

**Condition of Confinement Review Worksheet**

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

**This Form to be used for Inspections of all IGSA Facilities Used Under 72 Hours**



**Field Office Detention Review Worksheet**

<input checked="" type="checkbox"/>	Local Jail - IGSA
<input type="checkbox"/>	State Facility - IGSA
<b>Name</b> Benton County Detention Center	
<b>Address (Street and Name)</b> 1300 SW 14 <sup>th</sup> Street	
<b>City, State and Zip Code</b> Bentonville, Ar. 72712	
<b>County</b> Benton	
<b>Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)</b> (b)(6), (b)(7)c Capiton	
<b>Name and title of Reviewer-In-Charge</b> (b)(6), (b)(7)c	
<b>Date[s] of Review</b> 02/28/06	
<b>Type of Review</b> <input type="checkbox"/> Headquarters <input checked="" type="checkbox"/> Operational <input type="checkbox"/> Special Assessment <input type="checkbox"/> Other	

### ADMISSION AND RELEASE

**Policy:** All detainees will be admitted and released in a manner that ensures their health, safety, and welfare. The admissions procedure will, among other things include: medical screening; a file-based assessment and classification process; a body search; and a search of personal belongings, which will be inventoried, documented, and safeguarded as necessary.

Components	Yes	No	NA	Remarks
In-processing includes orientation information.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Medical screenings are performed by a medical staff <u>or</u> persons who have received specialized training for the purpose of conducting an initial health screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All new arrivals are searched in accordance with the "Detainee Search" standard. An officer of the same sex as the detainee conducts the search and the search is conducted in an area that affords as much privacy as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The "Contraband" standard governs all personal property searches. IGSA's use or have a similar contraband standard. Staff prepare a complete inventory of each detainee's possessions. The detainee receives a copy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Staff completes Form I-387 or similar form for CDFs and IGSA's for every lost or missing property claim. IGSA facilities forward all I-387 claims to ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All releases are coordinated with the ICE office of jurisdiction.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ICE Staff enter all information on detainees admitted, released, or transferred into the Deportable Alien Control System (DACS).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

**Acceptable**       **Deficient**       **At-Risk**       **Repeat Finding**

### CLASSIFICATION SYSTEM

**Policy:** All facilities will develop and implement a system according to which ICE detainees are classified. The classification system will ensure that each detainee is placed in the appropriate category, physically separated from detainees in other categories

Components	Yes	No	NA	Remarks
The facility has a system for separating criminal and non-criminal ICE detainees. Violent offenders are separated from non-violent offenders.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Housing assignments are based on threat level-level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

**Acceptable**       **Deficient**       **At-Risk**       **Repeat Finding**

Reviewer Signature: \_\_\_\_\_

Date: 2/28/06

### DETAINEE HANDBOOK

**Policy:** Every OIC will develop a site-specific detainee handbook to serve as an overview of, and guide to, the detention policies, rules, and procedures in effect at the facility. The handbook will also describe the services, programs, and opportunities available through various sources, including the facility, ICE, private organizations, etc. Every detainee will receive a copy of this handbook upon admission to the facility.

Components	Yes	No	NA	Remarks
The detainee handbook is written in English and translated into Spanish or into the next most-prevalent Language(s).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility does not have a hand book but has a list of rules and regulations.
The detainee handbook states in clear language basic detainee responsibilities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	It is written in English, and Spanish, and
The handbook identifies: <ul style="list-style-type: none"> <li>• Initial issue of clothing and bedding and personal hygiene items.</li> <li>• when a medical examination will be conducted.</li> <li>• the telephone policy, debit card procedures, direct and frees calls; Locations of telephones; Policy when telephone demand is high; Policy and procedures for emergency phone calls, and the Detainee Message System.</li> <li>• facility search procedures and contraband policy.</li> <li>• facility visiting hours and schedule and visiting rules and regulations</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each detainee must read and sign that he has read and understands the rules and regulations of the facility.
The handbook describes the detainee disciplinary policy and procedures: <p>Including:</p> <ul style="list-style-type: none"> <li>• Prohibited acts and severity scale sanctions.</li> <li>• Time limits in the Disciplinary Process.</li> <li>• Summary of Disciplinary Process.</li> <li>• The detainee handbook describes the sick call procedures for general population and segregation.</li> <li>• The handbook specifies the rights and responsibilities of all detainees.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

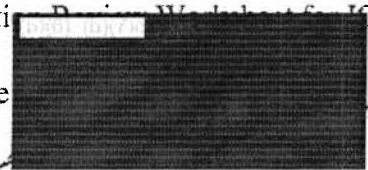
**Acceptable**
         
  **Deficient**
         
  **At-Risk**
         
  **Repeat Finding**

### FOOD SERVICE

**Policy:** Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.

Components	Yes	No	NA	Remarks
The food service program is supervised by trained staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Reviewer Signature \_\_\_\_\_



Date: 2/28/06

**FOOD SERVICE**

**Policy:** Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.

Components	Yes	No	NA	Remarks
All knives not in a secure cutting room are physically secured to the workstation and staff directly supervise detainees using knives at these workstations. Staff monitor the condition of knives and dining utensils	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees are served at least three meals daily. No more than 14 hours elapse between the last meal served and the first meal of the following day.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The food service program addresses medical diets.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Satellite-feeding programs follow guidelines for proper sanitation.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Hot and cold foods are maintained at the prescribed, "safe" temperature(s) after two hours. (140 degrees for hot - 40 degrees for cold)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All meals provided in nutritionally adequate portions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Food is not used to punish or reward detainees based upon behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Equipment is inspected daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Storage areas are locked.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

**Acceptable**       **Deficient**       **At-Risk**       **Repeat Deficiency**

**FUNDS AND PERSONAL PROPERTY**

**Policy:** All facilities will implement procedures to control and safeguard detainees' personal property. Procedures will provide for the secure storage of funds, valuables, baggage and other personal property; the documentation and receipting of surrendered property; and the initial and regularly scheduled inventorying of all funds, valuables, and other property.

**Standard NA: Check this box if all ICE detainee Funds, Valuables and Property are handled only by the ICE Field Office or Sub-Office in control of the detainee case.**

Components	Yes	No	NA	Remarks
Detainee funds and valuables are properly separated and stored away. Detainee funds and valuables are accessible to designated supervisor(s) only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Funds are kept behind two locks for security

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**FUNDS AND PERSONAL PROPERTY**

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**Standard NA:** Check this box if all ICE detainee Funds, Valuables and Property are handled only by the ICE Field Office or Sub-Office in control of the detainee case.

Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Staff forwards an arriving detainee's medicine to the medical staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Staff searches arriving detainees and their personal property for contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
There is a written policy for returning forgotten property to detainees and staff follows procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Property discrepancies are immediately reported to the CDEO or Chief of Security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

**Acceptable**       **Deficient**       **At-Risk**       **Repeat Finding**

**ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS**

**Policy:** ICE requires that all facilities housing ICE detainees provide clean clothing, bedding, linens and towels to every ICE detainee upon arrival. Further, facilities shall provide ICE detainees with regular exchanges of clothing, linens, and towels for as long as they remain in detention.

Components	Yes	No	NA	Remarks
All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
New detainees are issued clean bedding, linens and towel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

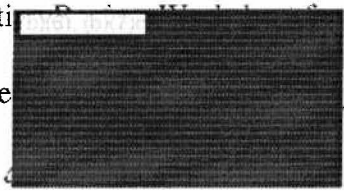
**Acceptable**       **Deficient**       **At-Risk**       **Repeat Finding**

**RELIGIOUS PRACTICES**

**Policy:** Facilities will provide ICE detainees of all faiths with reasonable and equitable opportunities to participate in the practices of their faith, limited only by the constraints of safety, security, the orderly operations of the facility and budgetary considerations.

Components	Yes	No	NA	Remarks
Detainees are allowed to engage in religious services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The facility allows detainees to observe the major "holy days" of their religious faith.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Reviewer Signature \_\_\_\_\_



Date: 2/28/06

**RELIGIOUS PRACTICES**

**Policy:** Facilities will provide ICE detainees of all faiths with reasonable and equitable opportunities to participate in the practices of their faith, limited only by the constraints of safety, security, the orderly operations of the facility and budgetary considerations.

Each detainee is allowed religious items in his/her immediate possession.




**Standard Rating:**

**Acceptable**

**Deficient**

**At-Risk**

**Repeat Finding**

**DETAINEE TELEPHONE ACCESS**

**Policy:** All facilities housing ICE detainees will permit detainees' reasonable and equitable access to telephones.

Components	Yes	No	NA	Remarks
Detainees allowed access to telephones during established facility waking hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Upon admittance, detainees are made aware of the facility's telephone access policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees are afforded a <i>reasonable degree of privacy</i> for legal phone calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency phone call messages are immediately given to detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees are allowed to return emergency phone calls as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees are allowed phone calls to consular/embassy officials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees in disciplinary segregation allowed phone calls for family emergencies. Detainees in administrative segregation and protective custody afforded the same telephoning privileges as those in general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
When detainee phone calls are monitored, notification is posted by detainee telephones that phone calls made by the detainees may be monitored. Special Access calls are not monitored.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

**Acceptable**

**Deficient**


**At-Risk**

**Repeat Finding**

**VISITATION**

**Policy:** ICE shall permit detainees to visit with family, friends, legal representatives, special interest groups and the news media.

Components	Yes	No	NA	Remarks
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Reviewer Signature: 

Date: 2/28/06

### VISITATION

**Policy:** ICE shall permit detainees to visit with family, friends, legal representatives, special interest groups and the news media.

There is a written visitation schedule and hours for general visitation. Hours for both General and Legal Visitation are noted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The visitation schedule and rules are available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A general visitation log is maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Visitors are searched and identified according to standard requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

**Acceptable**       **Deficient**       **At-Risk**       **Repeat Finding**

### ACCESS TO MEDICAL CARE

**Policy:** Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.

Components	Yes	No	NA	Remarks
The Facility operates a health care facility in compliance with State and Local laws and guidelines.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The facility's in-processing procedures of arriving detainees include medical and mental health screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All detainees have access to and receive medical care.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pharmaceuticals are stored in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Medical screening includes a Tuberculosis (TB) test.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees in the Special Management Unit have access to health care services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The facility has a written plan for the delivery of 24-hour emergency health care when no medical personnel are on duty at the facility, or when immediate outside medical attention is required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detention staff is trained to respond to health-related emergencies within a 4-minute response time.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If staff is used to distribute medication, a health care provider properly trains these officers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The medical unit keeps written records of medication that is distributed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees are required to sign a refusal to consent form when medical treatment is refused.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

**Acceptable**       **Deficient**       **At-Risk**       **Repeat Finding**

### SUICIDE PREVENTION AND INTERVENTION

**Policy:** All detention staff working with ICE detainees will be trained to recognize suicide-risk indicators. Staff will handle potentially suicidal individuals with sensitivity, supervision, and referrals. A clinically suicidal detainee will receive preventive supervision and treatment.

Components	Yes	No	NA	Remarks
Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Training prepares staff to: <ul style="list-style-type: none"> <li>Recognize potentially suicidal behavior;</li> <li>Refer potentially suicidal detainees, following facility procedures;</li> <li>Understand and apply suicide-prevention techniques.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

Acceptable       Deficient       At-Risk       Repeat Finding

### CONTRABAND

**Policy:** All detention facilities will ensure the proper handling and disposal of all contraband. Documentation of contraband destruction is required.

Components	Yes	No	NA	Remarks
The facility follows a written procedure for handling illegal contraband. Staff inventories, holds, and reports it when necessary to the proper authority for action/possible seizure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Upon admittance, detainees receive notice of items they can and cannot possess.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

Acceptable       Deficient       At-Risk       Repeat Finding

### DISCIPLINARY POLICY

**Policy:** All facilities housing ICE detainees are authorized to impose discipline on detainees whose behavior is not in compliance with facility rules and regulations.

Components	Yes	No	NA	Remarks
The facility has a written disciplinary system using progressive levels of reviews and appeals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The facility rules state that disciplinary action shall not be capricious or retaliatory.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Reviewer Signature: \_\_\_\_\_

Date: 2/28/06



### DISCIPLINARY POLICY

**Policy:** All facilities housing ICE detainees are authorized to impose discipline on detainees whose behavior is not in compliance with facility rules and regulations.

