placed in disciplinary segregation. The form is prepared upon the detainee's placement into disciplinary segregation status. The form must be filled out by the end of the shift.
25. SMU staff record whether the detainee ate, showered, exercised, took medication, etc. <ul style="list-style-type: none"> • Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc. • The health care official sign individual records after each visit. • The housing officer initials the record when all detainee services are completed or at the end of the shift. • A new record is created weekly for each detainee in the SMU. • The SMU retains these records until the detainee leaves the SMU. 	Meets Standard	Officers record detainee activity during each shift. The documentation required by this component is addressed on the activity record. The forms are created each week and retained in the housing unit until the detainee is released from this status.

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) – REVIEWER SUMMARY		
<i>(Use following format for dates: mm/dd/yyyy)</i>		
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i>		
<p>Evaluation of this standard included a review of the policy and post orders, an interview with the OIC and a physical inspection of the housing unit where ICE detainees are held for disciplinary segregation. Disciplinary records for ICE detainees were also examined. Detainees are placed in disciplinary segregation status following the findings of a disciplinary hearing officer pursuant to written policy. Detainees in disciplinary segregation have the opportunity to maintain a normal level of personal hygiene, with daily showers and shaves. Clothing and bedding is issued to detainees consistent with detainees in general population. Standard living conditions in disciplinary segregation are not modified for disciplinary reasons except the televisions are removed from the cells. All cells have an intercom and the detainees can communicate directly with the officer assigned to the housing unit. One ICE detainee was in a cell for disciplinary reasons during this inspection. This detainee had made threats toward staff and other detainees. He refused to be interviewed by this inspector.</p> <p>If discipline becomes necessary for ICE detainees, it will be managed as this standard requires.</p>		
Overall Rating: Meets Standard		
Reviewer Name (Printed)	(b)(6); (b)(7)(C)	Completion Date: 1/12/2017
Reviewer Signature (for printed form submission):		

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

TOOL CONTROL (Key: AH)		
POLICY: IT IS THE POLICY OF ALL FACILITIES THAT ALL EMPLOYEES SHALL BE RESPONSIBLE FOR COMPLYING WITH THE TOOL CONTROL POLICY. THE MAINTENANCE SUPERVISOR SHALL MAINTAIN A COMPUTER GENERATED OR TYPEWRITTEN MASTER INVENTORY LIST OF TOOLS AND EQUIPMENT AND THE LOCATION IN WHICH TOOLS ARE STORED. THESE INVENTORIES SHALL BE CURRENT, FILED AND READILY AVAILABLE FOR TOOL INVENTORY AND ACCOUNTABILITY DURING AN AUDIT.		
COMPONENTS	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 respective departments.
3. Tool inventories are required for the: <ul style="list-style-type: none"> • Maintenance Department; • Medial Department; • Food Service Department; • Electronics Shop; • Recreation Department; and • Armory. 	Meets Standard	The maintenance, medical and food service departments have tool inventories. The armory is located outside the secure perimeter. The facility does not have an electronics shop or recreation department.
4. The facility has a policy for the regular inventory of all tools. <ul style="list-style-type: none"> • The policy sets minimum time lines for physical inventory and all necessary documentation. • ICE facilities use AMIS bar code labels when required. 	Meets Standard	
5. The facility has a tool classification system. Tools are classified according to: <ul style="list-style-type: none"> • Restricted (dangerous/hazardous); and • Non-Restricted (non-hazardous). 	Meets Standard	Post orders established a tool classification system that classified all tools 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 respective 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.
8. The facility has an approved tool storage system. <ul style="list-style-type: none"> • The system ensures that all stored tools are accountable. • Commonly used tools (tools that can be mounted) are stored in such a way that missing tool is readily notice. 	Meets Standard	
9. Each facility has procedures for the issuance of tools to staff and detainees.	Meets Standard	Procedures for issuing tools to employees are in place. Detainees are not issued tools except in the kitchen.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

