From: (b)(6);(b)(7)(C)

Sent: 20 Feb 2018 10:31:10 -0500

To: (b)(6);(b)(7)(C)

Subject: FW: DEN FW: Seeking G-324 inspection report for Aurora, DENICDF

Attachments: 2016 ICE English Revised from ODO - Clean Copy.pdf, 17.1.2-AUR Attachment A

Housekeeping plan New Facility.pdf, 17.1.2-AUR Sanitation & Housekeeping 07162015.pdf,

DENICDF16 -DenverCDF- G324A PBNDS O72 2011-09-29-16.pdf, DENICDF16- DenverCDF CoverLTR 09-

29-16.doc, DENICDF16- DenverCDF SIS 09-29-16.doc, RA_DeniCDF16.pdf

(b)(6):() take a look at the 4-page attachment (17.1.2-AUR Sanitation & Housekeeping...) Pretty clearly requires cleaning of common areas, and not in the context of the VWP. Note signatures on the first page. Would be good to find out if there is one more current than this (date 8/18/15).

Thanks,

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

Associate Legal Advisor

Office of the Principal Legal Advisor | DCLD 202-732-3329 (desk) | 202-875-3799 (cell)



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From: (b)(6);(b)(7)(C)

Sent: Friday, March 31, 2017 11:11 AM

To: (b)(6);(b)(7)(C)

Cc:

Subject: FW: DEN FW: Seeking G-324 inspection report for Aurora, DENICDF

Hi (b)(6 et. al.,

Here are the most recent inspection documents for the Aurora facility, as well as GEO's Detainee Handbook Local Supplement and Housing Unit Sanitation Policy. I haven't reviewed them yet, but I will take a look and see how the standards compare with ICE's.

Thanks!

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

From (b)(6);(b)(7)(C)Sent: Friday, March 31, 2017 10:58 AM **To:** (b)(6);(b)(7)(C) Cc: Subject: FW: DEN FW: Seeking G-324 inspection report for Aurora, DENICDF (b)(6);(b)(7)(As requested. Please let me know if we can be of any further assistance. (b)(6);(b)(7)(C)Detention and Deportation Officer Immigration and Customs Enforcement | Enforcement and Removal Operations Detention Management Division | Detention Standards Compliance Unit 500 12th Street SW, Washington, D.C. 20536 202-732(b)(6); D) | 703-786(b)(6); C) (b)(6);(b)(7)(C)From: (b)(6);(b)(7)(C Sent: Thursday, March 30, 2017 5:06 PM **To:** (b)(6);(b)(7)(C) Subject: Seeking G-324 inspection report for Aurora, Colo. jail Hi(b)(6);(b)(7)I hope this finds you well. I'm working on (b)(5) Are these things that you have access to and could pass along, by any chance? Or if not, could you suggest the right person to contact? Many thanks, and all the best, (b)(6);(b)(7)(C)Associate Legal Advisor **Detention and Removal Law Section** Enforcement and Removal Operations Law Division

Office of the Principal Legal Advisor

U.S. Immigration and Customs Enforcement (202) 732 (b)(6) office); (202-) 308 (b)(6) mobile)

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C. B.

POZÄLTKILEGER

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INTRODUCTION/MISSION

The Aurora Detention Center is a private detention facility operating under a contract with the United States Immigration and Customs Enforcement. (I.C.E). The mission of this facility is to provide a safe, clean, and sanitary environment for detainees waiting processing of their administrative and immigration hearings and the staff who work here.

This supplement, with rules and regulations contained herein, is adopted and enacted by the Aurora Detention Center Administration pursuant to written guidelines, laws, rules and regulations. **Please read it carefully.** If you have any questions concerning any aspect of this handbook, please contact a staff member for clarification.

The purpose of this supplement is to explain the specific rules, regulations, policies and procedures that must be followed by detainees while being detained at this facility. The supplement will also help provide you with a general overview of the programs, rules, regulations, and services of the facility. You will be held accountable for your actions while in custody at this facility. Therefore, it is each detainee's responsibility to become familiar with the contents of this supplement.

A copy of this supplement will be issued to each detainee upon intake, and certain sections are posted on the bulletin boards in each housing unit. All detainees are required to acknowledge, by signature, receipt of this supplement.

The information contained in this supplement applies to all detainees and is intended to ensure your safety and the safety of staff, decent living conditions, fair treatment, and the protection of your rights. It is the policy of this facility that no individual be discriminated against because of age, sex, sexual orientation, race, color, creed, religion, physical challenges (handicap), national origin or political beliefs.

The detention staff is charged with the responsibility of maintaining your safety and security, to provide an appropriate professional response to your needs and to maintain the safe and orderly running of the facility. The staff/detainee relationship is very important to everyone's well-being, and each detainee has an important role in maintaining and improving this relationship.

FACILITY ADDRESS, TELEPHONE NUMBER & DIRECTIONS

AURORA DETENTION CENTER 3130 N. OAKLAND STRET AURORA, COLORADO 80010-1525 303-361-6612 or 303-739-8700

ICE/ERO 3130 N. OAKLAND STREET AURORA, COLORADO 80010-1525

DIRECTIONS:

The Aurora Detention Center is located 1.1 miles south of I-70 and 1.4 miles north of Colfax

Exit I-70 onto <u>Peoria</u> Street, <u>south</u>, go approximately 1.1 miles to East 30^{th} Avenue, turn right (west) on 33^{th} Avenue and proceed approximately 2 blocks. Turn left onto North Oakland Street. The facility will be on the left side of the street. Parking for visitors (i.e. family or friends) is available on. Oakland Street.

If traveling north on Peoria Street, go to East 33rd Avenue, turn left (west), and go approximately 2 blocks. The distance from Coffax and Peoria streets is approximately 1.4 miles.

It is imperative that you notify your family, friends or anyone who might visit, provide you money or want to leave a telephone number message, of your name and A-number. GEO staff is not responsible for any form of miscommunication resulting from an incomplete detainee's name or inaccurate A-number. GEO staff cannot provide your A# over the telephone to those that request it.

RIGHTS AND RESPONSIBILITIES

You have the right to expect that as a human being all personnel will treat you respectfully, impartially, fairly, and humanely.

You have the right to participate in educational classes, and volunteer work as far as resources are available and in keeping with your interests, needs, detention status, physical and mental health condition and abilities.

You have the responsibility to take advantage of activities that may help you live a successful and law-abiding life here in this facility, as well as when you return to the community. You will be expected to follow the regulations governing these activities.

You have the right to be informed of the rules, regulations, procedures and schedules of the facility that affect you.

You have a responsibility to know and abide by the rules, regulations, procedures and schedules of the facility.

You have the responsibility to treat others, both employees and detainees, in the same manner.

You have the right to freedom of religious affiliations and voluntary religious worship.

You have the responsibility to recognize and respect the voluntary rights of others in this regard.

You have the right to health care which includes nutritious meals, proper bedding and clothing, a laundry schedule for clean bedding and clothing, an opportunity to shower regularly, proper ventilation for warmth and fresh air, a regular exercise period, toiletries, and medical and dental treatment.

You have the responsibility to not waste food, follow laundry and shower schedules, maintain neat and clean living quarters, keep your area free of contraband, and seek medical and dental care as you need it.

You have the right to unrestricted and confidential access to courts by correspondence.

You have the responsibility to present honesty and fairly your petitions, questions, and problems to the courts.

You have the right to legal counsel from an attorney of your choice by means of interviews and correspondence at no cost to the United States Government.

It is your responsibility to obtain and use services of an attorney honestly and fairly.

You have the privilege to have family and friends visit with you in keeping with the facility rules and regulations.

It is your responsibility to conduct yourself properly during visits, not to accept or pass contraband, and not violate federal, state or local laws or the policies of the Aurora Detention Center.

You have the right to reading material for educational purposes and for your own enjoyment.

It is your responsibility to seek out and use materials for your benefit, without depriving others of the same benefit.

You have the right to use the law library reference materials to help you resolve legal problems. You also have the right to receive help when it is available through a legal assistance program.

It is your responsibility to use these resources according to the prescribed procedures and schedules, and to respect the rights of others to use the materials.

You have the right to an administrative hearing before an Immigration Judge to determine your status in the United States.

You have the responsibility to seek methods of payments for your bond.

You have the right to apply for political asylum if you believe that you will be persecuted because of your race, religion, nationality, membership in a social group or political opinion.

You have the responsibility to prepare and submit the proper form accurately.

You have the right to receive as correspondence any material reasonably necessary to present your legal claim.

You have the responsibility to request from the Library Officer all special mailing envelopes.

You have the responsibility to prepare all special mailing envelopes accurately and keeping all tracking numbers and receipts.

You have the responsibility to inform persons dropping off legal material for use in your legal claim of procedures and hours.

You have the right to request voluntary departure, if statutorily eligible, prior to a hearing but if you request voluntary departure you waive the right to a hearing.

It is your responsibility to inform an Immigration Officer that you request voluntary departure.

You have the privilege of communication. You can communicate with the consulate or diplomatic officers of the country of your nationality in the United States.

You shall not be harassed, disciplined, punished, or otherwise retaliated against for filing a complaint or grievance.

SECTION 1 - INITIAL ADMISSION

PHONE CALLS DURING BOOKING

Upon your arrival at the facility, while in intake, you will be issued a pin # card and will receive a free 3 minute phone call. You will have 72 hours in which to use the free 3 minutes. When you speak with family, friends and attorneys please advise them of your 'A' number and location (Aurora) as this will make it easier for them to locate you.

BOOKING

You are required to answer questions designed to identify individual characteristics and to aid the facility staff in your proper classification into the institution during the booking process. In addition, you will be photographed. Other information pertaining to you may also be gathered during the booking process.

You will be screened for medical problems. It is important that you answer all questions truthfully and accurately.

During the screening process, you may sign a "Consent to Refuse Medical Treatment." as you have the right to refuse medical treatment at any time.

You will be informed of the procedure to follow in order to obtain subsequent medical attention. If you have a medical problem and do not know what the procedure is, ask a detention officer or other staff member.

CLASSIFICATION

Classification Information

Staff shall use the most reliable, objective information during the classification process. "Objective" information refers to facts, i.e., current offense, past offenses, escapes, institutional disciplinary history, violent episodes/incidents, medical information or a history of victimization, etc.

Classification Levels and Housing Assignments

You will be housed according to your classification level.

Classification Levels

- a. Low Custody may include detainees with minor criminal records and nonviolent felonies
- Medium Custody includes detainees with criminal records violent felonies
- High Custody includes detainees with serious offense history, escape history, pattern of assaults and/or serious institutional disciplinary convictions

Reclassification

You may be reclassified any time and the classification level re-determined. The first re-assessment is completed 60 to 90 days after the date of the initial assessment. Subsequent reclassification assessments shall be completed at 90-120 day intervals. A special reassessment is completed within 24 hours before a detainee leaves disciplinary segregation and at any other time when additional relevant information becomes known. The officer assigned to classification will respond to requests for reclassification within 72 hours. A Kite for reclassification consideration needs to be addressed to the Classification Officer.

Any detainee may be reclassified to <u>High</u> if the behavior and threat to the facility, other detainees, and personnel is articulated.

Detainees classified at Medium who exhibit acceptable institutional behavior may be reviewed and reclassified to Low. (Detainee must be in custody for a minimum of 60 days before reclassification.)

Classification Appeal

All new arrivals classified as level two or three may appeal their classification decision through the detainee grievance system. All such appeals will be directed to, investigated, and reconsidered by Classification.

HOUSING AND UNIFORMS

You will be placed in living quarters based upon your present classification. Female detainees will be detained in a housing unit separate from males.

Housing units for females are dormitory style which provides separate areas for sleeping, activities, restrooms, and showers. Housing units for males are cells that house four or eight detainees with a sink and toilet inside each cell. A separate area for showering and activities is available in each unit.

Following the booking process, you will be issued clothing consisting of 2 uniforms. 5 pair of undergarments, 1 gym shirt, 1 pair of shorts, 1 pair of shower shoes, tennis shoes, two sheets, 1 pillow case, 2 blankets, 1 towel, 1 toothbrush, toothpaste, soap, hand lotion, comb, and headphones for the televisions. Long sleeve shirts will be provided from October to April.

Female detainees will be provided 3 bras, and necessary feminine hygiene items in addition to the above. It is your responsibility to wear the uniform as directed by staff, which includes wearing a Wristband.

The classification process determines the appropriate level of custody for each detainee. Once this is established, staff can issue the detainee clothing and wristband in the appropriate color for his or her classification period.

Dark Red - High Custody Bright Orange - Medium Custody Orange/Blue - Medium High Custody

Dark Blue - Low Custody

AURORA DETENTION CENTER - ID

All detainees will be issued a facility Identification Wristband. The wristband must be worn on i.e.., commissary, library, medical services. If you lose, damage or destroy your Identification also required for receiving medication and mail. Disregarding these requirements may lead to disciplinary action. Your Identification Wristband provides you access to certain services, Wristband it is your responsibility to contact a housing unit officer and notify them that you iis/her wrist anytime the detainee is outside of their assigned housing unit. The wristband is need a replacement. You may be required to pay for the replacement of your Identification Wristband.

PROPERTY YOU MAY TAKE TO THE HOUSING UNIT

The following is a list of property that you may take into the housing unit:

- Legal documents and papers, including property receipts
- Family pictures (not to exceed 10) measuring 5"x7" or smaller
- 1 pair of prescription glasses regular (no sunglasses)
 - Dentures upper, lower or both plates
 - Personal address book or pages
- Religious and secular reading material (softbound) Wedding band - plain, no stones
- Small religious item, i.e. religious medallion
- Materials authorized in writing by the Chief of Security

PERSONAL PROPERTY STORAGE

paper work only. You may have access to pictures, cards, papers, or other items approved by property except when your requests have been approved by the Intake Officer to obtain legal To protect the property of all detainees, you are not permitted access to your stored personal however, once you sign surrendering your property to the property section, you lose this staff out of your wallet or purse, during the admission process, while in the Intake area;

No alcoholic beverages, tobacco products or perishable food items will be stored or permitted disposable safety hazards will not be stored in this facility. Such items will be disposed of in this facility. For safety reasons, matches, cigarette lighters, tobacco products and other after you are placed into the facility population.

GEO in a small overnight bag or box, with dimensions not to exceed 14 X 14 X 18, and with a Detainee visitors may bring authorized property on Sunday, Monday, Tuesday and Thursday's You will be pre-authorized for clothing to be dropped off or mailed in. Property authorized for drop-off will be strictly limited to shoes and clothing (one set). Property must be submitted to onetime drop-off only. If additional items are needed submit a kite for further consideration. storage. No valuables, electronics, or other non-clothing materials are authorized. This is a total weight not to exceed 40 pounds, including whatever property you already have in from 09:00 a.m. to 7:00 p.m.

this choice you may still request your clothes be washed by writing a detainee request form to You will be provided the opportunity to have your personal clothing washed. If you decline

MONEY/PROPERTY RELEASE

community that you designate in writing. To release your property, a Property Release Form must be filled out and signed by you. A Property Release Form may be obtained upon request You may release all of your property, including your keys and/or money to someone in the from the housing unit officer assigned to your housing unit.

The person receiving your property must provide the following information: If the person does not have the following information, your property will not be released to them. It is your responsibility to advise the party picking up your property that this information is required.

- Name
- Address
- Date of Birth
- Official/Valid Picture ID or verifiable identification

RELEASE OF FUNDS AND PROPERTY

request detainee withdrawals from their account. The detainee accounts clerk or designee will review the request for proper approval and completeness also verifying the detainee name and Detainees will use a Property Release Form in conjunction with a Detainee Request Form to A number issued. The release form must be signed by the detainee and the housing unit

PROPERTY LEFT UPON DISCHARGE/TRANSFER

You are required to either take your property with you or make prior arrangements for transfer or disposal of it when you discharge from this facility.

30 days to make arrangements to contact Immigration and Customs Enforcement to claim your If you leave property, a written notice will be sent certified mail to the last known address you provided, notifying you that your property has been considered abandoned and that you have property. If there is no claim, the property will be vested in the U.S. Government and Immigration and Customs Enforcement shall direct its disposal

ITEMS LEFT FOR DETAINEES

The only items that may be brought to the facility for you are:

- ICE pre-approved clothing request (40 lbs. total) only in the event of deportation
 - Money for detainees will only be accepted Monday-Friday from 1:30-2:30 p.m.
 - Legal documents may be left for detainees, staff will inspect the documents for contraband but will not read the documents.

money for you at the facility, a receipt will be written and a copy given to you. No personal Money that is received at this facility will be credited to your account. If someone leaves checks will be accepted at the facility.

money orders, cashier's checks, or checks payable to you from a local, State or Federal agency. Deposits on your account must be in the form of U.S. currency, Postal or Western Union

RETURN OF YOUR MONEY

Upon discharge or transfer from this facility, all money remaining on your account will be returned to you.

NOTE: If the facility is unable to return your property to you due to loss, theft, or misplacement, and for which you have a legitimate property receipt, the facility staff will reimburse you for the missing personal property, money and/or valuables. In the event this situation occurs, you must fill out a Property Claim Form and provide a copy of your receipt(s)

PROCEDURES FOR FILING A CLAIM FOR LOST OR DAMAGED PROPERTY

If property is missing or damaged a Property Claim Form will be provided to the detainee and will be thoroughly investigated. A detainee being transferred, released, or removed from the country with a property claim shall be allowed to initiate the claim before leaving the facility. The facility administrator shall forward the result of the claim to the claimant's forwarding address (provided upon admission or in conjunction with the claim).

MONEY TRANSACTIONS

There will be no financial transaction between detainees unless approved by the Warden. You must be a verified relative or spouse in order to be considered for a transfer of money between detainees. If you meet the criteria, you must submit a written request to the Warden that provides sufficient information (reason for the request and supporting information).

You are not allowed to have any money in your possession while in the facility i.e. cash, coins, checks or money orders.

ORIENTATION VIDEO

The facility will show you an orientation video in the Intake area during your initial processing.

PRO BONO IMMIGRATION LAW VIDEO

You will be shown a legal video provided by the American Immigration Lawyers Association during your initial processing. In addition, you may request these immigration law materials anytime in the future, by using the packet request form available to you in the housing unit or Law Library. The list of detainees who will view the Pro Bono presentation is compiled by the court. If you want to be placed on the list, submit a detainee request to the Programs Coordinator.

A list of Pro Bono legal services is located on the bulletin board and the Talton Communication poster in the housing unit.

DETAINEE WORK PROGRAM (VOLUNTARY)

The center utilizes detainees to perform such functions as painting, food services, laundry services, barbershop and sanitation.

All work is done on a voluntary basis, except that work which is customarily required for cleaning your living area.

The Classification Officer selects and assigns workers to job vacancies. Your classification level, criminal history, escape history and medical status will be used to determine if you are eligible to work and if eligible, the type of work assignment for which you are eligible.

You may be removed from a work detail for such causes as:

- Disruptive behavior, threats to security, etc.
 - Unsatisfactory job performance
- Infraction of a facility rule, regulation or policy, leading to removal from a work
 detail as a sanction imposed by a disciplinary proceeding through the Institutional
 Disciplinary Panel (IDP) or Unit Disciplinary Committee (UDC)
- Physical inability to perform all functions required by the job, whether because of a lack of strength or a medical condition.

You will receive an orientation to your job assignment by your job supervisor. You will be asked to sign a statement that you have received the orientation and that you understand the job requirements. If you refuse to sign the statement, you will be removed from the job assignment.

If you are injured on your job assignment, you are to immediately report the injury to your detail supervisor.

Depending on the jobs, you are required to wear the proper uniform and/or safety related equipment as told to you by your supervisor.

DETAINEE DRESS CODE

You are required to have your full uniform on whenever you are outside your housing unit when going to court, visitation, and church services etc, except to recreation at which time a t-shirt and shorts will be allowed. When you are inside the housing unit, you are also required to put on your t-shirt, pants or shorts and shoes in the dayroom area.

SECTION II

ACCESS TO COURT AND LAW LIBRARY

IMMIGRATION LAW LIBRARY MATERIAL

The law library is available for detainee use. If you would like to go to the law library fill out a detainee request form (kite).

In addition to the computers, detainee handbooks, law dictionaries, legal research guides and writing materials are also available. The computers are for legal work only.

LOCATION AND HOURS OF ACCESS

The law library is located in the North West hall way of the facility.

The facility law library can be accessed Monday – Friday from 7:30am – 10 pm with the exception of count times and religious services. This will enable all detainees regardless of housing or classification to utilize the law library on a regular basis. When requested and where resources permit, you shall be provided with meaningful access to the Law Library, legal materials and related materials on a regular schedule with no less than 15 hours per week.

You will not be required to lose your recreation time in order to use the law library.

REPLACING DAMAGED MATERIALS

A list of law library holdings is posted in the library. The Law Library Officer is responsible for the law library and will inspect the law library documents at least weekly for missing or damaged materials. You are encouraged to report missing or damaged materials. Damaged or missing materials will be promptly ordered and replaced.

SUPERVISION

The library staff will monitor your use of legal materials to prevent misuse, damage or destroying of legal materials and/or equipment. You are not permitted to mutilate or destroy legal materials, equipment or to remove legal material or supplies from the law library.

UPDATING LEGAL MATERIALS

This facility provides detainees with access to law materials using Lexis-Nexis, a web-based research database that provides up-to-date access to legal materials in electronic format.

This facility subscribes to a law library updating service. Out-of-date materials will be disposed of when replaced by new material. Immigration and Customs Enforcement will add information on significant statutory and regulatory changes regarding detention and deportation of aliens in a timely manner, and will provide initial copies to the facility.

REQUEST FOR ADDITIONAL LEGAL MATERIALS

If you require additional legal material(s) not available in the facility, you need to make a request in writing to the Program Coordinator. Requests for copies of court decisions will normally be available within three (3) business days. If you are making unnecessary requests for material not contained in the law library, the Administration will consult with Immigration and Customs Enforcement staff to determine appropriate action.

PHOTOCOPYING OF LEGAL DOCUMENTS

You can obtain photocopies of legal materials when such copies are reasonable and necessary for a legal proceeding. You need to request these copies using a "kite" and state the number of copies you need.

The number of copies made of documents to be filed with a particular court, combined by the number required for Immigration and Customs Enforcement

records and at least one copy for your personal use will determine the number of photocopies required.

ILLITERATE AND NON-ENGLISH SPEAKING DETAINEES

Unrepresented illiterate and non-English speaking detainees who wish to pursue a legal claim related to their immigration proceedings or their detention will be provided with access to a set of English language law books and Language Line Service for limited English proficient detainees. Assistance will be provided as follows:

- Detainees will be assisted in the use of the law library and the drafting of legal documents from other detainees who have appropriate language and reading/writing abilities.
- Assistance in contacting pro bono legal-assistance organizations from the Immigration and Customs Enforcement-provided list. The Pro Bono list is posted on the bulletin boards in all housing units.

DETAINEE RETENTION OF PERSONAL LEGAL MATERIALS

Detainees are permitted to retain all legal materials in both general population and Segregation/SMU provided such material does not create a safety, security or sanitation hazard. Detainees with excess legal material will be required to place such material in personal property storage. If you wish to access the excess legal material, you must provide a request to the Chief of Security for the specific material you need to access. Your request will be answered within 24 hours after the request is made, during designated hours, unless documented security concerns preclude action within this time frame.

Detainees are allowed to utilize an electronic storage device provided by the library to save their legal documents. It will be kept in a locked cabinet in the library and they are not allowed in the housing unit, but will be transferred to a disk given to the detainee upon his or her departure from facility. At no time should information be saved on the library hard drive of the computers. On a daily basis, all computers are checked and cleared of any information not authorized at the closing of the library. No electronic devices will be accepted through the lobby and detainees are not allowed to have personal thumb drives or any other external media in their possession or brought in or mailed in.

LAW LIBRARY ACCESS FOR SEGREGATION/SPECIAL MANAGEMENT UNIT

Law library access for detainees housed in SEG/SMU is provided as follows:

- SMU Detainces housed in Administrative Segregation have the same law library access as the general population, consistent with security. Detainces segregated for protection may be required to use the law library separately from other detainces, or where feasible, have legal material brought to them. The level of law library supervision provided will be based on an individual's behavior, attitude, custody level, separation needs or other security concerns.
- Disciplinary Segregation Detainees housed in disciplinary segregation will be afforded the same legal access as the general population, unless security concerns require limitations. Access will be provided upon request. Violent and/or uncooperative detainees will be temporarily denied access to the law library to maintain security, until such time as their behavior and attitude warrants resumed

access. In some circumstances, where feasible, legal material may be brought to individuals in disciplinary segregation.

ATTORNEY VISITATION

Legal assistants may meet with you during legal visitation hours provided that they produce a letter of authorization from the legal representative under whose supervision they are working. The letter must state that the named legal assistant is working on behalf of the supervising legal representative. Pre-approved interpreters may accompany legal representatives and legal assistants on visits.

Legal materials (limited to hard copy documents no electronic media) may be provided to you during a legal visit. Staff will inspect the material for contraband, but will not read the

Legal visits authorized hours are from 8am to 9 pm, seven days per week.

REQUESTS FOR INFORMATION FROM IMMIGRATION AND CUSTOMS ENFORCEMENT OR THE COURT

If you wish to contact Immigration and Customs Enforcement/ ERO Field Officer or court, you will need to submit a completed Detainee Request Form (kite) to request a service or information from the Immigration and Customs Enforcement. Each kite requires your name, "A" number, housing unit, the date and your signature. Print clearly on the Kite and submit one Kite for each request. Questions about Court or for Immigration and Customs Enforcement should be addressed to Immigration and Customs Enforcement, and/or Court, whichever is applicable, on the Kite. Place the kite in the mailbox labeled "ICE". ICE staff visit housing units on a rotating schedule. Refer to the bulletin board in your assigned housing unit for specific days and time of visits for your unit. ICE can be contacted via written request at any time. Responses to requests will be provided Monday through Friday between 7am and 3:30 pm.

Schedule of ICE dormitory visitation and corresponding assigned officer based on last 2 digits of your Alien Number

CALLA	W. Jane Jan. T. Jan. Acc. 550.
Seg/A3	Wednesday/Inursday Officer Elliot (84-99)
Medical/B-3	Wednesday/Thursday Officer Black (33-49)
1	Wednesday/Thursday Officer Garcia (50-66)
B-4	Wednesday/Thursday Officer Cordova (67-83)
B1/B2	Wednesday/Thursday Officer Minter (17-32)
A2/A4	Wednesday/Thursday Officer Hernandez (00-16)

Refer to housing unit bulletin board for most up to date list.

LEGAL COMMUNICATION

Mail service, attorney visitation and telephone calls are the primary means of access to legal representation and the courts. Interpretive services for essential communication to GEO, ICE and Courts will be provided upon request by submitting a Detaince Request Form (Kite).

Legal documents will be accepted seven days a week during the hours of 1pm and 5pm.

RETALIATION PROHIBITED

You have the right to present to the Court any legal issue regarding your immigration proceedings, basis for your detention, or the conditions of your confinement.

You will not be subjected to reprisals or penalties because of a decision to seek judicial relief on any matter, including the legality of your confinement; the legality of conditions or treatment while under detention or an issue relating to your immigration proceedings; or an allegation that the government is denying you rights protected by law.

NOTARY PUBLIC

A notary public is on-site for your assistance. If you need a document notarized, submit a Detainee Request Form (kite) to your housing unit officer. There is no charge for this service. Documents to be notarized are limited to commercial or household related matters only. The facility has several notary publics in the facility who are available to assist you.

ENVELOPES AND STAMPS FOR LEGAL DOCUMENTS

If you are indigent, you may request envelopes from the officer assigned to your housing unit. You may request stamps by submitting a Detainee Request Form (kite), along with the addressed, sealed envelopes to the Library/Mail Officer.

SECTION III

CORRESPONDENCE (MAIL), VISITATION, TELEPHONE ACCESS

Mail can be sent to you at this address:

Your Name Your A Number

Aurora Detention Center 3130 N. Oakland Street Aurora, Colorado 80010

Advise your correspondents to also address any special delivery. FedEx, UPS packets in this manner. If not, there is a possibility that the mail could be returned due to a lack of a sufficient address or detainee information.

SPECIAL CORRESPONDENCE

Special correspondence is defined as correspondence sent to or received from private attorneys and legal representatives, government attorneys, judges, courts, embassies and consulates, the President and Vice President of the U.S. members of the U.S. Congress, the U.S. Department of Justice (including the Immigration and Customs Enforcement and the Office of the Inspector General), the U.S. Public Health Service, administrators of grievance systems, and representatives of the news media. Correspondence will be treated as special only: if the sender-for incoming correspondence or the addressee - for outgoing correspondence - the <u>title</u> and office are <u>CLEARLY</u> identified on the envelope and the correspondence is labeled "Special". It is your responsibility to inform senders of special mail of this LABELING REQUIREMENT.

Postage stamps may be purchased through the commissary.

If you need writing implements, paper and/or envelopes, you may request these materials from the officer assigned to your housing unit.

INDIGENT DETAINEES

If you are indigent (\$15.00 or less consistently on your account for a period of seven (7) days or more), you will be permitted to mail the following:

- An unlimited amount of special correspondence or legal mail within reason.
 - Three (3) pieces for general correspondence upon request

general correspondence and other mail. You must submit a "kite" with the correspondence you Indigent postage in all cases is generally limited to letters of one ounce or less, but exceptions may be made for special correspondence and may be made in compelling circumstances for are sending.

INCOMING MAIL

NON- LEGAL MAIL

All incoming mail will be opened, inspected and/or read for contraband, if necessary, in your endanger the recipient or the public or might facilitate criminal activity, such as containing correspondence is withheld, you shall be informed in writing of the reason such action has presence by staff. Non-legal mail will be read when the facility personnel have reason to been necessary. Incoming mail will be distributed on the day it is delivered by the postal service. Packages will be inventoried and inspected within 48 hours of delivery. information related to an escape attempt or other illegal activity. If, for any reason, your believe that said mail might present a threat to the facility's secure or orderly operation,

LEGAL MAIL

your legal representatives or potential representatives, to clearly mark their mail as "Special Incoming legal mail and special correspondence will be opened and inspected for contraband confining authority, other government officials, and administrators of grievance systems and members of the Parole Authority. It is your responsibility to advise the senders, if they are in your presence by staff unless waived in writing; however, legal mail shall not be read or This is inclusive of letters from the courts, counsel, officials of the or legal" mail on the envelope. withheld from you.

CHANGE OF ADDRESS

It is your responsibility to notify the postal service of your change of address should you be transferred or released. In most instances, mail received after you leave, will be returned to

LIMITATIONS ON POSSESSION OF PUBLICATIONS

You are limited to the following number of items in your possession at any one time from the leisure library:

- Three (3) books hard/soft cover
- Two (2) magazines ф С С
- One Bible, Koran, or similar religious publications
 - Other items approved by the Warden or designee

items, with the exception of legal papers and personal correspondence, will be confiscated as It is your responsibility to have excess material placed into your property storage. Excess contraband and will be disposed of as the Warden deems appropriate. Legal papers and personal correspondence will be placed in your locker for safe storage.

to certain magazines that are available to you in the leisure library. Books must be requested in advance via a "Request to Receive a Package or Property" form. The title(s) of the book(s) must appear on the "Request" form. Books must come directly from the publisher or an Subscriptions to publications, magazines and catalogs are not allowed. The facility subscribes authorized bookstore / outlet.

OUTGOING MAIL

out the same day. If for any reason your outgoing mail is not sent, you will be informed and the affixed, and placed in the designated mailboxes. All mail picked up by 9:00 a.m. will be sent reason why it was not sent will be provided to you. There is no limit on the number of letters All outgoing mail must be placed into ENVELOPES, SEALED, with the proper postage you may send out.

All outgoing mail must have a return address with your name; your a number and the complete address of the facility clearly written on the envelope.

Outgoing general correspondence and other mail may be inspected or read if:

the addressee is another detainee; or

þ.

secure or orderly operation, endanger the recipient or the public or There is evidence the item might present a threat to the facility's facilitate criminal activity.

VISITATION

Visits are 60 minutes in length and done by unit. Visitors must have valid and verifiable identification - a government issued photo identification card. A responsible adult must accompany anyone under 18 years of age.

Visiting is as follows:

Legal/Religious visits - authorized hours are from 8am to 9pm, seven days per week. (Both shall provide proof of endorsement by the appropriate certifying body)

	Monday Lunes	Tuesday Martes	Wednesday Miércoles	Thursday Jueves	Friday Viernes	Saturday Sábado	Sunday Domingo
A3 & 4 Units	None	0700-1300	None	None	0700-1300	0700-1300	None
B1 Unit	0700-1300	None	None	0700-1300	None	None	0700-1300
B2, 3&4 Units	None	1500-2100	None	1500-2100	None	None	1500-2100
A1 & 2 Units	1500-1800 None	None	0081-0051	None	None	1800-2200	None
OHS	None	None	0060-0020	None	1330-1530	1330-1530	None

A detainee can only have one social visit per day, for example if a detainee has a visit in the early evening, he/she cannot have another visit, later in the evening on that same visiting day.

VISITING BETWEEN DETAINEES

Customs Enforcement will confer with the Warden and you will be advised of the decision in a and Customs Enforcement staff, requesting visitation and provide supporting documentation of your relationship with the person for which the visiting has been requested. Immigration and Immigration and Customs Enforcement staff, You must submit a "Kite" to the Immigration All visits between persons detained must have prior approval of both the Warden and the reasonable period of time.

VISITING RESTRICTIONS

- All social visits are Non-contact visits.
- If your visitors appear to be under the influence of alcohol/drugs, the Shift Supervisor will be notified and the visit will be terminated.
- A maximum of 2 visitors at a time (small children not included).
 - All visitors are subject to search.
- Visitors are not allowed to pass or attempt to pass any item to you.
 - Children must be under control at all times
- Visitors are not allowed to chew gum in the facility.
- Visitors are not allowed to carry any items into the visiting area.
- If contraband is found on your visitors, such as drugs, alcohol, weapons, they will be subject to prosecution under CRS-18-8-201 and 18-8-204.
 - The Chief of Security must approve additional visitation time.

VISITING RULES

It is your responsibility to advise your visitors to follow the visiting rules and all posted laws, rules, and regulations when they come to visit you. It is also your responsibility to follow all of the visiting rules and regulations.

Female Visitors Age 12 and Older

- Shorts shall cover customarily covered areas of the anatomy, including the buttocks comply. Short-shorts, jogging shorts, cut-offs, and other obviously inappropriate and crotch area, when standing and/or sitting. Shorts no higher than mid-thigh short garments are prohibited.
 - Skirts and dresses shall extend to mid-thigh, seated

- Slits in skirts and dresses shall rise no higher then mid-thigh, seated
 - Sheer (see-through) clothing is prohibited.
- The top of clothing shall be no lower than the underarm in front and back, bare midriffs and strapless tops, tube, and swimsuits are prohibited.
- Shoes shall be worn at all times.
- Gang "colors" and other gang displays are prohibited.

le Visitors Age 12 and Older

- Shorts shall cover customarily covered areas of the anatomy, including the buttocks, comply. Short-shorts, jogging shorts, cut-offs, and other obviously inappropriate and crotch area when standing and/or sitting, Shorts no higher than mid-thigh short garments are prohibited.
 - Shirts shall be worn at all times. Muscle shirts, bare midriff shirts and sleeveless shirts are prohibited.
- Shoes shall be worn at all times.
- Gang "colors: and other gang displays are prohibited.

CONTACT VISITS

infants and children, where limited physical contact is allowed. Limited contact may include a A contact visit is defined as a 30 minute visit between a detainee and any visitor, including All requests for contact visits are to be submitted in writing via detainee request form. brief embrace at the beginning, and upon completion of the visit.

CONDUCT DURING VISITATION

- All conduct by both detainees and visitors shall be quiet and orderly.
- Detainees and visitors shall remain in an upright position. ر د ب
- Detainees will be seated across from all adult visitors without physically touching their adult visitors, but may hold their own children.

The following conduct shall be prohibited:

- Exposure of genitals or breasts;
- Lying on the floor or ground, upon seats or tables or under tables or attempting to conceal the visitor and/or detainee from staff;
- Touching any genital area, breast or buttocks, under or over clothing;
- Use of profanity, making loud noises, disturbing other detainees or visitors, creating a mess or otherwise being a nuisance in the visitation area;

unclothed sexual body parts of a detainee or a visitor will result in an immediate suspension of Abuse of these privileges will not be tolerated and immediate suspension of a visit may occur disrupt the visiting environment. The exposing of, or physical contact with, the clothed or for prolonged hugging and kissing, French kissing, or excessive displays of affection that the visit and may result in denial of future visitation privileges.

behavior, engaging in activities that disrupt or disturb others, creating loud noises, creating unsanitary conditions and which disrupts the orderly operation of the visiting room or offends Any disorderly conduct, which includes using hostile, vulgar, or profane language, unruly others, is not permitted.

Any attempt to circumvent the regulations outlined in policy statement may result in temporary or permanent suspension of visiting privileges or other administrative or legal remedy by the Warden

Upon completion of the visit, the detainee shall clean the area adequately

Detainees will not be allowed to exchange any property with any of the visitors. Exchange of property may result in suspension or termination of family visits.

Detainees are not permitted to take any personal items into the contact visitation room other than issued identification card. Legal paperwork is permitted for contact visitation with legal representatives.

Detainees needing to utilize the restroom during a visit will be escorted to the adjacent restroom with a pat-search being conducted prior to and after the movement.

DETAINEE TELEPHONE ACCESS

Calls to "800," "888," "900," and any other toll free numbers are not authorized and will not be made. The authorized "877" prefix is the one for contacting the Consulate office and the "800" prefix DJS's OIG hotline #1-800-323-8603, or a 1-800 number that is verified by staff, in advance of the call as legal, is acceptable.

Any 1-800 number that is legal and verified as legal is acceptable.

No three way calling is allowed. Phone calls are subject to monitoring.

Telephone access hours are from 5am until 11 pm on Sunday through Thursday and 12 pm on Friday and Saturday. In the event of an emergency or after hours needs a detainee request needs to be submitted to the Chief of Security for approval. Your access to telephones will be suspended at count times, in the event of an emergency, and when it is determined by staff to be necessary to protect the good running order and security of the facility. Telephone use time is limited to up to 20 minutes per call in order to provide telephone availability for all residents. During times of high use by housing unit residents, this rule will be enforced.

When you receive your pin number for the phone you must set up your voice recognition. To do that you must do the following: State your name and GEO Aurora ICE clearly – Example: John Doe at GEO you will be prompted several times to repeat this statement. You must use the same words and tone when setting up your voice and at any time you desire to make a call.

HEARING OR SPEECH IMPAIRED TELEPHONE

A portable phone for the hearing or speech impaired that complies with the American Disabilities Act is available for use if needed. Complete a Detainee Request Form (kite) if you require this service and send it to the Program Coordinator.

PRE-PAID PHONE TIME

Phones are available in all living areas and Intake. These phones can be used for personal calls. You must not interfere with another detainee's telephone privilege.

Pre-paid phone time may be ordered via 411# on the housing unit phones.

The phone time may be used to make national and international long distance calls in addition to being used for all local calls.

The cost of the phone time will be deducted from your personal account. Local and international phone call rates are posted in your living area.

Phone time cannot be turned in for money. When you leave the facility you will take your "Talton" pin card with you.

Detainees are personally responsible for maintaining their pin card in their locker.

Phone time may be purchased based on funds available – minimum purchase is \$5.00. Upon arrival, you will be given the opportunity to request phone time. Phone time (based on your funds) is applied to your account on the first business day following your arrival. Phone time is not posted on weekends or holidays. You may request same day phone time up to 3:45 p.m. Monday thru Friday excluding holidays. Any time requested after 3:45 p.m. on Friday will be applied on the following business day.

You cannot use personal phone cards - only facility purchased time may be used.

Your family and friends can leave you a voicemail by dialing (888) 516-0115 this will cost the person leaving the message \$1.00 for each voicemail.

Your family and friends can deposit funds on your phone account from the internet visit: www.Talton.net

USING THE HOUSING UNIT PHONES

Collect Calls: You need to dial (1) for English or (2) for Spanish directions followed by a (0), then the area code and phone number of the person you wish to contact. Once the number has been dialed, a voice prompt will ask for your name.

Pre-Paid Card: For instructions in English press (1) for instructions in Spanish press (2). After pushing (1) or (2) follow the voice prompted instructions.

INCOMING CALLS

Staff will take and deliver telephone messages to you as promptly as possible. If an emergency call is received for you, the caller's name will be taken and delivered to you as soon as possible. You will be permitted to return the emergency call as soon as reasonably possible within the constraints of security and safety. If you are indigent, staff will assist you in returning the call.

It is your responsibility to handle your telephone calls in a responsible manner. If it is determined that you are abusing this privilege, for example, having someone call in false legal calls in order to circumvent regulations and this is discovered by staff, disciplinary action may be taken against you.

DIRECT OR FREE CALLS

The telephone service generally available to detainees at this facility is limited to pre-paid time and collects calls. The facility shall provide detainees with the ability to make direct calls in the following circumstances:

- To consular officials
- Emergency calls and other types of calls where a detainee can demonstrate a compelling need to make a direct call, such as a family emergency.
 - To the local immigration courts and the Board of Immigration Appeals
- To Federal and State courts where the detainee is or may become involved in a legal
- To a government office, to obtain documents relevant to his/her immigration case.
 - Office of the Inspector General of the U.S. Dept. of Homeland Security at 1-800-
- Legal representatives to obtain legal representation or for consultation when subjected to expedited removal.
 - UN High Commissioner for Refugees (UNHCR) 1-888-272-1913

Detainees shall be provided with the ability to make direct or free calls to the following:

- Consulado de Mexico Denver
- Pro Bono Denver
- Metro Volunteer Lawyers
- Catholic Immigration Services
 - Justice Information Center
- A Welcome Place (Utah only)
- Wyoming Legal Services (Wyoming only)

Providing access to a telephone that permits calls at no expense to you

UNUSED PHONE TIME

unused monies to the address you provide. The only exception to this would be if a credit card was used to purchase phone time, then the refund of phone time would be credited directly to Upon departing the facility, you may have unused monies that you have placed on the detainee phone system. TALTON Communications is the company that Immigration and Customs Enforcement (ICE) has contracted with to provide service for the detainee population here. phone monies be less than \$50.00 dollars, you will then be provided a prepaid phone card in the amount owed. This prepaid phone card will be issued by TALTON in the form of a pin# balance of your phone monies be \$50.00 dollars or more, then TALTON will send you your This company is separate and distinct from The GEO Group, and as such we have no control over their policies in this matter. TALTON will not consider a refund of phone monies until you have departed the facility (release or removal). Upon departure you must call TALTON at (866) 348-6231 and provide them with all requested information. Should the balance of your that you can use wherever you are located (provided you are not incarcerated). Should the the credit card used. Any further inquiries can be directed to TALTON through the phone system by dialing 211#.

DETAINEE SERVICES SECTION IV

take care of basic health, religious and social needs. You will be expected to cooperate with the The Aurora Detention Center provides various services to the detainees that are designed to staff during such times that you take advantage of these services.

RECREATION

Fimes are subject to change based on facility needs. You will be afforded the opportunity for You will be afforded at least four (4) hours a day, seven (7) days a week when housed in General Population. Recreation shall begin after morning count at 07:00 until 21:30 pm. recreation in the indoor/outdoor recreation areas, which is adjacent to each housing unit.

A schedule of recreation activities shall be arranged to coincide with normal center operations. Recreational activities in the housing units are limited to television viewing, card and board occasionally, an event such as bingo for the housing unit residents by the recreation staff. games, reading, puzzles, self-directed activities such as drawing, limited exercise and

Rules governing recreation are as follows:

- Your housing unit will announce recreation. Hours regarding recreation are posted on the housing unit bulletin board.
- Fennis shoes, shorts, and t-shirt must be worn.
- You will conduct yourself in an orderly fashion during recreation.
 - No food or drink is permitted in the recreational areas

Detainees in Special Management Unit (SMU) for administrative or disciplinary reasons shall be offered at least two (2) hours of recreation or exercise opportunities per day, seven days a

TELEVISION

and the batteries can be purchased through commissary. Indigent detainees will be handled on viewing. If you request a replacement radio, headphone or batteries you will be charged for it Detainees shall be provided a FM wireless radio and headset, and batteries for television a case-by-case basis.

If you requested batteries from the business office you will have to exchange the old batteries you must turn in the same amount of batteries that you are receiving. The maximum amount for the new batteries with the housing unit officer. Exchanges are on a one for one basis and that can be exchanged at any time is two (2).

breakfast must meet the satisfactory level of the officer to have the televisions remain on. Television viewing hours will begin while breakfast is served. However clean up after

Abusive use will result in the housing unit officer taking action to discontinue TV viewing for Detainees will be allowed to select the television programs they wish to watch. The housing unit officer will supervise this activity to insure that it is fairly operated and not abused a period of time.

time if the detainees in the housing unit are uncooperative with regular operations which must Televisions may be turned off by any staff member in conjunction with the Lieutenant at any

occur in the housing unit, i.e., sanitation and maintenance work and/or if housing unit residents become disorderly, violate security, etc., or if staff determine the need to protect the orderly and safe operation of the housing unit/facility. The television will be turned on once cooperation and order is restored.

The televisions will be turned off at 11:00 p.m. Sunday through Thursday and 12:00 a.m. Friday and Saturday. Headphones are provided to you to hear the televisions and must be turned into your housing officer upon your release.

All activities in the housing unit will cease when the televisions are turned off for the night. Detainees will clear the dayrooms and will go to bed. Detainees will not be permitted to sit in the dayroom or to walk around in the dayrooms once the televisions are turned off, thus allowing other residents the opportunity to sleep without distractions.

Detainees are not authorized television controls in any manner.

Detainees in Administrative Segregation, not Disciplinary Segregation, will be offered television. If a detainee is housed in Medical, a medical clearance must be given from the medical department first. However, a detainee must have good cell sanitation to be eligible for television viewing in the medical dayroom. There are no food and drinks allowed in the medical dayroom while watching television.

SMOKING

This is a non-smoking facility. Tobacco products of any kind are prohibited within the facility.

EDUCATION

If you are interested in sobriety programs or educational programs while you are here, contact the Program Coordinator to discuss your interest and see if you are eligible.

FOOD SERVICE

The center provides three (3) nutritionally balanced meals per day. All meals are prepared in a clean and sanitary manner, and the kitchen is operated under guidelines set down by the Health Department and is periodically inspected by local health department officials. The use of food, i.e. withholding of, or variation from the standard menu, as a disciplinary measure or reward is prohibited. Special diets as required for medical reasons or adherence to religious dietary law are provided by the Food Service Department. You will be issued an appropriate eating utensil(s) and napkin. Meal times and menus are posted on the bulletin board in your housing

- All menus are screened and approved by a registered dietitian to ensure a balanced diet that provides the proper nutritional value for all meals served.
 - If you require a special diet for medical reasons, it will be implemented upon the written notification from the medical department to the kitchen supervisor.
 - You are not permitted to barter with food handlers for special or additional food
- Conduct during meals will be orderly and courteous at all times. There will be no loud talking or disruptive behavior. Stand back from the food carts to allow food to be served to all detainees without interference. Interference will not be tolerated at any time.

- You will not store open containers of food in your housing unit. Open food
 containers are not allowed due to safety and sanitary reasons. Food ordered from
 the Commissary in closed containers may be stored. Food served during meal
 service will not be stored in abundance in your living/bed area due to sanitation and
 health hazards.
- Refusal or bartering of a special diet (religious/medical) will result in a review of the diet request and possible discontinuation of diet.
- When receiving your meals you will be required to have on a minimum of shorts, tshirts, shower shoes.
- Detainees that are assigned to the food service department shall have a neat and clean appearance
- Upon leaving the kitchen after you have completed your shift, you will be searched before going into your housing unit.

 All detainees working in food service areas shall use hair nets. Persons with hair
- that cannot be adequately covered up with a hair nets shall be prohibited from food services operations. Beard guards are also available.

 Detainees will receive a medical exam (from the medical denartment) before
 - Detainees will receive a medical exam (from the medical department) before entering the kitchen to work.

Meal times are as follows:

Breakfast at approx. 05:30 am Lunch at approx. 10:30 am Dinner at approx. 5:00 pm

RELIGIOUS DIETS

GEO facilities provide a pork-free menu which accommodates most religious dietary requirements. A non-flesh (vegetarian) diet may be provided for those who are uncomfortable with or prohibited from eating from the main menu.

Procedures are in place to reasonably accommodate detainees who have special religious dietary requirements. When a detainee's religion requires special food services, either daily or during particular periods of religious fasting, praying or holiday celebration; reasonable accommodations will be made to provide meals not religiously prohibited. If you require a religious diet, you must submit an "Authorization for Common Fare Participation" to the Programs Coordinator requesting the diet. No food items can be substituted from the "Common Fare" menu if you are enrolled.

The Chaplain or his designee may remove a detainee from the diet at the request of the detainee or at the request of the medical department due to medical reasons consistent with maintaining safety or security operational procedures. Detainees who are removed by their personal request from the diet may NOT immediately re-enter the diet process.

The Chaplain or his designee may recommend withdrawal approval for a detainee's religious diet if the detainee is documented as being in violation of the terms of the religious diet program. If a detainee misses three consecutive common-fare meals, the Chaplain or his designee shall recommend in writing that the detainee be removed from the program.

The facility maintains qualified, licensed medical professionals to attend to health problems.

REQUESTS

If you have a medical problem, you must fill out a **Medical Request Form**, which may be obtained from a Detention Officer. The request will be screened and scheduled for assessment by the appropriate health professional. Medical requests shall be placed by the detainee in the boxes labeled "<u>Medical Requests/Grievances</u>" that are in the respective housing unit and Segregation/SMU.

When there is an urgent medical request and a delay in medical care will result in a serious medical condition, you should alert a detention officer or speak with a nurse during medication

Filling out a kite instead of a Medical Request Form may cause a delay in being assessed for a particular medical problem. The kite must be placed in the "Medical request/grievance box"

SICK CALL

Sick call is conducted 7 days per week by a licensed nurse. If a particular medical problem falls outside of the scope of practice for either a registered nurse or a licensed practical nurse, you will be referred to a medical doctor, physician's assistant or nurse practitioner according to the schedule of the practitioners.

Should you require emergency medical attention, you will be taken to the nearest facility providing emergency services.

STAFF ASSISTANCE

If you cannot read or write, a facility staff member may assist you or you may have another detainee help you complete the medical request. Another detainee may not submit a request on your behalf.

HEALTH ASSESSMENT

You will receive a comprehensive health assessment including a physical exam, dental and mental health screening within the first 14 days of detention and annually. Routine dental treatment may be provided to detainees who have remained in the facility for six months consecutively. TB screening is performed for the safety and well-being of detainees as well as GEO staff. You will receive a screening for Tuberculosis upon arrival regardless of your records or status at a previous facility.

MEDICAL REQUESTS FOR MEDICAL OR DENTAL ATTENTION

All requests for routine medical or dental attention must be submitted in writing to the medical department on a medical request form. You must be fully dressed and show your Identification when you talk to the nurse, during housing unit medication pass, or are going to the medical department for treatment.

PERSONAL MEDICATION

All medications that are brought into the facility are to be surrendered to Medical staff for disposition for the time you are here. Please ensure that you retrieve your personal medication before leaving.