Components	Yes	No	NA	Remarks
Written rules prohibit staff from imposing or permitting the following sanctions: <ul style="list-style-type: none"> <li>• corporal punishment</li> <li>• deviations from normal food service</li> <li>• clothing deprivation</li> <li>• bedding deprivation</li> <li>• denial of personal hygiene items</li> <li>• loss of correspondence privileges</li> <li>• deprivation of physical exercise</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The following conspicuously posted in Spanish and English or other dominate languages used in the facility: <ul style="list-style-type: none"> <li>• Rights and Responsibilities</li> <li>• Prohibited Acts</li> <li>• Disciplinary Severity Scale</li> <li>• Sanctions</li> <li>• If so, where posted</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

**Acceptable**
         
  **Deficient**
         
  **At-Risk**
         
  **Repeat Finding**

### EMERGENCY (CONTINGENCY) PLANS

**Policy:** All facilities holding ICE detainees will respond to emergencies with a predetermined standardized plan to minimize the harming of human life and the destruction of property. It is recommended that SPCs and CDFs enter into agreement, via Memorandum of Understanding (MOU), with federal, local and state agencies to assist in times of emergency.

Components	Yes	No	NA	Remarks
No Detainee or detainee groups exercise control or authority over other detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees are protected from: <ul style="list-style-type: none"> <li>• Personal abuse / Corporal punishment</li> <li>• Personal injury</li> <li>• Disease</li> <li>• Property damage</li> <li>• Harassment from other detainees</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Reviewer Signature \_\_\_\_\_

Date: 2/28/16

### EMERGENCY (CONTINGENCY) PLANS

**Policy** All facilities holding ICE detainees will respond to emergencies with a predetermined standardized plan to minimize the harming of human life and the destruction of property. It is recommended that SPCs and CDFs enter into agreement, via Memorandum of Understanding (MOU), with federal, local and state agencies to assist in times of emergency.

Components	Yes	No	NA	Remarks
The facility has written emergency plans that cover: <ul style="list-style-type: none"> <li>• Work/Food Strike</li> <li>• Disturbances</li> <li>• Escapes</li> <li>• Bomb Threats</li> <li>• Adverse Weather</li> <li>• Facility Evacuation</li> <li>• Internal Hostages</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

**Acceptable**
         
  **Deficient**
         
  **At-Risk**
         
  **Repeat Finding**

### ENVIRONMENTAL HEALTH AND SAFETY

**Policy:** Every facility will control flammable, toxic, and caustic materials through a hazardous materials program. The program will include, among other things, the identification and labeling of hazardous materials in accordance with applicable standards (e.g., National Fire Protection Association [NFPA]); identification of incompatible materials, and safe-handling procedures

Components	Yes	No	NA	Remarks
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: <ul style="list-style-type: none"> <li>• Wear personal protective</li> <li>• Equipment.</li> <li>• Report hazards and spills to the</li> <li>• designated official.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The MSDS are readily accessible to staff and detainees in the work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> <li>• quantities are limited.</li> <li>• Staff always supervises detainees using these substances.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Reviewer Signature: [REDACTED]

Date: 2/28/06

**ENVIRONMENTAL HEALTH AND SAFETY**

**Policy:** Every facility will control flammable, toxic, and caustic materials through a hazardous materials program. The program will include, among other things, the identification and labeling of hazardous materials in accordance with applicable standards (e.g., National Fire Protection Association [NFPA]); identification of incompatible materials, and safe-handling procedures

Components	Yes	No	NA	Remarks
Staff directly supervises and accounts for products with methyl alcohol. Staff receive a list of products containing diluted methyl alcohol, e.g., shoe dye. All such products clearly labeled as such. "Accountability" includes issuing such products to detainees in the smallest workable quantities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The facility conducts the fire and safety inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The facility has an approved fire prevention, control, and evacuation plan.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The plan requires: <ul style="list-style-type: none"> <li>• Monthly fire inspections.</li> <li>• Fire protection equipment strategically located throughout the facility.</li> <li>• Public posting of emergency plan with accessible building/room floor plans.</li> <li>• Exit signs and directional arrows.</li> <li>• An area-specific exit diagram conspicuously posted in the diagrammed area.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Written procedures regulate the handling and disposal of used needles and other sharp objects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Standard cleaning practices include: <ul style="list-style-type: none"> <li>• Using specified equipment; cleansers; disinfectants and detergents.</li> <li>• An established schedule of cleaning and follow-up inspections.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. <ul style="list-style-type: none"> <li>• At least monthly.</li> <li>• The pest-control program includes preventive spraying for indigenous insects.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

**Acceptable**
         
  **Deficient**
         
  **At-Risk**
         
  **Repeat Finding**

**HOLD ROOMS IN DETENTION FACILITIES**

**Policy:** Hold rooms will be used only for temporary detention for detainees awaiting removal, transfer, EOIR hearings, medical treatment, intra-facility movement, or other processing into or out of the facility.

Components	Yes	No	NA	Remarks
The hold room is situated in a location within the secure perimeter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The hold rooms well ventilated, well lighted and all activating switches located outside the room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Reviewer Signature: \_\_\_\_\_



Date: 2/28/06

### HOLD ROOMS IN DETENTION FACILITIES

**Policy:** Hold rooms will be used only for temporary detention for detainees awaiting removal, transfer, EOIR hearings, medical treatment, intra-facility movement, or other processing into or out of the facility.

Components	Yes	No	NA	Remarks
The hold rooms contain sufficient seating for the number of detainees held.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The walls of the hold rooms escape proof. <ul style="list-style-type: none"> <li>• The hold room ceilings are escape and tamper resistant.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Individuals are not held in hold rooms for more than 12 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Male and females are segregated from each other at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees under the age of 18 are not held with adult detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
In older facilities officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All detainees are given a patdown search for weapons or contraband before being placed in the room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring.).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

**Acceptable**
         
  **Deficient**
         
  **At-Risk**
         
  **Repeat Finding**

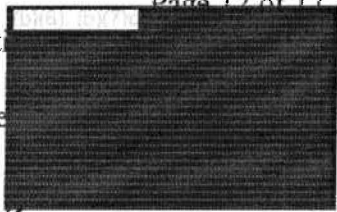
### KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)

**Policy** It is the policy of the ICE Service to maintain an efficient system for the use, accountability and maintenance of all keys and locks.