TOOL CONTROL (Key: AH)		
<p>POLICY: IT IS THE POLICY OF ALL FACILITIES THAT ALL EMPLOYEES SHALL BE RESPONSIBLE FOR COMPLYING WITH THE TOOL CONTROL POLICY. THE MAINTENANCE SUPERVISOR SHALL MAINTAIN A COMPUTER GENERATED OR TYPEWRITTEN MASTER INVENTORY LIST OF TOOLS AND EQUIPMENT AND THE LOCATION IN WHICH TOOLS ARE STORED. THESE INVENTORIES SHALL BE CURRENT, FILED AND READILY AVAILABLE FOR TOOL INVENTORY AND ACCOUNTABILITY DURING AN AUDIT.</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
<p>10. The facility has policies and procedures to address the issue of lost tools. The policy and procedures include:</p> <ul style="list-style-type: none"> • Verbal and written notification; • Procedures for detainee access; and • Necessary documentation/review for all incidents of lost tools. 	Meets Standard	All requirements of the component are addressed in policy and post orders.
<p>11. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.</p>	Meets Standard	
<p>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.</p>	Meets Standard	Post orders require that all tools used by contractors or other visitors must be inventoried prior to admittance or departure from the facility.

TOOL CONTROL – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>Evaluation of this standard was based on a review of policy, inspection of the maintenance department tool storage, medical tool storage, and food service tool storage. The maintenance supervisor, the food service director and the health supervisor were interviewed. Tools brought into the secure area of the facility by contractors or visitors must be inventoried upon entering and exiting the secure area of the facility. All employees are required to immediately report missing and/or lost tools to a supervisor who will ultimately report the lost tool to the OIC. Tools are not issued to detainees except in food service. Knives used in that area are properly tethered and all other tools were properly secured and inventoried. All medical tools are accounted for each shift and their inventories were current and accurate.</p> <p>Tools at this facility are maintained and accounted for as this standard requires.</p>	
<p>Overall Rating: Meets Standard</p>	
<p>Reviewer Name (Printed): (b)(6); (b)(7)(C)</p>	<p>Completion Date: 1/12/2017</p>
<p>Reviewer Signature (for printed form submission):</p>	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP

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	Transport officer's personnel records such as copies of drivers' licenses and transport schedules are kept current by the transportation lieutenant.
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. All transport officers have a CDL to operate the vehicle.
3. Supervisors maintain records for each vehicle operator.	Meets Standard	The transportation lieutenant maintains a record for each of the transport officers. Schedules, driving times and individual trip specifics are noted in the records.
4. Officers use a checklist during every vehicle inspection. <ul style="list-style-type: none"> • Officers report deficiencies affecting operability; and • Deficiencies are corrected before the vehicle goes back into service. 	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"> • Limit driving time to 10 hours in any 15 hour period; • Drive only after eight consecutive off-duty hours; • Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours; • Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days; • During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a safe area—exceeding the 10-hour limit. 	N/A	According to the transportation lieutenant, the sheriff's office does not do long distance transports of ICE detainees.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)
6. Two officers with valid CDLs required in any bus transporting detainees. <ul style="list-style-type: none"> • When buses travel in tandem with detainees, there are two qualified officers per vehicle. • An unaccompanied driver may transport an empty vehicle. 	Meets Standard	
7. Before the start of each detail, the vehicle is thoroughly searched.	Meets Standard	Policy requires that each vehicle be searched prior to start of the detail.
8. Positive identification of all detainees being transported is confirmed.	Meets Standard	
9. All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.	Meets Standard	
10. The facility ensures that the number of detainees transported does not exceed the vehicles manufacturer's occupancy level.	Meets Standard	
11. Protective vests are provided to all transporting officers.	Meets Standard	Transport officers are provided protective vests and are required to wear them when transporting detainees.
12. The vehicle crew conducts a visual count once all passengers are on board and seated. <ul style="list-style-type: none"> • Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop. 	Meets Standard	
13. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	Meets Standard	
14. Officers ensure that no one contacts the detainees. <ul style="list-style-type: none"> • One officer remains in the vehicle at all times when detainees are present. 	Meets Standard	
15. Meals are provided during long distance transfers. <ul style="list-style-type: none"> • The meals meet the minimum dietary standards, as identified by dieticians utilized by ICE. 	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP I