EYE CARE

Family members may bring in prescription eyeglasses with approval of the Health Services Administrator if this is deemed necessary. Optometry referrals will be made if your visual acuity (after an eye exam) is worse than 20/50 in the best eye. Prescription eyeglasses are not available for detainees who have been detained less than one year. After one year, an eye exam will be provided and prescription glasses will be made available if justified by an eye exam. Generic reading glasses may be offered in the case of eye strain after consultation with the Health Services Administrator.

FACILITY PRESCRIBED MEDICATION

Medications will be administered as frequently as ordered by a health professional. When the nurses come into the housing unit to dispense medications, it is your responsibility to remain at alreast 3 feet from the medical carr until the nurse calls you to receive your medication. The nurse must have an order to give medication and only in the doses and times the doctor has ordered. Medication rounds are performed twice a day 7 days per week, In order to receive prescription medications you must be present yourself during Medication Rounds with your identification and be fully dressed. You are responsible for ensuring that you receive your medication as it is not the responsibility of the nursing staff to locate you to take your medication. Touching or crowding the cart, taking medication or other items from the cart, being loud, aggressive, or hindering the nurse in any way is prohibited. You are responsible to report to the nurse to receive your medication. Your name will not be called. The nurse will not come back after leaving your housing unit. You are responsible to bready to receive your medications. No Aspirin, Tylenol or Motrin will be administered at Medication Rounds unless prescribed by a doctor or dentist. However, these items are available for purchase from the

You will be asked to review and sign a contract of responsibility for "Keep on Person" medication (as prescribed) and medical devices and/or equipment. You will be asked to sign this document which also includes a waiver. You will be expected to abide by written instructions and rules associated with "Keep on Person" articles by securing them inside your personal bin under your bed. At no point in time are these articles to be lent to or borrowed out to another detainee.

REFUSING MEDICAL TREATMENT

You may refuse routine medical treatment, but will be administered treatment in the event of a life-threatening emergency. Do not submit a Medical Request unless you have a need for medical care. Should you refuse medical treatment after submitting a Medical Request Form, you will sign a refusal form with a medical professional witnessing your refusal. Should you refuse to be seen by a physician, you will report to the medical department to sign a refusal form with medical professional witnessing your refusal. You cannot refuse the 14-day Health Assessment.

If you do not report to the medication cart, you will be reported as a no show. You will be taken to the doctor's appointment to sign a refusal in the doctor's presence.

The medical department will not approve the following:

- Non-medical diets (i.e. vegetarian diets)
- Extra bedding or mattresses (unless medically related)
 - Extra or personal clothing
- Protein or herbal supplements
- Any medication not ordered by the Medical Director

COMMUNICABLE DISEASE GUIDELINES

In order to prevent the spread of communicable diseases, you need to follow basic sanitation rules and guidelines. Do not share eating utensils with other detainees. Do not share razors or towels. Throw used issues in the trash. Do not spit in the sink, trashcans or on the floor.

Cover all coughs and sneezes with a tissue. Wash your hands with soap and warm water each time after you use the bathroom. Avoid contact with other detainee's body fluids. Do not use needles or allow another detainee to tattoo or pierce you with anything, at any time. Do not share combs, toothbrushes, or food with other detainees. Wear your shower shoes while taking a shower

MEDICAL DIETS

Medical diets are prescribed only by Medical Staff and only addressed specific needs such as diabetes, low salt, low fat, and certain medically proven allergies. Medical will not order a specific food for you or restrict something that you don't like. Medical staff will not prescribe a vegetarian diet or any diet required by religious beliefs. Those requests should be addressed to the Programs Coordinator.

BARBERING SERVICES

The hours for the barbershop vary, depending on staff and barber availability. Only approved detainees provide haircuts. A schedule will be posted in the housing units to inform you when your unit is scheduled for haircuts. The detainee cutting hair is not allowed to charge any fee, take commissary, phone cards or anything else of value in exchange for a haircut. The detainees cutting hair are only allowed to give regular haircuts; no fades or specialized haircuts.

Hair cutting restrictions are:

The removal or treatment of blackheads, carbuncles, infected hairs, or any sores or lesions is prohibited.

The pulling of hair from ears, eyebrows, and moustaches is prohibited.

No barbers will serve any detainee when the skin of the detainee's face, neck, or scalp is inflamed, scaling, contains pus, or is erupted, unless service of such detainee is performed in accordance with the specific authorization of the Health Services Administrator. No person will be served when infested with head lice. Detainees who have confirmed follicultits through medical are allowed to use the trimmers.

LAUNDRY SERVICE

Mondays and Thursdays:

- Uniform exchange Units A, D, Segregation and Medical
 - Undergarment exchange* Unit B

Tuesdays and Fridays:

- Uniform exchange Unit B
- Undergarment exchange* Units A, D, Segregation and Medical

Wednesdays:

Linen exchange – Units A, D, Segregation and Medical

Thursdays:

Linen exchange - Unit B

Blanket exchange

Blankets will be exchanged once per month on a one-for-one basis

All mesh bags need to be placed near the officer station no later than 0600. Medical and Segregation officers will insure the respective bags are ready for pick-up.

All exchanges will be on a one-for-one basis

All items will be washed, dried and the identical number of items returned to the housing unit.

You are not permitted to wash clothing, bedding, linens, tennis shoes or other items in the living units and you are not permitted to hang any laundry on the walls, beds, or other areas. You will be held accountable for clothing and bedding supplies issued to you. You are not authorized to alter, in any manner, the clothing you receive.

RELIGIOUS SERVICES AND SPIRITUAL COUNSELING

You have the right to freedom of religious affiliation and you will have the opportunity to practice your religious faith in a manner that is deemed essential by your faith, consistent with the safety, security and the orderly operation of the facility. Attendance at all religious activities is voluntary and open to all. You will be expected to recognize and respect the rights of others. Opportunities for religious activities are open to the entire population, without regard to race, color, nationality, or creed.

Qualified volunteers offer Catholic and Protestant Services along with non-denominational services on a weekly basis. These volunteers may also provide counseling services, provided there are available volunteers. Services may be provided to detainees who are in the SMU/Segregation Unit on an individual basis.

Worship services are conducted on a regular basis. Bibles, religious items and literature are available from the Programs Coordinator or designee upon request. If you have a question concerning your religious activities, contact the Programs Coordinator.

The observance of religious holy days is respected. The Programs Coordinator will work with you to accommodate a proper observance of important religious holy days. You must submit a written request to the Program Coordinator if you wish to participate in a religious holy day observance.

You may be allowed to wear or use personal religious items during religious services, ceremonies, or meetings in the multipurpose room, unless the Warden or Programs Coordinator determines that the wearing or use of such items would threaten facility security, safety or good order. Items of religious wearing includes, but is not limited to:

- Prayer shawls and robes:
- Kurda or ribbon shirts;
- Medals and pendants;
- Beads and various types of head wear

DETAINEE LIBRARY SERVICES

General library reading materials will be made available Monday through Friday, 7:30am–10:00 pm with the exception of court times and religious services.

Leisure library books will be available in each housing unit in the multipurpose room.

You must submit a request (kite) to go to the library. You may have in your possession a maximum of three (3) books (hard or soft cover) and (2) magazine (other than those issued by Religious/Educational Programs). When you are leaving the facility, you must return any books and magazines belonging to the library to the housing unit officer.

COMMISSARY

You may order commissary throughout the week utilizing the kiosk. You may add to or subtract from your order during the week however the kiosk will be locked on Thursdays at 12:00 noon to finalize your purchase. Orders will be delivered weekly, usually on Fridays. Maximum purchase will be \$100.00 not including clothing and headphones. Prices are subject to change without notice as commissary costs increase. If you don't have enough money for the entire order you placed, the commissary department will fill your order based on how much money you have in your account to cover your order. Commissary items MUST fit in your locker. You must present your identification and be fully dressed to receive your order.

If you accept your order and leave the delivery area without checking it, items shorted will not be filled. It is your responsibility to check your order prior to leaving the delivery area.

If you are working, in visitation, court, or medical and the housing unit officer is able to verify that, your order will be left with the Lieutenant in a secure area and upon your return your order will be given to you and a signed receipt will be given to the officer.

MARRIAGE REQUESTS

The following guidelines will be used if you request permission to marry while in the custody of the Immigration and Customs Enforcement: The Immigration and Customs Enforcement will either grant or deny your permission to marry. The Warden will be advised of your request and of the decision of the Immigration and Customs Enforcement.

If permission is granted, you must make all arrangements for the marriage, which includes taking a blood test (if applicable), obtaining a marriage license, paying for all costs associated with the marriage and retaining an official to perform the marriage. GEO staff or the Immigration and Customs Enforcement will not participate in making marriage arrangements. Staff will accommodate arrangements made consistent with the safe, secure and orderly operation of the facility. The Warden reserves the right of final approval concerning the day, time, place and manner of all arrangements. Only those persons necessary to perform the ceremony will be permitted to attend. Guests will not ordinarily be permitted to attend. Minors under the age of 17 and under will not be

Only those persons necessary to perform the ceremony will be permitted to attend. Guests will not ordinarily be permitted to attend. Minors under the age of 17 and under will not be permitted to attend unless directly related – i.e., your immediate family. A detainee will not be allowed to leave the facility for the purpose of making marriage arrangements. The detainee or person(s) acting on his/her behalf shall bear all expenses relating to the marriage. Marriage ceremonies will be private, with no media publicity.

SECTION V SANITATION

The center will maintain the highest sanitation standards at all times in all locations without exception. There will be an organized, supervised and continuous program of daily cleaning by all detainees to maintain those standards.

PERSONAL HYGIENE

You are required to keep your body clean and free from offensive odors, lice or other parasites, and you are required to be dressed in a complete uniform during normal working hours when in the dayroom area or outside the housing unit, i.e., shirt, pants, shoes.

Personal hygiene items will be exchanged every other Monday. In order to receive a new bottle of lotion and/or shampoo you must exchange your empty bottles. Supplementary items are available for purchase from the commissary.

If you do not have money, you will be issued necessary items for the purpose of personal hygiene, but only the needed items in minimum quantities necessary will be provided.

You will have the opportunity to take at least one (1) shower daily. You are highly encouraged to shower and brush your teeth daily.

If you think you may be infested with "crabs" or other parasites, notify a medical staff person who will take immediate steps for delousing.

Disposable razors will be issued on a daily basis normally around 7:30 am, and only on day shift. If a detainee requests to shave, he or she will sign up on the razor issue form. Detainees will have one hour to use the razor and return it to the officer. Detainees reporting to work in the kitchen on the morning shift are also afforded the opportunity to shave before reporting to work.

If you will be attending a court hearing, you will be afforded the opportunity to shave before appearing.

Fingernail clippers are available for purchase through the commissary.

Flush the toilets after each use. <u>Urinate and defecate in the toilets</u>, not the floors or wall. Toilet paper may be obtained from detention staff.

You must wear shoes or shower shoes except when in your bunk. If you have peeling skin or cracks on your feet, you should notify Medical.

LIVING AREA/BED ASSIGNMENT

You are required to keep your personal living area clean and sanitary. This includes your bunk and immediate floor area around and under your bunk, locker, and any personal items.

Cleaning supplies will be provided, usually at specific times, as needed by the detention officer.

Housing units and all common areas must be kept clean and should be ready for inspection at any time.

You are required to keep all books, hygiene items and personal items in the storage unit provided.

If you have excessive personal items in your bed area including under your mattress, you will be afforded, during shakedowns, the opportunity to place these items in your personal property or to dispose of the items. The Officers assigned to the housing unit along with the Shift Supervisor will decice what items are excessive. If personal items are confiscated a receipt will be issued to you.

You are required to make your bunk in a neat and orderly manner by 0730. This means that the bottom and sides will be tucked under the mattress. The sides and ends will not hang down over the edge of the bed.

You may sleep on your bunk after it is made in the mornings, not under the covers/sheets. You may request a second blanket and sleep under the second blanket on the top of your made bed, not under the sheets until after the afternoon count has been completed. When you get up from your nap, you need to neatly fold your blanket and place it on your bed. Your bed is to be made when you are not occupying it.

Your towel needs to be neatly folded and hung on the hook and you may neatly hang your laundry bag over the hook as well.

You are authorized one mattress and one pillow. Excess pillows and mattresses will be removed from your bed.

Blankets, sheets or towels are not to be used as rugs, drapes, pillows, or tenting for purposes of concealment at any time.

Pictures, articles of any kind, or any other items may not be placed on the walls or other fixtures of this facility. This includes graffiti and other drawings or markings on any surface area, for example, the walls, your bed and bed area, bulletin boards, televisions, doors etc.

You will be assigned a bed and a storage unit for the storage of your personal property. <u>Do not move to another bed unless staff has authorized you to move</u>. You should also use your storage unit to store all of your personal property, including your commissary. Do not allow other detainees to have access to your personal property. If you do, you increase the probability that your personal items may be stolen. It is your responsibility to take care of your personal items.

HOUSING UNIT SANITATION

Each and every detainee must participate in the facility's sanitation program. A list of detainees is developed each day by staff and is posted daily for viewing. During a general cleanup all detainees must participate. The assigned Housing Unit Officer will be responsible for assuring this general cleanup is done on a regular basis.

DAY SPACE

Day rooms are open spaces in the housing units that are utilized for watching television, playing board games, dominos or cards, as well as for socializing among detainees. Tables with chairs are provided for your use in the dayroom.

All detainees in a housing unit are required to keep clean and sanitary all commonly accessible areas of the housing unit, including walls, floors, windows, window ledges, showers, sinks, toilets, tables, and chairs.

Detainees will take turns cleaning the area. If a detainee feels that everyone is not doing their fair share, the detainee should inform the housing unit officer of the problem. Action will be taken to resolve this problem.

The day room area will be kept clean at all times. Should an officer notice that the area is not clean, the officer will make available necessary cleaning supplies. If the detainees in the housing unit do not clean the area after being instructed to do so, the televisions will be turned off, in conjunction with the Lieutenants permission and the detainees will not be permitted to participate in any activities/programs until the housing unit is cleaned. Continued refusal to clean the area will result in further disciplinary action.

Walls will be kept free of newspapers, clothing, cups, bowls, and other objects.

Bulletin boards contain information beneficial to you and are not to be defaced in any manner. Posted material is to remain on the boards until staff removes the item(s).

SECTION VI GRIEVANCE PROCEDURES

A Grievance is a complaint about the substance or application of any written policy, regulation or rule of Aurora Detention Center or the lack of application of a policy, regulation or rule, or a complaint about any behavior or action directed toward any detainee by staff or another detainee, or a violation of civil rights. You have a responsibility to use the program in good faith and in an honest and straightforward manner.

FILING A GRIEVANCE

If you have a grievance, you should first try to <u>informally resolve</u> it by bringing it to the attention of a detention officer, shift supervisor or staff member in charge of the area with which you have a problem. Each grievance filed must contain only one subject, or a group of closely related issues, under one subject. If your grievance contains more than one subject, contains vulgar language, or is submitted as a group grievance, the Grievance Coordinator will

reject it without review. Grievances that are medically related must be placed into the mailbox labeled "Medical Requests/Grievances" and all other grievances must be placed into the mailbox labeled "Grievances".

You may obtain a Grievance form from your housing unit officer. You must fill out the form, sign and date it, and explain as best you can what the problem or complaint is and what relief is sought. You may obtain assistance of facility staff or another detainee in preparing your grievance. Another detainee may assist you with your grievance if you are illiterate or unable to communicate in English without charge or obligation of any kind. Another detainee cannot submit a grievance for you or any other detainee.

Grievances that are of an EMERGENCY nature will be responded to on an immediate basis in an effort to prevent problems that may arise due to delay. You must directly submit your grievance to a staff member for it to be treated as an emergency. The staff member will immediately contact the Shift Supervisor. If the Shift Supervisor concurs the grievance represents an emergency, he/she will submit a report to the Warden describing the problem and its resolution. Emergency grievances not resolved at the Shift Supervisor's level will be sent to the Grievance Coordinator for resolution during normal business hours.

If the emergency is medical in nature, the grievance will be submitted to the Health Services Administrator. This grievance will be reviewed within twenty-four hours of receipt. If a Shiff Supervisor received the complaint during the absence of the Health Services Administrator, he/she will be contacted and advised of the complaint. The Health Services Administrator will advise the Shiff Supervisor and the medical staff on the procedures to resolve the complaint.

If the Warden determines that your grievance is not an emergency, you will be contacted and advised of the non-emergency determination of the complaint and the complaint will be rejected as an emergency.

Detainees shall place completed grievances in the locked "Grievance Drop Box" located in each housing unit. The grievance may be placed in an envelope prior to being placed in the locked Grievance Box.

Each day (excluding weekends and holidays) all grievances will be collected from the grievance drop boxes.

If your written grievance is accepted, it will be forwarded to a department head or management level employee by the Grievance Coordinator to provide review and resolution of your grievance. For example, the Food Service Manager would be assigned to provide review of a grievance in the food service area. This information will be forwarded to the Warden for final review and approval. A written response to your grievance will be given to you within 5 working days excluding weekends and holidays. If you are illiterate or non-English speaking attempts will be made to translate the findings into your language.

The detainee may appeal the Department Head's decision to the Grievance Appeal Board (GAB) designee within five working days. The GAB may call witnesses, inspect evidence or otherwise gather facts essential to an impartial decision. The Board will offer the detainee the opportunity, if determined by the Board that additional information or clarification is required, to appear before the Committee to present his/her case, answer questions and respond to conflicting evidence or testimony. Within five days of reaching a decision, the GAB will provide the detainee with its response to the grievance, in writing. The written response will state the decision and the reason for it.

A final appeal may be filed to the Warden. The form will then be forwarded to the Warden. The Warden will respond to the appeal within five (5) working days for final resolution of the orievance.

Any detainee dissatisfied with facility response may file a grievance appeal and communicate directly with ICE/ERO.

No harassment, punishment or disciplinary action will result simply because you are seeking resolution of a complaint.

Detainees may file a complaint about ICE officer misconduct directly with the U.S. Department of Justice by calling 1-800-323-8603 or by writing to:

DHS OIG Hotline 245 Murray Drive SW Mail stop 2600

Building 410

Washington, DC 20528

SECTION VII SECURITY AND SAFETY - DETAINEES AND STAFF

PERSONAL SAFETY

You will be protected from personal abuse, corporal punishment, unnecessary or excessive use of force, and the right of freedom from discrimination based on sexual orientation or political beliefs, personal injury, disease, and damage to your property and harassment to the fullest extent possible.

You are responsible for your own behavior at all times and are to be courteous and respectful toward the facility staff. You are expected to treat staff, community volunteers and other detainees with respect at all times. Harassing, rude or demanding behavior and profanity toward staff or others will not be tolerated. You shall address all staff members by either their rank, title, or as "Mister", "Miss", or "Officer."

If you have a problem such as conflicts with other detainees, personal problems (family) or questions about this facility operation, ask your housing unit officer for assistance. If you feel that you should be moved from your current housing unit for your safety, notify an officer immediately.

Identification wristbands must be worn on your wrist anytime you are outside of your assigned housing unit. The wristband is also required for receiving medication and mail. Disregarding these requirements may lead to disciplinary action. You may be charged a replacement cost.

Fire Evacuation/Fire Drills

In case of a fire, follow the orders of the housing officer.

There is firefighting and emergency equipment throughout the facility. Never tamper with any of

If you fail to follow these rules, or the orders of the floor officer in case of a fire, you could receive a formal disciplinary case. You could also lose your life or get seriously injured.

You may also be required to participate in facility fire drills. You will be notified if it is an actual emergency or drill. Most drills are unannounced and require the cooperation of everyone. Failure to follow the instructions of the staff during the drill could result in disciplinary action.

Do not block exit doors with beds, chairs, lockers or other material or items that could interfere with

When you are called for release you will come out of your living area with all of your clothing, Identification and Wristband, bedding, library books and all of your personal belongings. Headphones and detainee handbooks will be given to your housing unit officer when you leave the unit or prior to leaving the unit.

The detention staff will make announcements for meals, recreation, visitation, clothing exchange and medication pass. You are responsible for being prepared to leave the housing unit when the doors are opened. Depending on the activities, you will be moved to various areas of the facility for court, medical appointments, visits and other functions. You are expected to walk in a quiet and orderly manner. Running inside the facility is prohibited, unless you're in the recreation yard. You are subject to a search of your person and your property. Normally you will not be allowed to take anything with you during your movement to and from most activities. You will be allowed to take necessary legal material with you when escorted to legal visits and court.

If you are housed in the SMU/Segregation Unit for any reason, you will normally be moved to the law library and other areas of the facility with your hands handcuffed behind you.

"Horseplay" or other such activities is prohibited at all times. Detainee Workers are not allowed to wear radio headsets or other devices that affect their ability to hear when working due to safety reasons.

ATTEMPTED ESCAPES

Any attempt to escape from this facility will result in serious disciplinary consequences. Attempted escape may significantly affect your legal standing and status and you may be subject to criminal prosecution.

COMMISSION OF A CRIME

Crimes committed by a detainee that violate local, State or Federal law, will be investigated and referred to the proper legal authority for action.

DESTRUCTION OF PROPERTY

If you are found guilty of destroying facility property, you may be charged for both replacing the item damaged or destroyed and the cost of reinstallation as well.

COUNTS

Official counts are conducted at 6:30 a.m., 2:00 p.m., 10:00 p.m., 1:00 a.m... You are required to be on your bed, sit/lay on your bed and remain stationary whenever a count procedure is

taking place. . You are to stay on your bed until directed by staff to restore movement. You are also required to stand next to your bed for the 2:00 p.m. face to photos stand up count as well as . You are prohibited from interfering with the officer making the count. During count, all televisions, radios, and telephones will be turned off. All foot traffic will cease – detainees will not use the showers, toilets, urinals, or sinks, while count is in progress.

CONTRABAND

Contraband is any item or material that is not approved by the facility for possession, not sold in the commissary or not issued by staff. Some examples of contraband are:

- Unauthorized drugs
- Medication distributed by the medical staff not authorized for retention or prescribed for another detainee.
- Chemical intoxicants
- Alcoholic beverages or any other products containing alcohol in any form
- Obscene picture(s) and literature.
- Extra food items, which are not from the Commissary or authorized by the medical staff.
- Money, checks, or money orders
- Weapons or items that could be considered a weapon.
- Any tobacco product or matches/lighters
- Ammunition or explosives
- Combustible or flammable liquids
- Hazardous or poisonous chemicals or gases
 - Tools of any type that could aid in escape

In the event that contraband is not illegal to possess under criminal statutes and would not otherwise pose a threat to security, staff shall inventory and provide a receipt for the property. At the detainee's request, the staff will mail the property to a third party, or store it with the detainee's other stored personal property. If a detainee chooses not to provide an appropriate mailing address within 30 days, or is unable to pay the postage, the facility may dispose of the property.

The facility shall require that an item of questionable ownership be held for 120 days before its destruction can be considered, to afford the detainee ample opportunity to obtain proof of ownership and appeal the decision through the grievance process.

AUTHORIZED ITEMS

You are allowed to have in your possession the following items:

- Property that staff authorizes you to take to your living area.
- Item(s) pre-approved by the Chief of Security that are left for you.
- Facility items issued to you.
- Items purchased through the Commissary.
- Medication and materials authorized by the medical staff (when medication is authorized for retention).

PRISON RAPE ELIMINATION ACT (PREA) VIDEO

The facility will show you a PREA video in the Intake area during your initial processing

SEXUAL ASSAULT AWARENESS

GEO adheres to a standard of zero tolerance for incidents of sexual abuse or assault that may occur in this facility. Sexual assault or abuse of detainees by other detainees, staff, volunteers, or contract personnel is prohibited and subject to administrative disciplinary and criminal sanctions.

Add blue bench info

REPORT ALL ASSAULTS

If you become a victim of a sexual assault, report the incident immediately. Individuals who sexually abuse or assault detainees can only be disciplined or prosecuted if the abuse is reported. You can report a sexual assault incident to facility staff, ICE/ERO personnel, or DHS or ICE headquarters, including through the following methods:

Report to the facility.

- Tell any staff member at the facility you trust (for example the PREA Compliance Manager, Medical staff, Chaplains, Housing officer, Supervisors, etc).
- File an informal or formal grievance (including emergency grievance) with the facility

Report to the ICE Field Office:

- Tell an ICE/ERO staff member who visits the facility.
- File a written informal or formal request or grievance to ICE/ERO.

Report to DHS or ICE Headquarters:

- Contact the ICE Community and Detainee Hotline, call the toll-free hotline at 1-888-351-4024
- Dial #519 or #9116 on the unit telephone
- Contact the ICE Office of Professional Responsibility (OPR) Joint Intake Center (JIC), call the toll-free hotline at 1-877-246-8253
- Press 9 on the telephone in your unit. Anonymous calls enter 000000# as the pin number.
- Write a letter to: P.O. Box 14475 1200 Pennsylvania Ave. NW Washing ton, D.C. 20044

You do not have to give your name to report sexual abuse or assault, but the more information you can provide, the easier it will be to investigate what happened. Staff members are required to keep the reported information confidential and only discuss it with the appropriate officials on a need-to-know basis.

Any report of sexual abuse, or fear of being abused or assaulted, will not negatively affect your immigration case. No one can retaliate against you in any way for reporting sexual abuse or assault. Sexual abuse and/or assault is never an acceptable consequence of detention

DEFINITIONS:

DETAINEE ON DETAINEE SEXUAL ABUSE/ASSAULT

The definition of detainee-on-detainee sexual abuse/assault was expanded to include attempted sexually abusive contact in addition to completed sexually abusive contact. In addition, the qualification that 'penetration, however slight, of the anal or genital opening of another person by hand or finger or by any object". the act of "touching of the genitalia, anus, groin, breast, inner thighs or buttocks, either directly or through the clothing, with an intent to abuse, humiliate, harass, degrade or arouse or gratify the sexual desire of any person" was also added to the list of acts constituting detainee sexual abuse/assault when accomplished by force, coercion, or intimidation.

STAFF ON DETAINEE SEXUAL ABUSE/ASSAULT

"Repeated verbal statements or comments of sexual nature to a detainee, including demeaning references to gender, derogatory comments about body or clothing, or profane or obscene language or gestures," Staff member engaging in, or attempting to engage in a sexual act with any detainee or the intentional touching of a detainee's genitalia, anus, groin, breast, inner thigh, or buttocks with the intent to abuse, humiliate, harass, degrade, arouse, or gratify the sexual desires of any person. Sexual abuse/assault of detainees by staff or other detainees is an inappropriate use of power and is prohibited by ICE policy and the law.

Sexual conduct of any type between staff and detainees amounts to sexual abuse, regardless of weather consent exists.

PROHIBITED ACTS

This facility has a zero tolerance policy for sexual abuse and assault, which is prohibited by ICE policy and the law. A detainee or staff member who commits sexual assault shall be punished administratively and may be subject to criminal prosecution.

A detainee who engages in such behavior can be charged with the following Prohibited Acts under the Detainee Disciplinary Policy:

- Code 101: Sexual Assault
- Code 206: Engaging in a Sex Act
- Code 207: Making a Sexual Proposal or Threat
 - Code 300: Indecent Exposure
- Code 404: Using Abusive or Obscene Language

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Victimized detainees shall not be subject to disciplinary action for reporting sexual abuse or for participating in sexual activity as a result of force, coercion, threats, or fear of force. If you experience retaliation for reporting sexual abuse or for engaging in sexual activity as a result of In addition, consensual sexual conduct between detainees is also prohibited and subject to administrative and disciplinary sanctions.

DETENTION AS A SAFE ENVIRONMENT

While you are detained, no one has the right to pressure you to engage in sexual acts or engage in unwanted sexual behavior. Regardless of your age, size, race, ethnicity, sexual orientation or gender identity, you have the right to be safe from unwanted sexual advances and acts.

AVOIDING SEXUAL ASSAULT

Carry yourself in a confident manner at all times. Do not permit your emotions to be obvious to others.

Do not accept gifts or favors from others. Most gifts or favors come with strings attached to them.

Do not accept an offer from another detainee to be your protector.

Find a staff member with whom you feel comfortable discussing your fears and concerns. Repot concerns!

Be clear, direct and firm. Do not be afraid to say "no" or "stop it now"

Be alert! Do not use substances such as drugs or alcohol. These can weaken your ability to stay alert and make good judgments.

Stay in well-lit areas of the institution.

Choose your associations wisely. Look for people who are involved in positive activities like educational programs or religious services. Get involved in these activities your self.

Trust your instincts. If you sense that a situation may be dangerous, it probably is. If you fear for your safety, report your concerns to staff.

If you become a victim:

- Report it immediately to staff.
- Protection from assailants will be offered.
- You will be referred for a medical exam.
- Although you do not have to identify your assailants, the information will make it easier to protect you and others.
- Even if you do not name your attacker, you will continue to receive protection.
- It is extremely important to see Medical before you shower, shave, wash, drink or eat, change clothing or use the bathroom.
- Medical staff will examine you for injuries.

- You may also be tested for sexually transmitted diseases and evidence may be gathered.
 - The exam will be conducted privately and professionally by a physician.

What will happen:

- An investigation will be conducted to determine the nature and extent of the misconduct.
- You may be asked to give a statement.
- You may be asked to testify.
- You will be offered protection.
- You will receive a medical examination.
- You will be offered counseling by: The Mental Health staff Community resources if appropriate.

Help Available:

- Most people need help to recover from the emotional effects of sexual assault.
 - This is true whether it occurred recently or in the past.
- Mental Health staff are available.

If you feel you might hurt someone else:

- If you feel you need help to keep from sexually assaulting someone else, psychological services are available to help you gain control.
 - Ask Medical Staff for a referral.

How to report an incident of sexual assault:

- Notify any staff member immediately.
- If you do not wish to notify a staff member, you may write the Warden, Assistant Warden, or Health Services Administrator confidentially.
 - You may also notify ICE according to the procedures outlined in your detainee handbook or call the DHS/OIG hotline at 1-800-323-8603.

Remember:

- It is every staff member's responsibility to ensure your safety.
 - You will receive protection.
- Confidentiality will be maintained.

THE EMOTIONAL CONSEQUENCES OF SEXUAL ASSAULT

It is common for victims of sexual assault to have feelings of embarrassment, anger, guilt, panic, depression and fear several months or even years after the attack. Other common reactions include loss of appetite, nausea or stomach aches, headaches, loss of memory and/or trouble concentrating, and changes in sleep patterns. Emotional support is available from the facility's mental health and medical staff, and from the chaplains. Also, many detainees who are at high risk of sexually assaulting others have often been sexually abused themselves. Mental health services are available to them also so that they can control their actions and heal from their own abuse.

Sexual assaults can happen to anyone; any gender, age, race, ethnic group, socio-economic status and to an individual with any sexual orientation or disability. Sexual assault is not about sex; it's about power and control. All reports are taken seriously. Your safety and the safety of others is the most important concern. For everyone's safety, all incidents, threats, or assaults must be reported.

SECTION VIII DISCIPLINARY PROCEDURE

To provide a safe and orderly living environment, facility authorities will impose disciplinary sanctions on any detainee whose behavior is not in compliance with facility rules and procedures.

INVESTIGATION

When an alleged rule violation is reported, an appropriate investigation will begin within 24 hours of the time the violation is reported and is completed without unreasonable delay, unless there are exceptional circumstances for delaying the investigation.

UNIT DISCIPLINARY COMMITTEE (UDC)

The UDC shall be comprised of one to three members, at least one of who is a supervisor.

The UDC will conduct hearings and, to the extent possible, informally resolve cases involving "high moderate" or "low moderate" charges, in accordance with the list of charges and related sanctions. Unresolved cases and cases involving serious charges are forwarded to the Institutional Disciplinary Panel (IDP).

The UDC shall have authority to:

- Conduct hearings and informally resolve incidents involving High Moderate or Low Moderate charges.
- Consider written reports, statements, and physical evidence.
- Hear pleadings on the part of the detainee.
- Make findings that a detainee did or did not commit the rule violation(s) or prohibited act(s) as charged, based on the preponderance of evidence.
- Impose minor sanctions "E" through "M" in accordance with the table of prohibited acts and associated sanctions.

The detainee in UDC proceedings shall have the right to:

- Remain silent at any stage of the disciplinary process
- Due process, including a UDC hearing within 24 hours of the end of the investigation,
- To attend the entire hearing (excluding committee deliberations); or
 - b. To waive the right to appear.

- If security considerations prevent the detainee's attendance, the committee must document the security considerations.
- Present statements and evidence in his/her own behalf.
- Appeal the committee's determination through the detainee appeal process.

INSTITUTIONAL DISCIPLINARY PANEL (IDP)

This facility has a disciplinary panel to adjudicate detainee incident reports. Only the disciplinary panel can place a detainee in disciplinary segregation.

The IDP refers either one to a three-person panel appointed by the Warden, or a one-person disciplinary hearing officer.

The panel shall not include the reporting officer, the investigating officer, and any member of the referring UDC, or anyone who witnessed or was directly involved in the incident. Only if virtually every available officer witnessed or was directly involved in the incident shall an exception to this rule occur.

The IDP shall have authority to:

- Conduct hearings on all charges and allegations referred by the UDC.
 - Call witnesses to testify.
- Consider written reports, statements, physical evidence, and oral testimony.
 - Hear pleadings by detainee and staff representative.
- Make findings that the detainee did or did not commit the rule violation(s) or prohibited act(s) as charged, based on the preponderance of evidence.
 - Impose sanctions as listed and authorized in each category.

The IDP shall:

- Verify that the detainee has been advised of, and afforded, his/her rights, as provided above.
- Remind the detainee of his/her right to a staff representative, providing one if requested.
 - Advise the detainee of his/her right to waive the hearing and admit having committed the offense.
- Conduct the hearing on the first business day after receiving the UDC's referral, unless the detainee waives the 24-hour notification provision, requesting an immediate hearing. In cases where a hearing is delayed, the reason(s) must be documented (e.g., a continuing investigation of facts, the unavailability of one or more essential witnesses, etc.) and approved by the Warden. If the detainee is being held in segregation, the delay shall not exceed 72 hours, barring an emergency. Prepare a written record of its proceedings. This record must show that the detainee was advised of his/her rights. It must also document the evidence considered by the Panel and subsequent findings; the decision and sanctions imposed, along with a
 - brief explanation.

 Forward the entire record to the Warden, who may (a) concur; (b) terminate the proceedings; or (c) impose more severe or more lenient sanctions.
 - Serve the detainee with written notification of the decision.

STAFF REPRESENTATION

The Warden or designee shall, upon the detainee's request, assign a staff representative to help prepare a defense. This help will be automatically provided for illiterate detainees, detainees with limited English-language skills; detainees without means of collecting and presenting essential evidence and detainees in administrative or disciplinary segregation.

- A staff representative must be a full-time employee.
- Because of the potential conflict of interest, the Warden, members of the IDP and of the UDC initially involved in the case, eyewitnesses, the reporting and investigating officers, and anyone else with a stake in the outcome shall not act as staff
- The detainee may select his/her staff representative, barring anyone identified in #2, above.
- The IDP shall arrange for the presence of the staff representative selected by the detainee. If that staff member declines or is unavailable, the detainee has three choices. He/she may select a different representative; wait for the unavailable staff member to become available (within a reasonable period); or proceed without a staff representative.
- A staff member declining to serve as a detainee's representative must state the reason on the staff representative form.
- If several officers decline, the Warden shall assign a staff member to serve as that detainee's staff representative.
- The staff representative shall be free to speak to witnesses and to present evidence in the detainee's behalf, including any mitigating circumstances.
- The IDP shall allow the staff representative enough time to speak with the detained and interview witnesses. The standard pre-hearing preparation time will suit most cases. However, the IDP may grant a delay if required for an adequate defense.
 - The IDP shall establish the reliability of information provided by a confidential
 informant before considering it in the disciplinary proceedings.
- The IDP may withhold the confidential informant's identity from the staff representative. While the staff representative may challenge the substance of any confidential information the IDP discloses, he/she may not question its reliability (pre-established by the IDP).
 - When the detainee cannot effectively present his/her own case, the Warden shall appoint a staff representative, even if not requested by the detainee.

POSTPONEMENT OF DISCIPLINARY PROCEEDINGS

The facility shall permit hearing postponements or continuances under certain circumstances.

Circumstances justifying the postponement or continuance of a hearing might include: defense preparation, physical or mental illness, security, escape, disciplinary transfer, deportation, or pending criminal prosecution.

An uncooperative detainee may also cause a delay in the proceedings, either because of inappropriate behavior during the hearing process or a refusal to participate in a productive manner.

DURATION OF PUNISHMENT

The duration of punishment shall be within established limits. Neither the panel recommending sanctions nor the Warden making the final decision shall impose sanctions arbitrarily, outside these limits.

- Punishments range from the withholding of privilege(s) to segregation. Time in segregation after a hearing will generally not exceed 60 days.
- 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 decision is announced.
- The disciplinary report and accompanying documents are not placed in the file of a
 detainee who is found not guilty. However, the facility may retain the material in its own files
 for institutional uses (statistical, historical, etc.).
- A detainee may be removed from segregation if a healthcare professional concludes that continued segregation is detrimental to the detainee's medical or mental health.

DOCUMENTS

All documents relevant to the incident, subsequent investigation, hearing(s), etc., will be completed and distributed in accordance with facility procedures.

Incident Report/Notice of Charges

The officer shall prepare a report and submit it to the Warden immediately after the incident takes place. If the incident is resolved informally, the officer will so note on the original report, which will then be forwarded to the Chief of Security via the shift supervisor.

If the UDC is to be involved, the supervisor shall serve the detainee with a copy of the Notice of Charges upon completion of the investigation, no less than 24 hours before the UDC hearing.

The UDC receives the original copy.

If the UDC hears the matter, the ranking member of that committee shall serve the detainee with a copy of the Incident Report/Notice of Charges indicating their decision. The UDC, upon conclusion of its proceedings, will forward the entire record to Classification.

CONFIDENTIAL INFORMATION

When a decision relies on information from a confidential informant, the UDC or IDP shall include in the hearing record the factual basis for finding the information reliable.

Prohibited acts are divided into four categories: "Greatest", "High", "Moderate", and "Low Moderate". The sanctions authorized for each category will be imposed only if the detainee is found to have committed a prohibited act.

"Greatest" offenses: The IDP shall impose and execute at least one sanction in the A through E range. Additional sanctions (A through G) may be imposed and either executed or suspended, at the discretion of the panel. The IDP may impose and execute sanctions F and G only in conjunction with sanction A, B, C, D, and/or E.

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Fighting, boxing, wrestling, sparring, and any other form of physical encounter, including horseplay that causes or could cause injury to another person; except when part of an approved recreational or athletic activity	202 Possession or introduction of an unauthorized tool 203 Loss, misplacement, or damage of any restricted tool 204 Threatening another with bodily harm 205 Extortion, blackmail, protection: demanding or receiving money or anything of value in return for protection against others, avoiding born or avoiding a	tract in return to protection ugainst carest, avoiding occur, mann, or avoiding the tract of being informed against 206 Engaging in sexual acts 207 Making sexual proposals or threats to another 208 Wearing a disense mask		Processing any officer's or staff clothing state. 212 Possessing any officer's or staff clothing. 213 Engaging in, or inciting a group demonstration. 214 Encouraging others to participate in a work stoppage or refusing to work. 215 Refusing to provide a urine sample or otherwise cooperate in a drug test. 216 Introducing alcohol into the facility. 217 Giving or offering an official or staff member a bribe or anything of value. 218 Giving money to, or receiving money from, any person for an illegal or prohibited.	Destroying, altering, or damaging property (facility or another person's) worth more than \$100, or destroying altering, or damaging property (facility or another person's) worth more than \$100, or destroying altering, or damaging life-safety devices, i.e. fire alarm, regardless of financial value 220 Being found guilty of any combination of three or more high moderate or low moderate offenses within 90 days 221 Signing, preparing, circulating, or soliciting support for prohibited group petitions Possessing or introducing an incendiary device, i.e. matches, lighter, etc. 223 Any act that could endanger person(s) and/or property interfering with a staff member in the performance of duties (conduct must be of highest severity). This charge is to be used only when no other charge of highest severity or orderly operation of the facility (conduct must be of highest severity). This charge is to be used only when no other charge of highest severity is applicable.	*When the prohibited act is interfering with a staff member in the Performance of duties (Code 198, 298, 398, or 498) or conduct that disrupts (Code 199, 299, 399, or 499), the Disciplinary Committee should specify in Its findings the severity-level of the conduct, citing a comparable offense in that category. For example, "We find the act to be of high severity, most comparable to Code 213, "engaging In a group demonstration". SANCTIONS A. Initiate criminal proceedings B. Disciplinary transfer (recommend) C. Disciplinary segregation (up to 30 days) D. Make monetary restitution, if funds are available E. Loss of privileges: commissary, etc.
"High" offenses: The IDP shall impose and execute at least one sanction in the A through M range. Additional sanctions (A through M) may be imposed, and either executed or suspended, at the discretion of the panel.	"High Moderate" offenses: The IDP shall impose at least one sanction in the A through M range, but may suspend any or all, once imposed. Similarly, the UDC shall impose at least one sanction in the G through M range, but may suspend any or all, once imposed.	"Low Moderate" offenses: The IDP shall impose at least one sanction in the E through M range, but may suspend any or all, once imposed. Similarly, the UDC shall impose at least one sanction in the G through M range, but may suspend any or all, once imposed.	DISCIPLINARY SEVERITY SCALE AND PROHIBITED ACTS CODE: "GREATEST" OFFENSE CATEGORY	Assaulting Assaulting any person (includes sexual assault) Escape from escort; escape from a secure facility Setting a fire (charged with this act in this category only when found to pose a threat to life or a threat of serious bodily harm or in furtherance of a prohibited act of Greatest Severity, i.e. a riot or an escape; otherwise the charge is classified as	Possession or introduction of a gun, firearm, weapon, sharpened instrument, knife, dangerous commissary, movies, chemical, explosive, escape tool, device or ammunition Rioting Inciting others to riot Taking hostage(s) Assaulting a staff member or any law enforcement officer Threatening a staff member or any law enforcement official with bodily harm Interfering with a staff member in the performance of duties (conduct must be of the Greatest Severity nature). This charge is to be used only if another charge of Greatest Severity is not applicable Conduct that disrupts or interferes with the security or orderly running of the facility (conduct must be of the Greatest Severity is not applicable only if another charge of greatest severity is not applicable	A. Initiate criminal proceedings B. Disciplinary transfer (recommend) C. Disciplinary segregation (up to 60 days) D. Make monetary restitution, if funds are available E. Loss of privileges, i.e. commissary, etc. F. Change housing G. Remove from program and/or group activity G. Remove from program and/or group activity CODE: "HIGH" OFFENSE CATEGORY

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- Reprimand Warning

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APPEAL PROCEDURE

appeal his or her case to the Warden. Detainees are advised of their right to appeal decisions of A detainee who has been found guilty of a rules violation of this facility shall have the right to the disciplinary hearing officer at the time they are provided the decision. If a detainee wishes to appeal his/her case, he/she must so indicate by signing the Appeal Form (on the back of a grievance form) in the appropriate space and submit written reason (s) for his/her appeal.

The sanctions imposed by the hearing officer will remain in effect pending the outcome of the appeal.

including weekends and holidays, after the final appeal has been received. The Warden will The Warden will review the final appeal as soon as possible, but no later than five (5) days. notify the detainee in writing of his decision.

ADMINISTRATIVE SEGREGATION ORDER

security, or orderly operation of the facility. No Administrative Segregation Order is required for a detainee awaiting removal, release, or transfer within 24 hours. A written order shall be completed and approved by a supervisory officer before a detainee is order shall be given to the detainee immediately, unless delivery would jeopardize the safety, impracticable. In such cases, an order shall be prepared as soon as possible. A copy of the placed in administrative segregation, except when exigent circumstances make this

Date	
Warden	

Reviewed

Housekeeping/Maintenance Plan

17.1.2-AUR Sanitation & Housing Attachment A

The facility establishes this Housekeeping/Maintenance Plan to maintain the physical plant and to ensure that sanitation and safety practices comply with applicable laws, codes, regulations, and standards relating to sanitation and safety within the facility.

Overview

A clean, safe, and maintained working and living environment requires certain general sanitation standards be maintained. Particular attention will be given to the following:

- Facility floors will be kept clean, dry and free of hazardous substances, and repaired when needed.
- 2. Sinks and toilets will be in good working condition, and clean and sanitary.
- 3. Furniture, shelves, and countertops will be in good working condition, clean and free of dust.
- 4. Windows and mirrors will be kept clean.
- 5. Mops and rags will be laundered.
- 6. Window sills, ledges, and door frames and tracks will be kept clean and free of dust and debris an in good working order.
- 7. Trash will be removed promptly and placed in the designated removal containers and/or areas.

All safety and sanitation inspections will be conducted under the Warden's direction and authorization. The Environmental Specialist/ Fire Safety Manager (ES/FSM) will be authorized to take all measures necessary to comply with the applicable laws and regulations of the county and state in regard to facility safety and sanitation.

All staff members conducting sanitation inspections will furnish the Warden with written reports, including specific deficiencies noted during the inspection and the required corrective action. The ES/FSM will ensure deficiencies are corrected in the required amount of time and will confer with the inspecting staff member regarding the documentation of corrective actions or any re-inspection that may be required.

Inspections will include, but not be limited to ensuring the following:

- 1. Floors are in good condition, clean, dry, and free of hazardous substances.
- 2. There are no accumulations of flammables, Toxic and Caustic
- 3. Exits and stairways are in good working order and are not blocked and are usable.
- 4. Fire equipment to include fire extinguishers, pull stations and the fire panel is accessible.
- 5. No accumulation of combustibles, trash
- 6. Monthly pest control inspection.
- 7. Inspection of plumbing pipes and fixtures

All deficiencies identified will be documented and corrected.

Food Service Areas

It is the responsibility of the Food Services Administrator to ensure high sanitation standards are maintained in the food preparation and service areas. The Kitchen Supervisor will supervise the kitchen detainee work force in daily cleaning duties. The kitchen will be inspected and rated by the Tri-County Health Department at least annually, and weekly by the ESF/SM.

Medical Areas

Special attention will be afforded the medical area to comply with health standards for cleanliness. The Medical Department will be cleaned daily on 3rd shift, after all doctor visits have been completed for the day. The staff member supervising detainee workers will ensure they are under that individual's constant, direct visual observation while cleaning the medical area. When mopping in the medical unit due to

soiled floors Double Bucket method will be utilized. 2 mops will be utilized, one containing fresh water/disinfectant. The second bucket will be utilized to rinse and discard the dirty water.

Public Lobby

The public lobby will be swept, mopped, and waxed as needed by detainee workers. All glass will be cleaned on an as-needed basis. Additionally, the lobby will be monitored for cleanliness throughout the day by assigned staff. Any hazards or unclean conditions will immediately be corrected by a detainee worker under an officer's supervision.

Visitation

All visitation areas will be cleaned as needed by detainee workers after the area is thoroughly searched by staff. All trash will be discarded, carpets vacuumed, and windowpanes cleaned as needed.

Restricted Security Areas

The control center and the Maintenance Shop will be off limits to detainees at all times (no exceptions). These areas will be cleaned by facility staff members. This cleaning will consist of cleaning counter areas, discarding trash, and cleaning all windowpanes as needed.

Liquid and Solid Waste

Liquid waste will be disposed of through the sanitary sewer system. Mop bucket water will be disposed of by pouring the water down the designated mop bucket cleaning sink located in each janitor closet. Solid waste and trash will be removed from departments and housing units as often as necessary to maintain sanitary conditions and to avoid creating health hazards.

Carpet Cleaning

All carpets will be vacuumed daily. The Facility Janitor in conjunction with 1st shift will be responsible for this cleaning. All carpets in administration areas will be evaluated on a quarterly basis for steam cleaning.

Hazardous Materials

All caustic, toxic, and flammable materials will be handled in accordance with Policy 13.1.4-AUR.

Pest/Vermin Control

The facility uses the service of a qualified professional pest control contractor. This service's purpose is to eliminate pest infestations and provide preventive treatment of future infestations.

The professional contractor will service the facility at least once a month; this schedule may vary from time to time in areas such as the facility kitchen. If necessary, additional preventive treatments may be scheduled.

Housekeepers

Supervising housekeepers is the responsibility of the officers assigned to the Housing Unit. Supervision includes assigning duties, training newly assigned detainees on their task and using Personal Protective Equipment, supervising work as it is done. All day areas and showers will be cleaned by the housing unit detainees daily.

Housekeeping/Maintenance Plan

17.1.2-AUR Sanitation & Housing Attachment A

Housing Unit Officers must notify the Chief of Security of any detainee removed from worker status for nonperformance for duties or for vacancies that occur due to a release or transfer. The Classification Department is responsible for assigning the next eligible detainee in that Housing Unit to fill the vacancy.

Pod Cleaning

On a weekly basis or by the direction of the Shift Supervisor, all Pods will be subject to a total sanitation mission to assure standards are met and maintained. The responsibility for cleaning each Pod will be shared by 2nd and 3rd Shifts as followed:

Female Housing	Female Segregation		
Monday	Monday		

A-Pod		B-Pod		C-Pod	
Monday	A-1	Monday	B-1	Monday	C-1
Tuesday	A-2	Tuesday	B-2	Tuesday	C-2
Wednesday	A-3	Wednesday	B-3	Wednesday	C-3
Thursday	A-4	Thursday	B-4	Thursday	C-4
	100	MEDICAL	L.		
		aily basis (on 3	rd shift)		

SEG/SMU E-1	SEG/SMU E-2
Friday	Friday

FACILITY CLEAN-UP DAILY CLEANING SCHEDULE

AREA	CLEANERS AND DISINFECTANTS USED	SPECIAL INSTRUCTIONS
Floors Hallways, Intake, Medical Area and Visitation	Green Solutions Neutral disinfectant Cleaner, Glass Cleaner, Green Solutions neutral Disinfectant floor cleaner,	Sweep and damp mop. Strip, seal and wax and spray buff as needed.
Windows And Window Sills	BioRenewables Glass Cleaner	Clean windows and wipe down surfaces to keep them dust-free
Sinks, Commodes and Showers	Green Solutions Disinfectant Cleaner, Clean By Peroxy, Bio-Renewables Restroom Cleaner (Showers only)	Clean surfaces with cloth, scrubbing pad or brush.
Stainless Steel (Showers, Sinks)	Green Solutions Disinfectant Cleaner	Wipe down surfaces with cloth
Trash Receptacles	Green Solutions Disinfectant Cleaner	Empty daily (taken to trash receptacle cleaning station on a weekly basis)
Furniture, Vending Machines and other Equipment	Green Solutions Disinfectant Cleaner	Dust all horizontal surfaces with cloth, then wipe with cloth

HOUSING UNIT CLEANING SCHEDULE **ASSIGNED HOUSEKEEPERS** AND HOUSING UNIT TRUSTEE

AREA	SCHEDULED CLEANING	CLEANERS AND DISINFECTANTS USED	SPECIAL INSTRUCTIONS
Floors	After every meal (more often if needed)	Tribase Multi Purpose Cleaner	Sweep and damp mop
Divider Walls, Windows And Window Sills	Once per shift (more often if needed)	Green Solutions Disinfectant Cleaner/BioRenewables Glass Cleaner	Clean windows and wipe down surfaces to keep them dust-free
Sinks, Commodes and Showers	Once per shift (more often if needed)	Green Solutions Neutral Disinfectant Cleaner/BioRenewables Glass Cleaner	Clean surfaces with cloth, scrubbing pad or brush using the appropriate cleanser.
Trash Receptacles	Cleaned Weekly	Green Solutions Neutral Disinfectant Cleaner. Bio-Renewables Restroom Cleaner	Empty After every meal and washed out weekly or as needed when it becomes soiled.
Furniture	Once per shift	Green Solutions Neutral Disinfectant Cleaner	Spray Cleaner and wipe down surfaces with cloth
Equipment	Each Shift	Green Solutions Neutral Disinfectant Cleaner	Wipe down surfaces with cloth
Stainless Steel (Showers, Sinks)	Once per shift	Green Solutions Neutral Disinfectant Cleaner/Clean By Peroxy	Wipe down surfaces with cloth
Mattresses/Pillows	Upon transfer (or movement) of detainees	Green Solutions Neutral Disinfectant Cleaner	Wipe down surfaces with cloth
Light Fixtures/Vents/Air Ducts	Once a Month	Green Solutions Neutral Disinfectant Cleaner	Wipe down surfaces with cloth. Use Shop Vacuum to clean vents. (Done by Maintenance Trustee).