Components	Yes	No	NA	Remarks
Facility policies and procedures address the issue of compromised keys and locks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Padlocks and/or chains are not used on cell doors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to <ul style="list-style-type: none"> <li>• Occupational Safety and Environmental Health Manual, Chapter 3</li> <li>• National Fire Protection Association Life Safety Code 101.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency keys are available for all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The facilities use a key accountability system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Individual gun lockers are provided. <ul style="list-style-type: none"> <li>• They are located in an area that permits constant officer observation.</li> <li>• In an area that does not allow detainee or public access.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

G-324B Detent [REDACTED] IGSA's (Under 72 Hours)

Reviewer Signature



Date:

2/28/06

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

**Policy:** It is the policy of the ICE Service to maintain an efficient system for the use, accountability and maintenance of all keys and locks.

Components	Yes	No	NA	Remarks
All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> <li>• Issued keys are returned immediately in the event an employee inadvertently carries a key ring home.</li> <li>• Detainees are not permitted to handle keys assigned to staff.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

Acceptable       Deficient       At-Risk       Repeat Finding

**POPULATION COUNTS – Rating**

**Policy:** All detention facilities shall ensure around-the-clock accountability for all detainees. This requires that they conduct at least one formal count of the detainee population per shift, with additional formal and informal counts conducted as necessary.

Components	Yes	No	NA	Remarks
Staff conducts a formal count at least once each shift.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Activities cease or are strictly controlled while a formal count is being conducted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Formal counts in all units take place simultaneously.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Officers do not allow detainee participation in the count.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Officers positively identify each detainee before counting him/her as present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Written procedures cover informal and emergency counts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The control officer (or other designated position) maintains an out-count record of all detainees temporarily leaving the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

Acceptable       Deficient       At-Risk       Repeat Finding

**SECURITY INSPECTIONS**

**Policy:** Post assignments in the facility's high-risk areas, where special security procedures must be followed, will be restricted to experienced personnel with a thorough grounding in facility operations.

Components	Yes	No	NA	Remarks
The facility has a comprehensive security inspection procedures / program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Every officer is required to conduct a security check of his/her assigned area. Results are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The front-entrance officer checks the ID of everyone entering or exiting the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Reviewer Signature: \_\_\_\_\_

Date: 2/28/06

### SECURITY INSPECTIONS

**Policy:** Post assignments in the facility's high-risk areas, where special security procedures must be followed, will be restricted to experienced personnel with a thorough grounding in facility operations.

Components	Yes	No	NA	Remarks
The Control Center is staffed around the clock. Every Control Center officer receives training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Policy restricts staff access to the Control Center.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Detainees do not have access to the Control Center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Officers monitor all vehicular traffic entering and leaving the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Officers thoroughly search each vehicle entering and leaving the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Every search of the SMU and other housing units documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

**Acceptable**
         
  **Deficient**
         
  **At-Risk**
         
  **Repeat Finding**

### SPECIAL MANAGEMENT UNIT (SMU) Administrative Segregation

**Policy:** The Special Management Unit required in every facility isolates certain detainees from the general population. The Special Management Unit will consist of two sections. One, Administrative Segregation, houses detainees isolated for their own protection; the other for detainees being disciplined for wrongdoing (see the "Special Management Unit [Disciplinary Segregation]" standard).

Components	Yes	No	NA	Remarks
The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. <ul style="list-style-type: none"> <li>• Detainees are placed in the SMU (administrative) in accordance with written criteria.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
In exigent circumstances, staff may place a detainee in the SMU (administrative) before a written order has been approved. <ul style="list-style-type: none"> <li>• A copy of the order given to the detainee within 24 hours.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The SMU is well ventilated. <ul style="list-style-type: none"> <li>• Adequately lighted.</li> <li>• Appropriately heated.</li> <li>• Maintained in a sanitary condition.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All cells are equipped with beds.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The number of detainees in any cell does not exceed the occupancy limit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees receive three nutritious meals per day.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Reviewer Signature: XXXXXXXXXX

Date: 2/28/06

SPECIAL MANAGEMENT UNIT (SMU) Administrative Segregation				
<p><b>Policy:</b> The Special Management Unit required in every facility isolates certain detainees from the general population. The Special Management Unit will consist of two sections. One, Administrative Segregation, houses detainees isolated for their own protection; the other for detainees being disciplined for wrongdoing (see the "Special Management Unit [Disciplinary Segregation]" standard).</p>				
Components	Yes	No	NA	Remarks
Each detainee maintains a normal level of personal hygiene in the SMU.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A health care professional visits every detainee at least three times a week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The SMU maintains a permanent log. <ul style="list-style-type: none"> <li>• Detainee-related activity, e.g., meals served, recreation, visitors etc.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
At a minimum staff record whether the detainee ate, showered, exercised and took any medication during every shift and records all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Standard Rating:</b> <input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Findings				

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)				
<p><b>Policy:</b> Each facility will establish a Special Management Unit in which to isolate certain detainees from the general population. The Special Management Unit will have two sections, one for detainees in Administrative Segregation; the other for detainees being segregated for disciplinary reasons.</p>				
Components	Yes	No	NA	Remarks
Officers placing detainees in disciplinary segregation follow written procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A completed Disciplinary Segregation Order accompanies the detainee into the SMU.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at set intervals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The conditions of confinement in the SMU are proportional to the amount of control necessary to protect detainees and staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All cells are equipped with beds.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
When a detainee is segregated without clothing, mattress, blanket, or pillow, a justification is made and the decision is reviewed each shift. Items are returned as soon as it is safe.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees in the SMU receive three nutritious meals/days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees are allowed to maintain a normal level of personal hygiene, including the opportunity to shower and shave at least three times/week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**SPECIAL MANAGEMENT UNIT  
(Disciplinary Segregation)**

**Policy:** Each facility will establish a Special Management Unit in which to isolate certain detainees from the general population. The Special Management Unit will have two sections, one for detainees in Administrative Segregation; the other for detainees being segregated for disciplinary reasons.