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)
16. The vehicle crew inspects all Food Service pickups before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). <ul style="list-style-type: none"> • Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative; • Basins, latrines, and drinking-water containers/dispensers are cleaned and sanitized on a fixed schedule. 	Meets Standard	Meals are not provided since transports do not exceed four hours. Detainees being transported during scheduled meal times are fed before they are transported.
17. Vehicles have: <ul style="list-style-type: none"> • Two-way radios; • Cellular telephones; and • Equipment boxes stocked in accordance with the Use of Force Standard. 	Meets Standard	Vehicles are equipped with two-way radios, mobile phones and an equipment box containing items in accordance with the Use of Force standard d.
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"> • Inventoried; • Inspected; and • Accompanies the detainee. 	Meets Standard	
20. The following contingencies are included in the written procedures for vehicle crews: <ul style="list-style-type: none"> • Attack • Escape • Hostage-taking • Detainee sickness • Detainee death • Vehicle fire • Riot • Traffic accident • Mechanical problems • Natural disasters • Severe weather • Passenger list includes women or minors 	Meets Standard	All contingencies listed in this component are included in transport officer's post orders.

TRANSPORTATION (Land Transportation) – REVIEWER SUMMARY

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

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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)*

Review of policy and procedures and an interview with the transportation lieutenant confirmed that the facility ensures that vehicles used for transporting detainees are properly equipped, maintained and operated. Documentation confirmed that detainees are transported in a secure, safe and humane manner under the supervision of trained personnel with the required qualifications.

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. Every transporting officer is issued and instructed to wear a protective vest while participating in the transportation of detainees. Officers ensure that when vehicles are equipped with seatbelts, detainees are properly secured before the transport begins.

Policy requires that the intake officer check records and ascertain if the detainee has a criminal history, is dangerous or has an escape record. Any information of an adverse nature shall be clearly indicated on the G-391 and the escorting officers shall be advised to take the necessary precautions.

Policy requires that officers ask each detainee whether he/she has in his/her possession all funds, valuables and other personal property listed on the detainee's property inventory form. If a detainee answers "yes," the detainee may board the vehicle.

Policy requires an armed officer be posted whenever detainees enter or exit a vehicle outside a secure area. A complete set of keys for every lock located in or on the vehicle travels with the vehicle at all times, in a secure place known to every transporting officer. An armed officer may not enter the secure area of the vehicle. If he/she must enter that area, the officer shall first leave the weapon(s) with another officer for safekeeping or, if the vehicle is equipped with weapons lockers, in a locker.

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.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/12/2017

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

USE OF FORCE (Key: AJ)		
POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:		
COMPONENTS	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 officers to respond to immediate use-of-force situations without the presence of a supervisor.
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	If a detainee's behavior is non-threatening, officers are required to attempt to resolve the conflict without resorting to force.
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"> Ranking detention official, health professional, and others confer before every calculated use of force. 	Meets Standard	Policy and post orders require that before authorizing a planned use of force, confrontation avoidance techniques must be used. The supervisor on shift and medical practitioner are required to assess the situation, taking into account 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"> Under staff supervision. 	Meets Standard	
6. Staff members are trained in the performance of the Use-of-Force Team Technique.	Meets Standard	All officers receive use-of-force team technique training. A specially trained team can be summoned to conduct a planned use of force on each shift.
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, the OIC and the sheriff's designee.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

USE OF FORCE (Key: AJ)		
POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
8. Staff: <ul style="list-style-type: none"> Do not use force as punishment; Attempt to gain the detainee's voluntary cooperation before resorting to force; Use only as much force as necessary to control the detainee; and Use restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical. 	Meets Standard	Policy and post orders require that all of the requirements of the component are followed by officers.
9. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	Meets Standard	
10. Use-of-Force Team follows written procedures that attempt to prevent injury and exposure to communicable disease(s).	Meets Standard	
11. Standard procedures associated with using four-point restraints include: <ul style="list-style-type: none"> Soft restraints (e.g., vinyl); Dressing the detainee appropriately for the temperature; A bed, mattress, and blanket/sheet; Checking the detainee at least every 15 minutes; Logging each check; Turning the bed-restrained detainee often enough to prevent soreness or stiffness; Medical evaluation of the restrained detainee twice per eight hour shift; and When qualified medical staff is not immediately available, staff position the detainee "face-up". 	Meets Standard	The restraint chair is used at this facility instead of four-point bed restraints. The applicable requirements of the component are followed by officers and supervisors when the restraint chair is used. No ICE detainees have been restrained during this inspection period.
12. The shift supervisor monitors the detainee's position/condition every two hours. <ul style="list-style-type: none"> He/she allows the detainee to use the rest room at these times under safeguards. 	Meets Standard	
13. All detainee checks are logged.	Meets Standard	
14. In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	Meets Standard	Medical practitioners report as soon as possible to examine detainees in all immediate use-of-force incidents.
15. When the OIC authorizes use of non-lethal weapons: <ul style="list-style-type: none"> Medical staff is consulted before staff use pepper spray/non-lethal weapons. Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized. 	Meets Standard	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