MEDICAL UNIT CLEANING SCHEDULE **ASSIGNED HOUSEKEEPERS**

AREA	SCHEDULED CLEANING	CLEANER AND DISINFECTANTS USED	SPECIAL INSTRUCTIONS
Floors	Every day (more often if needed)	Tribase Multi- Purpose cleaner #17 (double bucket method)	Sweep and damp mop
Divider Walls, Windows and Window Sills	Daily (more often if needed)	GS Neutral Disinfectant Cleaner #103, Glass cleaner #18	Clean windows and wipe down surfaces to keep them dust- free
Sinks, Toilets and showers	Daily, (more often if needed)	Bio-Renewables Restroom Cleaner, Clean by Peroxy #15	Clean surfaces with cloth, scrubbing pads or brush using the appropriate cleaner
Trash Receptacles	Empty daily	GS Neutral Disinfectant Cleaner #103	Clean as they become soiled
Med-Iso rooms, and furnishings, to include mattresses/pillows	Clean after every use	TB-Cide Quat (A hospital grade, non-acid disinfectant quaternary cleaner)	Use with rag, wipe down all surfaces.
Light fixtures/Vents/Air ducts	Weekly	GS Neutral Disinfectant Cleaner #103	Dust-off prior to using a rag, and cleaner

KITCHEN CLEANING SCHEDULE

AREA	SCHEDULED CLEANING	CLEANER & DISINFECTANTS	SPECIAL INSTRUCTIONS
Tables and Sinks, Stainless Steel	After every use	Bleach	Polish with High Shine Monday through Thursday
Pots and Pans	After every use	SparClean Pot & Pan Detergent	Use 3-sink table and sanitize
Ovens and Grill	After every use	Oven and Grill Cleaner	Degrease every Thursday with degreaser
Dishwasher	After every use	Lime/away by Spartan	De-lime every Thursday and polish with high shine
Chemical Room	Daily	Kitchen degreaser.	Sweep and mop. Restock cabinet weekly
Floors	Hourly or as needed	Tribase Multi purpose cleaner	Monitor constantly, Use "Wet Floor" signs
Storeroom	Daily	Green Solutions Neutral disinfectant Cleaner	Seep and mop. Every Monday move racks from the wall and mop floor.
Hoods and filters	Twice daily	Green Solutions Neutral disinfectant Cleaner Stainless steel cleaner	Clean the filters every Monday and polish with high shine.
Freezer and refrigerator	Every Tuesday	Green Solutions Neutral disinfectant Cleaner	Sweep floor and wipe down the racks
Kettles	After every use	SparClean pot & Pan Detergent	Every Tuesday shine the exterior surface with high shine.
Bathroom	Once per shift	Green Solutions Neutral disinfectant Cleaner/Clean by Peroxy	Check every shift. Sign out chemicals from laundry (supply) during assigned hours.
Food warmer and food carts	Daily	Green Solutions Neutral disinfectant Cleaner	Inside – weekly with degreaser; outside daily with high shine.

The Maintenance program will prolong the useful life of all facility property through predetermined, scheduled inspections. This inspection program will be conducted on a continuing basis to test and service institutional property and equipment. Any equipment or property beyond serviceable life will be disposed of through property disposal procedures.

Work orders for defects revealed by Staff will be submitted to the Facility Maintenance Supervisor.				
Warden J. Choate	Fire Safety Manager D. McCoy			
Effective August 18, 2015				



Aurora Detention Center POLICY and PROCEDURE MANUAL

17.1.2-AUR (Formerly 12.1.4-AUR)

CHAPTER: Sanitation

TITLE: Sanitation Procedures

RELATED ACA STANDARDS: 4-ALDF-1A-01, 1A-

02, 1A-04, 1A-07

REVISED ON:
08/18/15
SUPERSEDES:
08/18/14
APPROVED BY:

DocuSigned by:
(b)(6);(b)(7)(C)

I. POLICY

To provide detainees and staff with a clean living environment consistent with all applicable codes, standards and sound detention practice.

II. PROCEDURES

The Environmental Specialist/Fire Safety Manager (ES/FSM) will develop and oversee procedures that ensure the facility's sanitation plan is carried out; however, ensuring high standards of housekeeping and sanitary practices in the various areas of the facility is the responsibility of staff members and each department head.

A. Housekeeping Plan

A written housekeeping plan will be developed for each area of the facility, including common areas such as halls, exterior walks, etc. These plans will be prepared as directed by the ES/FSM, the Chief of Security, and the head of the department involved. The house keeping plan will be reviewed annually.

Plans will include a cleaning schedule for the area; specific assignments for detainees assigned to sanitary duties; a time schedule for completion; and instructions for cleaning cells, dayrooms, and other common areas, floors and doors, storage areas, other areas, walls and windows, toilet and shower facilities, and equipment.

Waste disposal procedures will be included in the sanitation plan, providing for proper collection, storage, and disposal of all liquid and solid waste accumulations for each area.

Necessary cleaning supplies and equipment will be procured from the Warehouse Officer. Detention Officers are responsible for the secure, hygienic storage of all cleaning supplies, including the proper storage of mops and other wet items.

B. Detainee Sanitation Responsibilities

Each detainee will be responsible for the cleanliness of his or her cell or living area, including walls, floors, sink, toilet, windows, and other property within the cell, room, or living area.

Beds will be made neatly and tightly. Nothing will be placed over windows, lights, vents, bars or grilles. Shoes will be neatly lined up under the edge of the bed. All personal property will be stored in the locker/container provided. Detainee personal property storage and limits will be enforced in the process of all sanitation inspections.

Cleaning materials and articles for cleaning will be issued by the Housing Unit Officer to each detainee. The detainee is responsible for the proper use and care of these articles.

C. Housing Unit Sanitation



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At 6:00 a.m. each day, the following items will be issued:

- Mops and buckets
- Brooms
- Scrub brushes
- Cleaning rags
- Cleaning Chemicals

Cleaning items will be secured each day by 10:00 p.m.; before and after issue staff will inspect all cleaning equipment for safety, cleanliness and damage.

At 10:00 a.m. and 5:00 p.m. each day, the following items will be issued:

- · Mops and buckets
- Brooms
- Cleaning rags

Housing Unit Officers will inspect all cleaning equipment for safety, cleanliness and damage, before and after issue. Cleaning Chemicals will be secured with the above listed items until 10:00pm at which time they will be secured in the housing unit janitor closet.

The Housing Unit Officer and Shift Supervisor are responsible for inspection of all cleaning.

Cleaning implements will be kept in the janitorial closet, so as to provide for proper ventilation and drying.

D. Segregation/Special Management Unit Sanitation

Cells will be cleaned daily and as detainees are transferred or released. This will include cleaning the toilet/sink areas, mopping the floor, sanitizing mattresses and pillows and wiping down horizontal surfaces.

E. Common Area Sanitation

The 1st Shift is responsible for cleaning corridors and other common areas of the facility. The Facility Clean-up Crew will conduct the cleaning.

Waxing of corridors and housing unit floors will be done as needed during the week on 1st Shift. All floors will be kept clean, dry, and free of hazardous substances.

The Shift Supervisor will inspect common areas for compliance with all sanitation standards and oversee the correction of any deficiencies.

F. Inspection Program

Pre-assigned staff members will conduct daily inspections of sanitation levels in all areas of the facility. These inspections will be in addition to the security inspections conducted under Policy and Procedures 10.2.33 – AUR. A record of these inspections will be filed with the Chief of Security.

Post orders will reflect the areas of sanitation and inspection responsibility for each staff member.



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The Housing Unit Officer will inspect all living areas daily and report any infraction of these regulations to the Shift Supervisor. The officer will notify detainees of unsatisfactory conditions, in cases of continued noncompliance, staff will complete a charging packet and/or incident report as is appropriate.

Each Department Head will personally inspect his or her department or area of responsibility at least once a week; that inspection will be documented.

The ES/FSM will conduct weekly and monthly inspections of sanitation levels in all areas of the facility and will keep a record of those inspections on file. All Safety Committee Members will inspect the facility on a quarterly basis.

The Tri-county Health Department will conduct annual inspections to ensure and document compliance with all applicable law and regulations related to sanitation and health. The Food Services Administrator will keep a record of those inspections.

G. Water Supply

The facility's potable water source and supply, owned and operated by the Aurora Water department, is certified at least annually by an independent, outside source to be in compliance with all jurisdictional laws and regulations. [4-ALDF-1A-07M]

H. Maintenance Issues

The facility will have an established system for reporting, responding to, and accounting for materials and labor relating to all facility repairs.

Major maintenance of toilets, wash basins, sinks, walls, doors and other equipment in the facility will be the responsibility of the Maintenance Department.

I. Blood or other body fluid

Following any incident where there is spillage of blood or other body fluids the area shall be sanitized immediately by a member of the health service staff pursuant to the Exposure Control Plan. The reporting staff member will notify the on duty Shift Supervisor who will make the determination as to whether there is a need to preserve evidence.

Security staff will ensure the area is secure and that all persons entering the area are donning appropriate Personal Protective Equipment for the situation. At no time will detainees be utilized for cleaning blood spills.

Medical staff will utilize "Clean-Up Kits" to clean up any blood and body fluids as well as decontaminate the area. Either a hospital grade disinfectant or a solution of one part bleach to 10 parts water will be utilized to clean all surfaces. Once the area has been properly cleaned, the kit and any additional items utilized for the cleaning will be disposed of properly in a Bio-Hazard waste receptacle in the medical unit. Shift Supervisor will make a final walk through of the area to ensure no equipment has been left behind.

Any clothing that has been contaminated with these fluids, including the equipment and clothing of staff involved shall immediately be disinfected or destroyed as appropriate. Disinfecting of clothing will include the use of an water soluble bag and outer yellow contaminated linen bag. Staff assigned to deliver the



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contaminated linen to the laundry will ensure the bag is delivered directly to the Laundry Officer only after proper protective equipment is donned.

Staff should exercise reasonable care when handling or exposed to the above body fluids, just as they do in addressing other types of risks common in their work.

THIS POLICY WILL BE REVIEWED AT LEAST ANNUALLY AND UPDATED AS NEEDED.

Gray highlighted areas are the changes made to the current revision.

QUESTIONS/SUGGESTIONS REGARDING THIS POLICY SHALL BE ADDRESSED TO THE ASSISTANT WARDEN OF OPERATIONS.

Department of Homeland Security

Immigration and Customs Enforcement: Office of Enforcement and Removal Operations

Condition of Confinement Inspection Worksheet

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

This Form is to be used for Inspections of Facilities used over 72 Hours



Performance-Based National Detention Standards 2011 Inspection Worksheet for Over 72 Hour Facilities

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

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Facility Informati	on		440		
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Facility Type: CDF	=				
Intergovernmental Serv	ice Agreement (I	GSA), ICE Service Processing Center (SPC),	ICE Contra	ct Detention Facility (CDF)	
Address:	ddress: 3130 North Oakland Street				
City: Aurora		State: CO	Zi	p: 80010	
County:	County: Adams				
CEO Name: (b)(6);	(b)(7)(C)			CEO Title: Warden	
Review Informati	on (Use following	ng format for dates: mm/dd/yyyy)	1010		
Start Date: 9/27/2	2016 End l	Date: 9/29/2016	Revi	ew Type: Headquarters	
Lead Name: (b)(6)	Lead Name: (b)(6);(b)(7)(C) Lead Title: LCI				
Review Documen	it Issue Sumr	nary (See Document Check Section to Re	eview/Upo	late)	
Error(s) Found: 0 Items Not Rated			0		

ICE HQ USE ONLY: (DO NOT EDIT*)

Form Name: G324A_PBNDS	Form Key: 8	Forn	n Date: 11/14/2012
Form Type: PBNDS		orm Review Type: Annual	Form Over/Under 72 Status: O72

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

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INTRODUCTION TO THE G324A OVER 72 HOUR FACILITY DETENTION REVIEW WORKSHEETS

The revised Performance-Based National Detention Standards (PBNDS 2011) were designed to better address the needs of ICE's detainee population while maintaining a safe and secure detention environment for staff and detainees. The revised standards build on the requirements of PBNDS 2008 to improve medical and mental health services, increase access to legal services and religious opportunities, improve communication with detainees with limited English proficiency, improve the process for reporting and responding to complaints, and increase recreation and visitation. The PBNDS 2011 follows the overall structure and organization of the PBNDS 2008, but adds one additional standard to Section 4 on Women's Medical Care, and applies certain italicized requirements to dedicated inter-governmental service agreement (IGSA) facilities, in addition to service processing centers (SPCs) and contract detention facilities (CDFs).

WHAT IS "PERFORMANCE-BASED"?

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

Expected Practices found in the PBNDS represent what is to be done to accomplish the Expected Outcomes that will meet the Purpose and Scope of the detention standard.

WORKSHEET OVERVIEW

Detention Review Worksheets are used to assess facility compliance with ICE detention standards. This set of worksheets is derived from the policies and procedures set forth in the PBNDS 2011. The G324A is for use with facilities that house detainees for over 72 hours.

Various line items in the worksheets have been designated as "Priority." Priority components replace mandatory components in earlier PBNDS 2008 worksheets, and represent those PBNDS requirements that ICE deems of critical importance for ensuring adequate conditions of confinement and the safety and security of detainees and staff at all ICE authorized detention facilities.

WORKSHEET COMPLETION

Reviewers are required to complete each item within each section of the G324A Detention Review Worksheets. Worksheets are in a uniform format with three columns, with PBNDS purpose and scope stated at the top of the worksheet. Column one contains the relevant standard line item. Column two contains a dropdown menu for each row where a rating can be assigned to a given line item. In addition to rating options for "Meets Standard" and "Does Not Meet Standard," there is an option for the review team to select "N/A." The "N/A" rating should be used only rarely and where applicable. In addition, the remarks section for each line item should be filled out in as much detail as possible. If the review team fails to assign a rating to a given line item, the default rating and thus the assigned rating on the worksheet will show as "Not Rated."

There is also a summary remarks and rating section at the end of each standard that must be completed by the assigned reviewer. The remarks should be filled out with sufficient detail to assist the Review Authority in accurately assessing overall facility compliance to the PBNDS.

Section I: SAFETY

Emergency Plans
Environmental Health and Safety
Transportation (By Land)

STANDARD 1.1. EMERGENCY PLANS (Key: A)

This detention standard ensures a safe environment for detainees and employees by establishing contingency plans to quickly and effectively respond to emergency situations and to minimize their severity.

	Components	Rating	Remarks (1000 Char Max)
1.	Staff are trained to identify signs of detainee unrest.	Meets Standard	Officers are trained in pre-service and annual in-service training on identifying signs of detainee unrest.
2.	All staff receive training in emergency preparedness during their initial orientation, and training on the facility's emergency plans at least annually.	Meets Standard	
3.	PRIORITY: The facility shall have in place contingency plans for responding to emergencies, including a locally approved and annually updated evacuation plan.	Meets Standard	The facility demonstrates emergency response preparedness via the comprehensive contingency plans they have in place. The evacuation plan, which is reviewed and updated annually, is approved annually by the Aurora City fire authority.
4.	Contingency plans shall include procedures for handling special needs detainees during an emergency or evacuation.	Meets Standard	
5.	The facility administrator shall notify facility staff in a timely manner when changes are made to the emergency plan.	Meets Standard	Changes to the emergency plans are posted in the training room and officers are advised of any changes during shift briefings. The updated plans are available to all employees electronically.
6.	(SPCs/CDFs) Each SPC and CDF shall develop contingency plans with local, State, and Federal law enforcement agencies and formalize those agreements with Memoranda of Understanding (MOUs). The facility administrator shall review and approve contingency plans at least annually.	Meets Standard	The facility has developed contingency plans and formalized agreements with the Aurora Police Department, Aurora Fire Department, and ICE. The plans are reviewed and updated annually by the warden.
7.	Every plan that is being developed or is final must include a statement prohibiting unauthorized disclosure.	Meets Standard	Each emergency plan contains a statement that the plan is confidential and unauthorized disclosure is prohibited.
8.	The facility shall establish written policy and procedures addressing, at a minimum: chain of command, command post/center, staff recall, staff assembly, emergency response components, use of force, video recording, records and logs, utility shutoff, employee conduct and responsibility, public relations, facility security, etc.	Meets Standard	
9.	(SPCs/CDFs) The facility shall set up a primary command post outside the secure perimeter that is equipped as per	Meets Standard	The primary command post is in the administration conference room. The room is outside the

STANDARD 1.1. EMERGENCY PLANS (Key: A)

This detention standard ensures a safe environment for detainees and employees by establishing contingency plans to quickly and effectively respond to emergency situations and to minimize their severity.

Components	Rating	Remarks (1000 Char Max)
the Emergency Plan standard.		secure perimeter and is equipped in accordance with the Emergency Plan standard.
10. At least one video camera shall be maintained in the Control Center for use in emergency situations.	Meets Standard	The facility maintains multiple video cameras for use in emergency situations. One of the cameras is secured in master control.
11. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	Meets Standard	
12. The FSA shall make contingency plans for providing meals to detainees and staff during an emergency, including access to community resources, which the FSA shall negotiate during the planning phase.	Meets Standard	The facility maintains a thirty-day supply of food. The FSA has coordinated contingency plans with Shamrock Foods and Sysco Foods for meal preparation during emergencies.
13. The plan shall include post-emergency procedures.	Meets Standard	
 Written procedures cover: Work/Food Strike Fire Environmental Hazard Detainee Transportation System Emergency ICE-wide Lockdown Staff Work Stoppage Disturbances Escapes Bomb Threats Adverse Weather Internal Searches Facility Evacuation Detainee Transportation System Plan Hostages (Internal) Civil Disturbances If needed, other site-specific plans 	Meets Standard	Written procedures address all listed contingencies.

STANDARD 1.1. EMERGENCY PLANS - Reviewer Summary

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

STANDARD 1.1. EMERGENCY PLANS – 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 plans in place to direct effective responses to emergencies. These plans are considered confidential and are handled accordingly. Officers are well versed in monitoring the detainee climate within the facility. All officers receive preservice and annual training on the facility emergency plans.

The chief of security is responsible for developing and implementing emergency contingency plans. All plans address confidentially, accountability, review and revision. Each plan includes procedures for rendering emergency assistance to other facilities in the form of supplies, transportation, and temporary housing, etc.

In the development of plans, the expertise of all department heads is solicited, and they are made aware of their responsibility to be fully ready to exercise that responsibility under the plan. An accurate inventory of equipment identified for use during implementation of the plan is maintained and reviewed at least every six months to ensure its accuracy.

Emergency plans are updated as often as necessary and forwarded to the OIC for approval. Reviews of plans are conducted annually, with participation from every department head. Annual reviews and approval of the plans are recorded on the master copy of the emergency plan file, even if the review resulted in no changes. The chief of security determines where copies of the various plans are to be stored, and in what quantity. A master copy of the plans is maintained outside the secure perimeter, along with an itemized list of plans and where they can be found. There is a checkout system that accounts for all plans at all times, with safeguards against detainee access.

General requirements for emergency plans implementation include policy and procedure for alternative means of reaching the facility for emergency staff if the main approach becomes dangerous or inaccessible; how and when staff notify nearby residents of the situation, including type of emergency, actions being taken, evacuation routes if applicable, and special precautions; and types of radio equipment to be utilized during the emergency, and where battery charging stations are to be located.

To evaluate this standard, emergency plans and the emergency shut-off manual were reviewed, and employees were interviewed.

riewer Name (Printed)(b)(6);(b)(7)(C)	Completion Date: 9/29/2016
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STANDARD 1.2. ENVIRONMENTAL HEALTH AND SAFETY (Key: B)

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

	Components	Rating	Remarks (1000 Char Max)
1.	 Environmental health and safety conditions shall be maintained at a level that meets recognized standards of safety and hygiene, including those from the: American Correctional Association, Occupational Safety and Health Administration, Environmental Protection Agency, Food and Drug Administration, National Fire Protection Association's Life Safety Code, and National Center for Disease Control and Prevention. 	Meets Standard	Environmental health and safety conditions are being maintained at a level consistent with the recognized safety and hygiene standards of the organizations listed in this component.
2.	A housekeeping plan will be developed for detainee living areas noted in the standards. The facility appears clean and well maintained.	Meets Standard	A housekeeping schedule has been established which covers all areas of the facility. The matrix identifies areas to be cleaned and the solutions, techniques and equipment to be used.
3.	The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	Meets Standard	
4.	 The Maintenance Supervisor or facility administrator designee shall compile: An up to date master index of all hazardous substances in the facility and their locations; A master file of MSDSs; and A comprehensive, up-to-date list of emergency phone numbers (fire department, poison control center, etc.). 	Meets Standard	The fire safety manager, the OIC designee, is responsible for compiling and maintaining a current master MSDS catalog of all substances stored inside the facility, and their locations. Remote storage locations are identified on a legend in the master MSDS file. A list of emergency phone numbers is maintained by and available in master control. Master control personnel are responsible for making contact with the appropriate respondent for a declared emergency.
5.	All personnel using flammable, toxic, and/or caustic substances follow prescribed safety procedures.	Meets Standard	
6.	The MSDS are readily accessible to staff and detainees in the work areas.	Meets Standard	MSDSs, in English and Spanish, are readily accessible in all areas where hazardous substances are stored.
7.	Hazardous materials are always issued under proper supervision.	Meets Standard	

STANDARD 1.2. ENVIRONMENTAL HEALTH AND SAFETY (Key: B)

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

	Components	Rating	Remarks (1000 Char Max)
8.	All toxic and caustic materials stored in their original containers in a secure area.	Meets Standard	
9.	Excess flammables, combustibles, and toxic liquids are disposed of properly in accordance with MSDS.	Meets Standard	
10.	The facility program will be supervised by a person who has been trained in accordance with OSHA standards.	Meets Standard	The environmental health and safety program is supervised by the fire safety manager. He is OSHA trained and certified. He has a B.A. degree in Occupational Safety and Health and has 25 years of safety experience in the nuclear power industry.
11.	PRIORITY: A qualified departmental staff member shall conduct weekly fire and safety inspections.	Meets Standard	The fire safety manager conducts and documents weekly fire safety inspections. Documentation supports adherence to the inspection schedule.
12.	Facility maintenance (safety) staff shall conduct monthly inspections.	Meets Standard	The electronic Facility-DUDE program enables maintenance personnel to monitor and schedule monthly inspections of most of the facility's utility systems. Monthly inspections of environmental and emergency control systems are conducted.
13.	The facility maintains files of inspection reports, including corrective actions taken.	Meets Standard	
14.	PRIORITY: 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 Aurora Fire Department on 07/08/2016.
15.	 The plan requires: Monthly fire inspections. Fire protection equipment strategically located throughout the facility. Public posting of emergency plan with accessible building/room floor plans. Exit signs and directional arrows. An area-specific exit diagram conspicuously posted in the diagrammed area. 	Meets Standard	The fire prevention, control and evacuation plan addresses all of the requirements listed in this component. Documentation and observation supports adherence to these requirements

STANDARD 1.2. ENVIRONMENTAL HEALTH AND SAFETY (Key: B)

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

	Components	Rating	Remarks (1000 Char Max)
16.	Fire drills are conducted and documented quarterly in all facility locations including the administrative area.	Meets Standard	Fire drills are conducted quarterly in all areas of the facility across all work shifts. Documentation supports adherence to the plan and schedule.
17.	PRIORITY: The facility administrator shall ensure licensed pest-control professionals perform monthly inspections to identify and eradicate rodents, insects and vermin, including a preventative spraying program for indigenous insects.	Meets Standard	Eco-Lab, a licensed pest control contractor, provides monthly inspections of the facility in order to identify and exterminate pests. Monthly preventative spraying is a contractual obligation. Documentation supports monthly inspections.
18.	At least annually, a state laboratory shall test samples of drinking and wastewater to ensure compliance with applicable Standards.	Meets Standard	The city of Aurora conducts monthly tests of the facility's drinking water. No concerns were noted during this inspection period. The facility is connected to the city of Aurora central sewer system; their testing adheres to applicable health codes and regulations.
19.	Emergency power generators are tested as required by emergency plans and manufacturer's recommendations.	Meets Standard	
20.	(Medical Operations) Written procedures, to include an exposure-control plan in the event of a needle stick, regulate the handling and disposal of used needles and other sharp objects.	Meets Standard	Medical written procedures address an exposure control plan and the handling of needles and other sharps.
21.	 (Medical Operations) Standard cleaning practices include: Using specified equipment; cleansers; disinfectants and detergents. An established schedule of cleaning and follow-up inspections. 	Meets Standard	
22.	(Medical Operations) Spill kits are readily available.	Meets Standard	Spill kits are readily available in the health care unit.
23.	(Medical Operations) A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	Meets Standard	Med-Pro is the contractor responsible for disposal of infectious/bio-hazardous waste.
24.	(Medical Operations) Staff are trained to prevent contact with blood and other body fluids and written procedures are followed.	Meets Standard	Training for contact prevention of blood and other body fluids is a mandatory component in initial and annual training sessions for all employees.

STANDARD 1.2. ENVIRONMENTAL HEALTH AND SAFETY (Key: B)

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

	Components	Rating	Remarks (1000 Char Max)
25.	(Medical Operations) The Health Services Administrator conducts medical-facility inspections daily.	Meets Standard	
26.	The facility administrator designee shall: conduct special investigations and comprehensive surveys of environmental health conditions, and provide advisory, consultative, inspection, and training services regarding environmental health conditions.	Meets Standard	
27.	The facility administrator designee for environmental health is responsible for developing and implementing policies, procedures, and guidelines for the environmental health program.	Meets Standard	The fire safety manager is the OIC designee responsible for developing and implementing procedures, programs and compliance for maintaining environmental health throughout the facility.

STANDARD 1.2. 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 has a fire/smoke alarm and detection system and an automatic sprinkler system for fire suppression that meets all local and national fire safety codes. The fire alarm system, the suppression and sprinkler systems and the fire extinguishers are inspected and tested in adherence to manufacturer's recommendation and requirements of the standard.

The facility maintains a high degree of cleanliness and sanitation by enforcing daily cleaning regiments. Non-toxic cleaning supplies are used for all cleaning purposes as recommended by the manufacturer. Garbage and refuse is collected and removed as necessary to maintain sanitary conditions and to avoid creating a health hazard. The methods for handling and disposing of refuse meet all regulatory requirements.

Medical cleaning procedures include daily health care unit cleaning, isolation cleaning, blood and body fluid clean-up and the use of disinfectants. Infectious waste is clearly labeled and contained. Universal precautions are followed by all personnel when handling infectious waste. All items that pose a security risk are inventoried every shift by medical personnel.

A review of training files indicated that individuals who use a hazardous substance are trained on all prescribed precautions. Protective equipment is available. Hazards or spills are immediately reported to a supervisor. Eyewash stations are in designated areas throughout the facility; staff members and detainees have been instructed in their use. Hazardous and flammable materials are maintained in the warehouse; their inventories were accurate. The master index includes a comprehensive, up-to-date list of emergency phone numbers; it is maintained in master control.

Cleaning substances are diluted and only issued by staff members. All chemical storage areas maintain accurate inventories. Automated dispensers are used to distribute or dilute full strength cleaning solutions. All chemicals, solvents and other caustic materials are labeled and in the original containers or approved miscellaneous containers.

The barbershop is located in a separate room and is not used for any other purpose. The floor and walls are smooth, nonabsorbent and easily cleaned. An officer is on-site during barbershop hours and escorts detainees to an adequately equipped lavatory, when necessary. Barbering equipment is kept in the watch commander's office. An inventory of each barber box is checked upon issuance and returned by the barbershop officer. Sanitation regulations are conspicuously posted on the walls. The barbershop has all the equipment and facilities necessary for maintaining sanitary procedures for hair care.

STANDARD 1.2. ENVIRONMENTAL HEALTH AND SAFETY - Reviewer Summary

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

Interviews with six ICE detainees, who have been here from one week to two months, revealed they were satisfied with the sanitation conditions of their housing units and common areas.

Interviews with the fire safety manager, the compliance manager, maintenance personnel, the health services administrator and major; inspection of the hazardous materials storage rooms and their inventories; review of policy, MSDS binders, fire/safety inspection documentation, service contracts and training records; and observations of overall sanitation conditions revealed detainees, staff, volunteers and contractors are protected from injury and illness through an established plan that maintains an acceptable level of cleanliness and sanitation.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6):(b)(7)(C) Completion Date: 9/29/2016

Reviewer Signature (for printed form submission):

STANDARD 1.3. TRANSPORTATION (BY LAND) (Key: C)

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

Standard 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.	The Facility Administrator shall develop and implement written policy, procedures and guidelines for the transportation of detainees.	Meets Standard	Written policy establishes procedures and guidelines for the transportation of detainees.
2.	Documentation indicating annual inspection of vehicles and annual inspection in accordance with state statutes is available for review.	Meets Standard	Documentation of annual vehicle inspections is maintained in the transportation supervisor's office and available for review.
3.	To be assigned to a bus transporting detainees, an officer must have successfully completed the ICE/ERO bus-driver-training program or a comparable approved training program and all local state requirements for a Commercial Driver's License (CDL).	Meets Standard	Officers complete a forty-hour ICE approved GEO bus driver course before being assigned to transport detainees. Officers must complete the requirements for a CDL.
4.	Supervisors maintain records for each vehicle operator. This includes certificate of completion from bus training program, most current physical exam used to obtain the CDL, and a copy of the CDL.	Meets Standard	
5.	Maximum driving time (time on the road), for CDL operators, is governed by USDOT.	Meets Standard	
6.	The transporting officer inspects the vehicle before the start of each detail.	Meets Standard	
7.	Positive identification of all detainees being transported is confirmed.	Meets Standard	Detainees are identified by photo prior to boarding the vehicle.
8.	The facility ensures that the number of detainees transported does not exceed the vehicle manufacturer's occupancy level.	Meets Standard	
9.	Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	Meets Standard	Policy addresses the use of restraining equipment on transportation vehicles.
10.	Vehicles used for transporting detainees include equipment appropriate and necessary for transporting detainees with disabilities and special needs.	Meets Standard	The facility utilizes a van equipped with a wheelchair lift for transporting detainees with disabilities and special needs.
11.	Meals are provided during long distance transfers. The meals meet the minimum dietary standards, as identified by dieticians utilized by ICE.	Meets Standard	Sack lunches are provided during long distance transfers. The sack lunches have been approved by the dietician.

STANDARD 1.3. TRANSPORTATION (BY LAND) (Key: C)

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

Standard 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)
12.	The facility administrator shall establish the procedures and schedule for sanitizing facility vehicles.	Meets Standard	Vehicles are sanitized according to a schedule established by the transportation supervisor.
13.	Personal property of a detainee transferring to another facility: Is inventoried. Is inspected. Accompanies the detainee.	Meets Standard	Personal property is inventoried, inspected and accompanies the detainee when transferred.
14.	Except in emergency situations, a single transportation staff member may not transport a single detainee of the opposite gender. Minors shall be separated from unrelated adults at all times during transport and seated in an area of the vehicle near officers and under their close supervision.	Meets Standard	Transports are conducted with (b)(7)(E) The facility does not transport minors.

STANDARD 1.3. TRANSPORTATION (BY LAND) - Reviewer Summary

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

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

Facility policy and procedures prevent harm to the general public, detainees, and staff by ensuring that vehicles are properly equipped, maintained, and operated and that detainees are transported in a secure, safe and humane manner, under the supervision of trained and experienced staff.

Drivers operate the vehicle in accordance with the highest prevailing standard and must maintain complete control of the vehicle at all times obeying all safety laws. Driving under the influence of drugs or alcohol is prohibited. Transporting officers comply with all state and federal motor vehicle regulations, including: wearing seat belts, transporting detainees in a safe and humane manner, driving defensively, re-inspecting the vehicle after each trip and returning the vehicle keys to the control officer or supervisor. Expenses are recorded using local procedures and credit cards assigned to the vehicle are safeguarded.

The transportation officers post orders specify that officers secure the vehicle before leaving it unattended, including removal of the keys from the ignition. Officers avoid parking in a spot where the vehicle would attract undue attention or be vulnerable to vandalism or sabotage.

Officers wear prescribed uniforms unless other attire is authorized by the OIC. Transportation officers are issued and wear (b)(7)(E) while transporting detainees.

A form I-203 is completed prior to any detainee being removed from the facility. Before transferring detainees from one facility to another, the receiving office is informed of the estimated time of departure, the number of detainees being transferred, any special handling cases and any estimated delays in departure affecting arrival times.

(b)(7)(E)officers are posted whenever detainees enter or exit a vehicle outside a secure area. A complete set of keys for every

STANDARD 1.3. TRANSPORTATION (BY LAND) – Reviewer Summary				
(Use following format for dates: mm/dd/yyyy)				
lock located in or on the vehicle travels with the vehicle at all times.				
Armed officers do not enter the secure area of the vehicle. During any stop, detainees are not allowed to leave the vehicle until the officers secure the area. Once disembarked officers keep detainees under constant observation to prevent external contact and/or contraband smuggling or exchange.				
Transportation vehicles are equipped with $(b)(7)(E)$ Each vehicle is provided with all the equipment specified in the transportation standard. The OIC has established written procedures in the transportation post orders addressing all of the emergency situations noted in the transportation standard.				
During the evaluation of this standard, policy and post orders were reviewed, vehicle inspection sheets and drivers' files were				
examined, a transport vehicle and transport restraints were inspected, and employees were interviewed.				
Overall Rating: Meets Standard				
Reviewer Name (Printed): (b)(6);(b)(7)(C) Completion Date: 9/29/2016				
Reviewer Signature (for printed form submission):				

Section II: SECURITY

Admission and Release
Custody Classification System
Contraband
Facility Security and Control
Funds and Personal Property
Hold Rooms in Detention Facilities
Key and Lock Control
Population Counts
Post Orders
Searches of Detainees
Sexual Abuse and Assault Prevention and Intervention
Special Management Units
Staff-Detainee Communication
Tool Control
Use of Force and Restraints

STANDARD 2.1. ADMISSION AND RELEASE (Key: D)

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

	Components	Rating	Remarks (1000 Char Max)
1.	The facility has implemented written policies and procedures for the intake and reception of newly arrived detainees and provided them with information about facility policies, rules and procedures.	Meets Standard	Written policies and procedures govern the intake and reception of newly arrived detainees. At intake detainees are given the National Detainee Handbook and a local handbook. The handbooks provide detainees with specific information about facility policies, rules and procedures. Both handbooks are available in English and Spanish, languages spoken by the majority of detainees held at the facility. A facility specific information video is shown at intake and can also be viewed by detainees during day hours on housing unit television monitors.
2.	At intake, detainees are searched, and their personal property and valuables checked for contraband, inventoried, receipted, and stored.	Meets Standard	
3.	Each detainee's identification documents are secured in the detainee's A-file.	Meets Standard	
4.	A medical screening will be conducted to protect the health of the detainee and others in the facility, and the detainee shall be given an opportunity to shower and be issued clean clothing, bedding, towels, and personal hygiene items.	Meets Standard	Newly admitted detainees are screened by a trained medical professional. They will also be given an opportunity to shower and issued clean clothing, bedding, towels and hygiene items.
5.	The facility shall comply with applicable federal laws to provide reasonable accommodations for detainees with disabilities and special needs.	Meets Standard	
6.	Staff shall not routinely require a detainee to remove clothing or require a detainee to expose private parts of his or her body to search for contraband.	Meets Standard	
7.	Staff shall issue those clothing and bedding items that are appropriate for the facility environment and local weather conditions.	Meets Standard	Policy notes that detainees will be issued clothing suitable for the local climate conditions.

STANDARD 2.1. ADMISSION AND RELEASE (Key: D)

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

	Components	Rating	Remarks (1000 Char Max)
8.	Staff shall use the documentation accompanying each new arrival for identification and classification purposes. If the classification staff is not ICE/ERO employees ICE/ERO shall provide the information needed for classification. Under no circumstances may non-ICE/ERO personnel have access to the detainees A-File.	Meets Standard	ICE classification documents accompany all new detainee arrivals to the facility. An officer will review the documents and classify the detainees using the ICE classification worksheet. Non-ICE/ERO personnel do not have access to detainee A-Files.
9.	An Order to Detain or Release the detainee (Form I-203 or I-203a), bearing the appropriate ICE/ERO Authorizing Official signature, must accompany each newly arriving detainee.	Meets Standard	Detention files, active and inactive, were reviewed and found to contain signed I-203 and I-216 forms for each detainee. The forms were dated the day the detainee was admitted to the facility.
10.	PRIORITY: Facilities shall have a method to provide ICE/ERO detainees an orientation to the facility as soon as practicable, in a language or manner that detainees can understand. Following the orientation, staff shall conduct a question-and-answer session.	Meets Standard	During the intake process, detainees view the ICE Know Your Rights video, a sexual assault prevention video and a site-specific orientation video. They are also given the National Detainee Handbook and the local handbook. The videos and handbooks are available in both English and Spanish. The intake process also includes a question and answer session conducted by a Spanish speaking officer or an officer assisted by a language line for detainees who do not speak English or Spanish.
11.	The facility shall issue to each newly admitted detainee a copy of the ICE National Detainee Handbook and local supplement that fully describes all policies, procedures, and rules in effect at the facility. The handbook and supplement shall be in English and Spanish.	Meets Standard	All newly admitted detainees are issued the ICE National Detainee Handbook and a local handbook. The handbooks, available in Spanish and English, fully describe all policies, rules and program services. Detainees sign a receipt attesting to the fact that they were given the handbooks.
12.	All releases are coordinated with ICE.	Meets Standard	1
13.	Staff complete paperwork/forms for release as required.	Meets Standard	
14.	The facility returns each detainee's property upon release, and each detainee receives a receipt for personal property secured by the facility.	Meets Standard	

STANDARD 2.1. ADMISSION AND RELEASE (Key: D)

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

Components	Rating	Remarks (1000 Char Max)
15. PRIORITY: The facility has a system to maintain accurate records and documentation for admission, orientation, and release.	Meets Standard	A file is created for each newly admitted detainee. Active and inactive files were reviewed. Each file contained admission, orientation and release documentation.
16. PRIORITY: The time, point and manner of release from a facility shall be consistent with safety considerations and shall take into account special vulnerabilities. Facilities that are not within a reasonable walking distance of, or that are more than one mile from, public transportation shall transport detainees to local bus/train/subway stations prior to the time the last bus/train leaves such stations for the day. If public transportation is within walking distance of the detention facility, detainees shall be provided with an information sheet that gives directions to and describes the types of transportation services available.	Meets Standard	Releases are consistent with safety considerations. Special vulnerabilities are taken into account and accommodated during releases. Detainees are either picked up by family members/friends or staff will provide transport to local public transportation. There is also a bus stop within walking distance from the facility. An information sheet is provided to detainees released directly from the facility which describes the types of transportation services available and provides information regarding social service organizations in the area.
17. Facilities must provide transportation for any detainee who is not reasonably able to walk to public transportation due to age, disability, illness, mental health or other vulnerability, or as a result of weather or other environmental conditions at the time of release that may endanger the health or safety of the detainee.	Meets Standard	
18. Prior to release, the detainee shall be notified of the upcoming release and provided an opportunity to make a free phone call to facilitate release arrangements.	Meets Standard	A detainee pending release is provided an opportunity to make a free telephone call to facilitate release arrangements.
19. Detainees will be provided with a list of legal, medical, and social services that are available in the release community, and a list of shelter services available in the immediate area along with directions to each shelter.	Meets Standard	Released detainees are provided all of the information listed in this component.
20. Detainees will be released with one set of non-institutionalized, weather-appropriate clothing.	Meets Standard	

STANDARD 2.1. ADMISSION AND RELEASE - Reviewer Summary

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

STANDARD 2.1. ADMISSION AND RELEASE - 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 protect the community, detainees, staff, volunteers and contractors by ensuring secure and orderly operations when detainees are admitted to or transferred from this facility. A telephone language line provides interpreters for a detainee who does not speak English or Spanish. This service is available during the orientation process as needed. The facility houses males and females. No items of personal clothing are permitted.

Evaluation of the standard included review of policy, detention files, the local handbook and a site specific orientation video; and interviewing detainees, ICE and facility personnel. The inspector also interviewed two LEP detainees who were being admitted to the facility.

Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6);(b)(7)(C)	Completion Date: 9/29/2016
Reviewer Signature (for printed form submission):	

STANDARD 2.2. CUSTODY CLASSIFICATION SYSTEM (Key: E)

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

	Components	Rating	Remarks (1000 Char Max)
1.	PRIORITY: Each facility shall develop and implement a system for classifying detainees in accordance with This detention standard. Facilities may rely on the ICE Custody Classification Worksheet, adopt the ICE custody classification recommendation generated by an ICE Field Office when one is provided, or use a similar locally established classification system (subject to ICE/ERO approval), as long as the classification criteria are objective and uniformly applied, and all procedures meet ICE/ERO requirements.	Meets Standard	ICE classification documents accompany all new detainee arrivals to the facility. An officer will review the documents and classify the detainees using the ICE custody classification worksheet. The facility's classification process is an objective, fact based classification system which complies with the requirements stipulated in this component and is in accordance with the standard.
2.	Staff shall reference facts and other objective, credible evidence documented in the detainee's A-file, ICE automated records systems, criminal history checks, workfolders, or other objective sources of information during the classification process. The classification process includes reassessment/reclassification.	Meets Standard	
3.	(SPCs/CDFs/DIGSAs) The custody classification recommendation generated by an ICE Field Office, when one is provided, or the point total from the ICE Custody Classification Worksheet, will determine the classification level of each detainee.	Meets Standard	At this CDF, the point total from the ICE custody classification worksheet determines the classification level of each detainee.
4.	 The facility classification system includes: Classifying detainees upon arrival. Separating individuals who cannot be classified upon arrival from the general population. The first-line supervisor or classification supervisor reviews every classification decision. 	Meets Standard	Detainees are classified upon arrival. Those that cannot be classified upon arrival are kept separate from the general population until they are classified. A supervisor reviews every classification decision.
5.	Special consideration shall be given to any factor that would raise the risk of vulnerability, victimization or assault. Detainees who may be at risk of victimization or assault include, but are not limited to, persons who are transgendered, elderly, pregnant, physically disabled, suffering from a serious medical or mental illness, and victims of torture, trafficking, abuse, or other crimes of violence.	Meets Standard	

STANDARD 2.2. CUSTODY CLASSIFICATION SYSTEM (Key: E)

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

	Components	Rating	Remarks (1000 Char Max)
6.	At facilities where applicable, detainees are assigned color- coded uniforms, wristbands, or other means of custody identification to reflect classification levels. In IGSA's a similar system is utilized for each level of classification.	Meets Standard	Detainees are issued color-coded uniforms and wristbands to identify their specific classification level.
7.	PRIORITY: Housing assignments are based on classification-level. Low custody detainees may not be commingled with high custody.	Meets Standard	Policy dictates that housing assignments shall be based upon a detainee's classification level. Policy further states that low custody detainees will not be commingled with high custody detainees.
8.	PRIORITY: Low custody detainees may not have convictions that included an act of physical violence, or any history of assaultive behavior, and may not be housed with any medium custody detainee with a history of assaultive or combative behavior.	Meets Standard	Policy stipulates that detainees who have convictions that include an act of physical violence or any history of assaultive behavior may not be classified as low custody. Policy further states that low custody detainees may not be housed with any medium custody detainee with a history of assaultive or combative behavior.
9.	Detainee work assignments are based upon classification designations.	Meets Standard	Low and medium low custody detainees with no assaultive history may be assigned jobs outside their housing units.
10.	The classification process includes reassessment/ reclassification. The first reassessment is to be completed 60 days to 90 days after the initial assessment.	Meets Standard	
11.	Subsequent classification reassessments are completed at 90 day to 120 day intervals. Special reassessments are completed within 24 hours before a detainee leaves the Special Management Unit, and at any other time when additional, relevant information becomes known.	Meets Standard	Policy states that subsequent classification assessments for general population detainees will be routinely completed at thirty, sixty and ninety day intervals. Special reassessments are completed before the detainee leaves the special management unit (SMU) and at any other time when relevant information becomes known.
12.	The facility classification system shall include procedures for detainees to appeal their classification levels. Classification decisions, along with information on the appeal process, should be provided to the detainee in a language or manner understood by the detainee.	Meets Standard	

STANDARD 2.2. CUSTODY CLASSIFICATION SYSTEM (Key: E)

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

Components	Rating	Remarks (1000 Char Max)
13. The Detainee Handbook explains the classification levels, with the conditions and restrictions applicable to each, and the procedures by which a detainee may appeal his or her classification.	Meets Standard	

STANDARD 2.2. CLASSIFICATION SYSTEM - Reviewer Summary

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

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

Personnel with detainee-intake/processing responsibilities receive on-site training which teaches techniques for identifying and recording data from files and related records needed for classification purposes.

All detainees are assigned color uniforms and a wristband which notes the detainee's classification level and A-number. High custody detainees wear red uniforms, medium high wear orange, medium low wear orange tops and blue bottoms, and low custody detainees wear blue. The reviewing supervisor ensures that each detainee has been assigned to the appropriate housing unit.

Policy states that detainees classified as low custody are not housed with high custody detainees. Detainees classified as low custody will not have a felony conviction that included an act of physical violence and may not have been convicted of an aggravated felony.

Medium custody detainees do not have a recent conviction for any offense listed under the "HIGHEST" section of the severity of offense guideline; and do not include any detainee with a pattern or history of violent assaults, whether convicted or not. High custody detainees are considered a high-risk category and are assigned to appropriate security housing. High custody detainees are always monitored and escorted.

To evaluate this standard, ICE and facility personnel were interviewed and policy and classification forms were reviewed.

verall Rating: Meets Standard		
eviewer Name (Printed):(b)(6);(b)(7)(C)	Completion Date: 9/29/2016	

STANDARD 2.3. CONTRABAND (Key: F)

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

	Components	Rating	Remarks (1000 Char Max)
1.	PRIORITY: The facility follows a written procedure for handling contraband, including the detection, seizure of contraband, disputed ownership, detainee or government property defined as contraband, and the preservation, inventory, and storage of contraband as evidence of a crime.	Meets Standard	There is a written procedure for handling contraband. The procedure fully addresses the requirements of this component.
2.	Contraband is retained as evidence for potential disciplinary action or criminal prosecution.	Meets Standard	Contraband retained as evidence for potential disciplinary action is secured and retained by the chief of security. Contraband retained as evidence for criminal prosecution is turned over to the Aurora Police Department.
3.	Before confiscating religious items, the Facility Administrator or designated investigator contacts a religious authority.	Meets Standard	The OIC or designee will generally consult with a religious authority prior to confiscating religious items.
4.	Facilities with canine units only use them for contraband detection and not in the presence of ICE detainees.	N/A	The facility does not have a canine unit.
5.	Detainees receive notification of contraband rules and procedures in the Detainee Handbook.	Meets Standard	All detainees receive a copy of the facility handbook which addresses the contraband rules and procedures.

STANDARD 2.3. CONTRABAND – 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 preserving, inventorying, controlling and disposing of seized contraband in accordance with the standard.

When a detainee's claimed ownership of potential contraband material is in question, staff inventory and store the item pending verification of ownership and provide the detainee a copy of the inventory. Once notified, detainees have thirty days to prove ownership of the listed items.

Policy states that narcotics and other controlled substances not dispensed or approved by the medical department constitute hard contraband. Medication dispensed or approved by the medical department is classified as hard contraband if found in the possession of a detainee for whom it was not prescribed, or if not used as prescribed. Employees must consult with the pharmacist or other medical staff when uncertain about whether prescribed medication represents contraband. Medicine a detainee brings into the facility upon arrival is required to be forwarded to the medical department for disposition.

Policy states the OIC determines when personal property items are excessive, and arranges to pay shipping costs to a third party chosen by the detainee. The OIC disposes of excess property in accordance with policy, after providing the detainee with written notice of the intent to destroy the property and how to prevent that outcome. The chief of security determines whether contraband items will be destroyed and, upon determination, sends a memorandum through official channels, describing what is to be destroyed and why. Procedures are in policy to provide detainees with ample opportunity to obtain proof of ownership or appeal the decision through the detainee grievance process. In disciplinary contraband cases, the OIC

STANDARD 2.3. CONTRABAND - Reviewer Summary

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

defers the decision about property destruction until the disciplinary case is resolved and appeals are satisfied. At least two employees are required to document in writing that they witnessed the destruction of detainee contraband property.

This standard was evaluated via staff interviews, policy review, and the inspection of documentation regarding contraband incidents.

Overall Rating: Meets Standard

Reviewer Name (Printed):(b)(6);(b)(7)(C) Completion Date: 9/29/2016

Reviewer Signature (for printed form submission):

STANDARD 2.4. FACILITY SECURITY AND CONTROL (Key: G)

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

	Components	Rating	Remarks (1000 Char Max)
1.	At least one male and one female staff member are on duty at all times where both males and females are housed.	Meets Standard	Male and females officers are on duty at all times.
2.	Comprehensive annual staffing analysis determines staffing needs and plans and is reviewed and updated annually.	Meets Standard	A staffing analysis is conducted by an assistant warden annually and must be reviewed and approved by the OIC.
3.	Essential posts and positions are filled with qualified personnel.	Meets Standard	
4.	(SPCs/CDFs/DIGSAs) Detainees do not have access to the Control Center.	Meets Standard	At this CDF, detainees do not have access to central control.
5.	Facility security and safety will be monitored and coordinated by a secure, well-equipped, and continuously staffed control center.	Meets Standard	Central control is continuously staffed seven days a week and is well equipped and capable of monitoring the security and safety of the staff and the facility.
6.	(SPCs/CDFs/DIGSAs) The facility administrator shall establish procedures to implement the following Control Center requirements: Round-the clock communications; Maintenance of a list of the current home and cellphone number of every staff member assigned to the facility, including administrative/support services staff, Situation Response Teams (SRTs), Hostage Negotiation Teams (HNTs), and applicable law enforcement agencies. Watch calls (officer safety checks) to the Control Center by all staff ordinarily shall occur every half-hour between 6:00 P.M. and 6:00 A.M. Individual facility policy may designate another post to conduct watch calls. Any exception for staff to not make watch calls as described requires approval of the facility administrator.	Meets Standard	At this CDF, policy and procedures address each of the bulleted items in this component. The control center maintains round the clock communications and maintains a list of the current home and cell phone numbers of every officer, administrator, support staff, situation response team members, and hostage negotiation team members and law enforcement agencies. Watch calls are made every halfhour between 6:00 p.m. and 6:00 a.m.
7.	The front-entrance officer checks the identification of everyone entering or exiting the facility.	Meets Standard	The front entrance officer checks the identification of everyone entering or exiting the facility.
8.	All visits are officially recorded in a visitor logbook.	Meets Standard	Written and electronic visitor logs are maintained.
9.	The facility has a secure visitor pass system.	Meets Standard	
10.	Information about routine procedures, emergency situations, and unusual incidents will be continually recorded in permanent post logs and shift reports.	Meets Standard	

STANDARD 2.4. FACILITY SECURITY AND CONTROL (Key: G)

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

Components		Rating	Remarks (1000 Char Max)
CDFs "0515 maint detair	/CDFs/DIGSAs) Housing unit Post Orders in SPCs and shall follow the event schedule format, for example, a Lights on" and shall direct the assigned officer to tain a unit log of pertinent information regarding thee activity. The shift supervisor shall visit each and and initial the log on each shift at least once bur.	Meets Standard	The housing unit post orders at this CDF follow the daily event schedule and provide direction to officers to maintain a log of all pertinent information regarding detainee activity. A supervisor visits each housing unit on each shift and initials the log.
adjac	ity officer posts shall be located in or immediately ent to detainee living areas to permit officers to see ar and respond promptly to emergency situations.	Meets Standard	Security officer posts are located inside each of the housing units, providing constant sight and sound monitoring for officers, thereby facilitating prompt responses to emergencies.
Medical Company of the Company of th	nee movement from one area to another area is olled by staff.	Meets Standard	
	RITY: No detainee may ever be given authority over, permitted to exert control over, any other detainee.	Meets Standard	Policy and practice prohibit detainees from having authority or exerting control over any other detainee.
admir by the housi	acility administrator, designated assistant facility nistrator, security supervisors, and others designated a facility administrator shall be required to visit all ng units at least weekly to observe living conditions at least with detainees.	Meets Standard	
16. The fa	cility has a comprehensive security inspection policy.	Meets Standard	
17. Docur	mentation of security inspections is kept on file.	Meets Standard	Security inspection documentation is maintained by the chief of security.
• P	procedures include: erimeter alarm system tests. hysical checks of the perimeter fence. ocumenting the results.	Meets Standard	Perimeter alarm system tests and physical checks of the perimeter fence are conducted at least once on each shift. The results of the checks are documented by the officer conducting the checks, and archived in a lieutenant's office.

STANDARD 2.4. FACILITY SECURITY AND CONTROL – Reviewer Summary

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

STANDARD 2.4. FACILITY SECURITY AND CONTROL - 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 an inspection process and other mechanisms that assist in maintaining security and minimizing the risk of harm.

All ICE/ERO employees are required to wear ICE/ERO-issued identification cards. The OIC has established policy delineating the procedures for tracking the arrivals and departures of contract employees.

The perimeter patrol officer checks the driver's license and insurance of the driver of delivery vehicles arriving at the facility. Officers hold the driver's license or identification of every person in the vehicle. The officer maintains a log noting the following information regarding every vehicle: tag number, driver's name, firm represented, purpose of the visit, vehicle contents, date, time in, time out, and facility employee responsible for the vehicle on-site. Vehicles are searched. Drivers making deliveries are not questioned about items considered contraband as they do not enter the facility.

Officers check the inventory of tools entering and leaving the SMU.

During the evaluation of this standard, policy and post orders were reviewed; security inspection forms, log books, and vehicle logs were inspected; the perimeter fence and perimeter patrols were observed; and employees were interviewed.

Overall Rating: Meets Standard

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

Completion Date: 9/29/2016

Reviewer Signature (for printed form submission):

STANDARD 2.5. FUNDS AND PERSONAL PROPERTY (Key: H)

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

Standard N/A

Click the button above (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.	 All detention facilities are required to have written policies and procedures to: Account for and safeguard detainee property from time of admission until date of release; Inventory and receipt detainee funds and valuables; Inventory and receipt detainee baggage and personal property (other than funds and valuables); Inventory and audit detainee funds, valuables and personal property; Return funds, valuables and personal property to detainees being transferred or release; and Provide a way for a detainee to report missing or damaged property. 	Meets Standard	Policy and procedures address all of the requirements listed in this component.
2.	 All facilities, at a minimum shall provide: A secured locker for holding large valuables, that can be accessed only by designated supervisor(s); and A baggage and property storage area that is secured when not attended by assigned admissions processing staff. 	Meets Standard	Each detainee has an individual storage bin for the safekeeping of their stored property; it is kept in the intake property storage room. Each bin is secured with a numbered zip lock which is recorded in the intake property storage room logbook. The storage room is manned by security personnel 24 hours a day. Access to the storage room and/or storage bins is controlled by the intake lieutenant.
3.	The detainee handbook or equivalent shall notify the detainees of facility policies and procedures concerning personal property.	Meets Standard	
4.	At admission, staff search and inventory detainee property only in the presence of the detainee, unless instructed otherwise by the facility administrator.	Meets Standard	Intake procedures require detainees and their property to be searched for contraband. Property is searched and inventoried in the presence of the detainee.
5.	The facility administrator shall establish whether and, how much cash each detainee may have in personal possession while in detention.	Meets Standard	

STANDARD 2.5. FUNDS AND PERSONAL PROPERTY (Key: H)

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

Standard N/A

Click the button above (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)
6.	Identity documents, such as passports, birth certificates, are held in each detainee's A-file but, upon request, staff shall provide the detainee a copy of a document, certified by an ICE/ERO official to be a true and correct copy.	Meets Standard	Identity documents are logged and held in a wall mounted storage box, located in the secure property storage room, until ICE removes them. ICE stores these items in accordance with their procedures. Detainees are provided copies of these items upon ICE approval.
7.	Every housing area shall have lockers or other securable space for storing detainees' authorized personal property. The amount of storage space shall correspond to the number of detainees assigned to that housing area.	Meets Standard	Each detainee is assigned a lockable (combination padlock) storage bin for safekeeping of their property in the housing unit. All allowed personal property must fit inside their assigned bin.
8.	(SPCs/CDFs/DIGSAs) Property discrepancies are immediately reported to the Chief of Security or equivalent.	Meets Standard	Property discrepancies are immediately reported to the shift commander and ICE, documented on an incident report form and promptly investigated.

STANDARD 2.5. FUNDS AND PERSONAL PROPERTY (Key: H)

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

Standard N/A

Click the button above (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.	 PRIORITY: Procedure ensures that: Detainee funds and small and large valuables are placed in a secure location; Medical staff determine the disposition of all medicine accompanying an arriving detainee; Detainees are able to keep a reasonable amount of personal property in their possession, provided it poses no threat to detainee safety or facility security; and Facilities return funds and valuables to detainees being transferred or released. 	Meets Standard	Procedure and practice ensure that detainee funds and small/large valuables are inventoried and securely stored in a controlled access room inside the intake area, which is manned by security officers 24 hours a day. Detainees sign and receive a copy of their inventory sheets. Valuable property is inventoried once each shift. Nonvaluable property is audited weekly. Medications accompanying a newly admitted detainee are directly handed over to medical personnel during intake. Medical personnel are onsite 24 hours a day and are present for all intakes. Detainees are permitted to retain, in their possession, a reasonable amount of approved personal property items. All funds and valuables are returned to detainees during their out-processing.
10.	For recordkeeping and accounting purposes, use of the G-589 Property Receipt form is mandatory to inventory any funds removed from a detainee's possession, and a separate form G-589 is required for each kind of currency and negotiable instrument.	Meets Standard	

STANDARD 2.5. FUNDS AND PERSONAL PROPERTY (Key: H)

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

Standard N/A

Click the button above (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.	 (SPCs/CDFs/DIGSAs) The supervisory security officer or equivalent shall remove the contents of the drop safe during his or her shift and initial the G-589 accountability log. The supervisor shall: Verify the correctness of all G-589s or equivalents; Record the amount of cash and describe each item in the supervisors' property log; and Verify the proper disposition of funds and valuables by checking the sealed envelopes in the cash box, the property envelopes in the safe, and the safekeeping of all large valuables in the designated secured locked area. 	Meets Standard	A business office designee removes and documents the money and its accompanying receipt from the secure drop safe in the intake area once a day, Monday through Friday. The designee initials the intake deposit log and documents the retrieval and amounts identified for each transaction, then reconciles the transactions and posts the deposits to the detainee's account. Detainee funds/valuables are securely stored at all times.
12.	(SPCs/CDFs/DIGSAs) The Facility Administrator has established quarterly audits of baggage and non-valuable property.	Meets Standard	Weekly audits of baggage and non-valuable property are conducted by an intake officer. Documentation supports the practice.
13.	All facilities shall report and turn over to ICE/ERO all detainee abandoned property.	Meets Standard	
14.	PRIORITY: Facilities have and follow procedures for reporting and investigating incidents of detainee property loss or damage, and for reimbursing detainees for all validated property losses caused by facility negligence. The senior contract officer immediately notifies the designated ICE/ERO officer of all claims and outcomes.	Meets Standard	Procedures dictate completion of an incident form for recording detainee allegations of property loss or damage. These claims are investigated by the programs manager. Settlements are paid for valid claims. There were no property loss/damage claims made during this inspection period. ICE personnel are immediately notified of all such claims and investigation outcomes by the programs manager.

STANDARD 2.5. FUNDS AND PERSONAL PROPERTY - Reviewer Summary

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

STANDARD 2.5. 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)

The handbook informs detainees of policies and procedures concerning funds and personal property. Each detainee is permitted to keep, in his/her possession, reasonable quantities of approved personal property. To prevent overcrowding and related storage problems, the facility permits detainees to send extra property to a third party of their choosing. If property is shipped during the detainee's stay inventory records are adjusted. A copy of the new inventory is placed in the detainee's detention file and a copy provided to the detainee. Identity documents are stored by ICE.

Inventory of detainee funds is conducted by at(b)(7)(E) officers, under camera surveillance and in the presence of the detainee. An intake officer deposits the clear, sealed envelope containing the cash, checks, money orders and other negotiable items in the drop safe. A G-589 receipt is generated and signed by the two officers and the detainee, who receives a copy.

The property storage area is maintained in a clean and orderly manner and inspected in accordance with standard requirements. All detainee luggage and facility containers used for storing detainee personal property are secured in a tamper resistant manner and are only opened in the presence of the detainee. When a detainee is being released or transferred, staff compare signatures on the inventory sheets and match cash funds, negotiable instruments and valuables against property descriptions on the G-589 and property inventory forms. Reconciled property is returned to the detainee. The detainee signs a form attesting receipt of all funds and personal property due him/her.

Interviews with an intake officer, business office personnel, ICE, medical personnel and property officers; review of policy and cash processing procedures and documentation; observation of the process of handling detainee funds; and inspection of the property storage areas revealed detainee personal property is safeguarded and controlled.

Overall Rating: Meets Standard			
Reviewer Name (Printed)(b)(6);(b)(7)(C)	Completion Date: 9/29/2016		
Paviewer Signature (for printed form submission):			

STANDARD 2.6. HOLD ROOMS IN DETENTION FACILITIES (Key: 1)

This detention standard ensures the safety, security, and comfort of detainees temporarily held in hold rooms while awaiting further processing. An individual may not be confined in a facility's hold room for more than 12 hours.

	Components	Rating	Remarks (1000 Char Max)
1.	(SPCs/CDFs/DIGSAs constructed after 1999) Each Hold Room shall contain sufficient seating for the maximum room-capacity but shall contain no moveable furniture.	Meets Standard	The hold rooms in this CDF contain sufficient seating for the maximum room capacity and have no moveable furniture.
2.	(SPCs/CDFs/DIGSAs constructed after 1999) Each Hold Room shall be equipped with stainless steel, combination lavatory/toilet fixtures with modesty panels, in compliance with the Americans with Disabilities Act of 1990.	Meets Standard	The hold rooms are each equipped with stainless steel combination lavatory/toilet fixtures with modesty panels and grab bars in accordance with ADA requirements.
3.	Each hold room shall be well-ventilated and well-lit. Detainees shall have access to potable water in hold rooms.	Meets Standard	
4.	PRIORITY: Detainees are not held in hold rooms for more than 12 hours.	Meets Standard	Detainees may not be held in hold rooms for more than twelve hours. A log is maintained noting the time each detainee is placed in a hold room and the time the detainee is removed from the hold room. Personnel interviewed stated that detainees seldom stay in a hold room for more than two hours.
5.	Male and females detainees are segregated from each other at all times.	Meets Standard	
6.	Unaccompanied minors (under 18) and parent(s) or legal guardians accompanied by minor children shall not be placed in Hold Rooms, unless they have shown or threatened violent behavior, have a history of criminal activity, or have given staff reasonable grounds to expect an escape attempt.	Meets Standard	Minors are not placed in hold rooms as the facility does not accept minors.
7.	Persons exempt from placement in a Hold Room due to obvious illness, special medical, physical and or psychological needs, or other documented reasons shall be seated in an appropriate area designated by the facility administrator outside the Hold Room, or in separate rooms, under direct supervision and control, barring an emergency.	Meets Standard	Detainees who are exempt from placement in a hold room due to illness, special medical, physical or psychological needs or other reasons are not placed in hold rooms, but are either seated outside the hold rooms under direct officer observation or moved to the medical unit.

STANDARD 2.6. HOLD ROOMS IN DETENTION FACILITIES (Key: I)

This detention standard ensures the safety, security, and comfort of detainees temporarily held in hold rooms while awaiting further processing. An individual may not be confined in a facility's hold room for more than 12 hours.

	Components	Rating	Remarks (1000 Char Max)
8.	To the extent practicable in a hold room situation, detainees with known or readily apparent disabilities, including temporary disabilities, shall be housed in manner that accommodates their mental and/or physical condition(s) and provides for their safety, comfort and security.	Meets Standard	Medical personnel are consulted to determine proper housing for detainees with disabilities.
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.	If the hold room is not equipped with toilet facilities, an officer is posted within visual or audible range to allow detainees access to such on a regular basis.	N/A	All of the hold rooms are equipped with toilet facilities inside the hold rooms.
11.	All detainees are given a pat down search for weapons or contraband before being placed in the hold room.	Meets Standard	
12.	Before placing a detainee in a room, an officer shall observe each individual to screen for obvious mental or physical problems.	Meets Standard	Processing officers closely observe detainees for obvious mental or physical problems prior to placing them in a hold room.
13.	Each detention facility maintains a detention log for each detainee placed in a hold cell.	Meets Standard	Processing officers maintain hand written logs on each detainee placed in a hold room.
14.	Officers provide a meal to any detained detained in a hold room for more than six hours. Pregnant women have access to snacks, milk or juice.	Meets Standard	
15.	Staff shall ensure that sanitation, temperatures and humidity in Hold Rooms are maintained at acceptable and comfortable levels. Pregnant women and others with evident medical needs will have temporary access to temperature appropriate clothing and blankets.	Meets Standard	Intake officers ensure the temperatures and humidity in the hold rooms are maintained at comfortable levels. Detainees with evident medical needs are either immediately moved to the medical unit or are provided access to temperature appropriate clothing or blankets.
16.	 PRIORITY: Officers closely supervise hold rooms through direct supervision, to ensure: Continuous auditory monitoring, Visual monitoring at irregular intervals at least every (b)(7)(E) Constant surveillance of any detainee exhibiting signs of hostility, depression, or similar behaviors. 	Meets Standard	There are intercoms in each hold room to ensure continuous auditory monitoring. Officers visually monitor the hold rooms every fifteen minutes on an irregular basis, documenting the action. Any detainee exhibiting signs of hostility, depression or similar behaviors is placed under constant surveillance.

STANDARD 2.6. HOLD ROOMS IN DETENTION FACILITIES (Key: I)

This detention standard ensures the safety, security, and comfort of detainees temporarily held in hold rooms while awaiting further processing. An individual may not be confined in a facility's hold room for more than 12 hours.

Components	Rating	Remarks (1000 Char Max)
17. The maximum occupancy for the hold room will be pos	Meets Standard	The maximum occupancy for each hold room is posted above the door.
18. When the last detainee has been removed, officers sensure the Hold Room is thoroughly cleaned inspected.	10.041A0	
19. (SPCs/CDFs/DIGSAs) Evacuation procedures shall incorposting the evacuation map and advance designation the officer responsible for removing detainees from Hold Room(s) in case of fire and/or building evacuation	n of the Meets Standard	The intake officer is designated to remove detainees from the hold rooms in the event of an emergency. The evacuation map is posted in the intake area.

STANDARD 2.6. 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) Detainees are safely and securely housed in hold rooms pending processing into or out of the facility.

The hold rooms have floor drains, are escape and tamper resistant, and were observed to be clean and well maintained.

No officer enters a hold room unless another officer is stationed outside the door, ready to respond as needed. Officers are not allowed (b)(7)(E) into a hold room. Detainees are not permitted to use tobacco products in a hold room or any other location at this facility.

Officers immediately contact medical emergency services when a detainee appears to be in need of urgent medical care. If a detainee is removed from a hold room for medical treatment, an officer accompanies and remains with that detainee until medical personnel determine whether the condition requires hospitalization.

During the evaluation of this standard, hold rooms and hold room logs were inspected, policy and post orders were reviewed, and staff and detainees were interviewed.

Overall Rating: Meets Standard	
Reviewer Name (Printed) (b)(6);(b)(7)(C)	Completion Date: 9/29/2016
	300
Reviewer Signature (for printed form submission):	

2018-ICLI-00052 2586

STANDARD 2.7. KEY AND LOCK CONTROL (Key: J)

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

IIIa	intained.		
	Components	Rating	Remarks (1000 Char Max)
1.	All staff shall be trained and held responsible for adhering to proper procedures for the care and handling of keys, including electronic key pads where they are used. Initial training shall be accomplished before staff is issued keys, and key control shall be among the topics covered in subsequent annual training.	Meets Standard	All employees are trained and held responsible for the proper care and handling of keys. Key control training is provided prior to officers being issued keys and annual training addresses key control.
2.	Each facility administrator shall establish the position of Security Officer, or at a minimum, assign a staff member the collateral security officer. The Security Officer shall have a written position description that includes duties, responsibilities, and chain of command.	Meets Standard	A lieutenant is assigned the duties of security key control officer. The post orders for this position contain a description of the duties, responsibilities and the chain of command for the position.
3.	(SPCs/CDFs) The Security Officer is responsible for all administrative duties, including recordkeeping, concerning keys, locks, and related security equipment.	Meets Standard	The security lieutenant is responsible for all administrative duties including recordkeeping concerning keys, locks and related security equipment.
4.	The Security Officer shall train and direct employees in key control, including electronic key pads where they are used.	Meets Standard	The security lieutenant conducts key control training.
5.	The facility maintains inventories of all keys, locks and locking devices.	Meets Standard	The security lieutenant maintains inventories of all keys, locks and locking devices.
6.	Facility policies and procedures address the issue of compromised keys, locks, and to ensure safe combination integrity.	Meets Standard	
7.	Either deadbolts or deadlocks shall be used in detainee- accessible areas. Grand master-keying systems are not authorized. A master-keying system may be used only in housing units where detainees have individual room keys.	Meets Standard	
8.	The security key control officer shall implement a preventive maintenance program. The security key control officer shall maintain all preventive maintenance records.	Meets Standard	The security lieutenant, in cooperation with the armorer, follows a preventive maintenance program that results in all locks being checked at least once per quarter. Records of these checks are appropriately maintained.
9.	The Security Officer shall implement procedures for identifying every key ring and every key on each key ring, and for preventing keys from being removed from key rings, once issued.	Meets Standard	

STANDARD 2.7. KEY AND LOCK CONTROL (Key: J)

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

Components	Rating	Remarks (1000 Char Max)
10. Emergency keys shall be on hand for every area to or from which entry or exit might be necessary in an emergency.	Meets Standard	Emergency keys are maintained in master control.
11. The facility has a written policy and implementation procedures to ensure key accountability. Facilities shall use standard system for the issuance and accountability of key rings.	Meets Standard	There is written policy and procedures to ensure key accountability. The facility uses the KeyWatcher system to ensure a standardized system for the issuance and accountability of key rings.
12. The facility administrator shall establish rules and procedures for authorizing use of restricted keys.	Meets Standard	The watch commander must authorize the use of restricted keys.
13. Pharmacy keys shall be strictly controlled.	Meets Standard	Pharmacy keys are strictly controlled.
14. Keys to ICE and EOIR (Executive Office for Immigration Review) office and courtroom areas shall similarly be restricted and controlled. If a key is authorized for emergency withdrawal, a copy of the Restricted Key form is to be provided to ICE.	Meets Standard	ICE and EOIR personnel maintain their own keys and their keys are restricted from access by non-ICE personnel. The facility does not maintain keys to the ICE areas, as these areas are outside the secure perimeter.
15. Officers shall store all their weapons in individual lockers before entering the facility. The facility administrator shall develop and implement site-specific procedures for controlling gun-locker access.	Meets Standard	(b)(7)(E) (b)(7)(E) Detainees and the public do not have access to the gun lockers.

STANDARD 2.7. KEY AND LOCK CONTROL - 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 for the use, accountability and maintenance of keys are in place. The KeyWatcher system keyboard is large enough to accommodate all facility key rings, including keys in use.

Detainees are prohibited from handling facility keys. Key rings, including those for gun lockers, must be securely fastened to a belt with a metal clip, chain, or other approved device. Fastening keys to a holster or belt loop is prohibited. Employees do not refer to key numbers or other means of key identification within earshot of a detainee and do not throw nor slide keys to one another. Employees are trained not to force locks and that if a key fails to operate a lock, a supervisor is to be notified immediately. If a key breaks inside a lock, the employee maintains visual oversight of the lock until the problem is repaired. If the key breaks inside a padlock, a maintenance employee removes the padlock for repairs. In every instance, the employee is required to submit an incident report to the OIC.

The security lieutenant and armory officer have completed an approved locksmith training program and are trained in Occupational Safety and Health Administration (OSHA) standards and the National Fire Prevention Association (NFPA) life safety codes as applicable to keys and locks.

STANDARD 2.7. KEY AND LOCK CONTROL - Reviewer Summary

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

Policy requires the written authorization of the OIC prior to a key or key ring being issued on a 24 hour basis.

Padlocks are not used on exit doors or intermediate doors along the exit route and none were observed. The splitting of key rings into separate rings is prohibited.

This standard was evaluated via a review of policy and post orders; inspection of the KeyWatcher box and control center; observation of employees handling keys within the facility; and interviews with staff.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6);(b)(7)(C) Completion Date: 9/29/2016

Reviewer Signature (for printed form submission):

STANDARD 2.8. POPULATION COUNTS (Key: K)

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

	Components	Rating	Remarks (1000 Char Max)
1.	Staff conduct a formal count at least once each 8 hours (no less than three counts per day). At least one of these counts shall be a face to photo count.	Meets Standard	Formal counts are conducted each day at 6:30 a.m., 2:00 p.m., 10:00 p.m. and 1:00 a.m. The face to photo count is conducted during the 2:00 p.m. count.
2.	Each officer shall make irregular but frequent checks to verify the presence of all detainees in his or her charge.	Meets Standard	Officers make frequent irregular checks of detainees in their areas to ensure that all detainees are accounted for.
3.	The facility Control Center shall maintain a master count.	Meets Standard	Master control maintains the master count.
4.	The control officer (or other designated position) maintains an "out-count" record of all detainees temporarily out of the facility.	Meets Standard	Intake employees maintain the official out-count record of all detainees temporarily out of the facility, and the master control center maintains the out-count information as well.
5.	An emergency count shall be conducted when there is reason to believe a detainee is missing, or after a major disturbance has occurred.	Meets Standard	An emergency count is conducted when there is reason to believe that a detainee is missing or after any disturbance or unusual event has occurred.

STANDARD 2.8. 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)

The facility accounts for detainees through a system of formal and informal counts, and employee vigilance. Formal counts take place at least every eight hours. During the count officers were observed ensuring that they were counting a living, breathing person. Count procedures were observed to be strictly followed by officers. If the accuracy of a count is in doubt officers conduct a recount. Officers never rely on a roll call in performing the count. Unaccompanied officers do not perform a count in an open area such as a housing unit or in food service. One officer conducts the count while a second officer observes. Once the first count is completed the officers switch positions and count again. Officers remain in the count area until the count clears.

Detainees do not participate in the count nor the preparation or documentation of the count process. Detainee movement is not permitted during the count process. All detainee units/areas are counted simultaneously with all detainees being counted at a specific location. Movement does not resume until the count is verified and cleared. Counting officers report their count and then deliver a signed count slip to the control center. The master control officer records the count in the control center log. If a recount fails to clear, the shift supervisor conducts a face to photo count. Emergency counts are conducted in the same manner as formal counts and all detainees are returned to their housing units during such count.

During the evaluation of this standard, the policy was reviewed, the count process was observed, and employees were interviewed.

Overall Rating: Meets Standard

(Use following format for	dates: mm/dd/yyyy)
Reviewer Name (Printed): (b)(6);(b)(7)(C) Completion Date: 9/29/2016	

STANDARD 2.9. POST ORDERS (Key: L)

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

	Components	Rating	Remarks (1000 Char Max)
1.	 The facility administrator shall ensure that: There are written Post Orders for each security post, Copies are available to all employees, Written facility policy and procedures: Provide official on-duty time for officers to read the applicable Post Orders when assigned to a post, and Ensure that officers read those applicable Post Orders prior to assuming their posts. 	Meets Standard	There is a written post order for each security post. Post orders are secured at each post and are also available to all staff electronically. Policy states that officers will read the applicable post orders when assigned to a post (while on-duty), and supervisors are to ensure that officers read the applicable orders prior to assuming their posts.
2.	Supervisors shall ensure that officers understand the Post Orders, regardless of whether the assignment is temporary, permanent, or due to an emergency.	Meets Standard	
3.	Anyone assigned to an armed post qualifies with the post weapons before assuming post duty.	Meets Standard	Each officer assigned to an armed post must qualify with the post weapons before assuming the position.
4.	Post Orders for armed posts, and for posts that control access to the institution perimeter, clearly state that: Any staff member who is taken hostage is considered to be under duress, and Any order issued by such a person, regardless of his or her position of authority, is to be disregarded.	Meets Standard	
5.	Specific instructions for escape attempts shall be included in the Post Orders for armed posts.	Meets Standard	The post orders for all armed posts contained specific instructions for escape attempts.
6.	Post Orders shall be kept current at all times and formally reviewed at least annually and updated as needed.	Meets Standard	Post orders throughout the facility were reviewed and found to be current and all had been formally reviewed. Post orders are required to be updated annually.
7.	Post Orders and logbooks are confidential and must be kept secure at all times and never left in an area accessible to detainees.	Meets Standard	
8.	The facility administrator authorizes all Post Orders and changes.	Meets Standard	

STANDARD 2.9. POST ORDERS - Reviewer Summary

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

STANDARD 2.9. POST ORDERS - 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 are in place at all security posts, providing direction and information to officers that help ensure the safety and security of their areas of responsibility. Post orders were reviewed at multiple locations throughout the facility and were found to be current and to contain the required updates. The post orders contain all of the information and instruction needed to ensure that each officer assigned to a security post knows the procedures, duties and responsibilities of that post.

The housing unit post orders follow the daily event schedule format. The transportation officer post orders describe and explain the proper care and safe handling of firearms. The circumstances and conditions under which the use of firearms is authorized are not included in the post orders but are included in the firearms policy which is included in the transportation officer post order folder. The post orders are based on and consistent with the detention standard on Use of Force and Restraints.

The chief of security determines whether post orders need updating between regular annual reviews. Two weeks prior to annual reviews, security supervisors solicit written suggestions for changes or additions to port orders from ICE/ERO, contract and other affected staff. Security supervisors review and comment on suggested changes prior to submitting them to the chief of security for possible inclusion in the post orders. The post order changes are forwarded to the OIC for approval. Emergency changes are made by memorandum and placed in the post orders and these changes are incorporated into the post orders during the next annual review. The chief of security maintains the post order master file which is available to all officers and post orders maintained at the post are secure from detainee access.

During the evaluation of this standard, post orders were reviewed throughout the facility, and employees were interviewed.

Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6);(b)(7)(C)	Completion Date: 9/29/2016
Reviewer Signature (for printed form submission):	

STANDARD 2.10. SEARCHES OF DETAINEES (Key: M)

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

	Components	Rating	Remarks (1000 Char Max)
1.	PRIORITY: The facility has written policy and procedures governing searches of detainees and housing or work areas. The policies and procedures include the requirement that staff employ the least intrusive method of body search practicable, based on security concerns involved; and conduct searches without unnecessary force and in ways that preserve the dignity of detainees.	Meets Standard	Policy governs detainee searches, and housing and work area searches. The facility's search policy states that the least intrusive form of search based upon security concerns will be employed. Policy further states that searches will be conducted without unnecessary force and in ways that preserve the dignity of detainees.
2.	All staff who do housing or work area searches or body searches shall receive initial training regarding search procedure prior to entering on duty, and annual training in effective techniques thereafter.	Meets Standard	Training on search procedures is provided during initial and annual in-service training.
3.	The facility shall establish procedures to ensure all housing units and work areas are searched routinely, but irregularly.	Meets Standard	Housing units are searched daily at irregular times.
4.	Staff shall maintain written documentation of each housing unit search within the individual housing unit.	Meets Standard	
5.	Work areas shall be searched each workday by shop supervisors, and these inspections shall be supplemented with periodic searches by designated search teams.	Meets Standard	
6.	Strip searches are conducted only when there is reasonable belief or suspicion that contraband may be concealed on the person, or a good opportunity for concealment has occurred, and when properly authorized by a supervisor.	Meets Standard	
7.	PRIORITY: Strip searches are performed by an officer of the same gender as the detainee.	Meets Standard	Policy requires that strip searches will be performed by an officer of the same gender as the detainee. Strip searches are not performed at this facility.
8.	Body cavity searches are conducted by designated health personnel only when authorized by the facility administrator (or acting administrator) on the basis of reasonable belief or suspicion that contraband may be concealed in or on the detainee's person. Body cavity searches are performed in an area that affords privacy from other detainees and from facility staff who are not involved in the search.	Meets Standard	

STANDARD 2.10. SEARCHES OF DETAINEES (Key: M)

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

Components	Rating	Remarks (1000 Char Max)
 "Dry cells" are used for contraband detection only when there is reasonable belief of concealment, with proper authorization, and in accordance with required procedures. 	N/A	Dry cells are not used at this facility.
10. The chief of security shall have post orders for closely observing a detainee in dry cell status.	N/A	Dry cells are not used at this facility.

STANDARD 2.10. SEARCHES OF DETAINEES - 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 handles detained searches in accordance with the standard. There are procedures in place to conduct housing unit and work areas searches which are primarily designed to detect contraband, prevent escapes, maintain sanitary standards, and eliminate fire and safety hazards. The procedures also include basic correctional services during lockdowns, such as delivery of food services, toilet access, medication delivery, and other vital services.

The detainees at this facility are pat searched on a routine or random basis to control contraband without a threshold level of suspicion. The search includes a search of the detainee's clothing and personal effects. The post orders for staff assigned to monitor detainees that are in close observation are clear and concise. They contain all the items outlined in the standard.

The facility has procedures in place to order an x-ray examination for the purpose of determining if contraband is concealed in or on the detainee. The procedures outline that staff documents the examination and the documentation includes authorizations and the reasons for the examination. This information will be maintained in the detention file. Any contraband found in conjunction with the search will be handled in accordance with the contraband standard.

To evaluate the standard, the inspector reviewed policy and the local handbook and interviewed staff and two LEP detainees being admitted to the facility.

Overall Rating: Meets Standard	77
Reviewer Name (Printed)(b)(6);(b)(7)(C)	Completion Date: 9/29/2016
n	
Reviewer Signature (for printed form submission):	

	Components	Rating	Remarks (1000 Char Max)
1.	 PRIORITY: Each facility has written policy and procedures for a Sexual Abuse and Assault Prevention and Intervention Program that includes, at a minimum: A zero-tolerance policy for all forms of sexual abuse or assault; Measures taken to prevent sexual abuse or assault, including the designation of specific staff members responsible for staff training and detainee education regarding issues pertaining to sexual assault; Procedures for immediate reporting of any allegation of sexual abuse or assault through the facility's chain-of-command procedure, and to ICE/ERO, including written documentation requirements; Procedures for detainees to report allegations; Measures taken for prompt and effective intervention to address the safety and medical/mental health treatment needs of detainee victims, and to preserve and collect evidence; Procedures for referral of incidents to appropriate investigative agencies (including law enforcement agencies and OPR), and coordination with such entities; Disciplinary sanctions for staff, up to and including termination when staff has violated agency sexual abuse policies; and Data collection and reporting. 	Meets Standard	The facility has a zero tolerance Sexual Abuse and Assault Prevention and Intervention Program that addresses all the requirements of the component.
2.	The facility administrator maintains or attempts to enter into memoranda of understanding (MOU) or other agreements with community service providers or, if local providers are not available, with national organizations that provide legal advocacy and confidential emotional support services for immigrant victims of crime.	Meets Standard	The facility has agreements with local service providers including the sexual assault nurse examiner (SANE) services at Denver Health Hospital.
3.	PRIORITY: The facility administrator has designated a Sexual Abuse and Assault Prevention and Intervention Program Coordinator for the facility.	Meets Standard	The compliance manager has been designated the Sexual Abuse and Assault Prevention and Intervention Program Coordinator.

	Components	Rating	Remarks (1000 Char Max)
4.	PRIORITY: Training on the facility's Sexual Abuse and Assault Prevention and Intervention Program is included in initial and annual refresher training for employees, volunteers, and contract personnel, and address all training topics required by the Detention Standard. The facility maintains written documentation verifying employee, volunteer, and contractor training.	Meets Standard	As verified by a review of training records and curricula, sexual abuse and assault prevention and intervention training is provided to all employees, volunteers, and contract personnel during initial and annual refresher training. Training includes all the topics required by the detention standard.
5.	PRIORITY: Detainees are informed about the facility's Sexual Abuse and Assault Prevention and Intervention Program and zero-tolerance policy for sexual abuse and assault through the orientation program and the detainee handbook. Detainee notification, orientation, and instruction must be in a language or manner that the detainee understands.	Meets Standard	Detainees are informed about the facility's Sexual Abuse and Assault Prevention and Intervention Program and zerotolerance policy via the handbook, which is distributed during in-processing, an orientation video and via postings in the housing units. The information is provided in both English and Spanish.
6.	The Sexual Assault Awareness Notice, along with the names 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. The "Sexual Assault Awareness Information" brochure is distributed to detainees.	Meets Standard	The Sexual Assault Awareness Notice, a memo listing the program coordinator's name and contact information and information on assistance organizations are posted in all housing units and common areas. The Sexual Assault Awareness Information brochure is distributed to each detainee along with the detainee handbooks.
7.	Detainees are provided the option to report any incident of sexual abuse or assault to any staff member, including a designated staff member other than an immediate point-of-contact line officer (e.g. the program coordinator or a mental health specialist).	Meets Standard	Without exception, detainees may report any incident of sexual abuse or assault to any staff member.

control, di	Components	Rating	Remarks (1000 Char Max)
facility behav behav Detai victim the	RITY: Detainees are screened upon arrival at the y for potential vulnerabilities to sexually aggressive vior or tendencies to act out with sexually aggressive	Meets Standard	Review of detainee medical records revealed that all are screened by a nurse upon arrival for high risk sexual assaultive and sexual victimization potential. Detainees identified as at risk are further evaluated by a mental health counselor and are housed and counseled accordingly.
not r classi vulne	ainee who is subjected to sexual abuse or assault is returned to general population until proper refication, taking into consideration any increased trability of the detainee as a result of the sexual abuse sault, is completed.	Meets Standard	A detainee who has been a victim of sexual abuse or assault is returned to the general population only after reclassification and only after consideration is given to any increased vulnerability.
sexua the a and/o	RITY: Any detainee who alleges that he/she has been ally assaulted is offered immediate protection from assailant and referred for a medical examination or clinical assessment for potential negative toms.	Meets Standard	Per policy, a detainee who alleges sexual assault is removed from the housing unit, referred for medical examination and offered protection from the assailant.
assaul forth in the facility refers having Field (in the interior and in gover	RITY: Staff members who become aware of an alleged lt immediately follow the reporting requirements set in the written policies and procedures. In a detainee(s) is alleged to be the perpetrator, the y administrator ensures that the incident is promptly red to the appropriate law enforcement agency g jurisdiction for investigation, and reported to the Office Director. In an employee, contractor, or volunteer is alleged to be perpetrator, the facility administrator ensures that incident is promptly referred to the appropriate law becoment agency having jurisdiction for investigation, reported to the Field Office Director. The local comment entity or contractor that owns or operates the cy is also notified.	Meets Standard	Policy establishes procedures for reporting requirements. Whether the alleged perpetrator is another detainee, an employee, a contractor or a volunteer, referrals are made to the Aurora Police Department and the FOD is notified.
appro medio secur assigr	facility uses a coordinated, multidisciplinary team bach to responding to sexual abuse, which includes a cal practitioner, a mental health practitioner, a ity staff member, and an investigator from the ned investigative entity, as well as representatives outside entities that provide relevant services and rise.	Meets Standard	The facility has a multidisciplinary sexual assault response team, which includes a medical practitioner, a licensed professional counselor, security personnel, investigators from the Aurora Police Department and community resources.

Components	<u> </u>	Rating	Remarks (1000 Char Max)
13. Care is taken to place a victimized denvironment that represents the less option possible (e.g. protective customates in the less of the less option of the less of the less of the request of the request of	ast restrictive housing stody), but victims are days in any type of ot in highly unusual	Meets Standard	Victimized detainees may be placed in protective custody until reclassification, which is completed within five days.
14. PRIORITY: Staff suspected of perperassault are removed from all dutic contact pending the outcome of an	es requiring detainee	Meets Standard	Employees suspected of perpetrating sexual abuse or assaults are removed from all duties requiring detainee contact pending the outcome of an investigation.
15. The facility ensures that all invessexual assault are prompt, thoroug conducted by qualified investigator establish the coordination a administrative and criminal investigations for compromised by the process for conducting interiorestigations only after consultate criminal investigative entity of investigation has concluded.	gh, objective, fair, and se. Written procedures and sequencing of gations to ensure that the former, including the ernal administrative ion with the assigned	Meets Standard	Documentation of the investigations of the six alleged sexual abuse/assaults that were reported since the previous inspection was available for review and confirmed that the investigations were prompt and thorough. Written policy and procedure address all the requirements listed in this component.
16. Information concerning the identit reporting sexual assault, and the fa are limited to those who have a new make decisions concerning the deta and for law enforcement/investiga	cts of the report itself, ed-to-know in order to ainee-victim's welfare,	Meets Standard	Detainee victim information and information regarding the investigation and report is provided only to those with a need to know.
17. When possible and feasible, approp crime scene, and safeguard inform coordination with the referral agen established evidence-gathering an procedures.	ation and evidence in cy and consistent with	Meets Standard	When possible, staff members preserve the crime scene and safeguard information and evidence for local law enforcement officials.
18. At no cost to the detainee, the arranges for the victim to undergo examination by external independence care personnel. The results of the and all collected physical evidence investigative entity.	go a forensic medical ent and qualified health physical examination	Meets Standard	Independent forensic medical examinations and evidence gathering are arranged through a SANE at Denver Health Hospital. The Aurora Police Department conducts all investigations.
19. The program coordinator reviews investigation of sexual abuse or improve prevention and response of	assault to assess and	Meets Standard	The program coordinator is required to review the results of sexual abuse or assault investigations to improve prevention and response efforts.

This detention standard requires that facilities that house ICE/ERO detainees act affirmatively 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)
20.	Victims are provided emergency medical and mental health services and ongoing care as appropriate, including testing for sexually transmitted diseases and infections, prophylactic treatment, emergency contraception, follow-up examinations for sexually transmitted diseases, and referrals for counseling (including crisis intervention counseling).	Meets Standard	Victims of sexual assault are provided with immediate emergency medical care within the facility and are transferred to Denver Health Hospital for further care and forensic evidence gathering. Follow-up medical and mental health evaluations and treatment are available through the facility's health services unit and local community resources.
21.	All case records associated with claims of sexual abuse are maintained in a secure location, consistent with the confidentiality requirements of the Detention Standards on "Medical Care" and "Detention Files."	Meets Standard	Case records associated with claims of sexual abuse or assaults are maintained in the coordinators office.
22.	The program coordinator conducts an annual review of aggregate data regarding sexual abuse or assault incidents at the facility, 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 to further the goal of eliminating sexual abuse.	Meets Standard	The program coordinator conducts an annual review of the data regarding sexual abuse and assaults, presenting the findings to the FOD and ICE/ERO HQ. This review is used to determine if any changes are indicated for the program. This was confirmed by the AFOD.

STANDARD 2.11. 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 Sexual Abuse and Assault Prevention and Intervention Program (SAAPI) coordinator assists with the development of written policies, procedures and training protocols, and serves as a liaison with other agencies. Employee, contractor and volunteer training includes all of the topics listed in the standard. Following the intake process, detainees are educated on the SAAPI program as required in the standard. Detainees are provided instructions on how to contact DHS/OIG or ICE to confidentially report sexual abuse or assault.

Detainees identified as "high risk" for committing sexual assault are assessed by a mental health professional and treated, if indicated. Statements from detainees claiming to be victims of sexual assaults are taken seriously and responded to professionally.

Testing is conducted for sexually transmitted diseases and infections; and referrals for counseling are made, as appropriate. Upon request, 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 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

STANDARD 2.11. SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION - Reviewer Summary

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

accordance with medical care and detention standards and applicable policies, and retained in accordance with established schedules. The program manager maintains an electronic record in the detail that is required by the standard. Law enforcement sensitive documents or evidence are not stored at the facility.

The facility has an effective sexual abuse and assault prevention and intervention program that affirmatively responds to such incidents; a team effectively responds to allegations and incidents, with appropriate classification and medical/mental health post- crises follow-up. There were six allegations of sexual assault or abuse involving ICE detainees since the last inspection. None involved staff. Two allegations of inappropriate touching were unsubstantiated. Two investigations of alleged sexual harassment are ongoing. One allegation of rape by a male detainee against another male detainee is still being investigated and pending DNA testing results. One case involving a male detainee's claim that he had been threatened with a weapon to give oral sex to his roommate on three different occasions was investigated, prosecuted, and the assailant was sentenced to sixteen years for assault with a deadly weapon. All the above cases were properly investigated and the victims and assailants were treated in compliance with standard.

Policy and procedures ensure timely and appropriate responses, evaluation, treatment and notification to ICE. The evaluation of this standard was based on a review of policy, procedures, case records and training files, and on interviews with the program coordinator and other staff.

 Overall Rating: Meets Standard

 Reviewer Name (Printed): (b)(6);(b)(7)(C)
 Completion Date: 9/29/2016

Reviewer Signature (for printed form submission):

	Components	Rating	Remarks (1000 Char Max)
1.	Written policy and procedures are in place for special management units, including Administrative Segregation and Disciplinary Segregation, as well as documenting the reason(s) for placement and periodic reviews.	Meets Standard	Policy addresses the requirements of this component.
2.	The number of detainees confined to each cell or room does not exceed the capacity for which it was designed.	Meets Standard	Capacity is never exceeded in the special management unit (SMU). All of the cells, with the exception of one cell, are single occupancy.
3.	Cells and rooms are well ventilated, adequately lit, appropriately heated/cooled and maintained in a sanitary condition at all times. Cells are conducive to maintaining a safe and secure environment for all detainees, with particular emphasis on allowing for full visibility and appropriate observation by staff, and wherever possible on eliminating potential safety hazards such as sharp edges and anchoring devices.	Meets Standard	The cells were observed to be clean, well ventilated, adequately lighted and climate controlled. Officers are able to observe detainees and no potential safety hazards were noted.
4.	Each facility shall issue guidelines concerning the privileges detainees may have in both Administrative and Disciplinary status.	Meets Standard	Detainees in segregated statuses are provided the privileges afforded them under the standards, and in some cases, optimal privilege levels are provided.
5.	PRIORITY: Detainees in SMUs are personally observed at least every 30 minutes in an irregular schedule and more often when warranted.	Meets Standard	Officers observe detainees every thirty minutes on an irregular schedule. If warranted, more frequent checks are conducted. All checks are documented via both electronic and hard-copy means.
6.	PRIORITY: A detainee is placed in Administrative Segregation only for non-punitive reasons, when necessary to ensure the safety of detainees or others, the protection of property, or the security or good order of the facility. The facility administrator or designee shall complete the Administrative Segregation Order (Form I-885 or equivalent), detailing the reasons for placing a detainee in Administrative Segregation, before his or her actual placement. A copy of the order shall be immediately provided to the detainee in a language or manner the detainee can understand, unless delivery would jeopardize the safe, secure, or orderly operation of the facility.	Meets Standard	Policy and practice address all requirements of this component. An equivalent local Administrative Segregation Order is completed before a detainee is placed in administrative segregation.

	Components	Rating	Remarks (1000 Char Max)
7.	PRIORITY: A detainee is placed in protective custody status in Administrative Segregation only when there is documentation and supervisory approval that it is warranted and that no reasonable alternatives are available. Use of administrative segregation to protect vulnerable populations shall be restricted to those instances where reasonable efforts have been made to provide appropriate housing and shall be made for the least amount of time practicable, and when no other viable housing options exist, and as a last resort. Detainees who have been placed in administrative segregation for protective custody shall have access to programs, services, visitation, counsel and other services available to the general population to the maximum extent possible.	Meets Standard	Written policy governs, and practice mirrors the policy, in regards to the placement of a detainee in protective custody status in administrative segregation. All of the requirements of this component are addressed.
8.	A detainee will be placed in Disciplinary Segregation only after a finding by a Disciplinary Hearing Panel that the detainee is guilty of a prohibited act or rule violation classified at a "Greatest," "High," or "High-Moderate" level, as defined in the Detention Standard on Disciplinary System.	Meets Standard	
9.	A written order shall be completed and signed by the chair of the IDP (or disciplinary hearing officer) before a detainee is placed into Disciplinary Segregation. A copy of the order shall be immediately given to the detainee in a language or manner the detainee can understand, unless delivery would jeopardize the safety, security, or the orderly operation of the facility.	Meets Standard	A written order is completed and signed by the disciplinary hearing officer before a detainee is placed in disciplinary segregation. A copy of the order is provided to the detainee in a language or manner the detainee can understand.
10.	Upon a detainee's release from the SMU, the releasing officer attaches the entire housing unit record to the Administrative Segregation Order or Disciplinary Segregation Order and forwards it to the Chief of Security or equivalent for inclusion in the detainee's detention file.	Meets Standard	

Components	Rating	Remarks (1000 Char Max)
11. PRIORITY: There are implemented written procedures for the regular review of all detainees in Administrative Segregation. A supervisor conducts a review within 72 hours of the detainee's placement in Administrative Segregation to determine whether segregation is still warranted. The review includes an interview with the detainee, and a written record is made of the decision and the justification. If a detainee is segregated for the detainee's protection, but not at the detainee's request, continued detention requires the authorizing signature of the facility administrator or assistant facility administrator. When a detainee has spent seven days in Administrative Segregation, and every week thereafter for the first 30 days and at least every 10 days thereafter, a supervisor conducts a similar review, including an interview with the detainee, and documents the decision and justification.	Meets Standard	Policy addresses, and practice mirrors, all of the requirements of this component. The chief of security, or designee, conducts a review within 72 hours of the detainee's placement in administrative segregation. A review is conducted every seven days as long as the detainee remains in the SMU. Additional reviews are conducted at thirty day intervals, notwithstanding the fact that weekly reviews are conducted.
12. A copy of the decision and justification for each segregation status review is given to the detainee, unless, in exceptional circumstances, this provision would jeopardize security. The detainee is given an opportunity to appeal a review decision to a higher authority within the facility.	Meets Standard	A copy of the decision and justification for each status review is provided to the detainee. The detainee may appeal the decision to the OIC.
13. A permanent log is maintained in each SMU to record all activities concerning SMU detainees (meals served, recreation, visitors, etc.). The SMU log records the detainee's name, A-number, housing location, date admitted, reasons for admission, status review dates, tentative release date for detainees in Disciplinary Segregation, the authorizing official, and date released. These logs shall also be used by supervisory staff and other officials to record their visits to the unit.	Meets Standard	The logs reviewed contained all of the required information. Visits by the OIC, supervisory employees, and medical staff are documented on these logs as well.
 14. A separate log is maintained in the SMU that all persons visiting the unit must sign and record: The time and date of the visit, and Any unusual activity or behavior of an individual detainee, with a follow-up memorandum sent through the facility administrator to the detainee's file. 	Meets Standard	

Components	Rating	Remarks (1000 Char Max)
 15. A Special Management Housing Unit Record is maintained on each detainee in an SMU, that records: Whether the detainee ate, showered, recreated, and took any medication; and Any additional information, such as whether the detainee has a medical condition, or has exhibited suicidal/assaultive behavior. 	Meets Standard	A special management housing unit record containing all required information is created and maintained for each detainee in the SMU.
16. Health care personnel are immediately informed when a detainee is admitted to an SMU to provide assessment and review as indicated by health care protocols.	Meets Standard	Healthcare staff are immediately notified to conduct an assessment when a detainee is placed in the SMU.
17. PRIORITY: Detainees with serious mental illness may not be automatically placed in an SMU on the basis of such mental illness. Every effort shall be made to place detainees with serious mental illness in a setting in or outside of the facility in which appropriate treatment can be provided, rather than an SMU, if separation from the general population is necessary.	Meets Standard	Detainees with serious mental illness are not placed in the SMU. A watch cell is located in the medical unit for this purpose. If necessary, detainees will be moved to another facility for appropriate treatment.
18. PRIORITY: Health care personnel conduct face-to-face medical assessments for every detainee in an SMU at least once daily, and where reason for concern exists, assessments are followed up with a complete evaluation by a qualified medical or mental health professional, and indicated treatment. Medical visits shall be recorded on the SMU housing record or comparable form, and any action taken shall be documented in a separate logbook.	Meets Standard	Health care personnel conduct daily face-to-face medical assessments on every detainee in the SMU. If there are any concerns, assessments are followed up with a complete evaluation by a qualified medical or mental health professional. Health care personnel sign the detainee's SMU housing record to document the visit. Any action taken is documented in the unit logbook.
19. A detainee's mental health status shall be reviewed and documented at least once every 30 days.	Meets Standard	A mental health professional reviews and documents a detainee's mental health status at least every thirty days when the detainee is housed in the SMU.
20. Detainees in SMUs may shave and shower at least three times weekly and receive other basic services (such as laundry, hair care, barbering, clothing, bedding, and linen) on the same basis as the general population.	Meets Standard	Detainees in the SMU are permitted to shower and shave daily.

Components	Rating	Remarks (1000 Char Max)
***	nating	Nemarks (1000 Char Iviax)
21. Detainees in Administrative Segregation are provided opportunities to spend time outside their cells (over and above the required recreation periods), for such activities as socializing, watching TV, and playing board games and may be assigned to work details (for example, as orderlies in the SMU).	Meets Standard	Detainees in administrative segregation are provided optimal time outside of their cells daily.
 The shift supervisor sees each segregated detainee daily, including weekends and holidays. 	Meets Standard	Shift supervisors are required to visit each segregated detainee daily.
23. The facility administrator (or designee) visits each SMU daily.	Meets Standard	
24. Detainees in SMUs are provided three nutritionally adequate meals per day, ordinarily from the general population menu.	Meets Standard	Detainees in the SMU receive the same meals as detainees in the general population.
25. Only for documented medical or mental health reasons are detainees denied such items as clothing, mattress, bedding, linens, or a pillow. If a detainee is so disturbed that he or she is likely to destroy clothing or bedding or create a disturbance risking harm to self or others, the medical department is notified immediately and a regimen of treatment and control instituted by the medical officer.	Meets Standard	If a detainee is so disturbed that he/she is likely to destroy clothing or bedding or create a disturbance risking harm to self or others, the detainee would be transferred to the watch cell in the medical unit for observation.
26. Detainees in an SMU may write and receive letters the same as the general population.	Meets Standard	Detainees in the SMU have the same correspondence privileges as detainees in the general population.
27. Detainees in an SMU ordinarily retain visiting privileges.	Meets Standard	Detainees in segregation retain visiting privileges.
28. Adequate documentation is generated for any restricted or disallowed general visits for a detainee in an SMU who violated visiting rules or whose behavior indicated the detainee would be a threat to the security or good order of the visiting room in the past year. Where visits are restricted or disallowed, a report is filed with the facility administrator and ICE/ERO, and made part of the detainee's file.	Meets Standard	Visiting restrictions would be documented as required and ICE would be notified.
 Under no circumstances is a detainee permitted to participate in general visitation while in restraints. 	Meets Standard	
 Detainees in protective custody and violent and disruptive detainees are not permitted to use the visitation room during normal visitation hours. 	Meets Standard	Detainees in protective custody and violent or disruptive detainees visit separately from other detainees.

Components	Rating	Remarks (1000 Char Max)
31. In cases in which a visit would present an security risk, visits may be disallowed for violent or disruptive detainee.	ı	ard
32. Ordinarily, detainees in SMUs are not visitation.	denied legal Meets Standa	Legal visitation is permitted.
33. Detainees in SMUs are allowed visits by modergy or other religious service providers, unless it is determined a visit presents a security, or orderly operations.	upon request;	ard
34. Detainees in SMUs have access to read including religious materials. The Recrea offers each detainee soft-bound, non-leg rotating basis.	tion Specialist Meats Standa	Policy addresses the requirements listed in this component.
35. Detainees in SMUs have access to legal accordance with the Detention Standard or and Legal Material. Detainees are permitt personal legal material in the SMU, provid create a safety, security and/or sanitation. Detainee requests for access to legal mastored personal property are accommodal possible and always within 24 hours of request.	n Law Libraries ed to retain all led it does not hazard. aterial in their ted as soon as	Detainees in the SMU have access to the law library. Detainees may retain a reasonable amount of legal materials provided it does not create a safety, security or sanitation hazard. Legal materials stored in the detainee's personal property are provided to the detainee within 24 hours of a request.
 Any denial of access to the law library is also Supported by compelling security conditions For the shortest period required for set Fully documented in the SMU housing ICE/ERO is notified every time law library access 	cerns, ecurity, and logbook. Meets Standa	Any denial of access to the law library must be supported by compelling security concerns, must be for the shortest period of time required and must be documented in the SMU logbook. Notification would be sent to ICE/ERO.
37. Recreation for detainees in the SMU is sep general population.	arate from the Meets Standa	The SMU has a separate recreation area.

reasons.		1 /2
Components	Rating	Remarks (1000 Char Max)
38. Detainees in the SMU for administrative reasons are offered at least one hour of recreation per day, outside their cells and scheduled at a reasonable time, at least seven days per week. Detainees in the SMU for disciplinary reasons shall be offered at least one hour of recreation per day, outside their cells and scheduled at a reasonable time, at least five days per week. Where cover is not provided to mitigate inclement weather, detainees are provided weather-appropriate equipment and attire.	Meets Standard	Detainees in administrative segregation are permitted optimal recreation time, at least two hours of recreation each day. Detainees in disciplinary segregation are permitted optimal recreation, at least one hour of recreation daily. Weather-appropriate attire is provided.
39. The recreation privilege is denied or suspended only if it would unreasonably endanger safety or security. When a detainee in an SMU is deprived of recreation (or any usual authorized items or activity), a report of the action is forwarded to the facility administrator.	Meets Standard	Policy addresses the requirements of this component.
40. The case of a detainee denied recreation privileges is reviewed as part of the regular reviews required for all detainees in SMU status. The reviewer documents whether the detainee continues to pose a threat to self, others, or facility security and, if so, why.	Meets Standard	Any denial of recreation privileges is reviewed and documented as required.
41. Denial of recreation privileges for more than 7 days requires the concurrence of the facility administrator and the health authority. The facility notifies ICE/ERO when a detainee is denied recreation privileges for more than 7 days.	Meets Standard	
42. Ordinarily, detainees in Administrative Segregation have telephone access similar to detainees in the general population, in a manner consistent with the special security and safety requirements of an SMU. Detainees in Disciplinary Segregation may be restricted from using telephones to make general calls as part of the disciplinary process; however, ordinarily, they are permitted to make direct and/or free and legal calls as described in the Detention Standard on Telephone Access, except for compelling and documented reasons of safety, security, and good order.	Meets Standard	A portable telephone is provided to detainees in administrative segregation upon request, allowing them to make unrestricted calls. General calls may be restricted for detainees in disciplinary segregation if the violation was related to violation of the telephone policy. Detainees are permitted to make legal and special access calls.
43. After seven consecutive days in Administrative Segregation, the detainee may exercise the right to appeal to the facility administrator the conclusions and recommendations of any review conducted.	Meets Standard	A detainee in administrative segregation may appeal the conclusions and recommendations of any review to the OIC.

STANDARD 2.12. SPECIAL MANAGEMENT UNITS (Key: O)

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

Components	Rating	Remarks (1000 Char Max)
44. If a detainee has been in Administrative Segregation for more than 30 days and objects to this status, the facility administrator reviews the case to determine whether that status should continue, taking into account the views of the detainee. A written record is made of the decision and the justification. A similar review is done every 30 days thereafter.	Meets Standard	A review is conducted every seven days, with a written record made of the decision and the justification. Additional reviews are completed at thirty day intervals.
45. When a detainee has been held in Administrative Segregation for more than 30 days, the facility administrator notifies the Field Office Director.	Meets Standard	ICE is notified immediately when a detainee is placed in administrative segregation.

STANDARD 2.12. SPECIAL MANAGEMENT UNITS – 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 protects detainees, staff, contractors, volunteers, and the community from harm by segregating certain detainees from the general population in Special Management Units.

The SMU is clean, well maintained and adequately furnished. SMU logs were found to contain the required information and were current. All detainees housed in segregated housing receive a copy of the documentation placing them in segregation status. Detainees in the SMU are visited daily by medical personnel and are interviewed face to face to ascertain their physical and mental health status. The SMU provides a safe housing environment for detainees who cannot live in the general population or require segregated status for disciplinary reasons. At the time of this inspection there were three ICE detainees on administrative segregation status and no ICE detainees on disciplinary segregation status. All three of the ICE detainees in the SMU were interviewed and voiced no complaints.

Policy and procedures are in place to control and secure the SMU entrances, contraband, tools and food carts. Housing logs are maintained to record specific data on detainees upon admission to and release from the unit and for supervisors to record their visits. Detainees in disciplinary segregation have more stringent personal property restrictions and control than those in administrative segregation. Detainees housed in the SMU have the same law library access as the general population.

Detainees are provided translation services or interpretation services while in the SMU to assist with their understanding of condition of confinement as well as their rights and responsibilities. Detainees are provided appropriate accommodations and professional assistance such as medical and therapeutic or mental health treatment for special needs.

Written procedures are in place requiring a review of a detainee in disciplinary segregation every seven days. The review includes an interview with the detainee and documentation of the review; a written copy of the decision and basis for the findings are given to the detainee.

This standard was evaluated via a review of policy and post orders; inspection of segregation logs, periodic segregation review forms, disciplinary forms, and segregation placement forms; tours of the SMU; and staff and detainee interviews.

Completion Date: 9/29/2016

STANDARD 2.12. SPECIAL MANAGEMENT UNITS - Reviewer Summary

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

Reviewer Signature (for printed form submission):

STANDARD 2.13. STAFF-DETAINEE COMMUNICATION (Key: P)

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

This standard also requires the posting of hotline informational posters from the Department of Homeland Security (DHS) Office of the Inspector General (OIG).

	Components	Rating	Remarks (1000 Char Max)
1.	PRIORITY: ICE/ERO detainees shall have frequent informal access to and interaction with key facility staff members, in a language they can understand. Facility staff shall conduct scheduled visits to address detainees' personal concerns and monitor living conditions.	Meets Standard	Policy dictates that key facility staff shall conduct scheduled visits with detainees, at least weekly, to address their personal concerns and monitor living conditions. It further states that communications during the visits will be conducted in a manner and language understood by the detainee. Bi-lingual ICE officers also conduct scheduled daily visits with detainees to address detainee concerns and monitor living conditions. Interactions between detainees and staff were observed during the inspection.
2.	The local supplement to the detainee handbook shall include contact information for the ICE/ERO Field Office and the scheduled hours and days that ICE/ERO staff is available to be contacted by detainees at the facility. The same information shall be posted in the living areas (or "pods") of the facilities. Posted contact information shall be updated quarterly or more frequently as necessary to reflect changes in ICE/ERO personnel.	Meets Standard	

STANDARD 2.13. STAFF-DETAINEE COMMUNICATION (Key: P)

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

This standard also requires the posting of hotline informational posters from the Department of Homeland Security (DHS) Office of the Inspector General (OIG).

	Components	Rating	Remarks (1000 Char Max)
3.	 PRIORITY: Detainees may submit written questions, requests, grievances or concerns to ICE/ERO staff, using the detainee request form, a local IGSA form, or a sheet of paper. Facilities must also allow any ICE/ERO detainee dissatisfied with the facility's response to file a grievance appeal and communicate directly with ICE/ERO. Each facility administrator shall: Ensure that adequate supplies of detainee request forms, envelopes, and writing implements are available. Have written procedures to promptly route and deliver detainee requests to the appropriate ICE/ERO officials by authorized personnel (not detainees) without reading, altering, or delaying such requests. Ensure that the standard operating procedures accommodate detainees with special assistance needs based on, for example, disability, illiteracy, or limited use of English. When language services are needed, the facility should use qualified interpretation services when an employee needs to communicate with a limited English proficient person. Ensure that each facility provides a secure dropbox for ICE detainees to correspond directly with ICE management, and that only ICE personnel have access to the dropbox. 	Meets Standard	Policy and practice address all the requirements listed in the component.
4.	In facilities with ICE/ERO on-site presence: The ICE/ERO staff member receiving the request shall normally respond in person or in writing as soon as possible and practicable, but no longer than within 3 business days of receipt.	Meets Standard	ICE officer's visitation logs were reviewed. The logs confirmed that responses to detainee requests are routinely processed within three days of receipt.
5.	In facilities without ICE/ERO on-site presence, each detainee request shall be forwarded to the ICE/ERO office of jurisdiction within two business days.	N/A	ICE staff are assigned to the facility.

STANDARD 2.13. STAFF-DETAINEE COMMUNICATION (Key: P)

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

This standard also requires the posting of hotline informational posters from the Department of Homeland Security (DHS) Office of the Inspector General (OIG).

	Components	Rating	Remarks (1000 Char Max)
6.	All requests to ICE/ERO staff shall be recorded in a logbook (or electronic logbook) specifically designed for that purpose. At a minimum, the log shall record: Date of receipt; Detainee's name; Detainee's A-number; Detainee's nationality;		
	 Name of the staff member who logged the request; Date the request, with staff response and action, was returned to the detainee; Any other pertinent site-specific information, 	Meets Standard	All of the items listed in this component are included in ICE officers' logs.
	 including detention condition complaints; Specific reasons why the detainee's request is urgent and requires a faster response; and The date the request was forwarded to ICE/ERO and the date it was returned. 		
7.	As required by the ICE/ERO Detention Standard on Detainee Handbook, each facility's handbook (or supplement) shall advise detainees of the procedures to submit written questions, requests, or concerns to ICE/ERO staff, as well as the availability of assistance to prepare such requests.	Meets Standard	
8.	The facility administrator shall ensure that OIG Hotline posters are posted in every housing unit and in appropriate common areas (recreation areas, dining areas, processing areas, etc.).	Meets Standard	OIG hotline posters were observed in the housing units, and other common areas.

STANDARD 2.13. STAFF-DETAINEE COMMUNICATION – 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 that encourage and require informal direct and written contact among staff and detainees, as well as supervisory staff. A review of documentation confirmed that ICE routinely responds to detainee requests within three business days of receipt. Detainee telephone services are tested daily by housing unit officers and ICE personnel. In addition to scheduled visits, ICE officers conduct frequent unannounced visits to detainee housing units to informally observe living and working conditions and encourage informal communication among staff and detainees in all areas of the facility. These visits are documented.

To evaluate the standard, the inspector reviewed policy, handbooks, request logs and ICE facility liaison checklists, observed housing unit activities and interviewed ICE and facility personnel and detainees.

The inspector interviewed a total of 33 detainees: 17 women and 16 men. The majority of the detainees interviewed were

STANDARD 2.13. STAFF-DETAINEE COMMUNICATION - Reviewer Summary

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

LEP. The detainees voiced a number of complaints including: two women complained about their medical care. One woman stated that she was concerned that her approved appointment to be seen by an outside medical specialist had not taken place. The medical inspector's review found that the appointment was in process, and staff subsequently reassured the woman that her appointment would take place soon. The other woman complained that she had not received medication to help with an eye irritation. The medical inspector's review found that the woman had not asked, either verbally or in writing, to been seen by medical staff. Medical staff did see the woman the day they were informed of the issue. Ten different women also complained about a female officer who was disrespectful and claimed that on a daily basis the officer was verbally abusive, calling them names and making fun of their appearance. Two of the women told the inspector that they had filed a grievance citing specific examples of the officer's behavior. The women claimed that it has been several weeks since they filed the grievance with no response from the facility. The safety SME investigated the issue and found no complaints had been filed regarding the female officer.

iewer Name (Printed): (b)(6);(b)(7)(C)	Completion Date: 9/29/2016
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STANDARD 2.14. TOOL CONTROL (Key: Q)

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

9	erations by maintaining control of tools, culinary utensils, an		7 2 320 27
1.	Components The use of tools, keys, medical equipment and culinary equipment is controlled.	Rating Meets Standard	Remarks (1000 Char Max) The use of all tools, keys, medical equipment and culinary equipment is closely controlled.
2.	PRIORITY: There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	Meets Standard	The chief of security is responsible for overall tool control procedures and the inspection system to insure accountability. A security lieutenant is the tool control officer.
3.	PRIORITY: Each facility administrator shall develop and implement a written tool control and storage system to include a tool classification system, and there are policies and procedures in place to ensure that all tools are properly marked and readily identifiable.	Meets Standard	There is a tool control and storage system in place which includes a tool classification system. Procedures are in place to ensure that all tools are properly marked and identifiable. Tools are marked and readily identifiable.
4.	The facility has developed and implemented a tool classification system.	Meets Standard	All tools are classified as either restricted or non-restricted.
5.	Tool inventories are required for: Facility Maintenance Department Medical Department Food Service Department Electronics Shop Recreation Department Armory	Meets Standard	Tool inventories are in place for the maintenance, food service, medical and recreation departments and the armory. There is no electronics shop.
6.	(SPCs/CDFs) The new tools shall be issued only after the Tool Control Officer has marked and inventoried them. Inventories that include any portable power tools shall provide brand name, model, size, description, and inventory control/AMIS number.	Meets Standard	New tools are not issued until they have been marked and added to the appropriate inventory by the tool control lieutenant. Portable power tools are inventoried using the brand name, model, name, size, description and control number. Use of the AMIS system is not required by ICE.
7.	The facility administrator shall schedule, and establish procedures for, the quarterly inventorying of all tools.	Meets Standard	Tools are inventoried monthly by the tool control lieutenant, with the exception of the kitchen tools, which are inventoried weekly. Tool inventories were complete and up to date.

STANDARD 2.14. TOOL CONTROL (Key: Q)

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

	Components	Rating	Remarks (1000 Char Max)
8.	(SPCs/CDFs) Tool inventories shall be numbered and posted conspicuously on all corresponding shadow boards, toolboxes, and tool kits. While all posted inventories must be accurate, only the Master Tool Inventory Sheet in the office of the chief of security requires the certifiers' signatures.	Meets Standard	Tool inventories are numbered and posted conspicuously on or by the corresponding shadow boards, toolboxes and tool kits. The signed master inventory of all tools is maintained by the tool control lieutenant.
9.	The facility administrator shall develop and implement procedures governing lost tools.	Meets Standard	
10.	(SPCs/CDFs) When a restricted or non-restricted tool is missing or lost, staff shall notify the chief of security in writing as soon as possible. When the tool is a restricted (Class "R") tool, staff shall inform the shift supervisor orally immediately upon discovering the loss. Any detainee(s) who may have had access to the tool shall be held at the work location pending completion of a thorough search. The facility administrator shall implement quarterly evaluations of lost/missing tool files.	Meets Standard	Practice includes all the elements of this component.
11.	All visitors, including repair and maintenance workers who are not ICE/ERO or facility employees, shall submit to an inspection and inventory of all tools, tool boxes, and equipment that could be used as weapons before entering and leaving the facility. The contractor shall maintain a copy of the tool inventory with them while inside the facility.	Meets Standard	Tools coming into the secure perimeter must be accompanied by an inventory and be inspected and inventoried before entering and leaving the facility. The tool inventory remains with the tools while inside the facility.

STANDARD 2.14. TOOL CONTROL – Reviewer Summary

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

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

Procedures ensure that tools and other sensitive equipment are accounted for, contributing to the safe and orderly operation of the facility. All tools used in the facility are accurately inventoried and stored in a secure manner.

Staff members remove restricted tools from work areas at the end of each workday for safekeeping. This facility does not use or have acetylene tanks or equipment. Individual toolboxes containing tools used on a daily basis are required to be secured with hasp and padlock. The maintenance personnel responsible for the toolbox are required to keep an inventory sheet in the toolbox, and the maintenance supervisor maintains copies of all such inventory sheets. Any tool permanently removed from service must be turned in to the maintenance supervisor for record keeping and safe disposal, as required by policy.

A metal chit is taken for tools/utensils issued in the kitchen. Employees use a sign in/out log indicating which tool was removed from the kitchen tool/utensil storage room.

The maintenance supervisor has established site-specific procedures for the control of ladders, extension cords, ropes and hoses, according to the following procedures: All ladders, extension cords, and ropes are classified as restricted tools and must be stored in the tool room or armory when not in use. Hoses are stored outside the secure perimeter.

STANDARD 2.14. TOOL CONTROL - Reviewer Summary

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

When a medical department tool or equipment item is missing or lost, policy requires that personnel immediately inform the health services administrator who will make the immediate verbal notification to the chief of security or shift supervisor and make written notification to the OIC.

During the evaluation of this standard, tools and tool storage areas were inspected; policy, tool inventories, and tool sign-out logs were reviewed; and employees were interviewed.

Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6);(b)(7)(C)	Completion Date: 9/29/2016
Reviewer Signature (for printed form submission):	

2018-ICLI-00052 2617

STANDARD 2.15. USE OF FORCE AND RESTRAINTS (Key: R)

This detention standard authorizes staff to use necessary and reasonable force after all reasonable efforts to otherwise resolve a situation have failed, for protection of all persons; to minimize injury to self, detainees, staff and others; to prevent escape or serious property damage; or to maintain the security and orderly operation of the facility. Staff should use only the degree of force necessary to gain control of detainees and, under specified conditions, may use physical restraints to gain control of a dangerous detainee.

	Components	Rating	Remarks (1000 Char Max)
1.	PRIORITY: Staff use physical force only as a last resort after all reasonable efforts to otherwise resolve a situation have failed, and use only the degree of force necessary to gain control of the situation, employing confrontation avoidance techniques and the use-of-force continuum.	Meets Standard	Policy and training require that officers use physical responses only as a last resort and after all reasonable efforts to resolve a situation have failed, and use only the degree of force necessary to gain control of the situation, employing confrontation avoidance techniques and the use-of-force continuum.
2.	Staff:		
	 Does not use force as punishment. Attempts to gain the detainee's voluntary cooperation before resorting to force. Uses only as much force as necessary to control the detainee. Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are 	Meets Standard	The use-of-force policy fully addresses each of the requirements of this component.
752	impractical.		
3.	PRIORITY: All officers receive training in self-defense, confrontation avoidance techniques and the use of force to control detainees. Specialized training is given to officers ensuring they are certified in all devices including chemical agents, approved for use.	Meets Standard	All officers receive training in self-defense, confrontation avoidance techniques and the use of force to control detainees. Officers receive specialized training to ensure they are certified in all devices approved for use.
4.	PRIORITY: Staff will consult with medical staff prior to a calculated use of force regarding the following: Use of pepper spray/non-lethal weapons.		
	 Pregnant detainees or detainees in post-delivery recuperation. Detainees with wounds or cuts. Detainees with special medical or mental health 	Meets Standard	Policy addresses all of the requirements of this component.

STANDARD 2.15. USE OF FORCE AND RESTRAINTS (Key: R)

This detention standard authorizes staff to use necessary and reasonable force after all reasonable efforts to otherwise resolve a situation have failed, for protection of all persons; to minimize injury to self, detainees, staff and others; to prevent escape or serious property damage; or to maintain the security and orderly operation of the facility. Staff should use only the degree of force necessary to gain control of detainees and, under specified conditions, may use physical restraints to gain control of a dangerous detainee.

	Components	Rating	Remarks (1000 Char Max)
5.	Special precautions are taken when restraining pregnant detainees, consistent with the Detention Standard on Medical Care (Women). Medical personnel are consulted.	Meets Standard	Pregnant detainees may only be restrained in extraordinary circumstances. Medical personnel must be consulted to determine the safest method of restraint.
6.	Intermediate force weapons, when not in use, are stored in areas where access is limited to authorized personnel and to which detainees have no access.	Meets Standard	
7.	When the detainee is in isolated location where there is no immediate threat to the detainee or others (e.g., a locked cell, a range), staff must try to resolve the situation without resorting to force.	Meets Standard	
8.	The facility subscribes to the prescribed confrontation avoidance procedures. The ranking detention official, health professionals, and others confer before every calculated use of force.	Meets Standard	The facility subscribes to the prescribed confrontation avoidance procedures. Ranking detention officials, health care staff and others confer to assess a situation before each planned physical response.
9.	When a detainee must be forcibly moved and/or restrained and there is time for a calculated use of force, staff use the use of force team technique.	Meets Standard	
10.	Staff members are trained in the performance of the use- of-force team technique.	Meets Standard	All members of the Corrections Emergency Response Team (CERT) are trained in the performance of the use of force team technique.
11.	PRIORITY: All use of force incidents are documented and reviewed. Staff prepare a use of force form that identifies the detainee(s), staff, and others involved, describes the incident, and documents the location of strikes if intermediate force weapons are used. All calculated use of force incidents are properly audiovisually documented and forwarded for review. Use of Force documentation at a minimum, shall include the medical examination through the conclusion of the incident. All calculated uses of force incidents must be audio-visually recorded in its entirety from the beginning of the incident to its conclusion.	Meets Standard	All applications of force are documented and reviewed. Employees are required to prepare a use of force form that speaks to all of the requirements of this component. Planned responses must be audio-visually documented in their entirety from beginning to conclusion and then be forwarded for review. The use of force documentation includes the medical examination of the subject detainee.

STANDARD 2.15. USE OF FORCE AND RESTRAINTS (Key: R)

This detention standard authorizes staff to use necessary and reasonable force after all reasonable efforts to otherwise resolve a situation have failed, for protection of all persons; to minimize injury to self, detainees, staff and others; to prevent escape or serious property damage; or to maintain the security and orderly operation of the facility. Staff should use only the degree of force necessary to gain control of detainees and, under specified conditions, may use physical restraints to gain control of a dangerous detainee.

Components	Rating	Remarks (1000 Char Max)
12. Staff shall store and maintain audio-visual recording equipment under the same conditions as "restricted" tools.	Meets Standard	
 13. Standard procedures associated with using four/five point restraints include: Soft (nylon/leather) restraints. Dressing the detainee appropriately for the temperature. A bed, mattress, and blanket/sheet. Checking the detainee at (b)(7)(E) Logging each check. Repositioning detainee often enough to prevent soreness or stiffness. Medical evaluation of the restrained detainee twice per eight-hour shift. When qualified medical staff are not immediately available, staff position the detainee "face-up." 	Meets Standard	The facility uses a four/five point bed restraint or a restraint chair. Policy addresses all requirements of this component.
14. In immediate use of force situations, officers contact medical staff once the detainee is under control.	Meets Standard	
15. The shift supervisor monitors the detainee's position/condition every two hours. He/she allows the detainee to use the restroom at these times under safeguards.	Meets Standard	
16. All detainee checks are logged.	Meets Standard	Policy requires that all detainee checks be logged.
17. When any detainee is restrained for more than eight hours, the facility administrator shall telephonically notify the Assistant Field Office Director and provide updates every eight hours until the restraints are removed.	Meets Standard	Policy addresses the requirements of this component.
18. It is standard practice to review any use of force and the non-routine application of restraints.	Meets Standard	All use of force incidents and non-routine applications of restraints are reviewed.

STANDARD 2.15. USE OF FORCE AND RESTRAINTS - Reviewer Summary

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

STANDARD 2.15. USE OF FORCE AND RESTRAINTS – Reviewer Summary			
(Use following format for dates: mm/dd/yyyy)			
Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)			
Physical responses are deployed only after all other reasonable means to resolve a situation have failed. Policy and training assert that only the minimum force needed to control the situation will be used. All physical responses are documented and reviewed. $(b)(7)(E)$ Chemical agents may be used if warranted.			
There have been two planned physical responses to detainee resistance involving two ICE detainees, and four immediate physical responses involving four ICE detainees during the inspection period. All incidents and accompanying video were reviewed. All incidents were the result of detainees either violently refusing to comply with rules and directions or disrupting the orderly operations of the facility with their overt actions. Medical attention was documented in all incidents. All reports were complete and had been reviewed by administrative staff and ICE. All physical responses were within the parameters of policy and the standard.			
The use of choke holds is prohibited. The following acts and techniques are specifically prohibited when using non-deadly force: choke holds, carotid control holds and other neck restraints; using a baton to apply choke or "come along" holds to the neck area; and intentional baton strikes to the head, face, groin, solar plexus, neck, kidneys, or spinal column.			
The facility maintains a written record of routine and emergency distribution of security equipment and assigns a security lieutenant the responsibility for inventorying chemical agents and related security equipment at least monthly to determine their condition and expiration dates. Only devices authorized by ICE are approved for use of force.			
The shift supervisor is required to inspect areas of blood or other body-fluid spillage after a use of force incident. Unless the supervisor determines that the spillage must be preserved as evidence, trained employees immediately sanitize those areas based on medical department guidance on appropriate cleaning solutions and their use.			
Policy states that the OIC, chief of security, the FOD's designee and the health services administrator conduct the after-action review. The after-action review team is required to gather relevant information, determine whether policy and procedures were followed, make recommendations for improvement, if any, and complete an after-action report to record the nature of its review and findings. The review team's investigative report is forwarded to the FOD for review.			
This standard was evaluated via a review of policy and use of force reports and video, inspection of the video camera utilized to record planned responses, and interviews with staff.			
Overall Rating: Meets Standard			
Reviewer Name (Printed): (b)(6);(b)(7)(C) Completion Date: 9/29/2016			

Reviewer Signature (for printed form submission):

Section III: ORDER

Disciplinary System

STANDARD 3.1. DISCIPLINARY SYSTEM (Key: S)

This detention standard promotes a safe and orderly living environment for detainees by establishing a fair and equitable disciplinary system, requiring detainees to comply with facility rules and regulations, and imposing disciplinary sanctions to those who do not comply.

	Components	Rating	Remarks (1000 Char Max)
1.	PRIORITY: The facility has a written disciplinary system using progressive levels of reviews and appeals. Written disciplinary policy and procedures shall clearly define detainee rights and responsibilities. The policy, procedures and rules shall be reviewed at least annually.	Meets Standard	There is a written disciplinary policy which uses progressive levels of reviews and appeals. The policy clearly defines detainee rights and responsibilities. The policy, procedures and rules are reviewed annually by the OIC.
2.	Detainees will receive translation or interpretation services throughout the investigative, disciplinary, and appeal process, including accommodation for the hearing impaired. The facility shall not hold a detainee accountable for his or her conduct if a medical authority finds him or her mentally incompetent.	Meets Standard	Detainees may be afforded translation or interpretation services through the entire disciplinary and appeal process, including accommodation for the hearing impaired. Detainees are not held accountable for his/her conduct if a medical authority finds him/her mentally incompetent.
3.	PRIORITY: Time in disciplinary segregation or withholding of privileges imposed for disciplinary violations do not generally exceed 30 days per violation, except in extraordinary circumstances. Staff do not impose or allow imposition of the following sanctions: corporal punishment; deprivation of food services (to include use of Nutraloaf or "food loaf"); deprivation of clothing, bedding, or items of personal hygiene; deprivation of correspondence privileges; deprivation of legal access and legal materials; or deprivation of indoor or outdoor recreation, unless such activity creates a documented unsafe condition.	Meets Standard	Policy does not allow time in disciplinary segregation or withholding of privileges to exceed thirty days except in extraordinary circumstances. Policy does not allow for the imposition of any of the sanctions noted in this component.
4.	A detainee shall be removed from segregation if a health care professional concludes that continued segregation is detrimental to the detainee's medical or mental health.	Meets Standard	
5.	PRIORITY: The facility supplemental handbook issued to each detainee upon admittance shall provide notice of the facility's rules of conduct and prohibited acts, the sanctions imposed for violations of the rules, the disciplinary severity scale, the disciplinary process and the procedure for appealing disciplinary findings.	Meets Standard	Rules of conduct, prohibited acts, sanctions, the disciplinary severity scale and procedures for violations are addressed in the facility handbook which is issued to all detainees during the intake process.

STANDARD 3.1. DISCIPLINARY SYSTEM (Key: S)

This detention standard promotes a safe and orderly living environment for detainees by establishing a fair and equitable disciplinary system, requiring detainees to comply with facility rules and regulations, and imposing disciplinary sanctions to those who do not comply.

****	Components	Rating	Remarks (1000 Char Max)
		Rating	
6.	Copies of the rules of conduct, rights, and disciplinary sanctions shall be provided to all detainees and posted in English, Spanish, and/or other languages spoken by significant numbers of detainees, as follows: Disciplinary Severity Scale Prohibited Acts Sanctions	Meets Standard	Rules of conduct, rights and sanctions are addressed in the facility handbook, communicated to all detainees in verbal orientation sessions and were observed to be posted in English and Spanish in all of the detainee housing units. The disciplinary severity scale, prohibited acts, and sanctions were observed to be posted in English and Spanish in the living units.
7.	All facilities shall have graduated scales of offenses and disciplinary consequences as provided in this section.	Meets Standard	
8.	PRIORITY: Incident reports are investigated within 24 hours of the incident by an officer who had no involvement in the incident. Low or moderate infractions are adjudicated by a Unit Disciplinary Committee (UDC). Unresolved cases and cases involving serious charges are forwarded by the UDC to the Institution Disciplinary Panel (IDP) for adjudication.	Meets Standard	Incident reports are investigated within 24 hours of the incident by an officer who had no involvement in the incident. Low or moderate infractions are adjudicated by the unit disciplinary committee (UDC) and unresolved cases or cases involving serious charges are forwarded to the institution disciplinary panel (IDP) for adjudication.
9.	The detainee is advised in writing of his/her right, if applicable, to an initial hearing before the Unit Disciplinary Committee (UDC) within 24 hours of his/her notification of charges. The detainee is provided a copy of the Incident Report and notice of charges at least 24 hours before the start of any disciplinary proceedings.	Meets Standard	
10.	The investigating officer advises the detainee of his/her right to remain silent at every stage of the disciplinary process, and ensures that he/she has a complete listing of detainee rights.	Meets Standard	
11.	PRIORITY: A staff representative is made available upon request for all detainees facing an IDP disciplinary hearing. Detainees also have the option of receiving assistance from another detainee of their selection rather than a staff representative, subject to approval from the facility administrator.	Meets Standard	A staff representative is made available upon request to detainees facing an IDP disciplinary hearing. Detainees have the option of receiving assistance from another detainee of their selection rather than a staff representative, subject to approval from the OIC.

STANDARD 3.1. DISCIPLINARY SYSTEM (Key: S)

This detention standard promotes a safe and orderly living environment for detainees by establishing a fair and equitable disciplinary system, requiring detainees to comply with facility rules and regulations, and imposing disciplinary sanctions to those who do not comply.

Components	Rating	Remarks (1000 Char Max)
 A staff representative is automatically provided for detainees who are illiterate, limited-English proficient, or without means of collecting and presenting essential evidence. 	Meets Standard	
13. The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	Meets Standard	Continuances are permitted when justified, the reasons are documented.
14. Written procedures govern the handling of confidential- source information. Procedures include criteria for recognizing "substantial evidence."	Meets Standard	Policy addresses the handling of confidential-source information and defines "substantial evidence".
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	Meets Standard	

STANDARD 3.1. DISCIPLINARY SYSTEM - 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 has a comprehensive disciplinary process which affords detainees their due process rights and levels of appeals. The facility handbook provides detainees a good overview of the disciplinary process.

The actions of the IDP are reviewed by the OIC, who may concur with the findings and sanctions or modify them. If any employee at any stage of the disciplinary process has reason to believe that the detainee is mentally ill or mentally incompetent, the facility will provide for an assessment by qualified medical personnel.

Policy states that disciplinary action may not be capricious or retaliatory.

If the disciplinary incident is under investigation on different grounds, the investigating officer will terminate the administrative investigation until the agency with primary jurisdiction concludes its investigation or indicates it shall not pursue the matter. A supervisory officer is the investigating officer that conducts the investigation. The shift supervisor reviews his/her report(s) for accuracy and completeness and signs them.

Policy states that time served in segregation pending the outcome of the proceedings can be credited to the number of days spent in the segregation unit after an adverse decision is adjudicated.

The disciplinary report and accompanying documents are not placed in the file of a detainee who is found not guilty. This material may be retained in the chief of security's office for institution statistical or historical purposes for a minimum of six months.

This standard was evaluated via policy review, inspection of disciplinary reports, and staff and detainee interviews. Detainees stated that they were treated justly during the disciplinary process.

Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6);(b)(7)(C)	Completion Date: 9/29/2016

STANDARD 3.1. DISCIPLINARY SYSTEM - Reviewer Summary

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

Reviewer Signature (for printed form submission):

Section IV: CARE

Food Service
Hunger Strikes
Medical Care
Medical Care (Women)
Personal Hygiene
Suicide Prevention and Intervention
Terminal Illness, Advance Directives, and Death

	Components	Rating	Remarks (1000 Char Max)
1.	 PRIORITY: The food service program shall be under the direct supervision of an experienced food service administrator (FSA) who is responsible for: Planning, controlling, directing, managing, and evaluating food service; Managing budget resources; Establishing standards of sanitation, safety and security; Developing nutritionally adequate menus and evaluating detainee acceptance of them; Developing specifications for the procurement of food, equipment, and supplies; and Establishing a training program that ensures operational efficiency and a high quality food service program. 	Meets Standard	The food service program is owned by GEO, the facility contractor, and managed by an experienced food service administrator (FSA) who is ServSafe certified and has over 25 years of experience in the public and private sector food service industry. Correctional officers, with a food service background, serve as dietary support staff. The FSA is responsible for all of the requirements listed in this component.
2.	The knife cabinet must be equipped with an approved locking device. Knives must be physically secured to workstations for use outside a secure cutting room. Any detainee using a knife outside a secure area must receive direct staff supervision.	Meets Standard	This facility does not use knives; dough cutters are used in their place. They are tethered to their work stations when in use. All tools/utensils are monitored by dietary personnel when used.
3.	Special procedures govern the handling of food items that pose a security threat.	Meets Standard	
4.	The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	Meets Standard	
5.	 During orientation and training session(s), the cook supervisor or equivalent explains and demonstrates: Safe work practices and methods. Safety features of individual products/ pieces of equipment. Training covers the safe handling of hazardous material[s] the detainee are likely to encounter in their work. 	Meets Standard	The FSA or a dietary officer conducts orientation and training sessions for all new ICE detainee workers. All of the requirements listed in this component are addressed in the training sessions.
6.	The cook supervisor documents all training.	Meets Standard	
7.	Detainees assigned to the food service department shall have a neat and clean appearance.	Meets Standard	
8.	Detainees are served three meals every day, at least two of which are hot meals. No more than 14 hours elapse between the last meal served and the first meal of the following day.	Meets Standard	Detainees are served three meals every day, at least two of which are hot meals. Scheduled meal times do not permit more than fourteen hours to lapse between servings.

Components	Rating	Remarks (1000 Char Max)
Meals shall always be prepared, delivered, and served under staff supervision.	Meets Standard	
10. PRIORITY: Before and during the display, service and transportation of food, sanitary guidelines are observed, with hot foods maintained at a temperature of at least 140 F degrees (120 degrees in food trays) and foods that require refrigeration maintained at 41 F degrees or below.	Meets Standard	Sanitary guidelines are maintained during the display, service and transport of food. Food temperatures are properly maintained during these stages. Documentation supports temperatures are within the safe ranges cited in this component. Hot/cold food temperature checks are logged for each meal.
Servers must wear food grade plastic gloves and hair nets whenever there is direct contact with a food or beverage. Serving food without use of utensils is strictly prohibited.	Meets Standard	Staff and ICE detainee kitchen workers were observed wearing plastic gloves and hair/beard nets. Serving food without utensils is prohibited.
12. Utensils shall be sanitized as often as necessary to prevent cross-contamination and other food-handling hazards during food preparation and service.	Meets Standard	
13. If the facility does not have enough equipment to maintain the minimum or maximum temperature required for food safety, the affected items (for example, salad bar staples such as lettuce, meat, eggs, cheese) must be removed and discarded after two hours at room temperature.	N/A	This facility has enough equipment to maintain the minimum/maximum temperature requirements for food safety.
14. Food shall be delivered from one place to another in covered containers.	Meets Standard	
15. If food carts are delivered to housing units by detainees, they must be locked unless they are under constant supervision of staff. All food safety procedures (sanitation, safe-handling, storage, etc.) apply without exception to food in transit.	Meets Standard	Food carts are delivered to the housing units by officers. All food safety procedures and precautions are followed when food is transported. Observation supports adherence.
16. PRIORITY: A registered dietitian shall conduct a complete nutritional analysis that meets U.S. Recommended Daily Allowances (RDA), at least annually, of every master-cycle menu planned by the FSA. The dietitian must certify menus before they are incorporated into the food service program.	Meets Standard	A registered dietician conducts a complete and annual nutritional analysis that meets U.S. RDAs on every master-cycle menu. The last review was conducted on 05/15/2016. Menus must have this certification before they can be implemented.
17. The CS or equivalent ensures that items on the master-cycle menu are prepared and presented according to approved recipes.	Meets Standard	

Components	Rating	Remarks (1000 Char Max)
18. The CS or equivalent has the authority to change menu items if necessary, documenting each substitution, along with its justification, with a copy to the FSA. Menu substitutions will be in accordance with dietician approved substitution guidelines.	Meets Standard	The FSA or a dietary officer can change a menu item, with GEO corporate office approval. All menu substitutions are made in accordance with dietician approved substitution guidelines. These actions are documented citing justification for the change.
19. Food service staff and detainee workers involved in cooking shall ensure that potentially hazardous foods are cooked at the required safe temperatures, as listed in the Detention Standard on Food service.	Meets Standard	
20. Facilities are required to provide detainees requesting a religious diet a reasonable and equitable opportunity to observe their religious dietary practice by offering a Common Fare Menu. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	Meets Standard	A common fare menu is available to detainees choosing to participate in a religious dietary practice. All requests for religious diets are routed through the chaplain for review and authentication.
21. (SPCs/CDFs) Once a religious diet has been approved, the FSA shall issue, in duplicate, a special-diet identification card.	Meets Standard	
22. The common fare menu shall be based on a 14 day cycle. The menus must be certified as exceeding minimum daily nutritional requirements. Hot entrees shall be offered daily.	Meets Standard	A common fare menu, based on a 42-day cycle, is available to approved detainees. The common fare menu is certified annually by a registered dietitian as exceeding daily nutritional requirements. Hot entrees are offered daily.
23. The chaplain, in consultation with local religious leaders if necessary, shall develop the ceremonial meal schedule for the following calendar year and provide it to the facility administrator.	Meets Standard	An annual ceremonial meal schedule/calendar is prepared by the chaplain. This calendar is approved by the OIC and provided to the FSA for adherence.
24. The Common Fare Program shall accommodate detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year, such as Ramadan, Passover, and Lent.	Meets Standard	The common fare program accommodates the menu, fasting requirements and meal schedules of approved religious faiths.
25. Detainees with certain conditions – chronic or temporary; medical, dental, and/or psychological – shall be prescribed special diets as appropriate.	Meets Standard	

STANDARD 4.1. FOOD SERVICE (Key: T)

	Components	Rating	Remarks (1000 Char Max)
26.	The sanitary standards, including proper temperature maintenance, are required in the food service department also apply to satellite meals, from preparation to actual delivery.	Meets Standard	
27.	Food for satellite meals must be prepared and held at the proper temperatures until served. Satellite tray meals must be delivered and served within two hours of food being plated.	Meets Standard	Food trays are prepared and held at temperatures ranges that adhere to the sanitary guidelines specified in the standard. Satellite trays are plated, delivered and served within two hours.
28.	In segregation units, food rations shall not be reduced or changed or otherwise used as a disciplinary tool.	Meets Standard	Segregation status detainees are served the same menu items as general population detainees. Food is not used as a disciplinary tool.
29.	Sack meals shall be provided for detainees being transported from the facility, and detainees arriving or departing between scheduled meal hours, and detainees in the SMU, as provided in the standard. Sack meals shall be of the same nutritional quality as other meals prepared by the food service.	Meets Standard	The FSA or a dietary officer ensures sack meals are provided to arriving/departing detainees when their movement interferes with scheduled meal times. SMU detainees receive the same meals as general population detainees. Sack meals are of the same nutritional quality as the meals they replace.
30.	 The food service staff instruct detainee volunteers on: Personal cleanliness and hygiene; Sanitary techniques for preparing, storing, and serving food, and; The sanitary operation, care, and maintenance of equipment. 	Meets Standard	The FSA or a dietary officer provides instruction to all new ICE detainee volunteer workers which address all of the requirements listed in this component. The training is documented in each detainee's training file.

Components	Rating	Remarks (1000 Char Max)
31. All food service personnel, including staff and detainees, shall receive a pre-employment medical examination. The Cook Foreman or detention staff assigned to food service shall inspect all detainee food service workers on a daily basis at the start of each work period. Detainees who exhibit signs of illness, skin disease, diarrhea (admitted or suspected), or infected cuts or boils shall be removed from the work assignment and immediately referred to Health Services for determination of duty fitness.	Meets Standard	All food service personnel must receive medical clearance prior to the initial start of their assignments. The FSA or a dietary officer conducts a health/hygiene inspection of all food service personnel prior to the start of their daily shift. Personnel with concerns are prohibited from working and are referred to medical professionals for further assessment and/or treatment. Medical clearance is required before those individuals are permitted to return to work.
32. The food service department complies with food safety and sanitation requirements as prescribed by the governing health inspection authority, applicable laws and contract provisions.	Meets Standard	The food service department adheres to the food safety and sanitation requirements, as prescribed by governing health codes and applicable laws and contract provisions. Overall sanitation in the kitchen is quite high. The cleaning schedules are inclusive of all kitchen areas. Tri-County Health Department conducted a food service monitoring and observation report on 08/24/2016. The three minor concerns cited have all been corrected.
33. All facilities shall meet environmental standards for safety and sanitation.	Meets Standard	
34. The FSA shall develop a schedule for the routine cleaning of equipment consistent with the information obtained from manufacturers or local distributors, the National Sanitation Foundation International (NSF) standards or equivalent standards of other agencies about the operation, cleaning, and care of equipment.	Meets Standard	The FSA has established a posted routine cleaning schedule for all food service areas and equipment. Cleaning areas, frequencies and substances used in these processes are in accordance with suggested manufacturers' recommendations. Documentation of routine cleaning supports the practice.

sanitary and hygienic food service operation.	1 5	T
Components	Rating	Remarks (1000 Char Max)
35. Spray or immersion dishwashers or devices – including automatic dispensers for detergents, wetting agents, and liquid sanitizer – shall be maintained in good repair. Utensils and equipment placed in the machine must be exposed to all cycles.	Meets Standard	
36. Adequate, sanitary, properly equipped, and conveniently located toilet facilities shall be provided for all food service staff and detainee workers.	Meets Standard	The food service area is equipped with two adequate, sanitary and properly equipped toilet facilities: one dedicated to staff and the other to detainee workers.
37. The FSA is responsible for pest control in the food service department. Air curtains or comparable devices shall be used on outside doors where food is prepared, stored, or served to protect against insects and other rodents.	Meets Standard	Eco-Lab is responsible for the monthly inspection and preventive spraying for insects and other rodents in the kitchen areas. There are no outside doors off the kitchen preparation, storage or serving areas.
38. The facility shall implement written procedures requiring administrative, medical, and/or dietary personnel to conduct the weekly inspections of all food service areas, including dining, storage, equipment, and food-preparation areas.	Meets Standard	Written procedures require weekly inspections of all food service areas by representatives from administration, medical and the dietary departments. Documentation supports the practice. These inspection reports are reviewed by the FSA.
39. PRIORITY: Staff shall check refrigerator and water temperatures daily and record the results. The FSA or designee will verify and document requirements of food and equipment temperatures. The FSA or CS shall inspect food service areas at least weekly. An independent, external inspector shall conduct annual inspections to ensure that the food service facilities and equipment meet governmental health and safety codes.	Meets Standard	Refrigerator/water temperatures are reviewed and documented daily, by the FSA or a dietary officer, to ensure they are within prescribed safety ranges. The FSA or a dietary officer inspects all food service areas daily. The Tri-County Health Department conducted a food service monitoring and observation report on 08/24/2016 to determine adherence to applicable government health and safety codes. No substantive concerns were noted.

STANDARD 4.1. FOOD SERVICE (Kev: T)

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

	Components	Rating	Remarks (1000 Char Max)
	The FSA shall develop a cleaning schedule for each food service area and post it for easy reference.	Meets Standard	A cleaning schedule for all kitchen areas has been developed and is conspicuously posted in multiple locations throughout the kitchen.
41.	Each FSA shall establish procedures for storing, receiving, and inventorying food.	Meets Standard	
	Store all products at least six inches from the floor and sufficiently far from walls to facilitate pest-control measures.	Meets Standard	Stored products are kept at least six inches off the floor and away from walls. All products are stored on pallets or shelving.
	Perishables shall be stored at 35-40 F degrees to prevent spoilage and other bacterial action, and maintain frozen foods at or below zero degrees.	Meets Standard	Refrigerator/freezer temperatures are maintained within the prescribed safety ranges listed in this component. Documentation supports the practice.
44.	Inventory levels are established, monitored and periodically adjusted to correct excesses or shortages.	Meets Standard	

STANDARD 4.1. FOOD SERVICE - Reviewer Summary

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

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

The food service department is operated by GEO employees. The food service operation is under the direction of a professionally trained and certified food supervisor administrator (FSA). The FSA is assisted by dietary officers. The food service department is furnished with the necessary equipment to prepare and present meals in accordance with industry standards. To ensure that all dietary officers have working knowledge of all food service posts within the department, the FSA has trained the staff in all areas of the food service operation, custodial issues and applicable ICE detention standards. The food service department maintained a high degree of sanitation during the inspection.

The FSA has considered the ethnic diversity of the detainee population; it is reflected in the cycle menus. All cycle menus have been nutritionally analyzed and certified to be nutritionally adequate by a registered dietitian. The facility maintains at least a fourteen day supply of food. Inventory levels are established, monitored and periodically adjusted to correct excesses or shortages.

The FSA has a meal schedule for ICE detainee food service workers. Excess food may be retained for a limited time under refrigeration. Leftover items are covered and identified with their preparation date. If the excess food is not used within three days it is discarded.

Yeast, mace, nutmeg, cloves, alcohol-based flavorings, sugar and other spices are subject to special handling. All of these items are securely stored in a supervised access area. The FSA or a dietary officer is authorized to handle and dispense these items. Dietary personnel keep a measured running inventory record of sugar.

A sink with three labeled compartments, all with hot and cold water, is used for manually washing, rinsing and sanitizing utensils and equipment. Each compartment has the capacity to accommodate items to be cleaned and industry standards are followed. The dishwashing machine includes automatic detergent/sanitizing solution dispensers. It is maintained in good

STANDARD 4.1. FOOD SERVICE - Reviewer Summary

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

working order and supplies appropriate water temperatures and water pressure. Plates, cups, utensils and equipment placed in the machine are exposed to all cycles.

Confidential interviews with eight housing unit ICE detainees and three detainee workers revealed no concerns regarding the quantity or taste of the food.

Interviews with the FSA, the chaplain, dietary officers and ICE detainees; tours of all food service preparation and storage areas; inspection of health department reviews, training records, temperature logs, menu substitutions, nutritional/dietitian assessments and special diet documentation; observation of preparation of the noon meal on 09/28/2016, food traying procedures and their delivery to the housing units; and review of overall sanitation routines and results revealed that detainees are provided a nutritionally balanced diet that is prepared and presented in a sanitary and hygienic environment.

riewer Name (Printed):(b)(6):(b)(7)(C)	Completion Date: 9/29/2016
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STANDARD 4.2. HUNGER STRIKES (Key: U)

This detention standard protects detainees' health and well-being by monitoring, counseling and providing appropriate treatment to any detainee who is on a hunger strike.

	Components	Rating	Remarks (1000 Char Max)
1.	All staff receive initial and annual training on recognizing the signs of a hunger striker and on the procedures for referral for medical assessment. Medical staff receive training in hunger-strike evaluation and treatment and remain up-to-date on these techniques.	Meets Standard	All personnel receive training in the recognition of hunger striker signs and the referral procedures during orientation and refresher training annually thereafter. Medical personnel receive additional training in the evaluation and treatment of hunger strikers and are current in these techniques.
2.	Procedures for identifying and referring to medical staff a detainee suspected or announced to be on a hunger strike shall include obtaining from qualified medical personnel an assessment of whether the detainee's action is reasoned and deliberate or the manifestation of a mental illness.	Meets Standard	Policy includes procedures for identifying and referring hunger strikers to medical personnel. A referral to mental health staff is also initiated to assess whether the detainee's action is reasoned and deliberate or the manifestation of a mental illness.
3.	PRIORITY: Facility immediately reports via the chain of command a hunger strike to ICE/ERO.	Meets Standard	Hunger strikes are immediately reported to onsite ICE personnel.
4.	PRIORITY: Staff shall consider any detainee observed to have not eaten for 72 hours to be on a hunger strike, and shall refer him or her to the clinical medical authority for evaluation and management.	Meets Standard	Per policy, any detainee who has not eaten for 72 hours or who has declared a hunger strike is considered to be on a hunger strike and is referred to medical staff for evaluation and management.
5.	 During the initial evaluation of a detainee on a hunger strike, medical staff shall: Measure and record height and weight; Measure and record vital signs; Perform urinalysis; Conduct psychological/psychiatric evaluation; Examine general physical condition; and If clinically indicated, proceed with other necessary studies. Medical staff record the weight and vital signs and repeat other procedures as medically indicated of a hunger-striking detainee at least once every 24 hours. Medical staff shall record all examination results in the detainee's medical file. 	Meets Standard	Guidelines for the initial medical evaluation of a hunger striker include all the items listed in this component. Weight and vital signs are taken once every 24 hours and documented in the medical record. Other indicated laboratory tests are conducted as ordered by the physician. A hunger strike monitoring form is utilized to document all results and is placed in the detainee's medical record.

STANDARD 4.2. HUNGER STRIKES (Key: U)

This detention standard protects detainees' health and well-being by monitoring, counseling and providing appropriate treatment to any detainee who is on a hunger strike.

	Components	Rating	Remarks (1000 Char Max)
6.	A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment. If the detainee will not cooperate by signing, staff shall note this on the "Refusal of Treatment" form. Any detainee refusing medical treatment will be monitored by medical staff to evaluate whether the hunger strike poses a risk to the detainee's life or permanent health.	Meets Standard	A detainee who refuses treatment must sign a Refusal of Treatment form. If a detainee refuses treatment and refuses to sign, a notation is written on the form and witnessed by two staff members. Medical personnel monitor the detainee to evaluate whether the hunger strike poses a risk to the detainee's life and document in the medical record repeated treatment attempts and counseling as to the risks of a hunger strike.
7.	After the hunger strike, medical staff shall provide appropriate medical and mental health follow-up care. Only the clinical medical authority may order a detainee's release from hunger strike treatment and shall document that order in the detainee's medical record. A notation will be made in the detention file when the detainee has ended the hunger strike.	Meets Standard	Policy states that only the clinical medical authority may order a detainee's release from hunger strike monitoring and treatment. The order must be written in the detainee's medical record. Per the ICE officer, a notation is made in the detention file when a detainee has ended the hunger strike.
8.	After consultation with the clinical medical authority, the facility administrator may require staff to measure and record food and water intake and output until terminated by the clinical medical authority. An IHSC Hunger Strike Form or equivalent must be used.	Meets Standard	Food and liquid intake and output is measured and recorded on an IHSC Hunger Strike equivalent Form on all hunger striking detainees.
9.	Unless otherwise directed by the medical authority, staff physically deliver three meals per day to the detainee's room, regardless of the detainee's response to a verbally offered meal and document those meal offers.	Meets Standard	Per policy and the health services administrator (HSA), three meals per day are delivered to the detainee. Delivery of the meals is documented on the monitoring form.
10.	Provide an adequate supply of drinking water or other beverages.	Meets Standard	An adequate supply of drinking water and beverages are provided to the detainee.
11.	Remove from the detainee's room all food items not authorized by the clinical medical authority.	Meets Standard	All food items not approved by the clinical medical authority are removed from the cell.

STANDARD 4.2. HUNGER STRIKES (Key: U)

This detention standard protects detainees' health and well-being by monitoring, counseling and providing appropriate treatment to any detainee who is on a hunger strike.

Components	Rating	Remarks (1000 Char Max)
12. Before involuntary medical treatment is administered, staff shall make reasonable efforts to educate and encourage him or her to accept treatment voluntarily. Involuntary medical treatment shall be administered in accordance with established guidelines and applicable laws and only after the clinical medical authority determines the detainee's life or health is at risk.	Meets Standard	A hunger-striking detainee is provided education and encouragement to accept treatment voluntarily by medical and mental health personnel. If involuntary treatment becomes necessary, the detainee is transferred to an off-site medical facility. Involuntary medical treatment is not administered at this facility.

STANDARD 4.2. HUNGER STRIKES – Reviewer Summary

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

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

During initial referral, medical personnel document the reasons for placing a detainee in a single occupancy observation room. This decision is reviewed every 72 hours. Medical personnel monitor detainees in single-occupancy observation rooms as medically indicated and mental health needs are considered. Medical personnel make the decision about appropriate housing placement when food and liquid intake/output is measured.

If a detainee engaging in a hunger strike has been previously diagnosed with a mental condition, or is incapable of giving informed consent due to age or illness, appropriate medical/administrative action is taken in the best interest of the detainee. Only qualified medical personnel modify or augment standard treatment protocols. If medically necessary, detainees are transferred to a community hospital or a detention facility appropriately equipped for treatment. Records are kept of all interactions with the striking detainee, the provision of food, attempted and successfully administered medical treatment, and communications between the clinical medical authority (CMA), OIC, and ICE.

Detainees on hunger strikes may not purchase food/snacks. Detainees refusing to accept treatment are counseled by medical staff regarding the medical risks associated with refusal of treatment. When clinical assessment and laboratory results indicate the detainee's weakening condition threatens the life or long-term health of the detainee, a physician recommends involuntary treatment. The OIC notifies ICE if a detainee is refusing treatment, and the health services administrator notifies the respective FOD in writing of any proposed plan to involuntarily feed the detainee. Any involuntary medical treatment is approved by ICE. The FOD, in consultation with the CMA, contacts the respective ICE Office of Chief Counsel and the U.S. Attorney's Office and discusses any impending involuntary medical treatment and makes recommendations regarding pursuing a court order. Medical personnel continue clinical and laboratory monitoring as necessary until the detainee's life or health is out of danger and continue medical and mental health follow-up as necessary.

No hunger strikes were reported since the last inspection. Therefore, this inspector was unable to review medical record documentation to ascertain if the facility is in full compliance with the standard. Policy and procedures are in place to protect the well-being of a detainee who is on a hunger strike, with effective identification, evaluation and treatment. Evaluation of this standard was based on a review of policy and training records and interviews with staff.

Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6);(b)(7)(C)	Completion Date: 9/29/2016

Reviewer Signature (for printed form submission):

inc	including emergency services.			
	Components	Rating	Remarks (1000 Char Max)	
1.	 Every facility shall directly or contractually provide its detainee population: Initial medical, mental health, and dental screening, Medically necessary and appropriate medical, dental and mental health care and pharmaceutical services Comprehensive, routine and preventive health care, as medically indicated Emergency care, Specialty health care, Timely responses, Mental health care, Hospitalization as needed within the local community, and Staff or professional language services necessary for detainees with limited English proficiency during any medical or mental health appointment, sick call, treatment, or consultation 	Meets Standard	Medical, mental health and dental care is provided by GEO medical personnel and contractors. Medical personnel are on duty 24 hours a day, seven days a week. All of the requirements listed in this component are addressed by onsite medical staff and/or through contractual agreements.	
2.	A designated health services administrator (HSA) or equivalent in non-IHSC staffed detention facilities shall have overall responsibility for health care services pursuant to a written agreement, contract, or job description. The HSA is a physician or health care professional and shall be identified to detainees. When the HSA is other than a physician, final clinical judgment shall rest with the facility's designated clinical medical authority. In no event should clinical decisions be made by non-clinicians.	Meets Standard	The health services administrator (HSA) is the designated administrative health authority as defined by policy and job description. The contract physician is the clinical medical authority. Policy states that clinical decisions are only made by the clinician.	
3.	PRIORITY: All facilities shall provide a medical staff and sufficient support personnel to meet these Standards. A staffing plan, which is reviewed at least annually, identifies the positions needed to perform the required services.	Meets Standard	Review of the staffing plan confirmed there are sufficient personnel to provide 24-hour onsite coverage seven days a week and to meet the medical, dental and mental health needs of the detainee population. Current staffing includes the HSA, a physician, registered nurses (RNs), licensed vocational nurses, a licensed mental health professional and ancillary and clerical staff. A dentist provides services on site twenty hours per week, and a psychiatrist, eight hours per week via telemedicine. The plan is reviewed annually by the HSA.	

inc	luding emergency services.	1000000	ř
	Components	Rating	Remarks (1000 Char Max)
4.	PRIORITY: All health care staff must be verifiably licensed, certified, credentialed, and/or registered in compliance with applicable state and federal requirements. Health care personnel only perform duties for which they are credentialed by training, licensure, certification, job descriptions, and/or written standing or direct orders by personnel authorized by law to give such orders.	Meets Standard	A review of credential files revealed that all medical personnel have licenses that are current and in compliance with state and federal requirements. Medical personnel perform only those duties that are within the scope of their respective practices and training and/or pursuant to orders by personnel authorized by law to give such orders.
5.	The facility administrator, in collaboration with the clinical medical authority and HSA, negotiates and maintains arrangements with nearby medical facilities or health care providers to provide required health care not available within the facility, as well as identifying custodial officers to transport and remain with detainees for the duration of any off-site treatment or hospital admission.	Meets Standard	The HSA has a Memorandum of Understanding with Denver Health Hospital for inpatient and specialty services. Policy establishes procedures for custodial officers to transport and remain with detainees during off-site treatment or hospital admission.
6.	 PRIORITY: Each facility shall have written plans that address the management of infectious and communicable diseases, including prevention, education, identification, surveillance, immunization (when applicable), treatment, follow-up, isolation (when indicated), and reporting to local, state, and federal agencies. Plans shall include: Coordination with public health authorities; Ongoing education for staff and detainees; Control, treatment and prevention strategies; Protection of individual confidentiality; Media relations; Procedures for the identification, surveillance, immunization, follow-up and isolation of patients; Manage infectious diseases and report them to local and/or state health departments in accordance with established guidelines and applicable laws; and Management of bio-hazardous waste and decontamination of medical and dental equipment that complies with applicable laws and Detention Standard on Environmental Health and Safety. 	Meets Standard	Policy establishes written procedures which address communicable disease management and include all of the items listed in this component.

	Components	Rating	Remarks (1000 Char Max)
7.	PRIORITY: All new arrivals shall receive TB screening within 12 hours of intake and using methods in accordance with CDC guidelines.	Meets Standard	Symptomatic screening for TB is performed during the intake process. A radiology technician takes a digital chest x-ray on all arriving detainees well within twelve hours. The x-ray is interpreted by radiologists at Diana and Associates in Maryland, within four hours.
8.	Detainees with symptoms suggestive of TB, or with suspected or confirmed active TB disease based on clinical and/or laboratory findings, shall be placed in a functional airborne infection isolation room with negative pressure ventilation and promptly evaluated for TB disease. Patients with suspected active TB shall remain in airborne infection isolation until determined by a qualified provider to be noncontagious in accordance with CDC guidelines.	Meets Standard	Detainees, who have symptoms suggestive of TB, or with suspected or confirmed TB, will be housed in one of five negative air flow rooms in the medical department. Patients with suspected active TB will not be released from isolation until determined by a qualified provider to be noncontagious in accordance with CDC guidelines.
9.	 For all confirmed and suspected active tuberculosis cases, designated medical staff shall report: All cases to local and/or state health departments within one working day of meeting reporting criteria and in accordance with established guidelines and applicable laws All cases to the ICE HQ Epidemiology Unit within one working day. Any movement of TB patients, including hospitalizations, facility transfers, releases, or removals/deportations to the local and/or state health department and the ICE HQ Epidemiology Unit 	Meets Standard	Per the HSA, all confirmed and suspected active TB cases are reported to local and/or state health departments and the ICE Epidemiology Unit by the medical provider within one working day. Notification is provided for any movement of TB patients, including hospitalization, facility transfer or release/deportation.
10.	PRIORITY: Designated medical staff shall notify the ICE Epidemiology Unit of any varicella (e.g. herpes zoster [shingles], chicken pox) cases among ICE detainees and of any ICE detainees exposed to active varicella without a history of prior varicella or varicella immunization.	Meets Standard	The HSA reports any varicella cases or potential cases to IHSC personnel at the Denver field office, who then make further notifications.
11.	Facilities must develop a plan to ensure the highest degree of confidentiality regarding HIV status and medical condition.	Meets Standard	Policy addresses the need for ensuring the highest degree of confidentiality regarding HIV status and medical condition.

	Components	Rating	Remarks (1000 Char Max)
12.	When current symptoms are suggestive of HIV infection, clinical evaluation shall determine the medical need for isolation.	Meets Standard	Medical isolation of detainees with HIV infection, when indicated, is based on the detainee's current symptoms and physical findings.
13.	Each facility shall establish a plan to address exposure to blood-borne pathogens, including reporting.	Meets Standard	Policy establishes procedures for the reporting and management of exposure to blood-borne pathogens.
14.	The facility shall provide each detainee, upon admittance, a copy of the detainee handbook and local supplement, in which procedures for access to health care services are explained; access to health care services, sick call and a medical grievance process shall be included in the orientation curriculum for newly admitted detainees.	Meets Standard	Detainees receive the National Detainee Handbook and the local supplement, which outline access to health care, the sick call process and medical grievance process, in English and Spanish. This information is also in the orientation video viewed by all arriving detainees.
15.	Detainees shall not be used for interpretation services during any medical or mental health service. Interpretation and translation services by other detainees shall only be provided in an emergency medical situation.	Meets Standard	Other detainees are not used for interpretation or translation services. The medical department uses other staff or the language line as needed.
16.	Facilities shall post signs in medical intake areas in the major languages spoken by the detainee population listing what language assistance is available during any medical or mental health treatment, diagnostic test, or evaluation.	Meets Standard	Language assistance signs are posted in the intake area and in the health services unit.
17.	PRIORITY: Medical, dental, and mental health interviews, examinations, and procedures shall be conducted in settings that respect detainees' privacy.	Meets Standard	As confirmed by observation, all health-related interviews, examinations and treatments are conducted in examining rooms which provide detainee privacy.
18.	A holding/waiting area shall be located in the medical facility that is under the direct supervision of custodial officers. A detainee toilet and drinking fountain shall be accessible from the holding/waiting area.	Meets Standard	There are two holding rooms located inside the entrance to the medical unit that are always under the direct supervision of custodial staff. Each holding room contains a toilet and a sink with a drinking fountain.
19.	Medical records shall be kept separate from detainee detention records and stored in a securely locked area within the medical unit.	Meets Standard	Medical records are kept in a locked medical records room inside the medical unit, with access restricted to medical staff.

Components	Rating	Remarks (1000 Char Max)
 20. If there is a specific area, separate from other housing areas, where detainees are admitted for health observation and care under the supervision and direction of health care personnel, consideration shall be given to the detainee's age, gender, medical requirements and custody classification, and the following minimum standards shall be met: Physician at the facility or on call 24 hours per day; Qualified health care personnel on duty 24 hours per day when patients are present; All patients within sight or sound of a staff member; Medical housing record that is a separate and distinct section of the complete medical record; and Compliance with all established guidelines and applicable laws. Facilities are expected to provide detainees in medical housing access to other services such as telephone, legal access and materials consistent with their medical condition. 	Meets Standard	While there is no infirmary, the HSU includes five single-bed negative pressure rooms, two two-bed observation rooms and a single occupancy suicide watch cell. Operating procedures include all of the requirements listed in this component.
21. Prior to placing a mentally ill detainee in medical housing, a determination shall be made by a medical or mental health professional that placement in medical housing is medically necessary.	Meets Standard	Per the HSA and policy, a determination will be made by medical or mental health personnel as to the medical necessity for placing a mentally ill detainee in medical housing.
22. PRIORITY: Each facility shall have and comply with written policy and procedures for the management of pharmaceuticals that include procurement, inventory, prescription, dispensing, and secure storage and disposal of all prescription and nonprescription medicines.	Meets Standard	Policy provides written procedures for the management of pharmaceuticals. The procedures address all of the items required by the component.
23. The facility administrator and HSA shall jointly approve any non-prescription medications that are available to detainees outside of health services and they shall jointly review the list annually at a minimum.	Meets Standard	The HSA and OIC approve all non-prescription medications available to detainees from the commissary. The list of items available is reviewed at least annually.

	g emergency services. Components	Rating	Remarks (1000 Char Max)
scre hea to p	ORITY: Initial medical, dental, and mental health eening shall be done within 12 hours of arrival by a alth care provider or a detention officer specially trained perform this function. Any past history of serious infectious or communicable illness, and any treatment or symptoms; Current illness and health problems, including communicable diseases; Pain assessment; Current and past medication; Allergies; Past surgical procedures; Symptoms of active TB or previous TB treatment; Dental problems; Use of alcohol and other drugs; Possibility of pregnancy; Other relevant health problems identified by the CMA responsible for screening inquiry; Observation of behavior, including state of consciousness, mental status, appearance, conduct, tremor, sweating; History of suicide attempts or current suicidal/homicidal ideation or intent; Observation of body deformities and other physical abnormalities; A transgender detainee's gender self-identification and history of transition-related care, when a detainee self-identifies as transgender; Past hospitalizations; Chronic illness (including, but not limited to, hypertension and diabetes); Dietary needs; and Any history of physical or sexual victimization and when the incident occurred.	Meets Standard	The initial medical, dental and mental health screening is performed by licensed nursing personnel upon a detainee's admission, as a part of the intake process within twelve hours of arrival. Review of twenty detainee medical records revealed that the screenings included inquiries into all the required areas.
sha trai the	creening is performed by a detention officer, the facility ill maintain documentation of the officer's special ining, and the officer shall have available for reference training syllabus, to include education on patient infidentiality of disclosed information.	N/A	All medical screenings are performed by medical personnel.

Componer	nts	Rating	Remarks (1000 Char Max)
26. PRIORITY: Any detainee indice emergent medical condition or significant finding as a result of evaluated by a qualified, licens quickly as possible, but in no la	demonstrating a clinically of initial screening shall be sed health care provider as	Meets Standard	Medical personnel perform the screenings and are thus able to immediately identify and evaluate a detainee with an acute or emergent medical condition.
27. PRIORITY: If at any time during is an indication of need, or reservices, the HSA must be not clinical medical authority, HSA, health care provider shall enevaluation if indicated. If a det sexual victimization or abuse chealth intake screening, whinstitutional setting or in the qualified, licensed healthcare immediately.	equest for, mental health ified within 24 hours. The or other qualified licensed sure a full mental health ainee discloses a history of during a medical or mental ether it occurred in an community, a referral to a	Meets Standard	The nurse performing the screening immediately notifies the HSA and mental health provider of any detainee with a need for mental health services. If a detainee discloses a history of sexual victimization or abuse during an intake screen, a referral is made as appropriate.
28. All facilities shall have policies the initial health screening and	100	Meets Standard	Policy is in place that ensures documentation of the initial health screening and assessment. This was confirmed by review of twenty detainee medical records.
29. PRIORITY: Upon completion of screening form, the detention notify medical staff when one of are documented. Medical staff for treatment (for example, Ur	officer shall immediately or more positive responses will then assess the priority	Meets Standard	Detention officers do not conduct medical or mental health intake screenings. Medical personnel conducting the intake screening will make the determination as to the need for urgent or routine medical care and follow-up.
30. PRIORITY: Limited-English p detainees who are deaf or hard interpretation or translation se needed for medical care activit Language assistance may be member competent in the lan service, such as a telephone tra	of hearing will be provided rvices or other assistance as ties. provided by another staff guage or by a professional	Meets Standard	Observation confirmed that non- English speaking detainees are provided interpretation or translation services utilizing a language line service provided by ICE. Deaf or hard of hearing detainees are provided a TTY device and/or interpretation/ translation services.
31. The clinical medical authority s evaluation and treatment of detoxification.	and the control of th	Meets Standard	Written guidelines have been established for the evaluation and treatment of newly arrived detainees who require detoxification. This was confirmed by review of detainee medical records.

	Components	Rating	Remarks (1000 Char Max)
32.	PRIORITY: Each facility's health care provider shall conduct a comprehensive health assessment, including a physical examination and mental health screening, on each detainee within 14 days of the detainee's arrival unless more immediate attention is required due to an acute or identifiable chronic condition. If such documentation exists of such a health assessment within the previous 90 days, the facility health care provider upon review may determine that a new appraisal is not required. Physical examinations shall be performed by a physician, physician assistant, nurse practitioner, RN (with documented training provided by physician) or other healthcare provider permitted by law.	Meets Standard	Per review of twenty ICE detainee medical records, physical assessments are conducted within fourteen days of the detainee's arrival by an RN who has been trained by the physician or a mid-level provider. The completed assessments are reviewed by the physician.
33.	A detainee's request to see a health care provider of a particular gender is accommodated, whenever possible. Otherwise, detainees are provided same sex chaperones if requested.	Meets Standard	A detainee request for a health care provider of a specific gender is accommodated, if possible. Chaperones of the same gender are provided.
34.	PRIORITY: Where a detainee has a serious medical or mental health condition or otherwise requires special or close medical care, medical staff complete a Medical/Psychiatric Alert form (IHSC-834) or equivalent, and file the form in the detainee's medical record. Where medical staff furthermore determine the condition to be serious enough to require medical clearance of the detainee prior to transfer or removal, medical staff also place a medical hold on the detainee using the Medical/Psychiatric Alert form (IHSC-834) or equivalent, which serves to prevent ICE from transferring or removing the detainee without the prior clearance of medical staff at the facility. The facility administrator receives notice of all medical/psychiatric alerts or holds, and notifies ICE/ERO of any medical alerts or holds placed on a detainee that is to be transferred.	Meets Standard	Medical/Psychiatric Alert forms and holds are documented in medical and detention records. The OIC receives notice of all alerts and holds, and ICE is notified when such a hold may impact transfer of a detainee. A GEO equivalent form is used.

	Components	Rating	Remarks (1000 Char Max)
35.	PRIORITY: The facility performs mental health intake screening, as well as mental health evaluations based on screening results, the comprehensive health assessment, medical documentation, or subsequent observations, that include prior history of mental health treatment, medications, drug use, suicidal tendencies, and abuse, observations of current physical and intellectual condition, and recommendations for any appropriate medical or custodial treatment. Detainees are appropriately referred to a mental health provider for diagnosis, treatment, and/or intervention, and transferred to licensed mental health facilities where detainee mental health needs exceed the capabilities of the facility.	Meets Standard	Review of twenty detainee medical records revealed that a nurse performs a mental health intake screening upon the detainee's arrival. Detainees are appropriately referred to a mental health provider based on screening results. The screenings and mental health evaluations address all of the topics listed in the component. Detainees are transferred to off-site facilities if needs exceed the capabilities of the facility.
36.	PRIORITY: Any detainee referred for mental health treatment shall receive a comprehensive evaluation by a licensed mental health provider as clinically necessary no later than 72 hours after the referral, or sooner if necessary. The provider shall develop an overall treatment/management plan that may include transfer to a mental health facility if the detainee's mental illness or developmental disability needs exceed the treatment capability of the facility.	Meets Standard	Review of medical records revealed that detainees referred for mental health treatment receive a comprehensive evaluation by the mental health provider within 72 hours. The mental health provider develops a treatment plan or may recommend transfer to a mental health facility if the need exceeds the capabilities of the facility.
	Any detainee prescribed psychiatric medications must be regularly evaluated by a duly-licensed and appropriate medical professional, at least once a month, to ensure proper treatment and dosage.	Meets Standard	Orders for psychotropic medication are not issued for more than thirty days. The detainee is re-evaluated by the psychiatrist before the order is renewed.
38.	The facility has a mental health staffing component on call to respond to the needs of the detainee population 24 hours a day, seven days a week.	Meets Standard	Mental health personnel are on call 24 hours a day, seven days a week.
39.	The clinical medical authority may place in medical isolation a detainee who is at high risk for violent behavior because of a mental health condition. The clinical medical authority must provide for reassessment on a daily basis the need for continued medical isolation for the health and safety of the detainee.	Meets Standard	Policy gives the physician the authority to place in medical isolation any detainee who is at high risk for violent behavior due to mental health issues. Policy requires the daily reassessment of the need for continued isolation.

STANDARD 4.3. MEDICAL CARE (Key: V)

Components	Rating	Remarks (1000 Char Max)
 40. PRIORITY: The facility shall have written procedures for restraints for medical or mental health purposes that specify: The conditions under which restraints may be applied; The types of restraints to be used; The proper use, application, and monitoring of restraints; Requirements for documentation, including efforts to use less restrictive alternatives; and After-incident review. 	Meets Standard	Policy clearly provides procedures for use of restraints for medical or mental health purposes. Policy addresses all the bulleted items listed in this component. Restraints for medical or mental health purposes have not been used since the last inspection.
 41. PRIORITY: Involuntary administration of psychotropic medications to detainees shall comply with established guidelines and applicable laws and only pursuant to the specific, written and detailed authorization of a physician. Absent declared medical emergency, before psychotropic medication is involuntarily administered, it is required that the HSA contact ERO Management, who shall contact respective DHS/ICE Chief Counsel. The authorizing physician shall: Review the medical record of the detainee and conduct a medical examination; Specify the reasons for and duration of therapy and whether the detainee has been asked if he or she would consent to such medication; Specify the medication to be administered, the dosage, and the possible side effects of the medication; Document that less restrictive intervention options have been exercised without success; Detail how the medication is to be administered; Monitor the detainee for adverse reactions and side effects; and Prepare treatment plans for less restrictive alternatives as soon as possible. 	Meets Standard	Written policy establishes procedures which address all of the requirements listed in this component. Per the HSA, involuntary administration of psychotropic medications has not occurred in the past year.

Components	Rating	Remarks (1000 Char Max)
42. A detainee that is in ICE custody for over a year continuously shall receive health examinations on an annual basis. Detainees shall have access to age and gender appropriate exams annually, including rescreening for tuberculosis.	Meets Standard	Per the HSA, ICE detainees who are in custody for over a year receive annual health assessments to include access to age and gender appropriate exams. Rescreening for TB is included in the annual evaluations. A review of medical records confirmed this procedure.
 43. An initial dental screening exam shall be performed within 14 days of the detainee's arrival. Emergency dental treatment shall be provided for immediate relief of pain, trauma and acute oral infection. Routine dental treatment may be provided to detainees in ICE custody for whom dental treatment is inaccessible for prolonged periods because of detention for over six (6) months. Dental exams and treatment are provided only by licensed dental personnel. 	Meets Standard	An initial dental screening exam is performed upon a detainee's arrival. Routine and emergent dental treatment is provided by a licensed dentist.
 44. PRIORITY: Each facility shall have a sick call procedure that allows detainees the unrestricted opportunity to freely request health care services (including mental health and dental services) provided by a physician or other qualified medical staff in a clinical setting. This procedure shall include: Clearly written policies and procedures; Sick call process will be communicated in writing and verbally to detainees during their orientation; Regularly scheduled "sick call" times will be established and communicated to detainees; All facilities must have an established procedure in place to ensure that all sick call requests are received and triaged by appropriate medical personnel within 24 hours after the detainee submits the request. In an urgent situation, the housing unit officer shall notify medical personnel immediately. All detainees, including those in Special Management Units, regardless of classification, shall have access to sick call. 	Meets Standard	Clearly written policies and procedures regarding the sick cal process address all of the requirements listed in this component. All detainees, including those in the special management unit, have access to sick call.

STANDARD 4.3. MEDICAL CARE (Key: V)

Components	Rating	Remarks (1000 Char Max)
45. If the procedure uses a written request slip, they shall be provided in English and the most common languages spoken by the detainee population of that facility. Limited-English proficient detainees and detainees who are deaf or hard of hearing will be provided interpretation/translation services as needed or other assistance as needed to complete a request slip.	Meets Standard	Request slips are printed in English and Spanish. Assistance is provided to detainees as needed.
46. Medical personnel shall review the request slips and determine when the detainee will be seen based on acuity of the problem. All facilities shall maintain a permanent record of all sick call requests.	Meets Standard	Request slips are triaged by the nurse and detainees are scheduled to be seen based on urgency of need, but never more than 48 hours later. Request slips are filed in the applicable detainee's medical file.
 47. PRIORITY: Each facility shall have a written emergency services plan for the delivery of 24-hour emergency health care. A plan shall be prepared in consultation with the facility's clinical medical authority or the HSA. The plan will include the following: • An on-call physician, dentist, and mental health professional, or designee, that are available 24 hours per day; • A list of telephone numbers for local ambulances and hospital services available to all staff; • An automatic external defibrillator (AED) will be maintained for use at each facility and accessible to staff; • All detention and medical staff shall receive cardio pulmonary resuscitation (CPR, AED), and emergency first aid training annually; • Security procedures that ensure the immediate transfer of detainees for emergency medical care. 	Meets Standard	There is a written plan for the delivery of 24-hour emergency health care, developed in consultation with the HSA, which addresses each of the items listed in this component. Medical personnel are on site 24 hours per day, seven days a week. Three AEDs are available for use by staff. CPR/AED and first aid training is provided to all staff annually.

Components	Rating	Remarks (1000 Char Max)
48. PRIORITY: Training is provided to all detention and health care personnel at least annually by a responsible medical authority in cooperation with the facility administrator, and includes: • Responding to health-related situations within four	Meets Standard	Review of the training curriculum and a random review of training files verified that all detention and health care personnel receive annual training in the topics listed in this component.
 (4) minutes; Recognizing of signs of potential health emergencies and the required responses; Administering first aid, AED and cardiopulmonary resuscitation (CPR); Obtaining emergency medical assistance through the facility plan and its required procedures; Recognizing signs and symptoms of mental illness and suicide risk; The facility's established plan and procedures for providing emergency medical care including, when required, the safe and secure transfer of detainees for appropriate hospital or other medical services, including by ambulance when indicated. 		
49. The designated health authority and facility administrator shall determine the contents, number, location(s), use protocols, and procedures for monthly inspections of first aid kits.	Meets Standard	The OIC and HSA have determined the contents, number and location of first aid kits. The medical department is responsible for monthly inspections and restocking.
50. Distribution of medication (including over the counter) shall be in accordance with specific instructions and procedures established by the HSA in consultation with the CMA. Written records of all medication given to or refused by detainees shall be maintained. Detainees may not deliver or administer medications to other detainees.	Meets Standard	Medication is administered pursuant to a physician's order or physician-approved treatment protocol. Medication is delivered to the housing units and administered there by medical personnel twice a day. Medical personnel also administer medications in the medical department once a day. Standard medication administration records are used. Policy prohibits detainees from delivering or administering medication.

STANDARD 4.3. MEDICAL CARE (Key: V)

Components	Rating	Remarks (1000 Char Max)
51. If prescribed medication must be delivered at a specific time when medical staff is not on duty, it may only be distributed by detention officers who have received proper training by the HSA or designee, where it is permitted by state law to do so. The facility shall maintain documentation of the training given any officer required to distribute medication, and the officer shall have available for reference the training syllabus or other guide or protocol provided by the health authority.	N/A	Medical personnel are on site at all times and perform all required medication administration.
52. Qualified health care personnel shall provide detainees health education and wellness information.	Meets Standard	Health education and wellness pamphlets on a variety of topics are available in the medical department and in the housing units.
53. The clinical medical authority for each facility must have a plan to notify ICE in writing of any detainee with special needs. The written notification must become part of the detainee's health record file.	Meets Standard	A local special needs form is used to notify ICE of any detainee with special needs. A copy is placed in the detainee's medical record.
54. Consistent with the IHSC Detainee Covered Services Package, detainees are provided medical prosthetic devices or other impairment aids, such as eyeglasses, hearing aids, or wheelchairs, except when such provisions would impact the security or safety of the facility.	Meets Standard	Per the HSA and policy, detainees are provided medical prosthetic devices or other impairment aids consistent with the IHSC Detainee Covered Services Package except when such provisions would impact the security or safety of the facility.
55. PRIORITY: When a detainee requires close medical supervision, including chronic and convalescent care, a written treatment plan that includes access to health care and other personnel regarding care and supervision, shall be developed and approved by the appropriate qualified licensed health care provider, in consultation with the patient, with periodic review.	Meets Standard	Review of medical records revealed that written treatment plans are developed, in consultation with the patient, and approved by the physician for detainees enrolled in a chronic care clinic or who otherwise require close medical supervision. The detainee is reevaluated at least every ninety days and the plan is reviewed.

Components	Rating	Remarks (1000 Char Max)
56. Transgender detainees who were already receiving hormone therapy when taken into ICE custody shall have continued access. All transgender detainees shall have access to mental health care, and other transgender-related health care and medication based on medical need. Treatment shall follow accepted guidelines regarding medically necessary transition-related care.	Meets Standard	Per policy, transgender detainees who are already receiving hormone therapy when taken into custody continue the hormone therapy. They have access to mental health services and other medical services based on need. Treatment follows accepted guidelines for continued medical care. Two transgender detainees are presently housed at this facility. They are housed in the medical unit and are both being evaluated for hormone treatment.
57. The facility HSA must ensure that a plan is developed that provides for continuity of medical care in the event of a change in detention placement or status. Upon transfer to another facility, the medical provider shall ensure that the detainee's full medical record and at least 7 day (or, in the case of TB medications, 15 day; and HIV/AIDS medications, 30 day) supply of medication shall accompany the detainee. Upon release from ICE custody, the detainee shall receive up to a 30 day supply of medication as ordered by the prescribing authority and a copy of his complete medical record.	Meets Standard	Per the HSA, and confirmed by observation, upon transfer or release detainees receive the appropriate amount of medication and a copy of their complete medical record.
58. PRIORITY: Documented informed consent, consistent with standards of the jurisdiction, is obtained from a detainee before medical treatment is administered. If a detainee refuses consent to treatment, medical staff explain the medical risks if treatment is declined and document their efforts in the detainee's medical record.	Meets Standard	Review of twenty detainee health records confirmed that all had signed and dated informed consent forms completed during in-processing. Additional consents are obtained for invasive procedures and tooth extractions. Refusal to consent requires medical personnel to document the risks of refusing in the medical record.

STANDARD 4.3. MEDICAL CARE (Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

Components	Rating	Remarks (1000 Char Max)
59. If a detainee refuses treatment and the clinical medical authority or designee determines that the treatment is necessary, ICE/ERO shall be consulted in determining whether involuntary treatment shall be pursued. Involuntary treatment is a decision made only by medical staff under strict legal restrictions. Prior to any contemplated action involving non-emergent involuntary medical treatment, DHS / ICE respective Chief Counsel will be consulted.	Meets Standard	ICE personnel are consulted if a detainee refuses lifesaving or life-sustaining medical treatment. If involuntary treatment is warranted, the detainee would be transferred to another facility.
 60. PRIORITY: The HSA shall maintain a complete health record on each detainee that is: Organized uniformly in accordance with appropriate accrediting body standards; Available to all practitioners and used by them for health care documentation; Properly maintained and safeguarded in a securely locked area within the medical unit separately from other detention records. 	Meets Standard	A separate, well organized, six- part, medical file is securely maintained for each detainee. Access is restricted to medical personnel. Medical files are maintained separately from detention records in a secure medical records room within the medical unit.
61. All medical providers, as well as detention officers and staff, shall protect the privacy of detainees' medical information in accordance with established guidelines and applicable laws. These protections apply, not only to records maintained on paper, but also to electronic records where they are used. Staff training must emphasize the need for confidentiality and procedures must be in place to limit access to health records to only authorized individuals and only when necessary.	Meets Standard	Medical files are maintained separately from detention records. Medical files are securely maintained in the restricted-access medical department, with access restricted to medical staff. All personnel receive training on the Health Insurance Portability and Accountability Act (HIPAA).
 62. The HSA shall provide the facility administrator and designated staff information that is necessary: To preserve the health and safety of the detainee, other detainees, staff, or any other person. For administrative and detention decisions such as housing, voluntary work assignments, security, and transport. For management purposes such as audits and inspections. 	Meets Standard	On a need-to know basis, medical personnel provide the OIC and other staff with information needed for reasons listed in this component.
63. Copies of health records shall be released by the HSA directly to a detainee or their designee, at no cost to the detainee, within a reasonable timeframe after receipt by the HSA of a written authorization from the detainee.	Meets Standard	Copies of medical records are provided upon receipt of a written request authorizing the release. Detainees are not charged for copies of their records.

STANDARD 4.3. MEDICAL CARE (Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

including emergency services.			
Components	Rating	Remarks (1000 Char Max)	
64. Detainees who indicate they wish to obtain copies of their medical records shall be provided with the appropriate request form. ICE/ERO, or the facility administrator, shall provide limited-English proficient detainees and detainees who are deaf or hard of hearing with interpretation or translation services or other assistance as needed to make the written request and assist in transmitting the request to the facility HSA.	Meets Standard	Detainees requesting copies of their medical records are provided with the appropriate request form and assistance in transmitting the request.	
65. PRIORITY: The HSA shall be given advance notice prior to the release, transfer, or removal of a detainee, so that medical staff may determine and provide for any medical needs associated with the transfer, release, or removal.	Meets Standard	The HSA stated that normally one to three days advance notice of a detainee's removal is provided.	
66. PRIORITY: Upon receiving notification that a detainee is to be transferred, appropriate medical staff at the sending facility notify the facility administrator of any medical/psychiatric alerts or holds that have been assigned to the detainee, as reflected in the detainee's medical records. The facility administrator notifies ICE/ERO of any medical alerts or holds placed on a detainee that is to be transferred. Those detainees who are currently placed in a medical hold status are evaluated and cleared by a licensed independent practitioner prior to transfer or removal. In addition, the CMA or designee informs the facility administrator in writing if the detainee's medical or psychiatric condition requires a medical escort during transfer or removal.	Meets Standard	Prior to the release of any detainee, medical personnel prepare a transfer summary which would include any medical or mental health alerts. Medical personnel provide the clearance and denote any special medical escort issues. ICE is notified of any detainee who has a medical or mental health alert, and these cases are evaluated by a licensed independent practitioner prior to transfer or removal. The OIC is also notified if the detainee's condition requires a medical escort.	
 67. When a detainee is transferred within the ICE Health Service Corps (IHSC) system, ICE ensures that: Form USM-553, or equivalent Medical Transfer Summary, and a copy of the detainee's full medical record accompanies the detainee; and The full medical record is placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL." When a detainee is transferred to an IGSA detention facility, the sending facility ensures that the Transfer Summary accompanies the detainee. A copy of the full medical record accompanies each detainee during transfer unless extenuating circumstances make this impossible, in which case the full medical record follows as soon as practicable. 	Meets Standard	This facility is not part of the IHSC system. When a detainee is transferred to another facility, a transfer summary and a copy of the detainee's full medical record accompanies the detainee. The records are placed in a sealed envelope with the appropriate markings.	

STANDARD 4.3. MEDICAL CARE (Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

	Components	Rating	Remarks (1000 Char Max)
68.	Detainees released or removed from detention receive a discharge treatment plan to ensure continuity of care, full copy of their medical record, medication and referrals to community-based providers as medically appropriate.	Meets Standard	Detainees released or removed from detention receive a discharge plan, medications, a full copy of their medical record and referrals to community providers.
69.	Detainees will not participate in medical, pharmaceutical or cosmetic research while under the care of ICE detention facilities. This does not preclude the use of approved clinical trials that may be warranted for a specific detainee's diagnosis or treatment when recommended and approved by the clinical medical director. Such measures require documented informed consent.	Meets Standard	Detainees are prohibited from participating in medical, pharmaceutical or cosmetic research. Participation in approved clinical trials is not prohibited if approved by the medical director and consented to by the detainee. Currently there are no detainees participating in clinical trials.
70.	PRIORITY: The HSA shall implement a system of internal review and quality assurance that includes data analysis, a multidisciplinary committee with regular monitoring of health service outcomes, and assessment of ongoing education and training needs.	Meets Standard	The HSA has implemented a system of internal review and quality assurance that includes all of the items listed in the component.
71.	The HSA shall implement an intra-organizational, external peer review program for all independently licensed medical professionals. Reviews are conducted at least annually.	Meets Standard	The HSA has implemented an annual external peer review program. Peer reviews of the clinician are performed by the corporate medical director, an independent physician or the medical director of another facility.

STANDARD 4.3. 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 adequately staffed and equipped to meet the health care needs of the detainee population. The medical department is NCCHC and ACA accredited. A current Clinical Laboratory Improvement Amendment (CLIA) waiver for limited on-site testing was observed. When TB treatment is indicated, multi-drug, anti-TB therapy is administered using directly observed therapy (DOT). Active TB disease is ruled out before treatment for latent TB infection is initiated. International referrals are coordinated with the IHSC Epidemiology Unit and local/state health departments. There is a written plan to address the management of hepatitis A, B, and C, and HIV. Detainees may request hepatitis and HIV testing at any time. Medical personnel provide all detainees diagnosed with HIV/AIDS medical care consistent with national recommendations and guidelines. Medical and pharmacy personnel ensure that all FDA medications currently approved for the treatment of HIV/AIDS are accessible. Detainees with active tuberculosis are evaluated for possible HIV infection. New HIV-positive diagnoses are reported to government bodies according to state and local laws and requirements.

Pharmaceutical management policy includes a formulary, obtaining non-formulary medications, prescription practices, perpetual inventory, medication administration error reports, training, and storage in a secure area as required by the

STANDARD 4.3. MEDICAL CARE - Reviewer Summary

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

standard. A spot check of inventories for DEA scheduled drugs, sharps, and medical instruments revealed that inventories are maintained and accurate.

The CMA reviews all health assessments to assess priority for treatment. Mental health evaluations and screenings include: reason for referral, mental health history, drug/alcohol use history, suicide attempts, current suicidal/homicidal ideation, medications, intellectual functioning, history of abuse, pertinent physical condition, and treatment recommendations.

The emergency medical services plan includes provisions for expedited entrance to and exit from the facility. Non-medical personnel contact medical personnel when questioning the need for emergency care. Emergency response equipment is available.

All medications and treatments are provided on schedule. Detainees who arrive with prescribed medications are evaluated by a qualified health care professional within twelve hours of arrival, and provisions are made to secure medically necessary medications.

Detainee treatment questions are answered by medical personnel. The written authorization for release of health information is retained in the medical record. Lab results are made available to detainees post transfer or release. Inactive medical records are retained. The agenda of quarterly administrative meetings includes items required by the standard. The quality assurance review includes all items required by the standard.

Detainees request an independent health examination by submitting a written request to the FOD. The cost of the exam is at the detainee's expense. Interviews with detainees resulted in three complaints voiced by female detainees concerning medical care. All three were investigated by this inspector and two were determined to have been unfounded. In the third case it was determined that a referral for a CT scan was slightly delayed due to a clerical error. The delay has been rectified and the referral is in progress. An inspection of the housing units, medical unit, and the facility overall revealed a clean, well maintained environment. Staff interaction with detainees was noted to be respectful and cordial and no issues were noted regarding the conditions of confinement. The evaluation of this standard was based on interviews with medical and corrections staff, the HSA and detainees; an inspection and observation of the medical unit; facility tour; and a review of medical records and training documentation.

STANDARD 4.4. MEDICAL CARE (WOMEN) (Key: W)

This detention standard ensures that female detainees in U.S. Immigration and Customs Enforcement (ICE) custody have access to appropriate and necessary medical and mental health care.

	Components	Rating	Remarks (1000 Char Max)
1.	 PRIORITY: In addition to the medical, mental health, and dental services provided to every detainee as required by standard "4.3 Medical Care," the facility directly or contractually provides its female detainees with access to: Pregnancy services, including pregnancy testing, routine or specialized prenatal care, postpartum follow up, lactation services, and abortion services, as outlined herein; Counseling and assistance for pregnant women in keeping with their express desires in planning for their pregnancy, whether they desire abortion, adoptive services, or to keep the child; Mental health assessments for all detainees who have recently given birth, miscarried, or terminated a pregnancy; and Routine, age-appropriate, gynecological health care services, including women's specific preventive care. 	Meets Standard	Per the health services administrator (HSA), the facility directly or contractually provides female detainees with all of the services listed in this component. There were no pregnant or postpartum detainees housed at the facility during the inspection.
2.	Within 12 hours of arrival, during their initial medical screening, all female detainees shall receive information on services related to women's health care as provided for in this standard and standard "4.3 Medical Care."	Meets Standard	As documented in detainee medical records, during the initial medical screening, female detainees receive information on women's health care. This includes information on access to medical care, nutrition, personal hygiene, infectious diseases, substance abuse and sexual assault prevention.
3.	If the initial medical intake screening indicates the possibility of pregnancy, recent sexual assault, violence or history of mental health illness, an initial health appraisal shall be completed as soon as possible, but no more than 24 hours after arrival.	Meets Standard	Per the HSA, if the initial medical intake screening indicates any of the listed issues, a health appraisal is completed within 24 hours.

STANDARD 4.4. MEDICAL CARE (WOMEN) (Key: W)

This detention standard ensures that female detainees in U.S. Immigration and Customs Enforcement (ICE) custody have access to appropriate and necessary medical and mental health care.

	Components	Rating	Remarks (1000 Char Max)
4.	All initial health assessments of female detainees include a thorough evaluation and assessment of the reproductive system. In addition to the criteria listed on the health assessment form, the evaluation inquires about the following: Pregnancy testing and documented results; If the detainee is currently nursing (breastfeeding); Use of contraception; Reproductive history (number of pregnancies, number of live births, number of spontaneous/elective abortions, pregnancy complications, etc.); Menstrual cycle; History of breast and gynecological problems; Family history of breast and gynecological problems; and Any history of physical or sexual victimization and when the incident occurred. A pelvic and breast examination, pap test, baseline mammography, and sexually transmitted disease (STD) screening are offered and provided as deemed appropriate or necessary by the medical provider.	Meets Standard	As documented in medical records, the initial health assessment includes inquiry into all of the requirements listed in this component.
5.	Female victims of sexual abuse are granted immediate access to emergency medical treatment and crisis intervention services. The facility provides access by giving detainees the current mailing addresses and telephone numbers, including toll-free hotline numbers, of local, state and/or national organizations that provide these services.	Meets Standard	Female victims of sexual abuse are given immediate access to emergency medical treatment and crisis intervention services, as needed, either on site or through local providers.
6.	Upon request, appropriately trained medical personnel within their scope of practice provide detainees with non-directive (impartial) advice and consultation about family planning and birth control, and where medically appropriate, prescribe and dispense birth control.	Meets Standard	Policy addresses all the requirements of this component.

STANDARD 4.4. MEDICAL CARE (WOMEN) (Key: W)

This detention standard ensures that female detainees in U.S. Immigration and Customs Enforcement (ICE) custody have access to appropriate and necessary medical and mental health care.

Components	Rating	Remarks (1000 Char Max)
 7. PRIORITY: A pregnant woman or woman in post-delivery recuperation is not restrained absent truly extraordinary circumstances that render restraints absolutely necessary as documented by a supervisor or directed by the on-site medical authority. Restraints are never permitted on women who are in active labor or delivery. Restraints are not considered an option unless one or more of the following applies: A medical officer has directed the use of restraints for medical reasons; Credible, reasonable grounds exist to believe the detainee presents an immediate and serious threat of hurting herself, staff, or others; or Reasonable grounds exist to believe the detainee presents and immediate and credible risk of escape that cannot be reasonably minimized through any other method. 	Meets Standard	Per the HSA, restraints are not used on pregnant females. Policy does allow the use of restraints in extraordinary circumstances as listed in the component.
8. In the rare event that restraints are used, medical staff determine the safest method and duration for the use of restraints, and the least restrictive restraints necessary shall be used. No detainee known to be pregnant shall be restrained in a face-down position with four-point restraints, on her back, or in a restraint belt that constricts the area of the pregnancy. All attempts are made to ensure that the detainee is placed on her left side if she is immobilized.	Meets Standard	While policy allows the use of restraints on pregnant detainees in extraordinary circumstances, the HSA reports that, in practice, restraints are not used on pregnant detainees. No pregnant detainees were housed in the facility during the inspection.

STANDARD 4.4. MEDICAL CARE (WOMEN) - Reviewer Summary

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

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

Preventative services specific to women are offered for routine, age appropriate screenings, to include breast examinations, Pap smear, STD testing and mammograms.

Pregnant detainees are under close medical supervision and have access to prenatal and specialized care, and comprehensive counseling inclusive of, but not limited to, nutrition, exercise, complications of pregnancy, prenatal vitamins, labor and delivery, postpartum care, lactation, family planning, abortion services and parental skills education. Detainees with high risk pregnancies are referred, as appropriate, to a physician specializing in high risk pregnancies. Pregnancy management and outcomes are monitored, quarterly, through a continuous quality improvement process.

The use of restraints on pregnant women requires documented approval and guidance from the on-site medical authority. Record-keeping and reporting requirements regarding the medical approval to use restraints are consistent with the provisions of the standard, including documentation in the A-file, detention file and medical files.

In the event continued detention is necessary and appropriate, and consistent with the practice of ICE federal partners, and the life of a detainee would be endangered by carrying a fetus to term, or in the case of rape or incest, ICE assumes the costs associated with a detainee's decision to terminate a pregnancy. ICE arranges for transportation for pregnancy termination at

STANDARD 4.4. MEDICAL CARE (WOMEN) - Reviewer Summary

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

no cost to the detainee for the medical appointment and, if requested by the detainee, for access to religious counseling, and non-directive (impartial) medical resources and social counseling, to include outside social services or community resources groups. If a detainee requests to terminate a pregnancy, the request is documented in the medical record with a statement personally signed by the detainee. The signed statement leaves no doubt as to the detainee's intent.

Female detainees have access to appropriate and necessary medical and mental health care as documented in medical records and discussed during interviews. Evaluation of the standard was based on review of policy, procedure and practice; documentation in medical records; and on staff and detainee interviews.

Reviewer Name (Printed): (b)(6):(b)(7)(C) Completion Date: 9/29/

2018-ICLI-00052 2661

STANDARD 4.5. PERSONAL HYGIENE (Key: X)

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

	Components	Rating	Remarks (1000 Char Max)
1.	Each detention facility shall have a written policy and procedures for the regular issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items.	Meets Standard	Written policy outlines procedures for the regular issuance and exchange of clothing, bedding, linens, towels and personal hygiene items.
2.	Clothing or shoes that are lost, unserviceable, indelibly stained, or bear offensive or otherwise unauthorized markings should be discarded and replaced as soon as practicable.	Meets Standard	Clothing that is worn out, stained, or bears unauthorized markings is discarded and replaced.
3.	All new detainees shall be issued clean, indoor/outdoor temperature-appropriate, size appropriate, presentable clothing during in-processing at no cost to the detainee. The standard issue of clothing is at least two uniform shirts and two pairs of uniform pants or two jumpsuits; two pairs of socks; two pairs of underwear; two brassieres, as appropriate; and one pair of facility-issued footwear.	Meets Standard	Newly arriving detainees are issued two uniforms, five undergarments, five pairs of socks, two t-shirts/three bras, one pair of gym shorts, one pair of gym shoes and one pair of shower shoes. The clothing is issued at no cost to the detainee.
4.	Each detainee assigned to a special work area shall be clothed in accordance with the requirements of the job and, when appropriate, provided protective clothing and equipment.	Meets Standard	Detainees assigned to work areas requiring special or protective clothing and equipment are issued clothing that is appropriate for that job, to include protective clothing and equipment.
5.	Staff shall provide male and female detainees personal hygiene items appropriate for their gender, including at a minimum, one bar of bath soap (or equivalent), comb, tube of toothpaste, toothbrush, bottle of shampoo (or equivalent), container of skin lotion, and feminine hygiene items, and shall replenish supplies as needed. The distribution of hygiene items shall not be used as reward or punishment.	Meets Standard	Detainees are provided with personal hygiene items appropriate for their gender, at no cost. Items are replenished as needed and distribution is not used as a reward or punishment.
6.	Razors must be strictly controlled. Disposable razors will be provided to detainees on a daily basis. Razors will be issued and collected daily by staff.	Meets Standard	Policy requires razors to be strictly controlled. Disposable razors are issued and collected each morning by staff members.
7.	Female detainees shall be issued and may retain feminine hygiene items as needed.	Meets Standard	Female detainees are issued feminine hygiene items as needed.
8.	Detainees shall be provided an adequate number of toilets 24 hours per day that can be used without staff assistance when detainees are confined to their cells or sleeping areas.	Meets Standard	There is an adequate number of toilets that can be used independently 24 hours a day.

STANDARD 4.5. PERSONAL HYGIENE (Key: X)

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

	Components	Rating	Remarks (1000 Char Max)
9.	An adequate number of washbasins with temperature controlled hot and cold running water 24 hours per day.	Meets Standard	There is an adequate number of sinks with hot and cold running water 24 hours a day.
10.	Operable showers that are thermostatically controlled to temperatures between 100 and 120 degrees Fahrenheit, to ensure safety and promote hygienic practices.	Meets Standard	Shower temperatures range from 100 to 116 degrees Fahrenheit. Temperatures are thermostatically controlled to prevent scalding and promote hygienic practices.
11.	Detainees with disabilities shall be provided the facilities and support needed for self-care and personal hygiene in a reasonably private environment in which the individual can maintain dignity.	Meets Standard	Detainees with disabilities are afforded handicap-accessible facilities, as observed.
12.	 PRIORITY: Detainees shall be provided with clean clothing, linen and towels on the following basis: A daily change of socks and undergarments. An additional exchange of undergarments shall be made available to detainees if necessary for health or sanitation reasons. At least twice weekly exchange of outer garments (with a maximum of 72 hours between changes). At least weekly exchange of sheets, towels, and pillowcases. An additional exchange of bedding, linens, towels, or outer garments shall be made available to detainees if necessary for health or sanitation reasons, and more frequent exchanges of outer garments may be appropriate, especially in hot and humid climates. 	Meets Standard	Observation and review of policy confirmed that policy and practice include all of the requirements listed in this component.

STANDARD 4.5. PERSONAL HYGIENE – 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 maintains an excess clothing inventory of at least two hundred percent of the maximum funded detainee capacity. Personal items of clothing are not permitted. Personal hygiene items from other sources are permitted with the approval of medical personnel and the chief of security. Detainees are provided with a reasonably private environment in accordance with safety and security needs. Detainees who cannot perform basic life functions are not housed at this facility

Bedding, linens and towels are issued as follows: one mattress, one pillow, one blanket, two sheets, one pillowcase and one towel. Clothing exchanges are on a one-for-one basis. There are no washers or dryers in the detainee housing units. The policy, practice and facility design enable the detainee population to maintain acceptable hygiene practices.

An inspection of the housing units, medical unit, and the facility overall revealed a clean, well maintained structure that provides a clean and safe environment. No concerns were noted with the conditions of confinement, as determined by detainee and staff interviews and observation of the detainee population and environmental factors. During detainee

STANDARD 4.5. PERSONAL HYGIENE - Reviewer Summary

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

interviews, no issues or concerns were brought to the inspector's attention with respect to personal hygiene.

The evaluation of this standard was based on a review of policy, an observation of the detainee population and the housing units, and interviews with detainees and staff.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6);(b)(7)(C) Completion Date: 9/29/2016

Reviewer Signature (for printed form submission):

This detention standard protects the health and well-being of ICE detainees through a comprehensive Significant Self-Harm and Suicide Prevention and Intervention Program that minimizes risk.

	Components	Rating	Remarks (1000 Char Max)
1.	PRIORITY: The facility has a written suicide prevention and intervention program that is reviewed and approved by the clinical health authority, approved and signed by the administrative health authority and Facility Administrator and reviewed annually. At a minimum, the Program shall include procedures to address suicidal detainees. Key components of this program include: Staff training, Identification, Referral, Evaluation, Treatment, Housing, Monitoring, Communication, Intervention, Notification and reporting, Review, and Debriefing.	Meets Standard	The written self-harm and suicide prevention and intervention program is reviewed and approved by the clinical medical authority, and approved and signed by the health services administrator and the OIC. The program is reviewed annually and includes all of the items listed in this component.
2.	 PRIORITY: All facility staff who interact with and/or are responsible for detainees are trained, during orientation and at least annually on the facility's Suicide Prevention and Intervention Program, to include: Why the environments of detention facilities are conducive to suicidal behavior, Standard first aid training, cardiopulmonary resuscitation (CPR) training and training in the use of emergency equipment, Liability issues associated with detainee suicide, Recognizing verbal and behavioral cues that indicate potential suicide, Demographic, cultural, and precipitating factors of suicidal behavior, Responding to suicidal and depressed detainees, Communication between correctional and health care personnel, Necessary referral procedures, Housing observation and suicide-watch procedures, Follow-up monitoring of detainees who have attempted suicide, and Reporting and written documentation procedures. 	Meets Standard	Employees are trained during initial orientation and annually on suicide prevention and intervention. Training addresses all of the items listed in this component.

This detention standard protects the health and well-being of ICE detainees through a comprehensive Significant Self-Harm and Suicide Prevention and Intervention Program that minimizes risk.

	Components	Rating	Remarks (1000 Char Max)
3.	PRIORITY: Detainees who are identified as being "at risk" for significant self-harm or suicide shall immediately be referred to a mental health provider, who shall evaluate the detainee within 24 hours of the referral.	Meets Standard	Detainees identified as being suicidal are immediately referred to medical personnel and placed on suicide watch. The detainees are referred to and evaluated by mental health staff within 24 hours.
4.	Evaluation by a mental health provider of detainees who are identified as being "at risk" for significant self-harm or suicide will be documented in the medical record and include: Relevant history, Environmental factors, Lethality of suicide plan, Psychological factors, A determination of level of suicide risk, Level of supervision needed, Referral/transfer for inpatient care (if needed), Instructions to medical staff for care, and Reassessment time frames.	Meets Standard	Review of medical records revealed that the mental health provider documents evaluations of at-risk detainees in the medical record and includes all the items listed in this component.
5.	Detainees who are placed on suicide watch are to be re- evaluated by appropriately trained and qualified medical staff on a daily basis and this re-evaluation is documented in the detainee's medical record. Only the mental health professional, clinical medical authority, or designee may terminate a suicide watch after a current suicide risk assessment is completed.	Meets Standard	Policy requires and review of medical records confirmed that detainees on suicide watch are re-evaluated daily by medical and mental health personnel. Only the mental health provider or the clinical medical authority may remove a detainee from suicide watch after a suicide risk assessment is completed. Once removed from watch status, the detainee is returned to the general population, if appropriate.

This detention standard protects the health and well-being of ICE detainees through a comprehensive Significant Self-Harm and Suicide Prevention and Intervention Program that minimizes risk.

	Components	Rating	Remarks (1000 Char Max)
6.	PRIORITY: Suicidal detainees should be closely supervised in a setting that minimizes opportunities for self-harm. The isolation room designed for evaluation and treatment must be free of objects or structural elements that could facilitate a suicide attempt, and security staff shall ensure that the area for suicide observation is initially inspected so that there are no objects that pose a threat to the detainee's safety. A suicidal detainee may be placed in the Special Management Unit only if space has been approved for this purpose by medical staff and such space allows for unobstructed observation.	Meets Standard	Per policy and practice, any detainee determined to be in need of suicide watch or observation status is placed in the Close Medical Observation Cell in the medical department. Inspection of the room indicated it is free of any objects or structural elements that could be used in a suicide attempt. Prior to placement of a detainee, security personnel inspect the room to ensure the environment remains free of any such objects.
7.	A detainee placed in a special isolation room designed for evaluation and treatment must receive continuous one-to-one monitoring, documented every 15 minutes or more frequently if necessary. Detainees not placed in an isolated confinement setting must receive documented close observation at staggered intervals not to exceed 15 minutes.	Meets Standard	All detainees on suicide watch are monitored via one-on-one direct observation by security officers who make a notation every fifteen minutes on the behavioral observation checklist.
8.	All detainees on suicide precautions are checked at least every 8 hours by clinical staff, and provided daily mental health treatment by a qualified clinician.	Meets Standard	Detainees on suicide watch are checked at least every eight hours by medical staff and provided daily mental health treatment by a qualified clinician.
9.	Detainees are provided suicide smocks to wear when medically indicated, and under circumstances are held without clothing.	Meets Standard	Detainees on suicide watch are provided a tear resistant garment and blanket. Under no circumstances are they held without clothing.
10.	Following a suicide attempt, security staff shall initiate and continue appropriate life-saving measures until relieved by arriving medical personnel.	Meets Standard	Following a suicide attempt, policy requires that all personnel initiate and continue lifesaving efforts until properly relieved by qualified medical providers.

This detention standard protects the health and well-being of ICE detainees through a comprehensive Significant Self-Harm and Suicide Prevention and Intervention Program that minimizes risk.

Components	Rating	Remarks (1000 Char Max)
11. In the event of a suicide attempt or a completed suicide, all appropriate ICE and IHSC officials shall be notified through the chain of command. The victim's family and appropriate outside authorities, as appropriate, shall also be immediately notified. Medical staff shall complete an Incident Report Form within 24 hours.	Meets Standard	Policy requires that ICE and IHSC are notified when there is a suicide attempt or a completed suicide involving an ICE detainee. There were no suicide attempts since the last inspection. ICE personnel make the family and consulate notifications. Appropriate reports are completed by all involved staff members.
12. Every completed suicide shall be subject to a mortality review process. A critical incident debriefing shall be provided to all affected staff and detainees within 24 to 72 hours after the critical incident.	Meets Standard	Following any death, to include a completed suicide, a mortality review is required. Critical incident debriefing is offered to affected staff members and detainees. There have been no completed suicides since the previous inspection.

STANDARD 4.6. SIGNIFICANT SELF-HARM AND 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)

Personnel are trained that the practice of "contracting for safety" will not be used at the facility. When medical personnel determine that a detainee is at imminent risk of bodily injury, they may recommend hospitalization for the purposes of evaluation or treatment. A court order will be sought, if necessary.

Based on an evaluation, a mental health provider develops a documented treatment plan that is placed in the medical record. The treatment plan includes strategies and interventions to be followed by staff and the detainee if suicidal ideation reoccurs; strategies for improved functioning; and regular follow-up appointments based on level of acuity. When a staff member identifies someone who is at risk of significant self-harm or suicide, the detainee is placed on suicide precautions and is immediately referred to a qualified mental health professional. Deprivations and restrictions placed on suicidal detainees are kept to a minimum. Any detainee who is believed to be in need of seclusion, and/or restraint due to self-harming or suicidal behavior will be transferred to a psychiatric facility, if deemed medically necessary to appropriately treat the needs of the detainee. Facility policy and training support effective management of detainees at risk for suicide, including appropriate identification, evaluation and documentation on their management, care and treatment. After discharge from suicide watch, detainees are re-assessed by qualified mental health staff members at intervals consistent with the level of acuity.

When transferred into ICE custody, ICE inquiries into any known prior suicidal behaviors, and if identified, ICE ensures detainee safety pending medical provider evaluation.

The CMA is to be notified when a detainee is referred to the local hospital emergency room. In the event of a suicide attempt or completed suicide, all personnel who came into contact with the detainee before the incident will submit statements including their knowledge of the detainee and the incident.

There were no suicide attempts reported since the last inspection. Evaluation of the standard was based on review of policy, procedure, medical records, training curriculum and blank log forms; observation of the watch cell and a suicide watch in

STANDARD 4.6. SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION – Reviewer Summary				
(Use following format for dates: mm/dd/yyyy)				
progress; and staff interviews.				
Overall Rating: Meets Standard				
Reviewer Name (Printed): (b)(6);(b)(7)(C)	Completion Date: 9/29/2016			
Reviewer Signature (for printed form submission):				

STANDARD 4.7. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH (Key: Z)

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

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.	When a detainee's medical condition becomes life-threatening, he/she is transferred to an appropriate off-site medical or community facility, if necessary. The facility's clinical medical authority or health services administrator immediately notifies the facility administrator and/or ICE/ERO Field Office Director (FOD) of the detainee's condition both verbally and in writing, describing the detainee's illness and prognosis. The facility administrator or designee immediately notifies ICE/ERO and IHSC.	Meets Standard	If a detainee's medical condition exceeds the capabilities of the facility, he or she is transferred to a more appropriate medical or detention facility and the OIC, ICE and IHSC are notified as required.
2.	The FOD or designee shall immediately notify (or make reasonable efforts to notify) the detainee's next-of-kin of the medical condition and status, the detainee's location, and the visiting hours and rules at that location, in a language or manner which they can understand.	Meets Standard	When a detainee becomes seriously or terminally ill, medical personnel notify the OIC and onsite ICE personnel of the detainee's medical condition. ICE notifies the next of kin regarding the detainee's location and visiting restrictions.
3.	Once a detainee is diagnosed as having a terminal illness or remaining life expectancy of less than one year, medical staff offer the detainee access to forms or other related materials on Advance Directives or Living Wills. When the detainee is at an off-site facility, that facility is expected to assist the detainee in completing an Advance Directive and/or Living Will. All facilities shall use the State Advance Directive form (in which the facility is located) for implementing Living Wills and Advance Directives.	Meets Standard	Detainees are offered access to State of Colorado advance directive and living will forms. Facility employees are expected to assist the detainee in completing an advance directive when the detainee is housed in an off-site facility.
4.	When the terms of the advanced directive must be implemented the medical professional overseeing the detainee's care will contact the appropriate ICE/ERO representative.	Meets Standard	If the terms of an advanced directive must be implemented, ICE is notified immediately.
5.	Each facility holding detainees shall establish written policy and procedures governing DNR orders in accordance with the laws of the state in which the facility is located.	Meets Standard	There are written policies and procedures regarding do not resuscitate (DNR) orders. Policy requires compliance with state laws.
6.	Health care will continue to be provided consistent with the DNR order.	Meets Standard	Policy requires health care personnel to provide care consistent with the DNR order.

STANDARD 4.7. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH (Key: Z)

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

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 detainee's medical file shall include documentation validating the DNR order.	Meets Standard	Policy requires documentation validating a DNR order to be placed in the detainee's medical record.
8.	The facility shall follow written procedures for notifying attending medical staff of the DNR order.	Meets Standard	Policy details the procedures for facility medical personnel to notify attending medical staff of a detainee's DNR order. During the inspection, there were no active DNR orders.
9.	The facility has procedures to address the issues of organ donation by detainees.	Meets Standard	Policy establishes procedures addressing organ donation by detainees.
10.	Each facility shall have written policy and procedures that are followed to notify ICE/ERO officials, next-of-kin, and consulate officials of a detainee's death while in custody.	Meets Standard	Policy addresses procedures for notifying ICE personnel when a detainee dies in custody. Per the ICE agent, ICE would notify next-of-kin and consulate officials.
11.	Within seven calendar days of the date of notification (in writing or in person), the family shall have the opportunity to claim the remains.	Meets Standard	The ICE officer reported that ICE takes into consideration the location of the family and works with them on claiming the remains.
12.	If family members cannot be located or decline orally or in writing to claim the remains, ICE/ERO shall notify the consulate.	Meets Standard	Per the ICE agent, ICE would make this notification.
13.	The facility administrator shall specify policy and procedures regarding responsibility for proper distribution of the death certificate.	Meets Standard	Policy establishes procedures for proper distribution of the death certificate.
14.	 The facility's written procedures for autopsies shall address, at a minimum: Contacting the local coroner or medical examiner, in accordance with established guidelines and applicable laws; Scheduling the autopsy; Identifying the person who will perform the autopsy; Obtaining the official death certificate, and Transporting the body to the coroner or medical examiner's office. 	Meets Standard	Policy includes procedures for autopsies that address all of the bulleted items listed in this component.

STANDARD 4.7. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH (Key: Z)

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

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)
 Medical staff shall arrange for the approved autopsy to be performed by the local coroner or medical examiner in accordance with established guidelines and applicable laws. 	Meets Standard	Policy states that the HSA shall arrange for the autopsy to be performed.

STANDARD 4.7. TERMINAL ILLNESS, ADVANCE 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)

When a detainee is hospitalized, the HSA follows up on a daily basis to receive information about major developments. In conjunction with medical providers, ICE provides family members and any others as much opportunity for visitation as possible, in keeping with the safety, security and good order of the facility.

Advance directive guidelines include having a living will other than the generic form made available by medical staff; appointing another individual to make advance decisions for him/her; and having a private attorney prepare the documents at the detainee's expense.

DNR policy complies with the following stipulations: A DNR order can only be written by the CMA since there are no staff physicians; it protects basic patient rights and complies with state requirements; a decision to withhold resuscitative services is considered only under specified conditions (the detainee has a terminal illness, the detainee has requested and signed the order, the decision is consistent with sound medical practice and is not in any way associated with any measures to hasten death); the medical file includes explicit directions regarding DNR and forms and memoranda regarding diagnosis and prognosis, express wishes of the detainee, immediate family's wishes, consensual decisions and recommendations of medical professionals identified by name and title, mental competency evaluation and informed consent; a detainee with a DNR order will receive all therapeutic efforts short of resuscitation; and the CD or HSA will notify the IHSC medical director and the ICE Office of Chief Counsel of the basic circumstances of any detainee with a DNR order.

Procedures for organ donation include: the organ recipient is an immediate family member; no blood or blood products are donated; all costs are at the expense of the detainee; the detainee signs a statement documenting his/her decision to donate the organ to a specific family member, his/her understanding of the risks, that the decision is undertaken without coercion or duress, and that the government is not responsible for any resulting medical complications or financial obligations; medical staff will assist in the preliminary medical evaluation and the facility coordinates arrangements for the donation.

The facility turns over the property of a deceased detainee to ICE within a week. ICE gives the property of deceased detainees to the next-of-kin within two weeks, unless it is being held as part of an investigation. ICE may assist the family with transporting the remains to a location in the U.S. If neither family nor consulate claims the remains, ICE schedules an indigent's burial, after contacting the Department of Veterans Affairs to determine burial benefits. ICE does not authorize cremation or donation of the remains for medical research. The original death certificate is sent to the person who claims the remains and a certified copy will be placed in the A-file. Written policy and procedures on autopsies include: the chaplain is involved in formulation of the procedures; the ICE Office of Chief Counsel is consulted; and a written copy of the autopsy is forwarded to the ICE Office of Chief Counsel. While an autopsy decision is pending, no actions are taken that could affect the validity of the results. The FOD verifies and accommodates the detainee's religious preference prior to autopsy or embalming.

No detainee deaths have been reported since the last inspection; therefore, no records were available for review in order to

STANDARD 4.7. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH – Reviewer Summary				
(Use following format for dates:	mm/dd/yyyy)			
ensure practice is in compliance with policy. Evaluation of this standard was based on review of policies and procedures and on staff interviews.				
Overall Rating: Meets Standard				
Reviewer Name (Printed) (b)(6);(b)(7)(C) Completion Date: 9/29/2016				
Reviewer Signature (for printed form submission):				

Section V: ACTIVITIES

Correspondence and Other Mail
Escorted Trips for Non-Medical Emergencies
Marriage Requests
Recreation
Religious Practices
Telephone Access
Visitation
Voluntary Work Program

STANDARD 5.1. CORRESPONDENCE AND OTHER MAIL (Key: AA)

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

	Components	Rating	Remarks (1000 Char Max)
1.	Each facility shall have written policy and procedures concerning detainee correspondence and other mail.	Meets Standard	Rules governing correspondence and other mail are noted in policy and the local handbook.
2.	PRIORITY: A detainee is considered "indigent" if he or she has less than \$15.00 in his or her account. Indigent detainees will be permitted to mail a reasonable amount of mail each week at government expense, as determined by the ICE/ERO, including the following: • An unlimited amount of special correspondence or legal mail, within reason. • At least three pieces of general correspondence. • Packages as deemed necessary by ICE. Each facility shall have written procedures that explain how indigent detainees can request postage at government expense.	Meets Standard	Detainees who have less than \$15.00 in their account are considered indigent. Correspondence rules and procedures explaining the process for indigent detainees to request postage at government expense are included in the local handbook. Detainees who are indigent may send an unlimited amount of special correspondence or legal mail, within reason, at least three pieces of general correspondence and packages as deemed necessary by ICE.
3.	The facility shall notify detainees of its rules on correspondence and other mail through the Detainee Handbook, or supplement, provided to each detainee upon admittance, and shall post those rules in each housing area.	Meets Standard	The rules for correspondence and other mail are included in the local handbook provided to detainees upon admission. The rules are also posted in the housing units.
4.	The facility shall provide key information to detainees in languages spoken by any significant portion of the facility's detainee population.	Meets Standard	Key information is provided to detainees in English and Spanish, languages spoken by the majority of detainees held at the facility. Language lines are also available.
5.	 PRIORITY: Detainee correspondence and other mail shall be delivered to the detainee and to the postal service on regular schedules. Incoming correspondence shall be distributed to detainees within 24 hours (one business day) of receipt by the facility. Outgoing correspondence shall be 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. 	Meets Standard	Correspondence and other mail is delivered to the detainee the business day it is received. Outgoing correspondence is delivered to the postal service the same day it is received by the facility; excluding weekends and holidays.

STANDARD 5.1. CORRESPONDENCE AND OTHER MAIL (Key: AA)

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

	Components	Rating	Remarks (1000 Char Max)
6.	All facilities shall implement procedures for the inspection of all incoming general correspondence and other mail (including packages and publications) for contraband in the presence of the detainee (unless otherwise authorized by the facility administrator).	Meets Standard	
7.	All facilities shall implement procedures for inspecting incoming special correspondence and legal mail for contraband in the presence of the detainee. Detainees shall sign a logbook upon receipt of special correspondence and/or legal mail to verify that the special correspondence or legal mail was opened in their presence. Incoming special correspondence and legal mail may not be read.	Meets Standard	All incoming special and legal correspondence is logged, opened and checked for contraband in the presence of the detainee. Detainees sign the logbook upon receipt of special and legal correspondence. Pursuant to policy, and confirmed by staff, special and legal correspondence is not read.
8.	Outgoing special correspondence and legal mail shall not be opened, inspected, or read.	Meets Standard	
9.	All facilities shall implement policies and procedures addressing acceptable and non-acceptable mail.	Meets Standard	
10.	When an officer finds an item that must be removed from a detainee's mail, he or she shall make a written record.	Meets Standard	
11.	Prohibited items discovered in the mail shall be handled as follows: • A receipt shall be issued to the detainee for all cash, which shall be safeguarded and credited to the detainee's account in accordance with the Detention Standard on Funds and Personal Property. • Identity documents, such as passports, birth certificates, etc., shall be placed in the detainee's Afile. Upon request, the detainee shall be provided with a copy of the document, certified by an ICE/ERO officer to be a true and correct copy.	Meets Standard	Policy and practice address the requirements of this component.
12.	The facility shall provide a postage allowance at government expense to all detainees, if the facility does not have a system for detainees to purchase stamps.	N/A	Detainees may purchase stamps via their commissary account.
13.	The facility shall provide writing paper, envelopes, and writing implements at no cost to ICE detainees.	Meets Standard	
14.	All facilities shall have written policy and procedures regarding mail privileges for detainees housed in a Special Management Unit.	Meets Standard	

STANDARD 5.1. CORRESPONDENCE AND OTHER MAIL - Reviewer Summary

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

STANDARD 5.1. 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)

The facility ensures that ICE detainees are permitted to send and receive correspondence in a timely manner while maintaining the security and orderly operation of the facility. Mail is routinely delivered to detainees within 24 hours of receipt or the next business day. All incoming general mail is opened and inspected for contraband but not read in the presence of the detainee. Special and legal mail is logged and delivered unopened to the detainee who is required to sign the log upon receipt. Incoming priority mail, overnight mail, certified mail and deliveries from a private package service are recorded in a logbook by the mail room officer. Packages and publications are subject to certain restrictions. Detainees are not permitted to send or receive packages, other than legal correspondence, without prior approval of the OIC or a designee. Detainees must pay postage for packages and oversized or overweight mail.

Inspection of the mail is for the purpose of detecting contraband and to maintain security. Reading of the mail must be authorized by the OIC. Outgoing general correspondence is inspected if it is addressed to another detainee or there is reason to believe that it may present a threat to the facility or others.

The sender and the addressee of rejected mail are notified in writing as to the circumstances of the rejection. Detainees may appeal rejection of correspondence through the detainee grievance system. Correspondence to or from the news media is considered special correspondence if properly identified as such. Detainees may not receive compensation or anything of value for correspondence with the media and may not act as a reporter or publish under a byline.

The facility provides assistance to any detainee without legal representation who requests certain services in connection with a legal matter (notary public, certified mail, etc.) if the detainee has no family member, friend, or community organization able to provide assistance. When timely communication through the mail is not possible, a reasonable amount of communication by means of a facsimile device between the detainee and designated legal representative is permitted.

To evaluate this standard, logs and mail rejection forms were reviewed, staff and detainees were interviewed, and the detainee handbook and policy were reviewed.

Overall Rating: Meets Standard				
Reviewer Name (Printed): (b)(6);(b)(7)(C) Completion Date: 9/29/2016				
	30 30			
Reviewer Signature (for printed form submission):				

STANDARD 5.2. TRIPS FOR NON-MEDICAL EMERGENCIES (Key: AB)

This detention standard permits detainees to maintain ties with their families through emergency staff-escorted trips into the community to visit critically ill members of the immediate family or to attend their 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.	On a case-by-case basis, and with approval of the respective Field Office Director, the facility administrator may allow a detainee, under ICE/ERO staff escort:		
	 To visit a critically ill member of his or her immediate family 	N/A	
	 To attend an immediate-family member's funeral and/or wake 		
	To attend a family-related state court proceeding.		
2.	Facility staff assist detainees in preparing requests for non- medical emergency trip requests. The Field Office Director is the approving official for all non-medical escorted trips.	N/A	
3.	Escorts shall ensure that detainees with physical or mental disabilities are provided reasonable accommodations in accordance with security and safety concerns.	N/A	

STANDARD E 2 TRIPS FOR NON-MEDICAL EMERGENCIE	C - Paviouer Cummary			
STANDARD 5.2. TRIPS FOR NON-MEDICAL EMERGENCIES – Reviewer Summary (Use following format for dates: mm/dd/yyyy)				
Overall Remarks: (Record significant facts, observations, other sources used, etc.	.) (5000 Character Max)			
ICE is responsible for all trips for non-medical emergencies.				
Overall Rating: N/A				
Reviewer Name (Printed): (b)(6);(b)(7)(C)	Completion Date: 9/29/2016			
Reviewer Signature (for printed form submission):				

STANDARD 5.3. MARRIAGE REQUESTS (Key: AC)

This detention standard ensures that each marriage request from an ICE/ERO detainee receives a case-by-case review, based on internal guidelines for approval of such requests.

	Components	Rating	Remarks (1000 Char Max)
1.	All facilities shall have in place written policy and procedures to enable eligible ICE/ERO detainees to marry.	Meets Standard	Policy states ICE detainees' requests for marriage are forwarded to ICE for handling.
2.	A detainee, or his or her legal representative, may submit the request for permission to marry to the facility administrator or Field Office Director in writing.	Meets Standard	
3.	The Field Office Director or Facility Administrator considers detainee marriage requests on a case-by-case basis.	Meets Standard	The Denver field office reviews and approves/denies each detainee marriage request.
4.	The facility administrator or designated Field Office staff shall notify the detainee in a timely manner of a time and place for the ceremony.	Meets Standard	
5.	Once the marriage has taken place, the facility administrator shall forward original copies of all documentation to the detainee's A-file and maintain copies in the facility's detention File.	Meets Standard	Marriage documentation is forwarded to the detainee's A-file and detention file.

STANDARD 5.3. 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 local handbook and the ICE National Detainee Handbook. Marriage requests are approved by ICE. Upon approval, the detainee, legal representative or other individual acting on the detainee's behalf makes all the marriage arrangements, including blood tests, obtaining marriage license, and retaining an officiant 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. Marriages are performed at the facility.

Interviews with the programs manager/chaplain, the compliance manager and ICE; and review of policy revealed detainees may submit requests to marry. There were no marriage ceremonies performed during this inspection period.

ompletion Date: 9/29/2016
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STANDARD 5.4. RECREATION (Key: AD)

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

	Components	Rating	Remarks (1000 Char Max)
1.	The facility provides an indoor recreation program.	Meets Standard	
2.	The facility provides an outdoor recreation program.	Meets Standard	
3.	PRIORITY: If outdoor recreation is available at the facility, each detainee shall have access for at least one hour daily, at a reasonable time of day, weather permitting. Detainees shall have access to clothing appropriate for weather conditions. If only indoor recreation is available, detainees shall have access for at least one hour each day to a large recreation room with exercise equipment and access to natural sunlight. All detainees participating in outdoor recreation shall have access to drinking water and toilet facilities.	Meets Standard	Outdoor recreation is available to all detainees for a minimum of one hour a day, seven days a week. Clothing suitable to the season is provided for all detainees. Indoor recreation is also available to all detainees throughout each day in the housing area dayrooms. Detainees participating in outdoor recreation are provided access to drinking water and toilet facilities.
4.	If a detainee is housed for more than 10 days in a facility that provides neither indoor nor outdoor recreation, he or she may be eligible for a voluntary transfer to a facility that does provide recreation. Likewise, if a detainee is housed for more than three months in a facility that provides only indoor recreation, he or she may be eligible for a voluntary transfer to a facility that also provides outdoor recreation.	N/A	This facility provides both indoor and outdoor recreation.
5.	PRIORITY: All facilities shall have an individual responsible for the development and oversight of the recreation program. Every facility with a rated capacity of 350 or more detainees shall employ a full-time recreation specialist with special training in implementing and overseeing a recreation program, who assesses the needs and interests of the detainees.	Meets Standard	A full-time recreation technician has the responsibilities for oversight and management of facility recreation programs and activities. She has the experience and training necessary to fulfill the demands of the position.
6.	All facilities shall provide recreational opportunities for detainees with disabilities.	Meets Standard	
7.	Exercise areas shall offer a variety of equipment. Weight training, if offered, must be limited to fixed equipment. Free weights are prohibited.	Meets Standard	
8.	Cardiovascular exercise shall be available to detainees for whom outdoor recreation is unavailable.	Meets Standard	

STANDARD 5.4. RECREATION (Key: AD)

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

	Components	Rating	Remarks (1000 Char Max)
9.	PRIORITY: Dayrooms in general population housing units shall offer board games, television, and other sedentary activities. Detention personnel shall supervise dayroom activities, distributing games and other recreation materials daily.	Meets Standard	Housing unit dayrooms offer television viewing, board games, cards, puzzles and various other sedentary activities daily, from 7:00 a.m. to 11:00 p.m. Dayroom activities are under the direct supervision of a housing unit officer. Detainees request dayroom games from their housing unit officer.
10.	Recreational activities shall be based on the facility's size and location. With the facility administrator's approval, recreational activities may include limited-contact sports, such as soccer, basketball, volleyball, and table games, and may extend to intramural competitions among units.	Meets Standard	
11.	Recreation areas shall be under continuous supervision by staff equipped with radios or other communication devices to maintain contact with the Control Center.	Meets Standard	Recreation areas, when in use, are under the constant supervision of surveillance cameras monitored by master control and by a housing unit officer who is equipped with a radio.
12.	PRIORITY: Recreation for detainees housed in the SMU shall be separate from the general population. Detainees in the SMU for administrative reasons shall be offered at least one hour of exercise opportunities per day, seven days a week, outside their cells, and outdoors when practicable, and scheduled at a reasonable time. Detainees in the SMU for disciplinary reasons shall be offered at least one hour of recreation per day, five days per week, outside their cells, and outdoors when practicable, and scheduled at a reasonable time. Where cover is not provided to mitigate inclement weather, detainees shall be provided weather-appropriate equipment and attire.	Meets Standard	Special management unit (SMU) detainees are housed and recreate separate from general population detainees. All SMU detainees receive at least two hours of outdoor and one hour of indoor recreation daily. Recreation for all SMU detainees is offered at reasonable times. Outdoor clothing suitable to the season is provided for all detainees.
13.	Each detainee in a Special Management Unit (SMU) shall be offered access to exercise opportunities and equipment outside the living area and outdoors, when practicable, unless documented security, safety or medical considerations dictate otherwise.	Meets Standard	

STANDARD 5.4. RECREATION (Key: AD)

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

Components	Rating	Remarks (1000 Char Max)
14. When a detainee in an SMU is deprived of recreation (or any usual authorized items or activity), a written report of the action is forwarded to the facility administrator. Denial of recreation must be evaluated daily by a shift supervisor.		If a SMU/ICE detainee is deprived of recreational opportunities, it is documented and the OIC and ICE are advised of the action. Procedures dictate these sanctions are to be evaluated routinely by the OIC for possible early restoration of the privilege. There were no deprivations of recreational activities imposed on ICE detainees during this inspection period.
15. When recreation privileges are suspended, the disciplinary panel or facility administrator shall provide the detained written notification, documentation of the reason for the suspension, any conditions that must be met before restoration of privileges, and the duration of the suspension provided the requisite conditions are met for its restoration.		If recreation privileges are suspended, documentation of the action would include the reasons, duration of the sanction and conditions that must be met before reinstatement of the privilege is granted. There were no suspensions of recreational activities imposed on ICE detainees during this inspection period.
 The case of a detainee denied recreation privileges shall be reviewed at least once each week as part of the reviews required for all detainees in SMU status. 	Occupant Annual Control of the Control occupant Annual	
17. Denial of recreation privileges for more than 7 days requires the concurrence of the facility administrator and a health care professional.	1	
 The facility shall notify the ICE/ERO Field Office in writing when a detainee's denied recreation privileges exceeds 7 days. 	The state of the s	ICE is informed of all detainee denials of recreation privileges.

STANDARD 5.4. RECREATION – 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 recreation technician who assesses the needs and interests of the detainees. Officers oversee the recreation programs, recreation yards and recreation equipment for general population and the SMU detainees. The facility provides recreational opportunities for detainees with disabilities. Detainees have access to outdoor recreation areas where they are exposed to natural light and fresh air. These areas reflect the outside climate and the time of day. Detainees do not forgo basic law library privileges for recreation privileges. Recreation schedules are posted in the housing units.

Policy requires that housing unit officers search recreation areas before and after use to detect altered or damaged equipment, hidden contraband and potential security breaches. They will also issue all portable equipment items and check each item for damage and general condition upon its return. Detainees will be able to engage in independent recreation activities such as board games and small group activities, consistent with the safety, security and orderly operation of the

STANDARD 5.4. RECREATION - Reviewer Summary

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

facility. Hours for television viewing and unit activities are from 7:00 a.m. to 11:00 p.m. daily. Televisions are turned off during official counts and when they interfere with other facility operations.

Policy states that a detainee may be denied recreation privileges only when the detainee's behavior would endanger detainee safety and/or security. Written authorization from the OIC and concurrence from a health care professional is required when the denial of recreation privileges exceeds seven days. ICE/ERO is notified when a detainee is denied recreation.

Review of outdoor/indoor recreation areas, recreation schedules and dayroom activities; and interviews with the chief of security, housing unit officers and detainees revealed detainees have access to recreation and exercise programs/activities within the constraints of safety, security and good order of the facility.

Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6);(b)(7)(C)	Completion Date: 9/29/2016
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Reviewer Signature (for printed form submission):

STANDARD 5.5. RELIGIOUS PRACTICES (Key: AE)

This detention standard ensures that detainees of different religious beliefs are provided reasonable and equitable opportunities to participate in the practices of their respective faiths, constrained only by concerns about safety, security, and the orderly operation of the facility.

	eration of the facility.	Datina	Domoniko (2000 Cl., 14, 1)
1	Components	Rating	Remarks (1000 Char Max) All detainees have an
1.	PRIORITY: Detainees have opportunities to engage in practices of their religious faiths (including observance of important holy days, observance of special diets, and use of personal religious property) consistent with safety, security, and the orderly operation of the facility. Attendance at all religious activities is voluntary.	Meets Standard	opportunity to engage in the practices of their expressed faiths, consistent with this component. All participation in religious activities is voluntary.
2.	Efforts shall be made to allow for religious practice in a manner that does not adversely affect detainees not participating in the practice. Detainees cannot be required to participate in or attend a religious activity in order to receive a service of the facility or participate in other, nonreligious activities.	Meets Standard	
3.	Religious activities shall be open to the entire detainee population, without discrimination based on a detainee's race, ethnicity, religion, national origin, gender, sexual orientation, or disability. Accommodations will be provided to residents who have limited English proficiency, or who are deaf or hard of hearing, to ensure their access to services should they wish to participate.	Meets Standard	Religious activities are accessible to all detainees without discrimination based on a detainee's race, ethnicity, religion, national origin, gender, sexual orientation or disability. The chaplaincy network of volunteers is able to provide services in English and Spanish, the predominant languages spoken by the existing detainee population. Detainees with other language or handicap needs are accommodated through the use of alternate community resources.
4.	Facility records shall reflect the limitation or discontinuance of a religious practice along with the reason for such limitation or discontinuance.	Meets Standard	
5.	PRIORITY: A facility religious services coordinator manages and coordinates religious activities for detainees, which are augmented and enhanced by community clergy, contractors, volunteers, and groups that provide individual and group assembly religious services and counseling that the facility religious services coordinator cannot personally deliver.	Meets Standard	The programs manager is also the chaplain. He is responsible for managing and coordinating religious services/activities for all detainees. The chaplain has organized and relies on a community network of ten chaplaincy volunteers to lead detainees' religious services and programs.
6.	The chaplain or other religious coordinator shall have physical access to all areas of the facility to serve detainees.	Meets Standard	

STANDARD 5.5. RELIGIOUS PRACTICES (Key: AE)

This detention standard ensures that detainees of different religious beliefs are provided reasonable and equitable opportunities to participate in the practices of their respective faiths, constrained only by concerns about safety, security, and the orderly operation of the facility.

	Components	Rating	Remarks (1000 Char Max)
7.	All facilities shall designate adequate space for religious activities that is sufficient to accommodate the needs of all religious groups in the detainee population fairly and equitably.	Meets Standard	The dayroom in an empty housing unit serves as the venue for conducting religious services and activities. This space accommodates the religious needs of the population.
8.	The chaplain or religious services coordinator shall not ordinarily schedule religious services to conflict with meal times.	Meets Standard	
9.	When recruiting citizen volunteers, the chaplain or religious services coordinator and other staff shall be cognizant of the need for representation from all cultural and socioeconomic parts of the community.	Meets Standard	
10.	Detainees who are members of faiths not represented by clergy may conduct their own services, provided they do not interfere with facility operations.	Meets Standard	Detainees practicing faiths for which clergy volunteers are not available are permitted to conduct their own services, with a tacit security officer presence to ensure participant safety and order.
11.	If requested by a detainee, the chaplain or religious services coordinator or designee shall facilitate arrangements for pastoral visits by a clergyperson or representative of the detainee's faith.	Meets Standard	
12.	Detainees may make a request for the introduction of a new component to the Religious Services program (e.g. schedule, meeting time and space, religious items and attire) to the chaplain. The chaplain or religious services coordinator may ask the detainee to provide additional information to use in deciding whether to include the practice.	Meets Standard	
13.	Each facility shall have written policy and procedures to facilitate detainee observance of important holy days, consistent with maintaining safety, security and orderly operations, and the chaplain shall work with detainees to accommodate proper observances.	Meets Standard	Policy addresses religious programs, services and observances, including holy days. The chaplain works with detainees on a regular daily basis to fulfill their religious needs.
14.	Each facility administrator shall allow detainees access to personal religious property, both during religious services and throughout the facility, as is consistent with safety, security and orderly operation of the facility.	Meets Standard	Detainees are permitted to possess religious articles, if they have prior written approval from the chaplain.

STANDARD 5.5. RELIGIOUS PRACTICES (Key: AE)

This detention standard ensures that detainees of different religious beliefs are provided reasonable and equitable opportunities to participate in the practices of their respective faiths, constrained only by concerns about safety, security, and the orderly operation of the facility.

	Components	Rating	Remarks (1000 Char Max)
15.	When a detainee's religion requires special food services, daily or during certain holy days or periods that involve fasting, restricted diets, etc., staff shall make all reasonable efforts to accommodate those requirements (for example, modifying the detainee's menus to exclude certain foods or food combinations, or providing the detainee's meals at unusual hours).	Meets Standard	
16.	The chaplain or religious services coordinator shall develop the religious fast schedule for the calendar year and provide it to the facility administrator or designee.	Meets Standard	The chaplain and the food service administrator develop a ceremonial schedule that honors all religious holy days and their respective requirements. It is put in effect upon OIC approval.

STANDARD 5.5. 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)

Religious services are provided through the efforts of a full-time chaplain and volunteer clergy from the community. Employees do not disparage the religious beliefs of a detainee, nor coerce or harass a detainee to change his/her religious affiliation. ICE 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 staff in writing, a detainee can request to change this designation at any time, and the change is effected in a timely fashion.

Detainees can request the introduction of new or unfamiliar religious components to the program. The staff may ask the detainee to provide additional data in order to make an informed decision to include or exclude the practice from the religious services program. Detainees are allowed to participate in group services.

The facility offers detainees the opportunity to practice their religious faiths through a variety of religious programs and activities, limited only by concerns about safety, security and the orderly operation of the facility. The religious program is organized and supervised by the programs manager who actively recruits community volunteers to assist in conducting religious services. The facility requires a cleared NCIC check, documentation of a clergy person's or faith group representative's credentials and a facility orientation before religious volunteers are allowed in the secure area of the facility. Volunteers do not provide unsolicited religious services or counseling to detainees.

Interviews with the programs manger/chaplain, the compliance administrator, the compliance manger, the food service administrator and four ICE detainees; and review of policy and religious services' venue revealed detainees of different religious beliefs are provided reasonable and equitable opportunity to participate in the practice of their expressed faith.

Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6);(b)(7)(C)	Completion Date: 9/29/2016
Reviewer Signature (for printed form submission):	

STANDARD 5.6. TELEPHONE ACCESS (Key: AF)

This detention standard ensures that detainees may maintain ties with their families and others in the community, legal representatives, consulates, courts, and government agencies, by providing them reasonable and equitable access to telephone services.

	Components	Rating	Remarks (1000 Char Max)
1.	To ensure sufficient access, each facility shall provide at least one operable telephone for every 25 detainees.	Meets Standard	Each housing unit has a maximum capacity of eighty detainees. All the units have eight telephones for a ratio of better than one telephone for every 25 detainees.
2.	PRIORITY: Each facility shall ensure that detainees have access to reasonably priced telephone services. Contracts for such services shall comply with all applicable state and federal regulations and be based on rates and surcharges commensurate with those charged to the general public. Any variations shall reflect actual costs associated with the provision of services in a detention setting.	Meets Standard	The facility's telephone contractor provides services that comply with the requirements of this component.
3.	Each facility shall maintain detainee telephones in proper working order. Designated facility staff shall inspect the telephones daily, promptly report out-of-order telephones to the repair service and ensure that required repairs are completed quickly. Facility staff shall notify detainees and the ICE/ERO free legal service providers of procedures for reporting problems with telephones.	Meets Standard	Shift and ICE staff routinely inspect detainee telephones and document their findings. Problems are immediately reported to the service contractor. Inoperable phones are either repaired or promptly replaced.
4.	Facility staff is responsible for ensuring on a daily basis that telephone systems are operational and that the free telephone number list is posted. Any problems identified must immediately be logged and reported to the appropriate facility and ICE staff personnel.	Meets Standard	
5.	Each facility shall have a written policy on the monitoring of detainee telephone calls. If telephone calls are monitored, the facility shall include a recorded message on its phone system stating that all telephone calls are subject to monitoring. At each monitored telephone, place a notice that states that detainee calls are subject to monitoring. A detainee's call to a court, a legal representative, OIG, or CRCL, or for the purposes of obtaining legal representation, may not be electronically monitored.	Meets Standard	

STANDARD 5.6. TELEPHONE ACCESS (Key: AF)

This detention standard ensures that detainees may maintain ties with their families and others in the community, legal representatives, consulates, courts, and government agencies, by providing them reasonable and equitable access to telephone services.

	Components	Rating	Remarks (1000 Char Max)
6.	Each facility shall provide telephone access rules in writing to each detainee upon admission, and shall post these rules and telephone access hours where detainees may easily see them, in Spanish and other languages spoken by significant segments of the limited English proficient population where practicable. Updated telephone and consulate lists, along with a list of card and calling rates, shall be posted in the detainee housing units. Translation and interpretation services shall be provided as needed.	Meets Standard	Telephone access rules are noted in the local handbook, and on housing unit postings. The handbook and postings are provided in English and Spanish. Updated telephone and consulate lists and calling rates are posted in English and Spanish. Translation and interpretation services are provided as needed.
7.	Each facility administrator shall establish and oversee rules and procedures that provide detainees reasonable and equitable access to telephones during established facility "waking hours."	Meets Standard	Detainees are permitted to use the telephones from the morning meal until lights out on a daily basis.
8.	Detainees are afforded a reasonable degree of privacy for legal phone calls.	Meets Standard	
9.	A procedure exists to assist a detainee who is having trouble placing a confidential call.	Meets Standard	
10.	The facility provides the detainees with the ability to make non-collect (special access) calls, as well as international calls.	Meets Standard	
11.	Even if telephone service is generally limited to collect calls, each facility shall permit detainees to make direct or free calls to the offices and individuals required by the standard. Updated lists need to be posted in the detainee housing units.	Meets Standard	Special access numbers are programmed into the detainee telephone system and are free of charge. Updated lists are posted in the housing units in English and Spanish.
12.	If detainees are required to complete request forms to make direct or free calls, facility staff must assist them as needed, especially illiterate or non-English speaking detainees.	Meets Standard	

STANDARD 5.6. TELEPHONE ACCESS (Key: AF)

This detention standard ensures that detainees may maintain ties with their families and others in the community, legal representatives, consulates, courts, and government agencies, by providing them reasonable and equitable access to telephone services.

Components	Rating	Remarks (1000 Char Max)
13. PRIORITY: All detainees are able to call their consulate, the DHS Office of the Inspector General, the ICE/OPR Joint Intake Center, and any organization on the ICE/ERO-provided list of free legal service providers at no charge to the detainee or receiving party. The FOD will ensure that all information is kept current and provided to each facility. Updated contact lists are posted in the detainee housing units.	Meets Standard	All special access numbers are programmed into the detainee telephone system and are free of charge. Current contact information is posted in the housing units. Updates are
Indigent detainees are afforded the same telephone access and privileges as detainees in the general population. The indigent detainee may also request a free call to immediate family or others in personal or family emergencies or for a compelling need (to be interpreted liberally).		posted as required. Procedures are in place to permit indigent detainees to make free calls to family or others upon request.
14. A facility may neither restrict the number of calls a detainee places to his/her legal representatives nor limit the duration of such calls by rule or automatic cut-off, unless necessary for security purposes or to maintain orderly and fair access to telephones.	Meets Standard	
15. The facility has a system for taking and delivering emergency detainee telephone messages.	Meets Standard	Policy notes that when an emergency telephone message for a detainee is received, staff shall deliver the message, the caller's name and telephone number to the detainee as soon as possible. Policy further mandates that the detainee will be permitted to return the emergency call as soon as reasonably possible.
16. The facility shall take and deliver telephone messages to detainees as promptly as possible. When facility staff receive an emergency telephone call for a detainee, the caller's name and telephone number will be obtained and promptly given to the detainee. The detainee shall be permitted to promptly return the emergency call at their own cost within the constraints of security and safety. The facility shall enable indigent detainees to make a free return emergency call.	Meets Standard	

STANDARD 5.6. TELEPHONE ACCESS (Key: AF)

This detention standard ensures that detainees may maintain ties with their families and others in the community, legal representatives, consulates, courts, and government agencies, by providing them reasonable and equitable access to telephone services.

	Components	Rating	Remarks (1000 Char Max)
17.	The facility shall provide a TTY device or Accessible Telephone (telephones equipped with volume control and telephones that are hearing-aid compatible for detainees who are deaf or hard of hearing). Detainees who are hard of hearing will be provided access to the TTY on the same terms as hearing detainees. Accommodations shall also be made for detainees with	Meets Standard	
	speech disabilities.		
18.	Even where telephone access is reasonably restricted for detainees in Special Management Units, detainees and their legal counsel shall nevertheless be accommodated in order for them to be able to communicate effectively with each other. Telephone access for legal calls, courts, government offices (including the DHS OIG and the DHS JIC) and embassies or consulates shall not be denied.	Meets Standard	Detainees in special housing units have access to a telephone for special access calls including those listed in this component.
19.	Detainees in Disciplinary Segregation may be restricted from using telephones to make general calls as part of the disciplinary process. Even in Disciplinary Segregation, however, detainees shall have some access for special purposes.	Meets Standard	Detainees in disciplinary segregation have access to telephones for special access calls for legal purposes and to courts and government offices. Their access to general calls is not routinely restricted.
20.	Generally, detainees in administrative segregation should receive the same telephone privileges that are available to detainees in the general population, subject to any safety and security considerations that may exist.	Meets Standard	
21.	Upon a detainee's request, facility staff shall make special arrangements to permit the detainee to speak by telephone with an immediate family member detained in another facility.	Meets Standard	Policy notes that a detainee may submit a request for approval to call an immediate family member detained in another facility. Reasonable limitations may be placed on the frequency and duration of such calls.

STANDARD 5.6. 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 reasonable and equitable access to telephones to allow detainees to maintain established relationships and to conduct legal business via the telephone. Unit telephones are available to detainees during normal dayroom hours, seven days per week. Facility and ICE personnel perform regular inspections of the telephone system. The facility uses an ICE contract for the provision of telephone services to detainees.

To evaluate this standard, policy was reviewed, staff and detainees were interviewed, the OIG speed dial number was tested and telephones were checked in the housing units to ensure they were operable. The inspector also reviewed the contracted service provider's calling rates which were \$0.21 per minute for local calls and \$0.25 per minute for long distance and

STANDARD 5.6. TELEPHONE ACCESS – Reviewer Summary			
(Use following format for dates: mm/dd/yyyy)			
international calls, plus a tax surcharge of 23% for each call. The rates charged to det the local community.	ainees are comparable to those paid by		
Overall Rating: Meets Standard			
Reviewer Name (Printed): (b)(6);(b)(7)(C) Completion Date: 9/29/2016			
Reviewer Signature (for printed form submission):			

STANDARD 5.7. VISITATION (Key: AG)

This detention standard ensures that detainees shall be able to maintain morale and ties through visitation with their families, the community, legal representatives, and consular officials, within the constraints of safety, security, and good order of the facility.