Components	Yes	No	NA	Remarks
A health care professional visits every detainee in disciplinary segregation every day, M - F.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All detainee-related activities are documented, e.g., meals served, recreation activities, visitors, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
At a minimum staff record whether the detainee ate, showered, exercised and took any medication during every shift and records all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

Acceptable       Deficient       At-Risk       Repeat Finding

**TOOL CONTROL**

**Policy:** It is the policy of all facilities that all employees shall be responsible for complying with the tool control policy. The Maintenance Supervisor shall maintain a computer generated or typewritten Master Inventory list of tools and equipment and the location in which tools are stored. These inventories shall be current, filed and readily available for tool inventory and accountability during an audit.

Components	Yes	No	NA	Remarks
The facility has a tool classification system. Tools are classified according to: <ul style="list-style-type: none"> <li>• Restricted (dangerous/hazardous)</li> <li>• Non Restricted (non-hazardous).</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Each facility has procedures for the issuance of tools to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Standard Rating:**

Acceptable       Deficient       At-Risk       Repeat Finding

G-324B Detention  IGSA's (Under 72 Hours)

Reviewer Signature: \_\_\_\_\_

Date: 2/28/06



**USE OF FORCE**

**Policy:** The U.S. Department of Homeland Security authorizes the use of force only as a last alternative after all other reasonable efforts to resolve a situation have failed. Only that amount of force necessary to gain control of the detainee, to protect and ensure the safety of detainees, staff and others, to prevent serious property damage and to ensure institution security and good order may be used. Physical restraints necessary to gain control of a detainee who appears to be dangerous may be employed when the detainee:

Components	Yes	No	NA	Remarks
There is a use of force policy outlining immediate and calculated use of force, and confrontation avoidance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Staff members are trained in the performance of the Use-of-Force Team Technique.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All use-of-force incidents are documented and reviewed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Staff: <ul style="list-style-type: none"> <li>• Does not use force as punishment.</li> <li>• Attempts to gain the detainee's voluntary cooperation before resorting to force</li> <li>• Uses only as much force as necessary to control the detainee.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Facility does not use Medication for restraint purposes
In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Special precautions are taken when restraining pregnant detainees and medical personnel are consulted	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The officers are thoroughly trained in the use of soft and hard restraints.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Facility does not use soft restraints
For incidents involving calculated use of force, a videotape is made and retained for review.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Facility does not use videotapes

**Standard Rating:**

**Acceptable**    **Deficient**    **Repeat Deficiency**    **At-Risk**

Reviewer Signature: \_\_\_\_\_

Date: 2/28/08



OFFICIAL

DETENTION FACILITY COMPLIANCE REPORT

NAME OF FACILITY Benton County Jail  
 ADDRESS 1300 SW 14th, Bentonville, AR 72712  
 COUNTY JUDGE OR MAYOR GARY BLACK  
 FACILITY SUPERVISOR (b)(6), (b)(7)c FACILITY PHONE 479/271-1011  
 PERSON INTERVIEWED (b)(6), (b)(7)c TITLE Captain  
 SHERIFF OR CHIEF OF POLICE (b)(6), (b)(7)c  
 LOCATION OF JAIL Same as above  
 DATE OF CONSTRUCTION April 1999 DATE REMODELED N/A

CELL DESIGN	MAXIMUM CAPACITY
1 MAN SIZE <u>X</u> SQ. FT. _____	SIZE <u>X</u> SQ. FT. _____
2 MAN SIZE <u>X</u> SQ. FT. _____	SIZE <u>X</u> SQ. FT. _____
3 MAN SIZE <u>X</u> SQ. FT. _____	SIZE <u>X</u> SQ. FT. _____
4 MAN SIZE <u>X</u> SQ. FT. _____	SIZE <u>X</u> SQ. FT. _____

HOW MANY PAID PERSONNEL (JAILORS & MATRONS) ARE ASSIGNED DUTIES IN THE JAIL? 86  
 Supervisors 10 Full Time Males 9 Full Time Females 1  
 Part Time Males 0 Part Time Females 0

WHAT IS THE SHIFT FORMULA?  
7 AM TO 5 PM 3 PM TO 1 AM 11 PM TO 9 AM

HOW MANY PERSONNEL TO EACH SHIFT INCLUDING SUPERVISORS? 26 Day - 27 evening, 21 MidNight

Sign (b)(6), (b)(7)c Inspection Date 9-28-05

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

Sign \_\_\_\_\_ Sign \_\_\_\_\_

Committee Member

Sign \_\_\_\_\_ Sign \_\_\_\_\_

Committee Member

STATE OF ARKANSAS  
ADULT DETENTION FACILITIES

DETENTION FACILITY Benton County Jail DATE OF INSPECTION 9-28-05

All Adult Detention Facilities in Arkansas must comply with all applicable mandatory requirements. Failure to meet applicable requirements will cause the facility to be considered in non-compliance and subject to further action by this Agency in compliance with Act 530 of 1985 - Section 4.

MINIMUM MANDATORY REQUIREMENTS

IN COMPLIANCE

III. ADMINISTRATION:

Does the Facility's operations comply with requirements as stated in Chapter III relative to the following:

Section 3 - 1004 - Written Policy YES  NO  N/A

Section 3 - 1005 - Budget YES  NO  N/A

IV. PERSONNEL:

Does the facility meet personnel requirements as stated in Chapter IV relative to the following:

Section 4 - 1002 - Personnel file with required records. YES  NO  N/A

Section 4 - 1002 - E Has each employee completed the basic jail course? YES  NO  N/A

Section 4 - 1002 - H Does the facility have sufficient personnel? YES  NO  N/A

If not, has the administrator requested such in writing? YES  NO  NA

V. RECORD SYSTEM:

Does the facility maintain a minimum record system in compliance with Chapter V relative to the following:

Section 5 - 1002 - Are proper papers for commitment being maintained? YES  NO  N/A

Section 5 - 1003 - Is a proper jail log or detention record being kept? YES  NO  N/A

V. RECORD SYSTEM: continued

- Section 5 - 1004 - Is confinement information being gathered on each inmate? YES  NO  N/A
- Section 5 - 1005 - Is prisoner's personal property being handled properly? YES  NO  N/A
- Section 5 - 1006 - Are proper medical records being kept relating condition of prisoner at intake? YES  NO  N/A
- Section 5 - 1007 - Does the facility have a written policy on strip searches? YES  NO  N/A
- Section 5 - 1008 - Is a copy of the jail rules provided to the prisoner? YES  NO  N/A
- Section 5 - 1010 - Are disciplinary actions recorded in writing? YES  NO  N/A
- Section 5 - 1011 - Is there a written record of unusual occurrences? YES  NO  N/A