USE OF FORCE (Key: AJ)		
<p>POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:</p>		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
16. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> • Medical personnel are consulted 	Meets Standard	
17. Protective gear is worn when restraining detainees with open cuts or wounds.	Meets Standard	Officers are trained to use protective gear to protect themselves from blood and body fluid contamination.
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	The OIC conducts an after-action review of all use-of-force incidents and non-routine application of restraints. The review is documented and signed by those conducting the review.
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"> • Specialized training is given and Officers are certified in all devices they use. 	Meets Standard	
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	An equivalent use-of-force form is being used at this IGSA facility.

<p>USE OF FORCE – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i></p>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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 review of policy and interviews with the OIC, a shift supervisor and officers. Policy and post orders are in place that authorizes staff to use necessary force only after all reasonable efforts to otherwise resolve a situation have failed. Post orders require that 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, and 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 incidents and is then forwarded to a lieutenant for review. The lieutenant reviews the report and forwards it to the OIC.

All planned 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. Tasers are carried by supervisors but policy precludes their use on ICE detainees. Canines are used for searches but never in the presence of ICE detainees. Unauthorized less-than-lethal force devices such as blackjacks, sap gloves, and/or chemical agents are not permitted. Post orders and training address the prohibition of any type of choke or carotid hold or use of restraint equipment to apply a choke hold.

The facility reported that there were no incidents that involved the use of force on ICE detainees during this inspection period. There were no escapes or attempted escapes during this inspection period.

If force becomes necessary at this facility it is managed, documented and reviewed as this standard requires.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6); (b)(7)(C)

Completion Date: 1/12/2017

Reviewer Signature (for printed form submission):

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAP I

STAFF DETAINEE COMMUNICATIONS (Key: AK)		
POLICY: PROCEDURES MUST BE IN PLACE TO ALLOW FOR FORMAL AND INFORMAL CONTACT BETWEEN KEY FACILITY STAFF AND ICE STAFF AND ICE DETAINEE AND TO PERMIT DETAINEES TO MAKE WRITTEN REQUESTS TO ICE STAFF AND RECEIVE AN ANSWER IN AN ACCEPTABLE TIME FRAME.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The ICE Field Office Director ensures that weekly announced and unannounced visits occur at the IGSA.	Does Not Meet Standard	This component was rated deficient during the last inspection because announced visits by ICE personnel did not occur weekly. Announced visits were not occurring weekly during this this inspection period. This is a repeat deficiency.
2. Detention and Deportation Staff conduct scheduled weekly visits with detainees held in the IGSA.	Does Not Meet Standard	This component was rated deficient during the previous inspection because scheduled weekly visits were not occurring. Scheduled visits did not take place weekly during this inspection period. This is a repeat deficiency.
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.	Meets Standard	
5. ICE information request Forms are available at the IGSA for use by ICE detainees.	Meets Standard	ICE information request forms are available in the housing units. Requests can also be submitted on local request forms or plain paper
6. The IGSA treats detainee correspondence to ICE staff as Special Correspondence.	Meets Standard	
7. ICE staff responds to a detainee request from an IGSA within 72 hours.	Meets Standard	This component was rated deficient during the last inspection because documentation was not available to demonstrate that detainee requests were responded to within 72 hours. A check of documentation indicated that all detainee requests during this inspection period were responded to within 72 hours.
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	

STAFF DETAINEE COMMUNICATIONS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