	Components	Rating	Remarks (1000 Char Max)
1.	There is a written visitation procedure, schedule, and hours for general visitation.	Meets Standard	General visitation rules and procedures are noted in policy. Written schedules and hours for general visitation are posted in the visitor's entrance, housing units and other common areas. Visitation rules and procedures are also noted on the facility's web page.
2.	Each facility administrator shall decide whether to permit contact visits, as is appropriate for the facility's physical plant and detainee population.	Meets Standard	All general visits are non-contact. Requests for contact visits must be submitted in writing and approved in advance by the OIC. All legal visitation is contact.
3.	A facility administrator may temporarily restrict visiting when necessary to ensure the security and good order of the facility. Each restriction or denial of visits shall be documented in writing, including the duration of and reasons for the restriction.	Meets Standard	
4.	 Each facility shall: Make the schedule and procedures available to the public, both in written form and telephonically. Post that information in the visitor waiting area in English, Spanish, and, where practicable, other major languages spoken in the facility, as well as in each housing unit where detainees can easily see them. 	Meets Standard	The visitation schedule and procedures are posted in the visitation waiting area and the detainee housing units. Postings are in English and Spanish. The information is also available on the facility's website and telephonically.
5.	PRIORITY: General visitation is permitted during set hours on Saturdays, Sundays, and holidays, and, to the extent practicable, the facility also establishes visiting hours on weekdays and during evening hours. The facility accommodates the scheduling needs of visitors for whom scheduled visiting hours pose a hardship. The number of visitors a detainee receives and the length of visits are limited only by reasonable constraints of space, scheduling, staff availability, safety, security, and good order.	Meets Standard	The general visitation schedule permits visits seven days a week including holidays. Visits are usually restricted to one hour; additional time may be granted upon request due to scheduling hardships, distance traveled and other relevant scheduling issues. Visiting hours are 7:00 a.m. to 9:00 p.m. Visits are normally limited to five individuals including children.
6.	Each facility shall maintain a log of all general visitors, and a separate log of legal visitors.	Meets Standard	

STANDARD 5.7. VISITATION (Key: AG)

This detention standard ensures that detainees shall be able to maintain morale and ties through visitation with their families, the community, legal representatives, and consular officials, within the constraints of safety, security, and good order of the facility.

	Components	Rating	Remarks (1000 Char Max)
7.	If the facility establishes and maintains a dress code for visitors, it shall be made available to the public.	Meets Standard	The visitor dress code is posted in the visitor entrance to the facility. Copies of the rules and dress code are also noted on the facility's web page.
8.	The facility's visiting areas shall be appropriately furnished and arranged, and as comfortable and pleasant as practicable.	Meets Standard	
9.	PRIORITY: The facility's written rules shall specify time limits for visits. Visits should be for the maximum period practicable but not less than one hour with special consideration given to family circumstances and individuals who have traveled long distances.	Meets Standard	Although visits are routinely restricted to one hour, special consideration is given to individuals who travel long distances and for other compelling family circumstances.
10.	Facilities should have provisions to allow for contact or non-contact visitation with minor children, stepchildren and foster children. Facilities that allow visitations by minor children, stepchildren and foster children should try to facilitate contact visitation when possible. Facilities should allow detainees to see their minor children as soon as possible after admission. Generous time allotments for visitation with minor children are recommended. At facilities where there is no provision for visits by minors, ICE arranges for visits by children, stepchildren, and foster children on request, within the first 30 days.	Meets Standard	Minor children visitation is permitted and allowed as soon as possible after admission.
11.	Written procedures shall detail the limits and conditions of contact visits in facilities permitting them.	Meets Standard	
12.	While in administrative or disciplinary segregation status, a detainee ordinarily retains visiting privileges.	Meets Standard	
13.	PRIORITY: Legal visitation is available seven (7) days a week, including holidays. Legal visitation hours provide for a minimum of eight (8) hours per day on regular business days, and a minimum of four (4) hours per day on weekends and holidays.	Meets Standard	Legal visitation is permitted from 8:00 a.m. until 9:00 p.m. each day of the week including holidays.
14.	Private consultation rooms are available for meetings with legal representatives or legal assistants. There is a mechanism for the detainee and his/her legal representative or assistant to exchange documents, even when contact visitation rooms are unavailable.	Meets Standard	Private consultation rooms are available for contact visits with legal representatives. The detainee and the legal representative are allowed to exchange documents.
15.	Legal representatives and assistants are subject to a non- intrusive search - such as a pat-down search of the person or a search of the person's belongings - at any time for the purpose of ascertaining the presence of contraband.	Meets Standard	Legal representatives and assistants are subject to inspection by a metal detector.

STANDARD 5.7. VISITATION (Key: AG)

This detention standard ensures that detainees shall be able to maintain morale and ties through visitation with their families, the community, legal representatives, and consular officials, within the constraints of safety, security, and good order of the facility.

	Components	Rating	Remarks (1000 Char Max)
16.	The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	Meets Standard	The current list of pro bono legal organizations is posted in the housing units and other common areas.
17.	Facility visitation procedures shall cover law enforcement officials requesting interviews with detainees. Facilities will notify and seek approval from ICE ERO of any proposed law enforcement officer visit with a detainee.	Meets Standard	Law enforcement officials must have approval from the OIC.
18.	Former ICE/ERO detainees, individuals with criminal records and individuals in deportation proceedings shall not be automatically excluded from visiting. Individuals in any of these categories must so notify the facility administrator before registering for visitation privileges.	Meets Standard	

STANDARD 5.7. VISITATION - Reviewer Summary

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

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

Visits by legal representatives are conducted in private contact visiting rooms. Strip searches are not required after any detainee visit.

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. G-28 forms are available via the ICE website or the attorney/legal representative may request a G-28 form from a DO at the facility.

Employees visually observe legal visits, but are not able to hear conversations. Legal visits may continue through counts. Upon request, legal visits may occur in general visitation areas if private consultation rooms are not available. Documents exchanged between detainees and their legal visitors are inspected by employees, but not read. 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 in writing to the ICE field office for review and must state the reasons for the visit and issues to be discussed. Legitimate community service organizations may visit upon approval of ICE. News media visit only with approval of ICE.

Visitation is restricted only through the disciplinary process and criminal behavior during visits may be referred for prosecution. In those cases, the officer is required to document the action and notify the OIC. The visiting room officer, with concurrence from the shift supervisor, may terminate visits involving inappropriate behavior.

Family and friends may visit detainees, and detainees may visit other family members who are detained at this facility by special arrangement. Visitors refusing search procedures are not permitted to visit. There are lockers available in the entrance for visitor's personal belongings. Policy lists the items of personal property that may enter the visitation areas. Service animals may accompany visitors with disabilities.

Written procedures address incoming detainee property and fund deposits. Visitors are permitted to use a kiosk in the reception lobby to deposit money into detainees' telephone and commissary accounts. A receipt is printed for the visitor.

STANDARD 5.7. VISITATION – Reviewer Sum	mary		
(Use following format for dates: mm/dd/yyyy)			
To evaluate this standard, visiting procedures, policy, the handbook and logs were staff members were interviewed.	reviewed; the visiting area was toured; and		
Overall Rating: Meets Standard			
Reviewer Name (Printed): (b)(6);(b)(7)(C) Completion Date: 9/29/2016			
Reviewer Signature (for printed form submission):			

STANDARD 5.8. VOLUNTARY WORK PROGRAM (Key: AH)

This detention standard provides detainees opportunities to work and earn money while confined, subject to the number of work opportunities available and within the constraints of safety, security, and good order of the facility. While not legally required to do so, ICE/ERO affords working detainees 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.	Detainees who are physically and mentally able to work shall be provided the opportunity to participate in a voluntary work program.	Meets Standard	Physically and mentally able detainees are afforded the opportunity to take part in the voluntary work program.
2.	The detainee's classification level shall determine the type of work assignment for which he/she is eligible. Generally, high custody detainees shall not be given work opportunities outside their housing units/living areas.	Meets Standard	Detainee classification levels are used to determine eligibility for work assignments. High custody level detainees do not work outside of their assigned housing unit.
3.	ICE detainees may not work outside the secure perimeter of non-dedicated IGSA facilities.	Meets Standard	This facility is a CDF. Low custody level detainees may be permitted to work outside the secure perimeter of the facility, while under direct supervision.
4.	The facility administrator shall develop site-specific rules for selecting work detail volunteers in a facility procedure that will include a voluntary work program agreement.	Meets Standard	Policy establishes the voluntary work program rules and procedures. Detainees must sign a voluntary work program agreement before they can participate in the program.
5.	Detainees shall not be denied voluntary work opportunities on the basis of such factors as a detainee's race, religion, national origin, gender, sexual orientation or disability.	Meets Standard	
6.	While medical or mental health restrictions may prevent some physically or mentally challenged detainees from working, those with less severe disabilities shall have the opportunity to participate in the voluntary work program in appropriate work assignments.	Meets Standard	
7.	Detainees who participate in the volunteer work program are required to work according to a fixed schedule that does not exceed 8 hours daily, 40 hours weekly.	Meets Standard	Detainees work a fixed schedule. They are not permitted to work more than eight hours a day or forty hours a week.
8.	Detainees shall receive monetary compensation for work completed in accordance with the facility's standard policy of at least \$1.00 (USD) per day.	Meets Standard	Policy dictates detainees participating in the voluntary work program are paid \$1.00 per day.

STANDARD 5.8. VOLUNTARY WORK PROGRAM (Key: AH)

This detention standard provides detainees opportunities to work and earn money while confined, subject to the number of work opportunities available and within the constraints of safety, security, and good order of the facility. While not legally required to do so, ICE/ERO affords working detainees 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)
9.	The facility administrator shall establish procedures for informing detainee volunteers about on-the-job responsibilities and reporting procedures.	Meets Standard	
10.	When a detainee is removed from a work detail, staff place the written justification for the action in the detainee's detention file. Detainees are permitted to file a grievance to the facility administrator or local Field Office Director if they believe they were unfairly removed from work.	Meets Standard	If a detainee is removed from the work program the action and its justification will be documented and the record placed in the detainee's detention file. Detainees may file a grievance on the decision.
11.	All detention facilities shall comply with all applicable health and safety regulations and standards, to include training.	Meets Standard	
12.	The facility administrator shall ensure that all department heads, in collaboration with the facility's safety/training officer, develop and institute appropriate training for all detainee workers.	Meets Standard	
13.	Upon a detainee's assignment to a job or detail, the supervisor shall provide thorough instructions regarding safe work methods and, if relevant, hazardous materials.	Meets Standard	Training on safe work practices is provided and documented for all newly assigned detainee workers. Detainees do not use hazardous materials.
14.	The facility shall provide detainees with safety equipment that meets OSHA and other standards associated with the task performed.	Meets Standard	
15.	The facility administrator shall implement procedures for immediately and appropriately responding to on-the-job injuries, including immediate notification of ICE/ERO.	Meets Standard	

STANDARD 5.8. 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)

The voluntary work program offers detainees the opportunity to work and earn money. The voluntary work program operates in accordance with OSHA and NFPA codes and regulations. A detainee can work in only one work detail per day. The facility has a system that ensures that detainees receive the pay owed them prior to the detainee being released or transferred. Detainees can be removed from work assignments for cause. Detainees are permitted to appeal work assignment terminations.

ICE detainees can work within the constraints of their security level. Detainees receive appropriate training, as required, prior to starting their assignments. During the inspection 72 detainees were participating in the voluntary work program.

STANDARD 5.8. VOLUNTARY WORK PROGRAM - Reviewer Summary

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

Interviews with the programs manager, the major, the compliance administrator, the compliance manager, the training administrator, department supervisors and three ICE detainees; review of work contracts and handbook content; and observation of trust fund account postings revealed detainees are provided opportunities to work and earn money during their stay in a safe and supervised voluntary work program.

Overall Rating: Meets Standard

Reviewer Name (Printed) (b)(6):(b)(7)(C) Completion Date: 9/29/2016

Reviewer Signature (for printed form submission):

Section VI: JUSTICE

Detainee Handbook Grievance System Law Libraries and Legal Material Legal Rights Group Presentations

STANDARD 6.1. DETAINEE HANDBOOK (Key: AI)

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

	Components	Rating	Remarks (1000 Char Max)
1.	PRIORITY: Upon admission to a facility, as part of the orientation program, each detainee shall be provided a copy of the ICE National Detainee Handbook and that facility's local supplement to the handbook.	Meets Standard	As part of the intake/orientation process all detainees receive a copy of a local handbook and a copy of the National Detainee Handbook. Both handbooks are available in English and Spanish.
2.	The facility administrator shall ensure that the local supplement is translated into Spanish and, where practicable, any other language spoken by significant numbers of limited-English proficient detainees in that facility.	Meets Standard	
3.	Staff shall require each detainee to verify, by signature, receipt of the handbook and maintain that acknowledgement in the detainee's detention file.	Meets Standard	Detainees sign a receipt for the handbooks. A copy of this documentation is placed in the detainee's detention file.
4.	If a detainee cannot read or does not understand the language of the handbook, the facility administrator shall arrange for the orientation materials to be read to the detainee, provide the material using audio or video tapes in a language the detainee does understand, or provide a translator or interpreter within a reasonable amount of time.	Meets Standard	If a detainee has difficulty in understanding the content of a handbook and/or other orientation materials, the OIC ensures such information is presented to the detainee by a designated officer in a manner he/she can understand.
5.	The facility administrator shall provide a copy of the ICE National Detainee Handbook and the local supplement to every staff member who has contact with detainees, and cover their contents in initial and annual staff training.	Meets Standard	A copy of both handbooks is provided to all new employees as part of their orientation training. Content discussion is a component of initial and annual training sessions.
6.	The facility administrator shall appoint a committee to review the local supplement annually and recommend changes. While the handbook does not have to be immediately revised and reprinted to incorporate every change, the facility administrator shall establish procedures for immediately communicating such changes to staff and detainees.	Meets Standard	The OIC appoints a designated panel to review the accuracy of current handbook content and approve edits for subsequent printings. Changes to existing handbook text are communicated to staff by command personnel and to detainees through housing unit postings and handbook inserts.

STANDARD 6.1. DETAINEE HANDBOOK (Key: AI)

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

Components	Rating	Remarks (1000 Char Max)
Components PRIORITY: The detainee handbook (local supplement) address the following issues: The rules, regulations, policies and procedures with which every detainee must comply Detainee rights and responsibilities Procedures for requesting interpretive services for essential communication The facility's services and programs The facility's classification system Medical care The facility's zero tolerance policy for all forms of sexual abuse and assault The facility's rules of conduct and prohibited acts, the disciplinary scale, the sanctions imposed for violations of the rules, the disciplinary process, the procedure for appealing disciplinary findings, and detainees' rights in the disciplinary system (as required by Standard 3.1) Information about the facility's grievance system, including medical grievances (as required by Standard 6.2) The facility's policies on telephone access and on the monitoring of telephone calls, if telephone calls are monitored The facility's visitation rules and hours Rules and procedures governing access to the law library (as required by Standard 6.3) and to legal counsel Content and procedures of the facility's rules on legal rights group presentations, and the availability of legal orientation programs The facility's rules on correspondence and other mail (including information on correspondence procedures	Rating Meets Standard	All of the requirements items listed in this component are addressed in the local handbook and/or the National Detainee Handbook.
 orientation programs The facility's rules on correspondence and other mail 		
 The facility's policies and procedures related to personal property (as required by Standard 2.5) The facility's marriage request procedures 		
 Contact information for the ICE/ERO Field Office and the scheduled hours and days that ICE/ERO staff is available to be contacted by detainees at the facility Procedures to submit written questions, requests, or concerns to ICE/ERO staff, as well as the availability of assistance to prepare such requests. 		

STANDARD 6.1. 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 a local handbook during intake; these handbooks, available in English and Spanish, describe facility rules, programs, procedures, programs, activities, detainee rights and requirements that each detainee must comply with during their detention. The handbooks provide information regarding how to report any complaint of abuse and civil rights violations, along with violations of officer misconduct, directly to ICE/ERO or DHS OIG.

The handbooks are free from derogatory or insensitive statements about detainee religion or culture.

Interviews with the compliance administrator, the programs manager, the major and detainees; and review of handbook content and detention file documentation revealed detainees are provided written orientation materials, in a language they understand, that explains facility rules and the rights, programs, services and activities available to them during their stay.

Reviewer Name (Printed):(b)(6);(b)(7)(C)	Completion Date: 9/29/2016
(b)(b),(b)(r)(c)	completion bate: 3/23/2010

STANDARD 6.2. GRIEVANCE SYSTEM (Key: AJ)

This detention standard protects a detainee's rights and ensures they are treated fairly by providing a procedure for them to file both informal and formal grievances, which shall receive timely responses relating to any aspect of their detention, including medical care.

2000	Components	Rating	Remarks (1000 Char Max)
1.	 PRIORITY: Each facility shall have written policy and procedures for a detainee grievance system that: Establishes a procedure for any detainee to file a formal grievance; Establishes a procedure to track or log all ICE detainee grievances separately from other facility populations; Establishes reasonable time limits for: Processing, investigating, and responding to grievances; Convening a grievance committee (or actions of a single designated grievance officer) to review formal complaints; and Providing written responses to detainees who filed formal grievances, including the basis for the decision. Ensures a procedure in which all medical grievances are received by the administrative health authority within 24 hours or the next business day, with a response from medical staff within five working days, where practicable; Establishes a special procedure for time-sensitive, emergency grievances, including having a mechanism by which emergency medical grievances are screened as soon as practicable by appropriate personnel; Ensures each grievance receives appropriate review; Provides at least one independent appeal that excludes individuals previously involved in the decision making process for the same grievance; Includes guarantees against reprisal; and Ensures information, advice, and directions are provided to detainees in a language or manner they can understand, or that interpretation/translation services are utilized. 	Meets Standard	Policy and procedures address all of the requirements listed in this component.
2.	Detainees are informed about the facility's informal and formal grievance system in a language or manner they understand.	Meets Standard	The local handbook, a copy of which every detainee receives during intake, addresses the informal and formal grievance processes. All handbook content is explained to detainees in a language and/or manner they can understand.

STANDARD 6.2. GRIEVANCE SYSTEM (Key: AJ)

This detention standard protects a detainee's rights and ensures they are treated fairly by providing a procedure for them to file both informal and formal grievances, which shall receive timely responses relating to any aspect of their detention, including medical care.

	Components	Rating	Remarks (1000 Char Max)
3.	The grievance section of the handbook explains all steps in the grievance process.	Meets Standard	
4.	Written procedures allow for the informal oral presentation and resolution of grievances. A detainee is free to bypass or terminate the informal grievance process at any point and proceed directly to the formal grievance stage.	Meets Standard	Policy encourages staff members receiving an oral grievance to attempt resolution of the issue informally. Per policy, detainees are permitted to file a formal grievance if they cannot find resolution through an informal grievance.
5.	Detainees may submit a formal written grievance to a Grievance Officer at any time during, after, or in lieu of lodging an information complaint. To prepare a grievance, a detainee may obtain assistance from another detainee, the housing officer or other facility staff, family members, legal representatives, or non-governmental organizations.	Meets Standard	
6.	Formal written grievances regarding medical care shall be submitted directly to medical personnel designated to receive and respond to medical grievances at the facility.	Meets Standard	All formal grievances, placed in the housing unit grievance mailbox, are initially routed through the programs manager for logging. After logging, medical grievances identified by the programs manager's content perusal are directly delivered to medical personnel for their investigation and response. If a medical grievance is placed in the housing unit medical mailbox it will be picked up by medical personnel and investigated by medical personnel. Upon resolution of those grievances, necessary grievance information is forwarded to the programs manager for a belated logbook entry.
7.	Each facility shall implement written procedures for identifying and handling a time-sensitive emergency grievance that involves an immediate threat to a detainee's health, safety or welfare.	Meets Standard	Procedures for handling emergency grievances are addressed in policy.
8.	All staff will be trained to appropriately respond to emergency grievances in an expeditious matter.	Meets Standard	

STANDARD 6.2. GRIEVANCE SYSTEM (Key: AJ)

This detention standard protects a detainee's rights and ensures they are treated fairly by providing a procedure for them to file both informal and formal grievances, which shall receive timely responses relating to any aspect of their detention, including medical care.

	Components	Rating	Remarks (1000 Char Max)
9.	A designated Grievance Officer (GO) shall conduct the initial adjudication of a grievance. The detainee shall have the option to file an appeal with a Grievance Appeals Board (GAB) if dissatisfied with a GO decision, and with the facility administrator if dissatisfied with a GAB decision. At all stages, detainees shall receive a decision on the grievance within five days of receipt of the appeal by the reviewing entity.	Meets Standard	The programs manager serves as the grievance officer and processes grievances in accordance with established policy. Detainees may appeal any grievance decision to the appeals panel. Members of the appeals panel are prohibited from having any involvement with the original grievance. Detainees receive written copies of grievance decisions generated through the hearing process within prescribed timelines.
10.	Facilities shall allow any ICE/ERO detainee dissatisfied with the facility's response to a grievance, or fearing retaliation, to appeal to or communicate directly with ICE/ERO.	Meets Standard	
11.	PRIORITY: Each facility shall maintain a Detainee Grievance Log. The documentation shall include: the date the grievance was filed, the name of the detainee that filed the grievance, the nature of the grievance, the date the decision was provided to the detainee, and the outcome of the adjudication. A copy of the grievance disposition shall be placed in the detainee's detention file and provided to the detainee. Medical grievances are maintained in the detainee's medical file.	Meets Standard	The programs manager maintains the detainee grievance log which contains the information required in this component. Grievance resolutions are filed in the detainee's detention file except for medical grievances; they are filed in the detainee's medical file.
12.	PRIORITY: Upon receipt, facility staff must forward all detainee grievances containing allegations of staff misconduct to a supervisor or higher-level official in the chain of command. While such grievances are to be processed through the facility's established grievance system, CDFs and IGSA facilities must also forward a copy of any grievances alleging staff misconduct to ICE/ERO in a timely manner.	Meets Standard	Grievances received that allege staff misconduct are logged by the programs manager, a supervisory position, then directly delivered to ICE. The grievance is handled through the local grievance system with ICE kept informed during all stages of the investigation.
13.	Staff shall not harass, discipline, punish, or otherwise retaliate against a detainee who files a complaint or grievance or who contacts the Inspector General. Immediately following any indication or allegation of retaliation, the facility and ICE/ERO shall conduct an investigation of alleged acts of retaliation in a timely manner, and take all steps necessary to remedy any retaliation determined to have occurred.	Meets Standard	

STANDARD 6.2. GRIEVANCE SYSTEM – 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 an independent appeal that excludes individuals previously involved in the decision making process for the initial grievance. The OIC is the final arbitrator of all grievances in the facility.

Review of policy and grievance log entries; and interviews with detainees and the programs manager revealed an established program ensures detainees have ability to file grievances and receive timely responses to those concerns.

Reviewer Name (Printed)(b)(6);(b)(7)(C)	Completion Date: 9/29/2016

10.1	STANDARD 6.3. LAW LIBRARIES		
Thi	s detention standard protects detainees' rights by ensuring th		7
	Components	Rating	Remarks (1000 Char Max)
1.	Each facility shall provide a properly equipped law library in a designated, well-lit room that is reasonably isolated from noisy areas and large enough to provide reasonable access to all detainees who request its use. It shall be furnished with a sufficient number of tables and chairs to facilitate detainees' legal research and writing.	Meets Standard	The facility's law library has sufficient space for detainee use. It has an adequate number of computers, has equipped workstations, is well lit and is a private quiet room separate from other noisy areas.
2.	PRIORITY: Each detainee shall be permitted to use the law library for a minimum of five hours per week and may not be forced to forego his or her minimum recreation time to use the law library.	Meets Standard	The law library is available for detainee use from 9:00 a.m. until 9:00 p.m. seven days a week including holidays. Detainees may use the library a minimum of five hours per week, space and fair access to others permitting. Detainees are not required to forego recreation time to use the law library.
3.	PRIORITY: The law library shall provide an adequate number of computers with printers, photocopiers and sufficient writing implements, paper, and related office supplies to enable detainees to prepare documents for legal proceedings, special correspondence, or legal mail. Typewriters, with replacement ribbons, carbon paper, and correction tape may be temporarily substituted for computers and printers only until such time as the facility can provide computers and printers, and if approved by ICE/ERO. Each facility administrator shall designate an employee to inspect the equipment at least daily and ensure it is in good working order and to stock sufficient supplies.	Meets Standard	There are eight computer work stations in the law library. Each computer is equipped with a current and functioning LexisNexis application which is defaulted to a printer. There are ample supplies of writing materials in the work stations. An officer supervises the operations of the law library and inspects its equipment daily, ensuring that the equipment is functioning properly and there are adequate supplies.
4.	Detainees are provided with the means to save legal work in a private electronic format for future use.	Meets Standard	Detainees are issued flash drives free of charge to save their legal work.
5.	The facility subscribes to updating services where applicable and legal materials requiring updates are current.	Meets Standard	
6.	Each facility administrator shall designate a facility law library coordinator to be responsible for updating legal materials, inspecting them weekly, maintaining them in good condition and replacing them promptly as needed.	Meets Standard	

	STANDARD 6.3. LAW LIBRARIES AND LEGAL MATERIALS (Key: AK)			
This detention s	tandard protects detainees' rights by ensuring t			
	Components	Rating	Remarks (1000 Char Max)	
Appendix 6 Detention I facility by I maintaining 6.3.A, a faci on CD ROM are not loa maintained CD-ROM of	The law library contains all materials listed in 5.3.A: "List of Legal Reference Materials for Facilities" and any materials provided to the CE/ERO. As an alternative to obtaining and 3 the paper-based publications in Appendix lity may substitute the Lexis/Nexis publications. Any materials listed in Appendix 6.3.A which ided onto the Lexis/Nexis CD ROM must be in paper form. If materials are provided on are in another electronic format, technical shall be provided.	Meets Standard	The law library contains all the written materials listed in the component. Each of the library's computers is also equipped with a current, September 2016, functioning LexisNexis application.	
the date ar legal mate	ate list of the law library's holdings, including and content of the most recent updates of all rials available to detainees in print and nedia, are posted in the law library.	Meets Standard		
Field Office	administrator must certify to the respective Director – and the Field Office Director must t the facility provides detainees sufficient:	Meets Standard		
	ole computers that are capable of running the lexis CDROM,			
Operate	ple printers,			
• Supplie	es for both, and			
Instruc system	tions for detainees on the basic use of the .			
or unpublisl library. If th an English	rsons and organizations may submit published hed legal material for inclusion in a facility's law he material is in a language other than English, translation must be provided. Outside d material is forwarded and reviewed by the ICE fusion.	Meets Standard	All materials submitted by outside persons and/or organizations for inclusion in the law library must be approved by the OIC.	
law library library coor	who require legal material not available in the may make a written request to the facility law dinator, who shall inform the Field Office of the soon as possible.	Meets Standard		
cost to the special corr and neces: detainee. D grievances, disciplinary documents	shall ensure that detainees can obtain at no detainee photocopies of legal material and espondence when such copies are reasonable sary for a legal proceeding involving the etainees shall also be permitted to photocopy letters regarding conditions of confinement, decisions, special needs forms, or other that are relevant to the presentation of any nigration proceeding.	Meets Standard	Photocopies of legal materials, legal work and other documents as described in the component are provided upon request, free of charge.	

STANDARD 6.3. LAW LIBRARIES This detention standard protects detainees' rights by ensuring the		
Components	Rating	Remarks (1000 Char Max)
13. Facility staff provide assistance to detainees in accessing legal materials where needed (e.g. orientation to written or electronic media and materials; assistance in accessing related programs, forms, and materials).	Meets Standard	
14. The facility permits detainees to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents.	Meets Standard	Policy and the local handbook, note that detainees may assist other detainees, voluntarily and free of charge, in researching and preparing legal work.
15. Unrepresented illiterate, limited-English proficient, or disabled detainees who wish to pursue a legal claim related to their immigration proceedings or detention, and who indicate difficulty with the legal materials, must be provided assistance beyond access to a set of English-language law books. To the extent practicable and consistent with the good order and security of the facility, efforts will be made to assist all illiterate, limited-English proficient, and disabled persons in using the law library.	Meets Standard	
16. The facility shall permit a detainee to retain all personal legal material upon admittance to the general population or Administrative Segregation or Disciplinary Segregation units, unless this would create a safety, security or sanitation hazard. Stored legal materials are accessible within 24 hours of a written request. Detainees with scheduled immigration hearings within 72 hours are provided access to their personal legal materials to the extent practicable.	Meets Standard	
17. Detainees housed in Administrative Segregation and Disciplinary Segregation units have the same law library access as the general population, unless compelling security concerns require limitations.	Meets Standard	Detainees in administrative or disciplinary segregation have similar access to law library materials as the general population unless compelling concerns require limitations.
 Denial of access to the law library must be: Supported by compelling security concerns, Be for the shortest period required for security, and Be fully documented in the Special Management Unit housing logbook. Documented, with reasons listed, in the detention file. The facility shall notify the Field Office every time access is denied and send a copy of the proper documentation. 	Meets Standard	Policy addresses all aspects of this component.

	STANDARD 6.3. LAW LIBRARIES	AND LEGAL MATERI	ALS (Key: AK)	
This detention standard protects detainees' rights by ensuring their access to courts, counsel, and comprehensive legal materials.				
Components		Rating	Remarks (1000 Char Max)	
19.	The facility shall provide assistance to any unrepresented detainee who requests a notary public, certified mail, or other such services to pursue a legal matter, if the detainee is unable do so through a family member, friend, or community organization.	Meets Standard		
20.	Staff shall not permit a detainee to be subjected to reprisals, retaliation or penalties because of a decision to seek judicial or administrative relief or investigation of any matter.	Meets Standard	The provisions of this component are addressed in written policy.	

STANDARD 6.3. LAW LIBRARIES AND 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.

ICE determines acceptance of outside published materials into the law library based on usefulness of the materials and space limitations, and notifies the submitter if materials are declined. Outdated legal materials are removed from the law library by the assigned library staff. Damaged or stolen materials are replaced as necessary. Outside persons and organizations are permitted to submit legal materials for inclusion in the law library which are in a language other than English.

Law library officers monitor detainees using the law library as well as ensure the equipment is working properly and supplies are adequate. Printers are available in each law library location. A library officer will assist detainees in obtaining photocopies of a legal document. These requests are denied only if the document poses a security risk, threat to orderly operations, violation of any law or regulation and/or the request is clearly abusive or excessive.

Requests for notary services are submitted to a law library officer. The mailroom supervisor processes certified mail and other such services to pursue a legal matter. All detainees are provided free envelopes and stamps for domestic mail related to their legal matters and for correspondence to a legal representative, a potential legal representative or any court. Requests to send international mail are reviewed by the mailroom supervisor and approved on a case-by-case basis. International mail to consulates or for other legal purposes is routinely approved.

The local handbook and postings in the housing units provide law library information, including rules, procedures, hours, and information on how to request additional time in the law library, how to access legal materials, how to request materials not included in the library, and how to report missing or damaged material.

Evaluation of the standard included: reviewing policy and the local handbook, visiting the law library and examining its equipment and detainee use logs, and interviewing detainees and staff.

Overall Rating: Meets Standard			
Reviewer Name (Printed): (b)(6);(b)(7)(C)	Completion Date: 09/29/2016		
	<u>.</u>		
Reviewer Signature (for printed form submission):			

STANDARD 6.4. LEGAL RIGHTS GROUP PRESENTATIONS (Key: AL)

This detention standard protects detainees' rights by providing all detainees access to information presented by authorized persons and organizations for the purpose of informing them of U.S. immigration law and procedures.

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.	If upon notification by the Field Office Director that a group presentation on legal rights has been approved, the facility administrator shall telephone the listed contact person to arrange a mutually acceptable date and time for the presentation according to the standard.	N/A	
2.	PRIORITY: At least 48 hours before a scheduled presentation, facility staff shall in each housing unit prominently display the informational posters provided by the presenter, and provide a sign-up sheet for detainees who plan to attend. Detainees that fail to sign up shall not be deprived of the opportunity to attend a presentation for that reason. The facility shall ensure that presentations are open to all detainees, regardless of the presenter's intended audience, except when a particular detainee's attendance would pose a security risk. Detainees in segregation are notified in advance of a presentation and provided the opportunity to attend. If the attendance of a detainee in segregation would pose a security risk, facility staff shall make arrangements with the presenters to offer a separate presentation and individual consultation to the detainee.	N/A	
3.	One or more legal assistants may help with a presentation.	N/A	
4.	The presenters ordinarily will have at least one hour for the presentation and additional time for a question-and-answer session. ICE/ERO and/or facility staff may observe and monitor presentations, assisted by interpreters as necessary. ICE/ERO and facility personnel will not interrupt a presentation, except for security purposes or if the allotted time has expired.	N/A	
5.	If approved in advance by ICE/ERO, presenters may distribute brief written materials that inform detainees of U.S. immigration law and procedure. The request for approval of a presentation must list any published or unpublished materials proposed for distribution, and the requestor must provide a copy of any unpublished material, with a cover page.	N/A	
6.	Following a group presentation, the facility shall permit presenters to meet with small groups of detainees to discuss their cases as long as meetings do not interfere with facility security and orderly operations.	N/A	

STANDARD 6.4. LEGAL RIGHTS GROUP PRESENTATIONS (Key: AL)

This detention standard protects detainees' rights by providing all detainees access to information presented by authorized persons and organizations for the purpose of informing them of U.S. immigration law and procedures.

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)
7.	The facility may discontinue or temporarily suspend group presentations by any or all presenters, if they:		
	 Pose an unreasonable security risk; Interfere substantially with the facility's orderly operation; 	N/A	
	 Deviate materially from approved presentation materials or procedures; or if 		
	The facility is operating under emergency conditions.		
8.	PRIORITY: If ICE/ERO approves an electronic presentation submitted by qualified individuals or organizations, the facility shall provide regularly scheduled and announced opportunities for detainees in the general population to view or listen to the electronic presentation(s). Each facility shall present only ICE/ERO-approved	N/A	
	electronic presentations on detainee legal rights.		
9.	The facility shall also provide detainees in administrative or disciplinary segregation for more than one week with at least one opportunity to view pre-approved presentation(s) during their placement in segregation, unless precluded by security concerns regarding a particular detainee.	N/A	
10.	The facility shall maintain electronically-formatted presentations and equipment in good condition.	N/A	

(Use following format for dates: mm/dd/yyyy) Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

STANDARD 6.4. LEGAL RIGHTS GROUP PRESENTATIONS - Reviewer Summary

There have been no legal rights group presentations conducted within the past twelve months. There is a contracted legal organization that offers legal assistance to individual detainees on a case-by-case basis.

Overall Rating: N/A	
Reviewer Name (Printed): (b)(6);(b)(7)(C)	Completion Date: 9/29/2016
Reviewer Signature (for printed form submission):	

Section VII: ADMINISTRATION & MANAGEMENT

Detention Files
News Media Interviews and Tours
Staff Training
Transfer of Detainees

STANDARD 7.1. DETENTION FILES (Key: AM)

This detention standard contributes to efficient and responsible facility management by maintaining, for each detainee booked into a facility for more than 24 hours, a file of all significant information about that detainee. This standard also addresses security for electronic files.

	Components	Rating	Remarks (1000 Char Max)
1.	For every new arrival whose stay will exceed 24 hours, a designated officer shall create a detainee detention file.	Meets Standard	
2.	The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	Meets Standard	Documents such as I-203 and ICE classification work sheets generated during the admission process were examined in active and inactive files.
3.	The detention files are located and maintained in a secured area.	Meets Standard	
4.	Each detention file remains active during the detainee's stay. When the detainee is released from the facility, staff add 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	Reviewed inactive files contain signed detention file checklists noting that the file contains completed release documents such as signed receipts for the return of personal property and valuables.
5.	At a minimum, a logbook entry recording the file's removal from the cabinet shall include: The detainee's name and A-File number; Date and time removed; Reason for removal; Signature of person removing the file, including title and department; Date and time returned; and Signature of person returning the file.	Meets Standard	The detention file sign-out log contains all of the information required by this component.
6.	Electronic record-keeping systems and data are protected from unauthorized access.	Meets Standard	All electronic record-keeping systems and data are password protected to prevent unauthorized access.

STANDARD 7.1. DETENTION FILES - Reviewer Summary

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

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

A detention file is created for each newly admitted detainee during the intake process. The files contain the required documentation. Detention files are stored in locked cabinets in a secure area of the facility.

Evaluation of the standard included review of twenty active and four inactive detention files, examining the file room and the cabinet where the files are stored, observing the classification officer preparing files for two newly admitted detainees, and interviewing ICE and facility staff.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6);(b)(7)(C) Completion Date: 9/29/2016

STANDARD 7.1. DETENTION FILES – Reviewer Summary	
(Use following format for dates: mm/dd/yyyy)	
Reviewer Signature (for printed form submission):	

STANDARD 7.2. INTERVIEWS AND TOURS (Key: AN)

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

	Components	Rating	Remarks (1000 Char Max)
1.	Interviews by reporters, other news media representatives, non-governmental organizations, academics, and parties not included in other visitation categories in the Detention Standard on Visitation shall be permitted access to facilities only by special arrangement and with prior approval of the respective ICE/ERO Field Office Director.	Meets Standard	Interview requests are processed by the local field office director and, if approved, coordinated with the OIC.
2.	News media organizations shall abide by the policies and procedures of the facility being visited or toured. Media representatives must obtain advance permission from the facility administrator and FOD before taking photographs in or of any facility. The facility administrator shall advise both media representatives and detainees that use of any detainee's name, identifiable photo, or recorded voice requires his or her prior permission.	Meets Standard	
3.	Media representatives shall obtain a signed release from the detainee before photographing or recording his or her voice. The original of the form is to be filed in the detainee's A-file with a copy in the facility's Detention File.	Meets Standard	A detainee must sign a release for any photographing or voice recording. Copies of the release are placed in the detainee's A-file and detention file.
4.	Detainees should not be pressured or coerced out of granting a personal interview request, nor should the facility in any way retaliate against a detainee for lawful communication with a member of the media or a member of the public.	Meets Standard	Policy provides that the facility will adhere to the provisions of this component.
5.	A press pool may be established when the Public Affairs Officer, Field Office Director and facility administrator determine that the volume of interview requests warrants such action.	Meets Standard	The OIC stated that an ICE information officer at the local area office is responsible for establishing press pools.
6.	If a tour or visit by a non-governmental organization or other stakeholders is approved by ICE/ERO, the facility shall post both the ICE sign-up sheet and the ICE stakeholder tour/visit notification flyer at least 48 hours in advance of the tour or visitation in appropriate locations (e.g. message boards, housing areas). Facility staff permit NGO or stakeholder access to pre-identified detainees and/or detainees who have signed up in advance to speak with the stakeholder.	Meets Standard	

STANDARD 7.2. INTERVIEWS AND TOURS - Reviewer Summary

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

STANDARD 7.2. INTERVIEWS AND TOURS - Reviewer Summary

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

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

The privacy of detainees and staff, including the right of a detainee not be photographed or recorded, is protected. Media representatives, media visitors, tours, personal interviews, press pools and visits by NGOs are all coordinated and approved by ICE officials. Access is not denied based on the political or editorial viewpoint of the requestor. Prior to the tour, the OIC or designee explains the terms and guidelines of the tour to the visitors.

Evaluation of the standard included a review of policy and procedures, and interviews with the OIC and facility staff.

Overall Rating: Meets Standard	
Reviewer Name (Printed): (b)(6)·(b)(7)(C)	Completion Date: 9/29/2016

Reviewer Signature (for printed form submission):

STANDARD 7.3. STAFF TRAINING (Key: AO)

This detention standard ensures that facility staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing training.

Lna	t they receive initial and ongoing training.		
	Components	Rating	Remarks (1000 Char Max)
1.	The facility conducts appropriate orientation, initial training, and annual training for all staff, contractors, and volunteers with appropriate assessment measures.	Meets Standard	
2.	The amount and content of training is consistent with the duties and function of each individual and the degree of direct supervision that individual receives.	Meets Standard	Personnel are provided training which is consistent with the duties and job functions of their assignment. The amount and type of training an individual receives is synonymous with the degree of direct supervision the individual will receive.
3.	At least one qualified individual with specialized training for the position coordinates and oversees the staff development and training program. At a minimum, training personnel complete a 40-hour training-for-trainers course.	Meets Standard	The training program is under the direction of an appointed training administrator. She has the rank of lieutenant and has credentialed experience in the training arena. She designs, coordinates and oversees staff development and training programs for all facility personnel. Trainers have completed a forty- hour training-for-trainers course.
4.	Training is governed and guided by a training plan that is reviewed and approved annually by the facility administrator.	Meets Standard	Training is governed and guided by an annual training that has been approved by the OIC.
5.	Training shall be conducted by trainers certified in the subject matter.	Meets Standard	Trainers are subject matter experts credentialed in the field of their instruction.
6.	Each trainee shall be required to pass a written or practical examination to ensure the subject matter has been mastered.	Meets Standard	A post training competency level of seventy percent is a prerequisite for successful completion of course material.
7.	The formal training received by each trainee shall be fully documented in permanent training records.	Meets Standard	

STANDARD 7.3. STAFF TRAINING (Key: AO)

This detention standard ensures that facility staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing training.

tnat t	ney receive initial and ongoing training.	i neme	
Components		Rating	Remarks (1000 Char Max)
a s s o o o o o o o o o o o o o o o o o	ach new employee, contractor, and volunteer is provided in orientation prior to assuming duties. While tailored becifically for staff, contractors, and volunteers, the rientation programs include, at a minimum: ICE/ERO detention standards Cultural and language issues, including requirements related to limited English proficient detainees Requirements related to detainees with disabilities and special-needs detainees Code of ethics Drug-free workplace Emergency plans and procedures Signs of suicide risk, suicide precautions, prevention, and intervention Use of force Key and lock control Tour of the facility Staff rules and regulations Sexual abuse/sexual misconduct awareness and reporting Hostage situations and staff conduct if taken hostage	Meets Standard	New employees, contractors and volunteers are provided training which addresses all of the elements listed in this component.
C	mployees and contractors who have minimal detainee ontact and no significant responsibilities involving etainees receive initial and annual training that includes: ICE/ERO detention standards update Cultural and language issues including requirements related to limited English proficient detainees Requirements related to detainees with disabilities and special needs detainees Code of ethics Staff rules and regulations Key and lock control Signs of suicide risk, suicide precautions, prevention, and intervention Drug-free workplace Health-related emergencies Emergency plans and procedures Sexual abuse and sexual misconduct awareness Hostage situations and staff conduct if taken hostage	Meets Standard	Employees and contractors that have minimal contact with detainees and no significant responsibilities involving detainees receive initial and annual training that includes all of the topics listed in this component.

STANDARD 7.3. STAFF TRAINING (Key: AO)

This detention standard ensures that facility staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing training.

STANDARD 7.3. STAFF TRAINING (Key: AO)

This detention standard ensures that facility staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing training.

Components		Rating	Remarks (1000 Char Max)
11.	Full-time health care employees receive, in addition to the training areas above, instruction in the following: Medical grievance procedures and protocols Emergency medical procedures Occupational exposure Personal protective equipment Bio-hazardous waste disposal Overview of the detention operations.	Meets Standard	
	Security personnel will receive, in addition to the training areas above, training on the following subjects, at a minimum: Searches of detainees, housing units, and work areas Self-defense techniques Use-of-force regulations and tactics	Meets Standard	Security personnel receive training on all of the requirements listed in this component, in addition to other required training curriculums.
13.	Situation Response Teams (SRTs) receive: • Specialized training before undertaking their assignments.	Meets Standard	
14.	PRIORITY: Personnel authorized to use firearms receive training that covers their use, safety, and care and constraints on their use before being assigned to a post involving their possible use. All personnel authorized to use firearms demonstrate competency in their use at least annually.	Meets Standard	All security personnel authorized to use firearms are subject to firearm training and qualification. Training addresses the use of the firearms, safety and care of the firearms and constraint on the use of firearms. All of these correctional personnel are required to qualify with a firearm quarterly.
15.	PRIORITY: Personnel authorized to use chemical agents receive training in the use of chemical agents and in the treatment of individuals exposed to a chemical agent before being assigned to a post involving their possible use.	Meets Standard	All security personnel authorized to use chemical agents receive training in their use and in the treatment of individuals exposed to chemical agents. This training is completed before the officer can be assigned to a post where a chemical agent might be used.

STANDARD 7.3. STAFF TRAINING - Reviewer Summary

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

STANDARD 7.3. STAFF TRAINING - Reviewer Summary

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

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

Interviews with the training administrator, the major, the CERT commander, health care personnel and the compliance administrator; and a review of policy, the annual training plan curricula and training documentation revealed an approved training program provides initial, annual and on-the-job training for employees, staff, trainers, contractors and volunteers.

Overall Rating: Meets Standard

Reviewer Name (Printed): (b)(6);(b)(7)(C) Completion Date: 9/29/2016

Reviewer Signature (for printed form submission):

STANDARD 7.4. DETAINEE TRANSFERS (Key: AP)

This detention standard is written to ensure that transfers of detainees from one facility to another are accomplished in a manner that ensures the safety and security of the staff, detainees, and the public; and that the process relating to transfers of detainees is carried out professionally and responsibly with respect to notifications, detainee records, and the protection of detainee funds and property.

	Components	Rating	Remarks (1000 Char Max)	
1.	 The sending facility ensures that: Specific plans and time schedules are not discussed with the detainee prior to transfer. The detainee is notified of the transfer immediately prior to departing the facility, in a language or manner he/she can understand. The detainee is not permitted to make or receive any phone calls, or have contact with any detainee in the general population, until he/she reaches the destination facility. 	Meets Standard	Policy addresses all requirements of this component.	
2.	 The sending facility shall ensure that the detainee acknowledges at the time of transfer, in writing, that: He or she has received the transfer destination information; It is his or her responsibility to notify family members if so desired, upon admission into the receiving facility; and He or she may place a domestic phone call, at no expense to the detainee, upon admission into the receiving facility. 	Meets Standard	The inspector reviewed ICE personnel transfer documents that were signed by detainees. The documents included the information required in this component.	
3.	A detainee may not be transferred from any facility without the appropriate Form I-203 or I-216 or equivalent authorizing the detail.	Meets Standard	Per policy detainee transfers will be authorized by an ICE I-203 form. Completed Form I-203s were observed in all reviewed archived detention files.	
4.	The facility health care provider shall be notified sufficiently in advance of the transfer that medical staff may determine and provide for any associated medical needs.	Meets Standard		

STANDARD 7.4. DETAINEE TRANSFERS (Key: AP)

This detention standard is written to ensure that transfers of detainees from one facility to another are accomplished in a manner that ensures the safety and security of the staff, detainees, and the public; and that the process relating to transfers of detainees is carried out professionally and responsibly with respect to notifications, detainee records, and the protection of detainee funds and property.

	Components	Rating	Remarks (1000 Char Max)
5.	 When a detainee is transferred within the ICE Health Service Corps (IHSC) system, ICE/ERO shall ensure that: Form USM-553, or equivalent Medical Transfer Summary, and a copy of the detainee's full medical record accompanies the detainee; and The full medical record is placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL." When a detainee is transferred to an IGSA detention facility, the sending facility shall ensure that the Transfer Summary accompanies the detainee. A copy of the full medical record must accompany each detainee during transfer unless extenuating circumstances make this impossible, in which case the full medical record will follow as soon as practicable. 	Meets Standard	A copy of the full medical record accompanies all detainee transfers. Each record is placed in a sealed envelope with the detainee's name and A-number and marked medical confidential.
6.	The sending facility's medical staff shall prepare a Transfer Summary that must accompany the transferee. Either the USM 553 Form or a facility-specific form may be used, provided it shows: TB clearance, including PPD with the test dates, and Chest x-ray results if the detainee has received a positive PPD reading; Current mental and physical health status, including all significant health issues; Current medications, with specific instructions for medications that must be administered en route; Any pending medical or mental health evaluations, tests, procedures, or treatments for a serious medical condition scheduled for the detainee at the sending facility; and The name and contact information of the transferring medical official.	Meets Standard	The transfer summary prepared by the facility's medical staff includes all of the elements listed in the component.
7.	Transportation staff may not transport a detainee without the required Transfer Summary, which is essential for detainee safety while in transit.	Meets Standard	A transfer summary is completed for each detainee.
8.	Upon receiving notification that a detainee is to be transferred, appropriate medical staff at the sending facility shall notify the facility administrator of any medical/psychiatric alerts or holds that have been assigned to the detainee, as reflected in the detainee's medical records. The facility administrator shall notify ICE/ERO of any medical/psychiatric alerts or holds placed on a detainee that is to be transferred.	Meets Standard	

STANDARD 7.4. DETAINEE TRANSFERS (Key: AP)

This detention standard is written to ensure that transfers of detainees from one facility to another are accomplished in a manner that ensures the safety and security of the staff, detainees, and the public; and that the process relating to transfers of detainees is carried out professionally and responsibly with respect to notifications, detainee records, and the protection of detainee funds and property.

Components	Rating	Remarks (1000 Char Max)	
9. If a detainee has been placed in a medical hold status, the detainee must be evaluated and cleared by a licensed independent practitioner prior to transfer. If the evaluation indicates that transfer is medically appropriate but that health concerns associated with the transfer remain, medical staff at the sending facility shall notify ICE and shall provide ICE requested information and other assistance, to the extent practicable, to enable ICE to make appropriate transfer determinations.	Meets Standard		
 10. PRIORITY: Prior to transfer, medical personnel shall provide the transporting officers instructions and, if applicable, medication(s) for the detainee's care in transit. Detainees shall be transferred with, at a minimum, 7 days' worth of prescription medications (TB medications, a 15 day supply) to ensure continuity of care throughout the transfer and subsequent intake process. Medications shall be: Placed in a property envelope with the detainee's name and A-number, and appropriate administration instructions, on it, Accompany the transfer, and If unused, be turned over to the receiving medical personnel. 	Meets Standard	The facility's medical staff provide transport officers with written instructions on the care of detainees being transferred. Detainees are transferred with a minimum seven-day supply of any prescription medications and/or, if applicable, a minimum fifteen-day supply of TB medications. Medications are placed in a properly marked property envelope which accompanies the transfer. Officers are instructed to turn over unused medications to the receiving medical personnel.	
11. Before transfer, the sending facility shall return all funds and small valuables to the detainee and close out all forms G-589 (or local IGSA funds and valuables receipts) in accordance with the Detention Standard on Funds and Personal Property.	Meets Standard		
12. After admission into the receiving facility or Field Office, al detainees must be given the documented opportunity to make one domestic three-minute phone call at no cost to the detainee. The responsible processing supervisor or his/her designee shall ensure that the detainee is promptly informed that he/she may notify interested persons of the transfer.	Meets Standard	Policy and practice address the requirements of this component.	

STANDARD 7.4. DETAINEE TRANSFERS - Reviewer Summary

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

STANDARD 7.4. DETAINEE TRANSFERS - Reviewer Summary

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

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

Transfers are approved and processed 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.

To evaluate this standard, policy, post orders and procedures were reviewed; ICE detainee transfer forms and detainee files were examined; and ICE and facility personnel were interviewed.

Overall Rating: Meets Standard	N5
Reviewer Name (Printed): (b)(6);(b)(7)(C)	Completion Date: 9/29/2016
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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.

The check will take several minutes to complete, during which the screen will flash.

Review Document	Issue Summary	Ratings check o	omplete.		
Check Document:	Run Check	Error(s) Found:	0	Items Not Rated:	0
Errors:			3.	8	
No Errors Found					
Items Not Rated:					
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