VI. RIGHTS OF ACCUSED IN CUSTODY:

- Section 6 - 1001 - Are inmate rights posted and is a copy furnished them? YES  NO  N/A
- Section 6 - 1002 - Do inmate rights contain provisions A thru G? YES  NO  N/A
- Section 6 - 1003 - Does written policy for disciplinary actions provide for requirements A thru D? YES  NO  N/A

VII. RULES OF CONDUCT FOR PERSONNEL:

- Section 7 - 1001 - Does facility policy and procedures manual provide for requirements listed in these sections? YES  NO  N/A
- 1002 -

VIII. PRISONER SEPARATION:

- Section 8 - 1001 - Does the facility provide complete separation of females from the area where males are confined? YES  NO  N/A
- Section 8 - 1001 - Are juveniles, charged as adults, separated from the rest of the inmates? YES  NO  N/A

VIII. PRISONER SEPARATION continued

- Section 8 - 1001 - Are youthful offenders under age 18, who are under The Jurisdiction of The Juvenile Court incarcerated? YES \_\_\_\_\_ NO  N/A \_\_\_\_\_
- Section 8 - 1001 - If so, are they completely separated from the rest of the jail population? YES \_\_\_\_\_ NO \_\_\_\_\_ N/A
- Section 8 - 1001 - Are prisoners being separated by class? YES  NO \_\_\_\_\_ N/A \_\_\_\_\_
- Section 8 - 1002 - Are work release and trusty prisoners separated from other prisoners? YES  NO \_\_\_\_\_ N/A \_\_\_\_\_

IX. SECURITY:

Does the facility's security procedures and practices comply with minimum requirements as stated in Chapter IX relative to the following:

- Section 9 - 1001 - A Does the facility have sufficient personnel on duty at all times? YES  NO \_\_\_\_\_ N/A \_\_\_\_\_
- Section 9 - 1001 - A - B - Are proper cell checks being made and recorded? YES  NO \_\_\_\_\_ N/A \_\_\_\_\_
- Section 9 - 1001 - C Are female officers on duty when females are incarcerated? YES  NO \_\_\_\_\_ N/A \_\_\_\_\_
- Section 9 - 1001 - D Does the policy manual have a search procedure for control of contraband? YES  NO \_\_\_\_\_ N/A \_\_\_\_\_
- Section 9 - 1002 - E Does the policy manual have a procedure for emergency situations which includes what to do in case of fire, escapes, riots, smoke situations, inmate disturbances and assaults? YES  NO \_\_\_\_\_ N/A \_\_\_\_\_
- Section 9 - 1002 - G Are officer's weapons removed before entering secure area? YES  NO \_\_\_\_\_ N/A \_\_\_\_\_
- Section 9 - 1002 - I Does the facility have a policy for key control? YES  NO \_\_\_\_\_ N/A \_\_\_\_\_
- Section 9 - 1002 - J Does the facility have a written policy addressing security measures for trusty-status inmates? YES  NO \_\_\_\_\_ N/A \_\_\_\_\_

X. MEDICAL, DENTAL AND DENTAL HEALTH CARE:

- Section 10 - 1001 - Does the facility have a medical and dental plan in writing and on file to insure that medical services or practices are available to all those in custody? YES  NO  N/A
- Section 10 - 1002 - If medical care is provided at the facility, is proper space provided? YES  NO  N/A
- Section 10 - 1003 - Does the facility have an emergency and sick call procedure? YES  NO  N/A
- Section 10 - 1004 - Are written records of inmate's medical and dental complaints being kept? Does this record include results of the health encounter? YES  NO  N/A
- Section 10 - 1005 - Are records kept of medicine prescribed and administered? YES  NO  N/A
- Section 10 - 1005 - Is medicine kept in a secure area? YES  NO  N/A
- Section 10 - 1009 - Is there a medical training program such as C.P.R. and first aid or a suitable alternative? YES  NO  N/A

XI. MAIL, COMMUNICATIONS AND VISITING:

Does the facility comply with minimum requirements regarding privileges as stated in Chapter XI relative to the following:

- Section 11 - 1001 - Rules for visiting? YES  NO  N/A
- Section 11 - 1002 - Is a visitor's log kept? YES  NO  N/A
- Section 11 - 1005 - Is there a written policy for thru correspondence and incoming mail? YES  NO  N/A
- Section 11 - 1010 - Is there a written policy for use of the phone and are prisoner's calls logged where necessary? YES  NO  N/A

XII. FOOD SERVICE:

- Section 12 - 1001 - Are meals being served as required? YES  NO  N/A

XII. FOOD SERVICE: continued

- \* Section 12 - 1001 - Are menus approved by a dietician? YES  NO  N/A
- Section 12 - 1002 - Are records being kept of the food actually served? YES  NO  N/A
- Section 12 - 1003 - Has kitchen been inspected by Health Department? YES  NO  N/A
- Section 12 - 1006 - Is garbage removed from the cells immediately after eating? YES  NO  N/A

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\* 24 hour overnight facilities are exempt

XIV. SAFETY:

- Section 14 - 1002 - Has the facility been inspected by local fire department in the past year? YES  NO  N/A
- Section 14 - 1003 - Does the facility have a written fire plan and is personnel familiar with it? YES  NO  N/A
- Section 14 - 1004 - Does the facility have a written plan for all other emergencies and are evacuation procedures detailed? YES  NO  N/A
- Section 14 - 1005 - Are exits plainly marked? YES  NO  N/A
- Section 14 - 1006 - Are cleaning fluids, toxic and caustic materials stored properly? YES  NO  N/A
- Section 14 - 1008 - Does the facility have up to date fire fighting equipment and access to a compressed air breathing apparatus? YES  NO  N/A

XV. INMATE SERVICES:

- \* Section 15 - 1002 - Does the facility have a written policy to provide recreation and leisure time activities, library services, social and religious services? YES  NO  N/A
- \* Section 15 - 1005 - Is outside exercise provided? YES  NO  N/A

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\* 14 day (and under) facilities are exempt