STAFF DETAINEE COMMUNICATIONS – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i>	
<p>Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i></p> <p>ICE officers and facility staff members make announced and unannounced visits to the facility’s housing units and activity areas to encourage informal communication among all staff and detainees. The facility does not have a standard required method to document the unannounced visits. ICE officers document their visits on the Facility Liaison Checklist. The ICE officers have not been consistent with their visits to the facility. Requests from detainees to ICE officials have been logged on a regular basis. The log contains the date the request was received, the detainee's name and A-number. The log does not contain the name of the ICE officer logging the request or the nationality of the detainee. Requests were consistently returned to the detainee within the standard required 72 hours.</p> <p>During the evaluation of this standard, written procedures were reviewed which included the detainee handbook. ICE and facility personnel were interviewed. ICE detainees indicated during the inspection that ICE staff does not consistently visit the units, and when they do visit, they only want to speak with detainees on their list. The facility does not require ICE staff to sign into the facility. The facility runs a video court and most of the ICE personnel are entering the facility for that program. Evaluation of this standard included reviewing post orders and detainee handbooks; inspecting the ICE detainee request form log; touring the housing units; examining the Facility Liaison Checklists; and interviewing ICE officers and facility staff.</p>	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/12/2017
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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"> • The notification is recorded in the detainee’s file; and • When the A File is not available, notification is noted within DACS 	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	
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"> • Times and transfer plans are never discussed with the detainee prior to transfer; • The detainee is not notified of the transfer until immediately prior to departing the facility; and • The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 	Meets Standard	Facility policy addresses all of the items listed in this component.
6. The detainee is provided with a completed Detainee Transfer Notification Form.	Meets Standard	Detainees sign, and are given a copy of, the transfer notification form.
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"> • The Detainee Immigration Health Service (or IGSA) (DIHS) Medical Director or designee approves the transfer; • Medical transfers are coordinated through the local ICE office; and • A medical transfer summary is completed and accompanies the detainee. 	Meets Standard	Medical transfers are conducted in accordance with each of the items listed in this component.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

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 his/her 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	
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 <i>(Use following format for dates: mm/dd/yyyy)</i>	
Overall Remarks: <i>(Record significant facts, observations, other sources used, etc.)(5000 Character Max)</i> Transfers are approved and facilitated with consideration for the safety and security of the facility personnel, detainees and the public. Policy and procedures address notifications, detainee records and the protection of detainee funds and property. ICE officers informed the inspector that an indigent detainee being transferred is authorized a single domestic telephone call at the government's expense upon arrival at his/her final destination. Non-indigent detainees have access to make calls at their own expense pursuant to the Detainee Telephone Access standard. To evaluate this standard, policies relevant to detainee transfers were reviewed; ICE and facility personnel were interviewed; and ICE detainee transfer forms were examined.	
Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6); (b)(7)(C)	Completion Date: 1/12/2017
Reviewer Signature (for printed form submission):	

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (Key: AM)		
POLICY: 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.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
1. The facility has a Sexual Abuse and Assault Prevention and Intervention Program consistent with the ICE Zero Tolerance Policy.	Meets Standard	The facility has a Sexual Abuse and Assault Prevention and Intervention (SAAPI) program consistent with the ICE Zero Tolerance Policy.
2. The facility administrator has designated a Sexual Abuse and Assault Prevention and Intervention Program coordinator for the facility.	Meets Standard	The OIC has designated a SAAPI coordinator.
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	All personnel are trained in the prevention and intervention areas required by the standard during initial orientation and in annual refresher training.
4. The facility maintains written documentation verifying employee, volunteer, and contractor training.	Meets Standard	Written documentation is maintained verifying employee, volunteer and contractor training.
5. Detainees are informed about the program in facility orientation and the detainee handbook (or equivalent).	Meets Standard	Detainees are informed about the program in orientation, the handbook and postings throughout the facility.
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	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 pod bulletin boards.
7. The Sexual Assault Awareness Information brochure is distributed to detainees.	Does Not Meet Standard	The Sexual Assault Awareness Information brochure is not distributed to detainees.
8. Detainees are screened upon arrival for "high risk" sexual assaultive and sexual victimization potential and housed and counseled accordingly.	Meets Standard	During admission, detainees are screened for high risk sexual assaultive and sexual victimization potential and housed and counseled accordingly.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (Key: AM)		
POLICY: 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.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
9. A detainee who is subjected to sexual abuse or assault is not returned to general population until proper re-classification, taking into consideration any increased vulnerability of the detainee as a result of the sexual abuse or assault, is completed.	Meets Standard	Re-classification, which takes into consideration any increased vulnerability of the detainee as a result of sexual abuse or assault, is completed for any detainee who is subjected to sexual abuse or assault and prior to return to general population.
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	Policy, procedure and training provide for prompt and effective intervention when any detainee is sexually abused or assaulted including the required chain-of-command and immediate ICE reporting
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	A sexual assault response team, consisting of the physician, mental health personnel, security personnel, an investigator, as well as, representatives from outside entities that provide relevant services, responds to all incidents of sexual assault and abuse.
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	A victimized detainee is placed in a supportive environment that represents the least restrictive housing possible, but victims are not held longer than five days in any type of administrative segregation except in highly unusual circumstances or at the request of the detainee.
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	An employee suspected of perpetrating sexual abuse or assault is removed from all duties requiring detainee contact pending the outcome of an investigation.

National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (Key: AM)		
POLICY: 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.		
COMPONENTS	RATING	REMARKS (1000 CHAR MAX)
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	Per policy, when there is an alleged sexual assault, personnel gather and maintain evidence, make referrals to appropriate law enforcement agencies for possible prosecution and ensure that qualified investigator conduct a prompt, thorough, objective and fair investigation.
15. When there is an alleged or proven sexual assault, the required notifications are promptly made to facility supervisors and ICE management.	Meets Standard	When there is an alleged or proven sexual assault, the required notifications are promptly made to administration and ICE.
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	When possible, victims of sexual abuse or assault are referred to specialized community resources for treatment and gathering of evidence.
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	All records associated with claims of sexual abuse or assault are maintained and specifically logged and tracked by the designated SAAPI coordinator.
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	The SAAPI coordinator conducts an annual review of aggregate data regarding incidents of sexual abuse or assault and presents the findings to ICE for use in determining whether changes are needed to existing policies and practices.
19. Tracking statistics and reports are readily available for review by the inspectors.	Meets Standard	Tracking statistics and reports were readily available at the time of the inspection.

<p>SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION – REVIEWER SUMMARY <i>(Use following format for dates: mm/dd/yyyy)</i></p>
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National Detention Standards Inspection Worksheet for Over 72 Hour Facilities With SAAPI

SEXUAL ABUSE AND ASSAULT 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)*

Approved policies ensure immediate protection to victims, include prevention of retaliation, assure medical and mental health referrals for alleged victims, specify medical employees' responsibility to report allegations or suspicions of sexual assault to facility personnel and specify evidence gathering and forensic medical examination protocols. The program coordinator is assigned responsibility for detainee education regarding issues pertaining to sexual assault. Detainees are provided instructions on how to contact DHS/OIG or ICE to confidentially report sexual abuse or assault.

The Sexual Abuse and Assault Prevention and Intervention Program (SAAPI) coordinator assists with the development of written policies and procedures and training protocols and serves as a liaison with other agencies. Employee, contractor and volunteer training include all of the topics listed in the Standard. The facility documents detainee participation in the training session. Detainees identified as "high risk" for committing sexual assault are assessed by a mental health or other qualified health care professional and treated if indicated.

Statements from detainees claiming to be victims of sexual assaults are taken seriously and professionally responded to. As clinically indicated, prophylactic treatment and follow-up examinations for sexually transmitted diseases are offered. After the physical examination, a mental health professional evaluates the need for crisis intervention, counseling and long-term follow-up. During the community examination, the victim may choose to have an outside advocate present. When the detainee has been transferred, the OIC is notified.

SAAPI case records include general files and administrative investigative files and are maintained chronologically in accordance with medical care and detention standards and applicable policies and retained in accordance with established schedules. The program coordinator maintains a record in the detail that is required by the Standard. Criminal investigative documents or evidence are not stored at the facility.

The facility has an effective SAAPI program that affirmatively responds to such incidents. A multidisciplinary team effectively responds to allegations and incidents with appropriate classification and medical/mental health post-crises follow-up. Policy and procedures ensure timely and appropriate responses, evaluation, treatment and notification to ICE.