\* 24 hour overnight facilities are exempt




XVI. EXISTING FACILITIES

	Section 16 - 1004 -	Is lighting adequate?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
	Section 16 - 1004 -	Is temperature maintained at a proper level?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
	Section 16 - 1004 -	Is an automatic cut-in generator for emergency lighting and equipment provided?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
	Section 16 - 1005 -	Are smoke and fire alarms present?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
	Section 16 - 1006 -	Is there a cell that can be used to house the handicapped?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
	Section 16 - 1007 -	Are there at least two exits from each housing area?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
	Section 16 - 1008 -	Is there a proper booking area located inside the secure area?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
	Section 16 - 1009 -	Is there an alcohol unit?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
**	Section 16 - 1010 -	Do cells meet general housing requirements?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
*	Section 16 - 1011 -	Do the cells meet the footage	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
**	1012 -	requirement?	
	Section 16 - 1013 -	Is there an observation cell?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
*	Section 16 - 1014 -	Will activity rooms meet	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
**		requirements?	
	Section 16 - 1015 -	Is there proper storage space for bedding and clothing?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
*	Section 16 - 1016 -	Are indoor or outdoor exercise areas provided?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
**			
	Section 16 - 1017 -	Is there adequate storage space for security equipment and cleaning supplies?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
	Section 16 - 1018 -	Is adequate space provided for administrative and staff functions?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
	Section 16 - 1019 -	Is there adequate space provided for food preparation and handling?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
	Section 16 - 1020 -	Is there a proper visiting area?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>


\* 14 day (and under) facilities are exempt  
 \*\* 24 hour overnight facilities are exempt

INSPECTION DATE: 9/28/05 INITIAL INSPECTION OR INSPECTION Initial

INSPECTION TIME SHIFT: FIRST 9 AM  SECOND  THIRD

RE-INSPECTION REQUIRED: YES  NO  SIGNED 

MAILINGS SENT: COUNTY JUDGE GARY BLACK  COUNTY CLERK

SHERIFF   QUORUM COURT

CHIEF OF POLICE \_\_\_\_\_ MAYOR \_\_\_\_\_ CITY COUNCIL \_\_\_\_\_

CIRCUIT JUDGE

ANY ACTION REQUIRED IN IMMEDIATE NON-COMPLIANCE? YES \_\_\_\_\_ NO

DIRECTOR'S HELP REQUIRED? YES \_\_\_\_\_ NO

LIST REASONS FOR (NO AND N/A)

SECTION NO.	NO or N/A	REASON
<u>Sec 8-1001</u>	<u>NO</u>	<u>Juveniles are not housed in this facility. Juveniles are housed in Benton Co. Juvenile facility in Benton Co. ARKANSAS.</u>
	<u>NA</u>	<u>No juveniles</u>

Sec 4-100.2 H NO Sufficient Personnel No request needed



## U.S. Immigration and Customs Enforcement

MEMORANDUM FOR: Craig Robinson  
Field Office Director  
New Orleans Field Office [REDACTED]

FROM: [REDACTED] [REDACTED]  
Acting Director [REDACTED]

SUBJECT: Benton County Detention Center Annual Review

The annual review of the Benton County Detention Center conducted on February 28, 2006 in Bentonville, Arkansas has been received. A final rating of **Acceptable** has been assigned. No further action is required and this review is closed.

The rating was based on the Reviewer-In-Charge (RIC) Summary Memorandum and supporting documentation. The Field Office Director must now initiate the following actions in accordance with the Detention Management Control Program (DMCP):

- 1) The Field Office Director, Detention and Removal Operations, shall notify the facility **within** five business days of receipt of this memorandum. Notification shall include copies of the Form G-324B, *Detention Facility Review Form*, the G-324B Worksheet, RIC Summary Memorandum, and a copy of this memorandum.
- 2) The Field Office Director shall schedule the next annual review on or before February 28, 2007.

Should you or your staff have any questions regarding this matter, please contact [REDACTED] Deputy Assistant Director, Detention Management Division at (202) 732-[REDACTED]

cc: Official File  
[REDACTED]

U.S. Department of  
HomeLand Security  
Detention and Removal  
3822 Airport Plaza  
P.O. Box 2510  
Texarkana Ar. 75504



U.S. Immigration  
and Customs  
Enforcement

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MEMORANDUM FOR: John P. Torres  
Director (Acting)  
Office of Detention and Removal

FROM: [REDACTED]  
Reviewer-In-Charge  
New Orleans Detention and Removal Operations

SUBJECT: Review Summary Report for Benton County Detention Center Review

On February 28, 2006 a review of the Benton County Detention Center located within the New Orleans District was conducted. This review was performed under the supervision of [REDACTED], Reviewer-In-Charge (RIC). The review measured compliance with the INS / ICE Detention Standards. Attached to this memorandum are a copy of the original Form G-324a Detention Inspection Form and a copy of the worksheet.

**Type of Review:**

This review is a Review by officers assigned to the district office as directed by HQDRO. This review was conducted for the purpose of determining overall compliance with the INS / ICE Detention Standards.

**Review Summary:**

The American Correctional Association (ACA) does not accredit the Facility. The Arkansas Criminal Detention Review Commission (Jail Standards) and the Arkansas State Health Department accredit the Facility.

Benton County

The following information summarizes those standards not in compliance. Each standard is identified and a short summary provided regarding standards or procedures not currently in compliance.

<b>Compliant</b>	-	<b>27</b>
<b>Deficient</b>	-	<b>0</b>
<b>At- Risk</b>	-	<b>0</b>

**RIC Observation:**

- Security Staff: The staff exhibited professionalism, Courtesy, and a good working knowledge of their facility. Staff was questioned at length regarding policy and procedure. I observed that the facility operated in a calm and orderly fashion throughout the review.

**Recommended Rating and Justification:**

It is the Reviewer in Charge recommendation that the facility receive a rating of "OUTSTANDING". The facility goes above and beyond to fully implementation of the INS / ICE Detention Standards. The facility fully complies with 27 of 27 standards. This facility highly exceeds our standards with the professionalism of the staff with the greatest of working knowledge of their facility and the standards of Immigration Customs Enforcement. The Cleanliness of the facility should be highly noted and recognized as well. It is once again highly recommended that this facility be given the rating of "OUTSTANDING". *Acceptable. Could be 72 hr facility* (JS)

**RIC Assurance Statement:**

It is the opinion of this Reviewer in Charge that the findings of compliance and noncompliance are documented on the G-324a Inspection form and that it is supported by documentation in the review file. Within the scope of this review, the facility is operating in accordance with their policy and procedures, and is in compliance with our Detention Standards.