The Sexual Assault Awareness Information brochure is not distributed to detainees.

The facility attained federal PREA certification in August 2014.

Since the last inspection, there have been no SAAPI ICE detainee incidents.

Evaluation of this standard was determined following a review of policy, training documentation, detainee orientation, interviews with the program coordinator and detainees and observations.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6); (b)(7)(C)

Completion Date: 1/12/2017

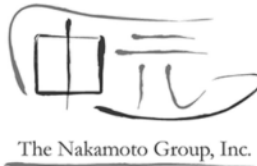
Reviewer Signature (for printed form submission):

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
Errors:					
<p>No Errors Found</p>					
Items Not Rated:					
<p>All Items Rated</p>					

Run Indicator:



January 12, 2017

TO: (b)(6); (b)(7)(C)
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) of the Butler County Jail in Hamilton, OH during the period of January 10-12, 2017. This is an Over 72 Hour IGSA facility.

The inspection was performed under the guidance of John E. Hahn, Lead Compliance Inspector. Team Members were:

Subject Matter Field	Team Member
Security	(b)(6); (b)(7)(C)
Detainee Rights	
Medical Care	
Safety	
QMC	

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

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 2016 and 2017 NDS compliance annual inspections:



2016 Annual Inspection	
Meets Standards	37
Deficient	0
At-Risk	0
Repeat Deficiency	0
Not Applicable	2

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

The inspection team identified twelve (12) deficient components in the following six (6) standards:

- Correspondence and Other Mail --1, which is a repeat deficiency
- Detainee Handbook - 5, which are repeat deficiencies
- Food Service - 1, which is a repeat deficiency
- Issuance and Exchange of Clothing, Bedding and Towels - 2, which are repeat deficiencies
- Staff Detainee Communication - 2, which are repeat deficiencies
- Sexual Abuse and Assault Prevention and Intervention - 1

Facility Snapshot/Description

The Butler County Jail (BCJ) is owned and operated by Butler County Sheriff's Office and is located in Hamilton, Ohio which is approximately 25 miles northwest of Cincinnati, Ohio. The facility houses low and medium custody adult male and female detainees for ICE. In addition, the facility houses U.S. Marshals detainees, BOP inmates and various other county prisoners. On January 11, 2017 the total count was 978, of which 124 were ICE detainees; 117 males and seven females. The average length of stay for an ICE detainee is 44 days.

The facility is of one and two story construction with eight general population housing units, a special management unit and a medical unit along a single hallway. Each of the general housing units is two-story with 48 cells. Two of the units have two cells to accommodate detainees with disabilities. The jail was opened in 2002 and there have been no further renovations to the building. The facility operates under a direct supervision model.

Every detainee room 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 outside recreation area is attached to the housing units. Every housing unit has video camera coverage, the images of which are displayed on monitors in the control center. Housing areas provide adequate open space, and each has telephone banks, tables, and seating. The atmosphere throughout the facility is relaxed. Detainees were witnessed frequently engaging the staff and each other without hesitation. The inspection team found the detainees to be calm with no obvious indicators of high stress levels present. The detainees were seen participating in recreation activities and legal visiting. An inspection of the general areas, housing units and special management unit (SMU) revealed sanitation conditions that were average.

The facility provides all the support systems for the facility except food service which is provided by ABL Management, Inc. During this inspection, the Medical and QMC SMEs reviewed twenty and



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eighty medical records respectively. The inspection team found the environment to be low-tension, with detainees freely approaching inspectors to converse.

The staff gave every indication of standardized, professional conduct, and displayed a clear understanding of the concept of civil detention and the NDS Standards. The facility has very few employees that are bilingual and they depend on the language line to assist with booking and classification of the non-English speaking detainees. Confidential interviews revealed only minor issues with food service. The inspection team interviewed 45 ICE detainees during the course of the inspection and all stated that the facility was safe and had no complaints about its operation.

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 – DO Thomas Sparrow, SDDO Joann Grace from the Detroit Field Office
- Facility Staff – Warden Adams, Deputy Wardens Scott Brown, Rob Clendenin and David Reynolds and various other supervisors and staff members.

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Lead Compliance Inspector

January 12, 2017

Printed Name of LCI

Date