# HEADQUARTERS EXECUTIVE REVIEW

## Review Authority

The signature below constitutes review of this report and acceptance by the Review Authority. OIC/CEO will have 30 days from receipt of this report to respond to all findings and recommendations.

HQDRO EXECUTIVE REVIEW: (Please Print Name) [Redacted]	Signature [Handwritten Signature]	[Redacted]
Title Acting Director	Date 5/31/04	

- Final Rating:
- Superior
  - Good
  - Acceptable
  - Deficient
  - At-Risk

Comments: The Review Authority concurs with the recommended rating of "Acceptable." The Reviewer-In-Charge has justified the rating.

**A. Type of Facility Reviewed**

ICE Intergovernmental Service Agreement  
 ICE Staging Facility (12 to 72 hours)

**B. Current Facility Review**

Type of Facility Review  
 Field Office  HQ Review  
Date[s] of Facility  
02/28/06

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

Date[s] of Last Facility Review  
02/21/05  
Previous Rating  
 Acceptable  Deficient  At-Risk

**D. Name and Location of Facility**

Name  
Benton County Dention Center  
Address (Street and Name)  
1300 SW 14<sup>th</sup> Street  
City, State and Zip Code  
Bentonville Ar. 72712  
County  
Benton  
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)  
[Redacted] Captain  
Telephone # (Include Area Code)  
479-271-[Redacted]  
Field Office / Sub-Office (List Office with oversight responsibilities)  
NewOrleans / Ft. Smith  
Distance from Field Office  
60

**E. ICE Information**

Name of Reviewer In Charge (Last, Title and Duty Station)  
[Redacted] / IEA / TXA Texarkana Ar.  
Name of Team Member / Title / Duty Location  
/ /  
Name of Team Member / Title / Duty Location  
/ /  
Name of Team Member / Title / Duty Location  
/ /

**F. CDF/IGSA Information Only**

Contract Number 10-00-0041	Date of Contract or IGSA 01/01/01
Basic Rates per Man-Day 40.00	
Other Charges: (If None, Indicate N/A) ; ; ;	
Estimated Man-days Per Year	

**G. Accreditation Certificates**

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

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

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

**I. Facility History**

Date Built  
April 1998  
Date Last Remodeled or Upgraded  
N/A  
Date New Construction / Bedspace Added  
N/A  
Future Construction Planned  
 Yes  No Date:  
Current Bedspace  
508  
Future Bedspace (# New Beds only)  
Number: N/A Date:

**J. Total Facility Population**

Total Facility Intake for previous 12 months  
10817  
Total ICE Mandays for Previous 12 months  
129327

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

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

**L. Facility Capacity**

	Rated	Operational	Emergency
Adult Male	476	357	476
Adult Female	32	24	32

Facility holds Juveniles Offenders 16 and older as Adults

**M. Average Daily Population**

	ICE	USMS	Other
Adult Male	0	0	0
Adult Female	0	0	0

**N. Facility Staffing Level**

Security: [Redacted] Support: [Redacted]

### Significant Incident Summary Worksheet

For ICE to complete its Review of your facility, the following information must be completed prior to the scheduled review dates. The information on this form should contain data for the past twelve months in the boxes provided. The information on this form is used in conjunction with the ICE detention standards in assessing your detention operations. This form should be filled out by the facility prior to the start of any inspection. Failure to complete this section will result in a delay in processing this report.

<i>Incidents</i>	<i>Description</i>	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault: Offenders on Offenders <sup>1</sup>	Types (Sexual <sup>2</sup> , Physical, etc.)				
	With Weapon				
	Without Weapon	31	36	19	22
Assault: Detainee on Staff	Types (Sexual Physical, etc.)				
	With Weapon				
	Without Weapon	3	0	2	1
Number of Forced Moves, incl. Forced Cell moves <sup>3</sup>					
Disturbances <sup>4</sup>					
Number of Times Chemical Agents Used		4	5	3	6
Number of Times Special Reaction Team Deployed/Used		3	3	3	3
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	4	5	3	6
	Type (C=Chair, B=Bed, BB=Board, O=Other)				
Offender / Detainee Medical Referrals as a result of injuries sustained.				1	1
Escapes	Attempted				
	Actual				
Grievances:	# Received	361	412	314	591
	# Resolved in favor of Offender/Detainee				
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)				
	Number				
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	49	41	52	32
	# Psychiatric Cases referred for Outside Care	22	22	29	27

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

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

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

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



<b>DHS/ICE Detention Standards Review Summary Report</b>					
1. Acceptable 2. Deficient 3. At - Risk 4. Repeat Finding 5. Not Applicable					
<b>Legal Access Standards</b>	1.	2.	3.	4.	5.
Visitation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Telephone Access	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Detainee Services</b>					
Admission and Release	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Classification System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainee Handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Food Service	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Funds and Personal Property	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Detainee Grievance Procedures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Issuance and Exchange of Clothing, Bedding, and Towels	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Religious Practices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Health Services</b>					
Medical Care	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Suicide Prevention and Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Security and Control</b>					
Contraband	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detention Files	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Disciplinary Policy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency Plans	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Environmental Health and Safety	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Hold Rooms in Detention Facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Key and Lock Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Population Counts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Security Inspections	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Special Management Units (Administrative Segregation)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Special Management Units (Disciplinary Segregation)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Tool Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Transportation (Land management)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use of Force	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Staff / Detainee Communication	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**RIC Review Assurance Statement**

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

Reviewer-In-Charge: (Print Name) [REDACTED]	Signature
Title & Duty Location IEA	Date 02/28/06

**Team Members**

Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location

**RIC Rating Recommendation:**     **Acceptable**  
   **Deficient**  
   **At-Risk**

Comments:

**RIC Review Assurance Statement**

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

Reviewer-In-Charge: (Print Name)	[Redacted]
Title & Duty Location	[Redacted]
I.E.A.	02/28/06

**Team Members**

Print Name & Duty Location	Print Name & Duty Location
Print Name & Duty Location	Print Name & Duty Location

- RIC Rating Recommendation:**
- Acceptable**
  - Deficient**
  - At-Risk**

RIC Comments: