Department of Homeland Security Immigration and Customs Enforcement Office of Detention and Removal

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 over 72 Hours



Field Office Detention Review Worksheet

Local Jail – IGSA	
State Facility – IGSA	
ICE Contract Detention Facility	
Name	
Blount County Jail	
Address (Street and Name)	
940 East Lamar Alexander Parkway	
City, State and Zip Code	
Maryville, Tennessee 37804-5002	
County	
Blount	·
Name and Title of Chief Executive Officer (Warden/	OIC/Superintendent)
Chief ^{(b)(6)} , (b)(7)c	
Name and title of Reviewer-In-Charge	
(b)(6), (b)(⁷)c , <i>IEA</i>	
Date[s] of Review	
4/17/06-4/18/06	
Type of Review	
🗌 Headquarters 🛛 Operational 🛛 Special As	sessment Other

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DETAINEE TRANSFER STANDARD

For each standard rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. Each facility should examine the entire worksheet to identify areas of improvement including those standards where an overall finding of acceptable was achieved.

Section I

Detainee Services Standards

ACCESS TO LEGAL	MATE			
Policy: Facilities holding ICE detainees shall permit de materials, facilities, equipment and document copying documents.				
Components		Ň	NA	Remarks
The facility provides a designated law library for detainee use.				disinitation
The law library contains all materials listed in the "Access to Legal Materials" Standard, Attachment A. The listing of materials is posted in the law library.				
The library contains a sufficient number of chairs, is well lit and is reasonably isolated from noisy areas.				
The law library is adequately equipped with typewriter, computers or both and has sufficient supplies for daily use by the detainees.				
In lieu of/or in addition to the physical law library, ICE detainees have access to the Lexus Nexus electronic law library.				Material accessed through request and researched by staff.
The Lexus Nexus library is updated and is current.				
Outside persons and organizations are permitted to submit published legal material for inclusion in the legal library. Outside published material is forwarded and reviewed by the ICE prior to inclusion.		Ø		
There is a designated ICE or facility employee who inspects, updates, and maintain/replace legal material and equipment on a routine basis. The designee properly disposes outdated supplements and replaces damaged or missing material promptly.				
Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.				
Detainees may request material not currently in the law library. Each request is reviewed and where appropriate an acquisition request is initiate and timely pursued. Request for copies of court decisions are accommodated within $3-5$ business days.				
The facility permits detainees to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.				
Staff ensures that illiterate or non-English-speaking detainees without legal representation receive more than access to English-language law books after indicating their need for help.				
Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.				
Detainees housed in Administrative Segregation and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.	⊠			
All denials of access to the law library fully documented.				

ACCESS TO LEGAL MATERIALS							
Policy: Facilities holding ICE detainees shall permit de materials, facilities, equipment and document copying documents.							
Components	Y	N	NA	Remarks			
Facility staff informs ICE Management when a detainee or group of detainees is denied access to the law library or law materials.							
Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.							
ACCESS TO LEGAL	MATE	RIALS		and a second and a s			
Acceptable 🛛 Deficient] At-Ri	sk		Repeat Finding			

Remarks: (*Hecord significant facts, observations, alternate source used for verification, etc.*) This facility doesn't have a law library. The detainees that are housed here are here only as long as it takes to get cleared medically to travel to the Sub-Office, SPC, or District Office for their immigration hearings.

06

ADMISSION ANI	RELE	ASE				
Policy: All detainees will be admitted and released in a n The admissions procedure will, almong other things inclu classification process; a body search; and a search o documented, and safeguarded as necessary.	de: med	caliscre	ening; a	tile-based assessment and		
Components	Y	N	NA	Remarks		
In processing includes an orientation of the facility. The orientation includes; Unacceptable activities and behavior, and corresponding sanctions. How to contact ICE. The availability of <i>pro bono</i> legal services, and how to pursue such services. Schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, etc., and the detainee handbook.						
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.						
When available, accompanying documentation is used to identify and classify each new arrival.						
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.						
Detainees are stripped searched only when cause has been established and not as routine policy. Non-criminal detainees are never strip-searched but are patted down unless cause or reasonable suspicion has been established.	x					
The "Contraband" standard governs all personal property searches. IGSAs/CDFs use or have a similar contraband standard. Staff prepares a complete inventory of each detainee's possessions. The detainee receives a copy.						
Staff completes Form I-387 or similar form for CDFs and IGSAs for every lost or missing property claim. Facilities forward all I-387 claims to ICE.						
Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	\boxtimes					
The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE Detainees are not charged for these items.						
All releases are coordinated with ICE.						
Staff completes paperwork/forms for release as required.	\boxtimes					
ADMISSIONS AND RE	LEASE	- Ratin	g			
🛛 Acceptable 🗌 Deficient 📄 At-Risk 🔄 Repeat Finding						

5/8/06

GLASSIFICATIO	N SYS	ГЕМ			
Policy: All facilities will develop and implement a system classification system will ensure that each detainee is play from detainees in other categories	accordi ed in th	ng to wh le approj	ich ICE griate ca	detainee ategory, j	s are classified. Th physically separate
Components	Y	N	NA		Remarks
The facility has a system for classifying detainees. In CDFs and IGSAs, an Objective Classification System or similar is used.	⊠				305 <u></u>
 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 designated classification specialist reviewing every classification decision. 					
The intake/processing officer reviews work-folders, A- files, etc., to identify and classify each new arrival.	\boxtimes				
Staff use only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/ unconfirmed reports may be filed but are not used to score detainees classifications.					
Housing assignments are based on classification- level.	\boxtimes				
A detainee's classification-level does not affect his/her recreation opportunities. Detainees recreate with persons of similar classification designations.	⊠			-	
Detainee work assignments are based upon classification designations.					
The classification process includes reassessment/reclassification. For IGSA's detainees may request reassessment between 45 and 60 days after arrival. For CDF's detainees are re-assessed approximately every 60 days.					
The classification system includes standard procedures for processing new arrivals' appeals. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.					
Classification appeals are resolved within five business days and detainees are notified of the outcome within 10 business days.					
Classification designations may be appealed to a higher authority such as the Warden or equivalent.	\boxtimes				
The Detainee Handbook or equivalent for IGSAs explains the classification levels, with the conditions and restrictions applicable to each.					
CLASSIFICATIO	NSYST	EM	· · .		

(b)(6), (b)(7)c 5/8/06

CORRESPONDENCE A	ND OTH	ER M	AIL	
Policy: All facilities will ensure that detainees send and realimitations required for the safety, security, and orderly op subject to the same limitations. Each facility will widely dist other mail.	eration	ofithe	facility.	Other mail will be permitted,
Components	Yes	No	NA	Remarks
The rules for correspondence and other mail are posted in each housing or common area or provided to each detainee via a detainee handbook.	⊠			In handbook.
The facility provides key information in languages other than English; In the language(s) spoken by significant numbers of detainees. List any exceptions.				Doesn't have extra Spanish copies. Can print a Spanish copy from the computer.
Incoming mail distributed to detainees within 24 hours or 1 business day after it is received and inspected.				
Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).				
IN CDFs: Staff maintain a logbook-recording acceptance of priority, priority overnight, and certified mail delivered to the facility for a detainee.			\boxtimes	
Staff do not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized in writing by the Warden or equivalent for prevailing security reasons.				All mail is inspected for contraband and cash. This is directed by the Sheriff for security reasons.
Staff does not ever read incoming general correspondence without the Warden's prior approval.				
Staff does not inspect incoming special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.				
Staff are prohibited from reading or copying incoming special correspondence.	\boxtimes			
Staff are only authorized to inspect outgoing correspondence or other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity.				
Correspondence to a politician or to the media is processed as special correspondence and is not read or copied.	\boxtimes			
The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	\boxtimes			
The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.				
Staff maintains a written record of every item removed from detainee mail.	\boxtimes			
The Warden or equivalent monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.				

CORRESPONDENCE AND OTHER MAIL

subject to the same limitations. Each facility will widely distrother mail		•	
The procedure for safeguarding cash removed from a detainee protects the detainee from loss of funds and theft. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.			Cash is not allowed only money orders are allowed and they are placed in the detainee's account.
Original identity documents (e.g., passports, birth certificates) are immediately removed and forwarded to ICE staff for placement in A-files.			
Staff provides the detainee a copy of his/her identity document(s) upon request.	\boxtimes		
Staff disposes of prohibited items found in detainee mail in accordance with the "Control and Disposition of Contraband" Standard or the similar prevailing policy in IGSAs and CDFs.			
Every indigent detainee has the opportunity to mail, at government expense: Reasonable correspondence about a legal matter: Three one ounce letters per week: Packages deemed necessary by ICE.			
The facility has a system for detainees to purchase stamps and for mailing all special correspondence and a minimum of 5 pieces of general correspondence per week.	\boxtimes		No limit on mail.
The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	\boxtimes		

Acceptable

Deficient

At-Risk

Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.) (b)(6), (b)(7)c

5/8/06

DETAINEE HAI	NDBOO	K		
Policy: Every OIC will develop a site-specific detainee had deterition policies, rules, and procedures in effect at the far programs, and opportunities available through various organizations, etc. Every detainee will receive a copy of	ndbook icility. T us sou	to serv he han nes, i	dbook ncludir	will also describe the services, ig the facility, IGE, private
Components	Y	N	NA	Remarks
The detainee handbook is written in English and translated into Spanish or into the next most-prevalent Language(s).				Bilifo
The handbook supplements the facility orientation video where one is provided.				
All staff members receive a handbook and training regarding the handbook contents.				
The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.				
There an annual review of the handbook by a designated committee or staff member.				
 The detainee handbook address the following issues: Personal Items permitted to be retained by the detainee. Initial issue of clothes, bedding and personal hygiene items. 	⊠			
The detainee handbook states in clear language basic detainee responsibilities.				
The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.				
The handbook states when a medical examination will be conducted.				
The handbook describes the facility, housing units, dayrooms, In-dorm activities and special management units.				
The handbook describes; Official count times and count procedures Meal times, feeding procedures, procedures for medical or religious diets, smoking policy, Clothing exchange schedules and if authorized, clothes washing and drying procedures and expected personal hygiene practices.	⊠			Not official count times.
The handbook describe times and procedures for obtaining disposable razors and allows that detainees attending court will be afforded the opportunity to shave first.				
The handbook describes barber hours and hair cutting restrictions.				Barber services are given
The handbook describes; the telephone policy, debit card procedures, direct and frees calls; locations of telephones; policy when telephone demand is high; and policy and procedures for emergency phone calls.				
The handbook addresses religious programming.	\boxtimes			
The handbook states times and procedures for commissary or vending machine usage. (where available)				
The handbook describes the detainee voluntary work				

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DETAINEE HANDBOOK

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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	Ŷ	N	NA	Remarks
The handbook describes the library location and hours of operation and law library procedures and schedules.				Legal research is available through requests.
The handbook describes; attorney and regular visitation hours, policies, and procedures.				
The handbook describes the facility contraband policy.	\boxtimes			
The handbook describes the facility visiting hours and schedule and visiting rules and regulations.	\boxtimes			
The handbook describes the correspondence policy and procedures.				
 The handbook describes the detainee disciplinary policy and procedures: Including: Prohibited acts and severity scale sanctions. Time limits in the Disciplinary Process. Summary of Disciplinary Process. 				
 The grievance section of the handbook explains all steps in the grievance process – Including: Informal (if used) and formal grievance procedures; The appeals process; <u>In CDF</u> facilities: procedures for filing an appeal of a grievance with ICE. Staff/detainee availability to help during the grievance process. Guarantee against staff retaliation for filing/pursuing a grievance. How to file a complaint about officer misconduct with the Department of Homeland Security. 	X			
The detainee handbook describes the medical sick call procedures for general population and segregation.	\boxtimes	, 🗖		
The handbook describes the facility recreation policy including: Outdoor recreation hours. Indoor recreation hours. 	Ø			
The handbook describes the detainee dress code for daily living; and work assignments.	\boxtimes			
The handbook specifies the rights and responsibilities of all detainees.				

DETAINEE HANDBOOK Acceptable Deficient At-Risk Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6), (b)(7)c 8/06 Auditor's Signature / Date

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 N NA Remarks							
Components	Y	N	NA	Remarks			
The food service program is under the direct supervision of a <u>professionally trained</u> and certified service administrator. Responsibilities of cooks and cook foremen are in writing. The Food Service Administrator (FSA) determines the responsibilities of the Food Service Staff.							
The Cook Foreman is on duty on days when the FSA is off duty and vice versa.							
 The FSA provides food service employees with training that specifically addresses detainee-related issues. In ICE Facilities this includes a review of the ICE "Food Service" standard 							
Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device.							
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							
Special procedures (when necessary) govern the handling of food items that pose a security threat.	\boxtimes						
Operating procedures include daily searches (shakedowns) of detainee work areas.							
The FSA monitor staffs implementation of the facility's population counts procedures. Staff are trained in counts procedures.							
The detainees assigned to the food service department look neat and clean. Their clothing and grooming comply with the "Food Service" standard.							
The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to- date.							
The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.							
 During orientation and training session(s), the CS 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. 							
The Cook Foreman documents all training in individual detainee detention files.	\boxtimes						
Detainees at CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSAs are subject to local and State rules and regulations regarding detainee pay.							

FOOD SERVICE

Policy: Every facility will provide detainees in its care accordance with the highest sanitary standards.	e with nu	utritious	and ap	petizing meals, prepared in
Components	Y	N	NA	Remarks
Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.				
For cafeteria style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.				
The facility has a standard 35-day menu cycle. IGSAs use a 35 day or similar system for rotating meals.				5 week cycle.
The FSA or facility considers the ethnic diversity of the facility's detainee population when developing menu cycles. (Provide examples)				
A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.				
The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.				
 The Cook Foreman has the authority to change menu items if necessary. If yes, documenting each substitution, along with its justification With copy to FSA 				
All staff and volunteers know and adhere to written "food preparation" procedures.	×			
Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	X			Chaplain has to approve their request.
 A common-fare menu available to detainees whose dietary requirements cannot be met on the main. Changes to the planned common-fare menu can be made at the facility level. Hot entrees are offered three times a week. The common-fare menus satisfy nutritional recommended daily allowances (RDAs). Staff routinely provides hot water for instant beverages and foods. Common-fare meals are served with: Disposable plates and utensils. Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items. 	×			
A supervisor at the command level must approve a detainee's removal from the Common-Fare Program.				
The Warden, in conjunction with the chaplain and/or local religious leaders, provide the FSA a schedule of the ceremonial meals for the following calendar year.				

FOOD SEF	RVICE:			ай , <u>, , , , , , , , , , , , , , , , , ,</u>
Policy: Every facility will provide detainees in its care accordance with the highest sanitary standards.	• with m	utritious	and ap	petizing meals, prepared in
Components	Y	N	NA	Remarks
 The common-fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. Muslims fasting during Ramadan receive their meals after sundown. Jews who observe Passover but do not participate in the Common-Fare Program receive the same Kosher-for- Passover meals as those who do participate. Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. 	⊠			
The food service program addresses medical diets.	\square			
satellite-feeding programs follow guidelines for proper sanitation.				
Hot and cold foods are maintained at the prescribed, *safe" temperature(s) as served.				
All meals provided in nutritionally adequate portions.	\square			
Food is not used to punish or reward detainees based upon behavior.				
 The food service staff instructs detainee volunteers on: Personal cleanliness and hygiene; Sanitary techniques for preparing, storing, and serving food, and; The sanitary operation, care, and maintenance of equipment. 				
Everyone working in the food service department complies with food safety and sanitation requirements.				
Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment. • who conducts the inspections?				The Food Services Superviosr and a member of the health care staff.
 Equipment is inspected for compliance with health and safety codes and regulations. When was the most recent inspection? Which agency conducted the inspection? 				The Blount County Health Inspector.
Reports of discrepancies are forwarded to the Warden or designated department head and corrective action is scheduled and completed.				
Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal.				
Staff documents the results of every refrigerator/ freezer temperature check.				
The cleaning schedule for each food service area is conspicuously posted.				
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.				
Storage areas are locked when not in use.	\boxtimes			

	FO	OOD SERVICE	
Acceptable	Deficient	At-Risk	Repeat Deficiency

8/06

 $(b)(6)_{r}(b)(7)c$

FUNDS AND PERSON	AL PRO	PERTY	1	
Policy: All facilities will implement procedures to com Procedures will provide for the secure storage of funds, va documentation and receipting of surrendered property; and funds, valuables, and other property. Standard NA: (IGSA ONL M Check this box if all IC handled only by the IDE Field Office	iluables, I the initia :E detail	bagga alandin nee Fu	ge and gularly n ds, V	other personal property; the scheduled inventorying of all aluables and Property are
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.				
Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.				
Staff itemizes the baggage and personal property of arriving detainees, including funds and valuables). For <u>IGSAs and CDFs</u> , using a personal property inventory form that meets the ICE standard?				1
Staff forwards an arriving detainee's medicine to the medical staff.				
Staff searches arriving detainees and their personal property for contraband.				
There is a written policy for returning forgotten property to detainees and staff follows procedures?	\boxtimes			
Property discrepancies are immediately reported to the CDEO or Chief of Security.	\boxtimes			
Staff follows written procedures when returning property to detainees.				
CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.	\boxtimes			
 The facility attempts to notify an out-processed detainee that he/she left property in the facility. By sending written notice to the detainee's last known address; Via certified mail; The notice state that the detainee has 30 days in which to claim the property, after which it will be considered abandoned. 				
 The facility disposes of abandoned property in accordance with written procedures. If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE. 				
FUNDS AND PERSON	AL PRO			
	At-Rie	<u>ــــــــــــــــــــــــــــــــــــ</u>		Beneat Finding



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

Check here if No Group Presentations were conducted within the past 12 months. Mark Standard as Acceptable overall and continue on with next portion of worksheet.

Components	Yes	No	NA	Remarks
The Field Office is responsive to requests by attorneys and accredited representatives for group presentations.				
Upon receipt of concurrence by the Field Office Director, the facility or authorized ICE Field Office ensures proper notification to attorneys or accredited representatives in a timely manner.				
The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.				
Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.				
Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.				
When the number of detainees allowed to attend a presentation is limited, the facility allows a sufficient number of presentations so that all detainees signed up may attend.				
Detainees in segregation, unable to attend for security reasons may request separate sessions with presenters. Such requests are documented.	1 🗖 1			
Interpreters are admitted when necessary to assist attorneys and other legal representatives.				
Presenters are afforded a minimum of one hour to make the presentation and to conduct a question-and-answer session.				
Staff permits presenters to distribute ICE-approved materials.				
The facility permits presenters to meet with small groups of detainees to discuss their cases after the group presentation. ICE or authorized detention staff are present but do not monitor conversations with legal providers.				
Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or disignee; and the reasons for suspension are documented. The Headquarters Office for Detention and Removal, Field Operations and Detention management Division is notified when a group or individual is suspended from making presentations.				
The facility plays ICE-approved videotaped presentations on legal rights, at regular opportunities at the request of outside organizations.				
A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request				

GROUP LEGAL RIGHTS PRESENTATIONS - Rating							
Acceptable	Deficient	At-Risk	Repeat Finding				

	E PROC	EDUR	ES	
Policy: Every facility will develop and implement stan detainee grievances in timely fashion. Each step in the Among other things, a grievance will be processed, invest with the SORs a grievance committee will convene as pro- providing the detainee with a written response to any fo decision. The facility will also establish standard pro- grievances will receive supervisory review. Reprisal agai	process igated, a ovided in rmal grie cedures inst the f	will occ nd decid the SO evance, for ha iler of a	ur withi ded (sul Ps. Sta which ndling onleva	in the prescribed time frame. bject to appeal) in accordance andard procedure will include will include the basis for the emergency grievances. All nce will not be tolerated.
Components	Y	N	NA	Remarks
 Written procedures provide for the informal resolution of oral grievances (Not mandatory). If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff. 				
 Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. Detainees may seek help from other detainees or facility staff when preparing a grievance. Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary. 	×			
Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.				Part of training.
There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodges a complaint. • If yes, explain.				
 Procedures include maintaining a Detainee Grievance Log. If not, an alternative acceptable record keeping system is maintained. "Nuisance complains" are identified in the records. For quality control purposes, staff documents nuisance complaints received but not filed. 	⊠			Grievances are scanned and put into the detainee's file on the computer.
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.				
DETAINEE GRIEVANC	E PROC	EDURI	ES	

Acceptable

Deficient

At-Risk

Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6), (b)(7)c 06

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ISSUANCE AND EXCHANGE OF CLOT	HING, B	EDDIN	G, ANI) TOWE	LS	
Policy: ICE requires that all facilities housing ICE detainee to every ICE detainee upon arrival. Further, facilities sha clothing, linens, and towels for as long as they remain in c	ll provide	ICE d				
Components	Yes	No	NA		Remarks	
 The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens and towels. The supply of these items exceeds the minimum required for the number of detainees. 						
 All new detainees are issued clean, temperature- appropriate, presentable clothing during in-processing. Detainees receive One uniform shirt and one pair of uniform pants or one jumpsuit. One pair of socks. One pair of underwear (Daily change). One pair of facility-issued footwear. 						
Additional clothing is available for changing weather conditions or is seasonally appropriate.						
 New detainees are issued clean bedding, linens and towel. They receive at a minimum: One mattress One blanket Two sheets One pillowcase One towel Additional blankets are issued based on local weather conditions. 						
Detainees assigned to special work areas are clothed in accordance with the requirements of the job.						
 Detainees are provided clean clothing, linen and towels. Socks and undergarments - exchanged daily. Outer garments - twice weekly. Sheets - weekly. Towels - weekly. Pillowcases - weekly. 						
Food service detainee volunteer workers permitted to exchange outer garments daily.						
Volunteer detainee workers are permitted to exchanges of outer garments more frequently.					<u>, </u>	

ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS - Rating

Acceptable

Deficient

🗌 At-Risk

Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6), (b)(7)c 8/06

Policy: All detainee marriage requests will receive case	by-case c	onside	eration f	rom ICE management.
Components	¥	N	NA	Remarks
The Field Office considers detainee marriage requests on a case-by-case basis.				· · · · · · · · · · · · · · · · · · ·
The Field Office Director reviews every marriage request rejected by a Warden/OIC or IGSA. Rejections are documented.				
It is standard practice to require a written request for permission to marry.				
The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.				
The Warden/OIC provides a written copy of his/her decision to the detainee and his/her legal representative.				
When permission is denied, the Warden/OIC states the basis for his/her decision.				
The Warden/OIC provides the detainee with a place and time to make wedding arrangements.				

Acceptable

Deficient

At-Risk

Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

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

NON-MEDICAL EMERGENC	Y ESCO	RTED	TRIPS	
Policy: The Immigration and Customs Enforcement (ICE) the community for the purpose of visiting critically ill me attending funerals.	may pro embers	vide de of the d	tainees letainee	s immediate family, or for
Standard NA: Check this box if all ICE Non-Medical	Emerge	onev Es	corted	Trips are bandled only by
the ICE Field Office of Sub-Office in control of the det	ainee ca	ase.		
Components	Yes	No	NA	Remarks
The Warden/OIC considers and approves, on a case- by-case basis, trips to immediate family member's: • Funeral • Deathbed				
The facility recognizes mother, father, brother, sister, spouse, child, stepparent, and foster parent as "immediate family".				
The CDF/IGSA facility notifies ICE of all detainee requests for non-medical escorts.				
The Field Office Director is the approving official for non-medical escorted trips.				
The detainee's Deportation Officer reviews the file before forwarding a detainee's request, with recommendation, to the approving official. Each recommendation addresses the individual's suitability for travel, e.g., the kind of supervision required.				
Detainees who require overnight housing are placed in approved IGSA facilities.				
 Each escort includes at least two officers. The detainee remains under constant, direct visual supervision of escorting staff. 				
Escorting officers report unexpected situations to the originating facility as a matter of procedure and the ranking supervisor on duty has the authority to issue instructions for completion of the trip.				
Escorting officers have the discretion to: a. Increase or decrease minimum restraints in accordance with written instruction, procedures and classification level of the detainee.				
Escort officers do not accept gifts/gratuities from a detainee, detainee's relative or friend for any reason.				
 Escort officers ensure that detainees: Conduct themselves in a manner that does not bring discredit to the ICE. Do not violate federal, state, or local laws. Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants. Do not arrange to visit family or friends unless approved before the trip. Make no unauthorized phone calls. Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return to the facility. 				
Standard procedure requires the immediate return to the facility of any detainee who violates trip rules.				
NON MEDICAL EMERG	ENCY E	SCOR	Γ	

NON MEDICAL EMERGENCY ESCORT

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	-			
Acceptable	Deficient	🔲 At-Risk	Repeat Finding	
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(b)(6), (b)(7)c <u>5|8|</u>06 Auditor's Signature / Date

RECREATION				
Policy: It is ICE policy to provide access to recreational	program	is and a	ctivities	s to all ICE detainees, to the
extent possible, under conditions of security and supervis	on that	protect	their sa	fety and welfare and
Components	Ý	N	NA	Remarks
Does the facility provide:		<u>, 96 8985</u>	<u></u>	
 An indoor recreation program? 				
An outdoor recreation program?	_	-		
A recreational specialist (for facilities with more than 350				
detainees) tailors the program activities and offerings to		\square		
the detainee population.				
Regular maintenance keeps recreational facilities and				
equipment in good condition.				
The recreational specialist or trained equivalent				Monitored by
supervises detainee recreation workers.		L		cameras.
The recreational specialist or trainee equivalent			57	
oversees recreation programs for Special Management				
Unit and special-needs detainees.				
Dayrooms offer sedentary activities, e.g., board games, cards, television.				
Outside activities are restricted to limited-contact sports.		+		
Each detainee has the opportunity to participate in daily		<u> </u>		Outside rec. 3 times a
recreation.				week/inside daily.
Detainees have access to recreation activities outside		<u> </u>	l	weervinoide daily.
the housing units for at least one hour daily, 5 days a				
week.				
Staff checks all items for damage and condition when	877			
equipment is returned.				
Staff conducts searches of recreation areas before and	57		— 1	
after use.				
All recreation areas under constant staff supervision.	\boxtimes			
Supervising staff is equipped with radios.	\boxtimes			
The facility provides detainees in the SMU at least one	_		_	
hour of outdoor recreation time daily, five times per	\square			
week.		<u> </u>		
Detainees in disciplinary/administrative segregation	57			
receive a written explanation when a panel revokes	\boxtimes			
his/her recreation privileges.				
Special programs or religious activities are available to detainees.	\boxtimes			
Volunteers are required to sign a waiver of liability		<u> </u>		Volunteers receive a
before entering a secure portion of the facility where	\boxtimes			training package which
detainees are present.		L3		includes a waiver.
Visitors, relatives or friends are not allowed to serve as				
volunteers.	\boxtimes			
If outdoor recreation is offered check this box. No	further	inform	ation is	s required when outdoor
recreation is offered.				•
If the facility has no outside recreation, are detainees				
considered for transfer after six months?				
 If yes, written procedures ensure timely review 	السما .			
of all eligible detainees.		L		
Case officers make written transfer recommendations				
about every six-month detainee to the OIC.	••••••			
The OIC documents all detainee-transfer decisions,				
whether yes or no.				
The detainee's written decision for or against an offered transfer documented in his/her A-file.				

RECREA	FIOIN	- :	
Policy: It is ICE policy to provide access to recreational extent possible, under conditions of security and supervise			
Staff notifies the detainee's legal representative of his/her decision to accept/decline a transfer.			
If no recreation is available, the ICE District routinely review transfer eligibility for all detainees after 60 days.			
Does the A-file of every detainee is held more than 60 days without access to recreation contains either a transfer-waiver signed by the detainee or the OIC's written determination of the detainee's ineligibility for transfer.			
The detainee's legal representative is notified of the detainee's/OIC's decision.			

🛛 Acceptable	🗌 Deficient	🗌 At-Risk	Repeat Finding

<u>s|8|06</u>

Auditor's Signature / Date

RELIGIOUS PR/		S			And the state of the
Policy: Facilities will provide IDE detainees of all faith participate in the practices of the facility and pudgetary considerations.				l equita	ble opportunities to
Components	Y	N	NA	artista Antista	Remarks
Detainees are allowed to engage in religious services.	X				
Space is available for detainees to conduct religious services.	\boxtimes				
The facility allows detainees to observe the major "holy days" of their religious faith. List any exceptions. 					
 The facility accommodates recognized holy-day observances by: Providing special meals, consistent with dietary restrictions. Honoring fasting requirements. Facilitating religious services. Allowing activity restrictions. 					
Each detainee is allowed religious items in his/her immediate possession.	\boxtimes				
Volunteer's credentials are checked and verified before allowing participation in detainee programs.	Ø				
Members of faiths not represented by clergy conduct may request to present their own services within security allowances.	\boxtimes				
Detainees in the Special Management Unit to participate in religious practices unless otherwise documented for the safety and security of the facility.					
RELIGIOUS PRA		Sut.			alia anasilina .
Acceptable Deficient	At-Ris			🗌 Rep	eat Finding

18/06

Auditor's Signature / Date

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

DETAINEE TELEPHONE ACCESS

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

0			1	
Components	¥	N	NA	Remarks
Detainees are allowed access to telephones during established facility waking hours.	\boxtimes			
Upon admittance, detainees are made aware of the facility's telephone access policy.				
Access rules are posted in housing units.		\square		
The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.				
Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	\boxtimes			
Telephones are inspected regularly by facility staff to ensure that they are in good working order.				
The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	⊠			
The facility administration monitors repair progress and take appropriate measures to ensure that the required repairs are begun and completed timely.				
Detainees are afforded a <i>reasonable degree of privacy</i> for legal phone calls.				
A procedure exists to assist a detainee who is having trouble placing a confidential call.	\boxtimes			
The facility provides the detainees with the ability to make non-collect (special access) calls.				
Special Access calls are at no charge to the detainees.	\boxtimes			
In facilities unable to fully meet this requirement initially because of limitations of its telephone service, the ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.				
No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".				
Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.	Ø			
Any telephone restrictions are documented.	\square			
The facility has a system for taking and delivering emergency detainee telephone messages.	\boxtimes			
Emergency phone call messages are immediately given to detainees.	\boxtimes			
Detainees are allowed to return emergency phone calls as soon as possible.	\boxtimes			
Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.				
Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	\boxtimes			
Detainees in disciplinary segregation are allowed phone calls for family emergencies.	Ø			

DETAINEE TELEPHONE ACCESS

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

Components	Y	N	NA	Remarks
Detainees in administrative segregation and protective custody afforded the same telephoning privileges as those in general population.				
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.				

i and Island	DETAINEE	TELEPHONE ACCESS		
eptable	Deficient	At-Risk	Repeat Finding	

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6), (b)(7)c 5/8/06 Auditor's Signature / Date

VISITAT	ION			
Policy: ICE shall permit detainees to visit with family, frier the news media.	nds, lega	al repres	entative	s, special interest groups and
Components	Y	N	NA	Remarks
There is a written visitation schedule and hours for general visitation.				
The visitation hours tailored to the detainee population and the demand for visitation.				
The visitation schedule and rules are available to the public.				
The hours for all categories of visitation are posted in the visitation waiting area.				
A written copy of the rules regulating visitation and the hours of visitation is available to visitors.				
A general visitation log is maintained.				
The detainees are permitted to retain personal property item specified in the standard.				
A visitor dress code is available to the public.				
Visitors are searched and identified according to standard requirements.				No contact visits.
The requirement on visitation by minors is complied with.				
At facilities where there is no provision for visits by minors, the ICE arranges for visits by children and stepchildren, on request, within the first 30 days.				
After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.				
Detainees in special housing afforded visitation.	\square			
Legal visitation is available seven (7) days a week, including holidays.	\boxtimes			
On regular business days legal visitation hours provide for a minimum of eight (8) hours per day and a minimum of four hours per day on weekends and holidays.				
On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.				
Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.				
There are written procedures governing detainee searches.				
When strip searches are required after every contact visit with a legal representative, the facility provides an option for non-contact visits with legal representatives.				
Prior to each visit, legal service providers and assistants are identified per the standard.				
The current list of <i>pro bono</i> legal organizations is posted in the detainee housing areas and other appropriate areas.				

VISITATI	a di sussian			
Policy: ICE shall permit detainees to visit with family, frien the news media.	ıds, lega		entatives	s, special interest groups and
The decision to permit or deny a tour is not delegated below the level of Field Office Director.				
Provisions for NGO visitation as stated in the Detention Standards are complied with.				
Law enforcement officials, requesting to visit with a detainee, are referred to the ICE Field Office for approval.				
Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the OIC or ICE Field Office.				
Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.				
VISITATI	ON			
Acceptable Deficient	│ At-R	isk		Repeat Finding

(b)(6), (b)(7)c 5/8/06

VOLUNTARY WOR	VPROC			
Policy: In every facility offering a voluntary work program, earn money by participating. While not legally required, Safety and Health Administration (OSHA) protections. Check here if ICE detainees are not authorized to 324A, page 3 and move to next section.	ICE affo	ords de	tainee v	workers basic Occupational
Components	Y	Ň	NA	Remarks
 Does the facility have a voluntary work program? Do ICE detainees participate? 				
Detainee housekeeping meets neatness and cleanliness standards.				
Detainees have the opportunity to participate in special details, however, are never allowed to work outside the secure perimeter.				
 Written procedures govern selection of detainees for the Voluntary Work Program. The same procedures apply for replacement workers as for "new" workers. Staff follows written procedures. 				
Where possible, physically and mentally challenged detainees participate in the program.				
 The facility complies with work-hour requirements for detainees, not exceeding: Eight hours a day. Forty hours a week. 				
Detainee volunteers generally work according to fixed schedule.				
If a detainee is removed from a work detail, staff places the written justification for the action in the detainee's detention file.				
Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.				
The voluntary work program meets: • OSHA standards • NFPA standards • ACA standards				
 Medical staff screens and formally certifies detainee food service volunteers. Before the assignment begins As a matter of written procedure 				
Detainees receive safety equipment/ training sufficient for the assignment				
Proper procedure is followed when an ICE detainee is injured on the job.				

		UNTARY WORK PRO	CDWM	- ** **->===
Acceptable	Deficient	At-RisK	Repeat Finding	

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

5/8/06 Auditor's Signature / Date

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Section II

Health Services Standards





	HUNGER STRIKES					
facilities will strive to sustain their ives.	ihe heall	h and v	welfare	of the individual detainees,		
Components	X	N	NA	Remarks		
When a detainee has refused food for 72 hours, it is standard practice for staff to refer him/her to the medical department.						
CDFs and IGSAs immediately report a hunger strike to the ICE.						
The facility has established procedures to ensure staff respond immediately to a hunger strike.						
Policy and procedure require that staff isolate a hunger- striking detainee from other detainees. If yes, in an observation room?						
Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.						
Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.						
The OIC of the facility obtains a hunger striker's consent before medical treatment.						
A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.	\boxtimes					
During a hunger strike, staff documents and provides the hunger-striking detainee three meals a day.	\boxtimes					
Staff maintains the hunger striker's supply of drinking water/other beverages.	\boxtimes			Drinking fountain available in cell.		
During a hunger strike, staff removes all food items from the hunger striker's living area.						
Staff is directed to record the hunger striker's fluid intake and food consumption, does staff always use Hunger Strike Monitoring Form I-839. IGSA's use a similar form.						
The medical staff has written procedures for treating hunger strikers.						
Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.						
Staff has received training in identification of hunger strikes. Medical staff receives early training in hunger- strike evaluation and treatment. Staff remain current in evaluation and treatment techniques.						

	HUNC	GER STRIKES	. beau	
🛛 Acceptable	Deficient	At-Risk	🔲 Repeat Finding	

(b)(6), (b)(7)c 5/8/06

ACCESS TO MED	ICAL CA	RE		
Policy: Every facility will establish and maintain an acer general well-being of CE detainees.	edited/ac	credita	tion-wo	ithy health program for th
Components	Y	N	NA	Remarks
Facilities operate a health care facility in compliance with State and Local laws and guidelines.				
The facility's in-processing procedures of arriving detainees include medical screening.				
All detainees have access to and receive medical care.				
The facility has access to a Managed Health Care Coordinator.				
The medical staff is large enough to provide, examine, and treat the facility's detainee population.				
The facility has sufficient space and equipment to afford each detainee privacy when receiving health care.				
The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.				
The medical facility entrance includes a holding/waiting room.				
The medical facility's holding/waiting room under the direct supervision of custodial staff.				· · ·
Detainees in the holding/waiting room have access to a toilet and a drinking fountain.				
 are: Secured in a locked area within the medical unit. With physical access restricted to authorized medical staff. Procedurally, no copies made and placed in detainee files. 				
Pharmaceuticals are stored in a secure area.				
 Medical screening includes a Tuberculosis (TB) test. Every arriving detainee receives a TB test. During the admission process. Detainee's TB-screening does not occur more than one business day after his/her arrival at the facility. Detainees not screened are housed separate from the general population. 				
 All detainees receive a mental-health screening upon arrival. It is conducted: By a health care provider or specially trained officer; Before a detainee's assignment to a housing unit. 				
The facility health care provider promptly reviews all 1- 794s (or equivalent) to identify detainees needing				· · · · · · · · · · · · · · · · · · ·
The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.	⊠			
Detainees in the Special Management Unit have access				

to health care services.

ACCESS TO MEDICAL CARE							
Policy: Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detaineds							
 Staff provides detainees with health- services (sick call) request slips daily, upon request. Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population. Service-request slips are delivered in a timely fashion to the health care provider. 							
The 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.				Hospital is located across the street.			
The plan includes an on-call provider.	\square						
The plan includes a list of telephone numbers for local ambulances and hospital services.	\boxtimes						
The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.							
Detention staff is trained to respond to health-related emergencies within a 4-minute response time.							
Where staff is used to distribute medication, a health care provider properly trains these officers.							
The medical unit keeps written records of medication that is distributed.							
The I-819 (or IGSA equivalent) is used to notify the Warden/Facility of a detainee that has special medical needs.							
A signed and dated consent form is obtained from a detainee before medical treatment is administered.							
Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.							
The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.							
Detainee's medical records or a copy thereof, are available and transferred with the detainee.	\boxtimes						
Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL".	⊠						

	ACCESS	O MEDICAL CARE	
🛛 Acceptable	Deficient	At-Risk	Repeat Finding

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

SUICIDE PREVENTION AND INTERVENTION

SUICIDE PREVENTION AND INTERVENTION						
Policy: All detention staff working with ICE detainees will t will handle potentially suicically cividuals with sensitivity, su will receive preventive supervision and treatment.	be trained pervision	torec and n	ognize. Ierrais	suicide-risk indicators, Staff A clinically suicidal detainee		
Components		N	NA	Remarks		
Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.						
 Training prepares staff to: Recognize potentially suicidal behavior; Refer potentially suicidal detainees, following facility procedures; Understand and apply suicide-prevention techniques. 	Ø					
 A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process. Screening does not occur later than one working day after the detainee's arrival. 						
Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.						
The facility has a designated isolation room for evaluation and treatment.						
The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	Ø					
Medical staff has approved the room for this purpose.	\boxtimes			Isolation room in medical.		
Staff observes and documents the status of a suicide- watch detainee at least once every 15 minutes.						

SUICIDE PREVENTION AND INTERVENTION

Deficient

At-Risk

Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6), (b)(7)c 5/8/06

AUDITOR'S SIGNATURE / Date

TERMINAL ILLINESS, ADVANCED DIRECTIVES, AND DEATH

Policy All facilities housing ICE detainees shall have policies and procedures addressing the issues of terminal illness or injury, medical advanced directives, and detainee death, to include the procedures to ensure proper notification is provided to ICE officials, family members and other interested parties in the event of a detainee becoming terminally ill or injured or death of a detainee occurs, in addition, the policy will cover procedures to be taken if the death of a detainee occurs while in transit.

Gheck this box if the facility does not accept ICE detainees who are severely or terminally ill. Indicate NA in the appropriate box for this portion of the worksheet. ALWAYS complete all references to detainee death and related notifications.

Components	Ŷ	N	NA	Remarks
Detainees, who are chronically or terminally ill, are transferred to an appropriate offsite medical facility.				
The facility or appropriate ICE office promptly notifies		<u> </u>		
the next of kin of the detainee's: medical condition.				
The detainee's location. The light time placed an existing				
The limitations placed on visiting. There are quidelines addressing State Advanced				·
There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and				
Advanced Directives.				
• The guidelines include instructions for detainees				
who wish to have a living will other than the			Ļ	
generic form the DIHS provides or who wish to				
appoint another to make advance decisions for				
him or her. The guidelines provide the detainee the opportunity to			·	
have a private attorney prepare the documents.				
There is a policy addressing "Do Not Resuscitate				
Orders"				
Detainees with a "Do Not Resuscitate" order in the		· .		
medical record receive maximal therapeutic efforts short				
of resuscitation?				
The facility notifies the DIHS Medical Director and Headquarters' Legal Counsel of the name and basic			-	
circumstances of any detainee with a "Do Not				
Resuscitate" order in the medical record. In the case of				
IGSAs, this notification is made through the local ICE				
representative.				
The facility has written procedures to address the issues				
of organ donation by detainees.				
The facility has written procedures to notify ICE officials,				
deceased family members and consulates, when a detainee dies while in Service.				
The facility has a policy and procedure to address the				
death of a detainee while in transport.				
At all ICE locations the detainee's remains disposed of				
in accordance with the provisions detailed in this				
standard.				
In the event that neither family nor consulate claims the		-		
remains, the Field Office schedules an indigent's burial,		-		
consistent with local procedures.	ليسا			
 If the detainee's is a U.S. military veteran is the Department of Veterans Affairs notified. 				
An original or certified copy of a detainee's death				· · · · · · · · · · · · · · · · · · ·
certificate is placed in the subject's a-file.				

		····		
TERMINAL ILLNESS, ADVANCED	DIREC	TIVES,	AND D	EATH
Policy All facilities housing ICE detainees shall have policie illness or injury, medical advanced directives, and detainee notification is provided to ICE officials, family members and becoming terminally ill or injured or death of a detainee occ beitaken if the death of a detainee occurs while in transit. Check this box if the facility does not accept ICI Indicate NA in the appropriate box for this portion of the to detainee death and related notifications.	e death, d other i curs. In E detai	to inclu interest additior nees w	de the p ed partie n, the po ho are	severely or terminally ill.
Components	Y	N	NA	Remarks
 The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as Performance of an autopsy. Who will perform the autopsy. Obtaining State approved death certificates. Local transportation of the body. 				
ICE staff follow established procedures to properly close the case of a deceased detainee.				

🛛 Acceptal	ble 🗌 Deficient	At-Risk	Repeat Findin	q
	TERMINAL ILLNESS, A	DVANCED DIRECTIVE	S, AND DEATH	

(b)(6), (b)(7)c 5/8/06

Section III

Security and Control

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Components		N	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.				
Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.				
Staff returns property not needed as evidence to the proper authority. Written procedures cover the return of such property.				
Altered property is destroyed following documentation and using established procedures.				
Before confiscating religious items, the OIC or designated investigator contacts a religious authority.				
Staff follows written procedures when destroying hard contraband that is illegal.				
Hard contraband that is illegal (under criminal statutes) may be retained and used for official use, e.g. training purposes. If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use.	⊠			

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DETENTION FILES							
Policy: Every facility will create a detention file for every ICE detainee booked into the facility, excluding only detainees scheduled to depart within 24 hours. The detention file will contain copies and, in some cases, the original of specified documents concerning the detainee's stay in the facility: classification sheet, medical questionnaire, property inventory sheet, disciplinary documents etc.							
Components		N	NA	Remarks			
A detention file is created for every new arrival whose stay will exceed 24 hours.							
The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.							
 The detainee's detention file also contains documents generated during the detainee's custody. Special requests Any G-589s and/or I-77s closed-out during the detainee's stay Disciplinary forms/Segregation forms Grievances, complaints, and the disposition(s) of same 							
The detention files are located and maintained in a secured area. If not the cabinets are lockable and distribution of the keys is limited to supervisors.							
The detention file remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent and other documentation.							
The officer closing the detention file makes a notation that the file is complete and ready to be archived.							
Staff makes copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.							
Appropriate staff has access to the detention files and other departmental requests are accommodated by making a request for the file. Each file is properly logged out and in by a representative of the responsible department.							
DETENTION	FILES			E			
Acceptable Deficient At-Risk Repeat Finding							

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

DISCIPLINARY POLICY							
Policy: All facilities housing ICE detainees are authorized not in compliance with facility rules and regulation		se discij	bline on	detainees whose methavior is			
Components	Y .	N	NA	Remarks			
The facility has a written disciplinary system using progressive levels of reviews and appeals.							
The facility rules state that disciplinary action shall not be capricious or retaliatory.							
 Written rules prohibit staff from imposing or permitting the following sanctions: corporal punishment deviations from normal food service clothing deprivation bedding deprivation denial of personal hygiene items loss of correspondence privileges deprivation of physical exercise 							
The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.							
 The following items are conspicuously posted in Spanish and English or other dominate languages used in the facility: Rights and Responsibilities Prohibited Acts Disciplinary Severity Scale Sanctions 							
When minor rule violations or prohibited acts occur, informal resolutions are encouraged.							
Incident reports and Notice of Charges are promptly forwarded to the designated supervisor.							
Incident reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before investigations end.							
An intermediate disciplinary process is used to adjudicate minor infractions.	\boxtimes						
 A disciplinary panel (or equivalent in IGSAs) adjudicates infractions. The panel: Conducts hearings on all charges and allegations referred by the UDC Considers written reports, statements, physical evidence, and oral testimony Hears pleadings by detainee and staff representative Bases its findings on the preponderance of evidence Imposes only authorized sanctions 							
A staff representative is available if requested for a detainee facing a disciplinary hearing							
The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons for are documented.							

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	Y	N	NA	Remarks
The duration of punishment set by the OIC, as recommended by the disciplinary panel does not exceed established sanctions. The maximum time in disciplinary segregation does not exceed 60 days for a single offense.				
Written procedures govern the handling of confidential- informant information. Standards include criteria for recognizing "substantial evidence"	⊠			
All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.				

		DISCIPLINARY PO	LICY		ta daga daga daga daga daga daga daga da
Acceptable	Deficie	ent 🗌 A	t-Risk	Repeat I	Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6), (b)(7)c 5/8/06

EMERGENCY (CONTINC	GENCY)	PLANS	3	
Policy All facilities nolding ICE detainees will respond to eme minimize the harming of human life and the destruction of pro into agreement, via Memorandum of Understanding (MOU) times of emergency.	perty. It , with fe	sirecon	nmende ocal and	ed that SPCs and CDFs enter state agencies to assist in
Components	Y	N	NA	Remarks
No Detainee or detainee groups exercise control or authority over other detainees.				
Detainees are protected from: Personal abuse Corporal punishment Personal injury Disease Property damage Harassment from other detainees				
 Staff are trained to identify signs of detainee unrest. What type of training and how often? 				
Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Officer In Charge (OIC)	\boxtimes			
There is a designated person or persons responsible for emergency plans and their implementation. Sufficient time is allotted to the person or group for development and implementation of the plans.				Captain.
 The plans address the following issues: Confidentiality Accountability (copies and storage locations) Annual review procedures and schedule Revisions 				
Contingency plans include a comprehensive general section with procedures applicable to most emergency situations.				
 The facility has cooperative contingency plans with applicable: Local law enforcement agencies State agencies Federal agencies 				
All staff receive copies of Hostage Situation Management policy and procedures.				
Staff is trained to disregard instructions from hostages, regardless of rank. Within 24 hours after release hostages are screened for medical and psychological effects.	\boxtimes			
Emergency plans include emergency medical treatment for staff and detainees during and after an incident.				
The food service maintain at least 3-days' worth of emergency meals for staff and detainees.				
Written plans locate shut-off valves and switches for all utilities (water, gas, electric).	\boxtimes			Pod officer has access to turn off utilities.

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 emerdency.

Components	Y	N /	NA	Remarks
Written procedures cover: Work/Food Strike Disturbances Escapes Bomb Threats Adverse Weather Internal Searches Facility Evacuation Detainee Transportation System Plan Internal Hostages Civil Disturbances				

	EMERGENCY (C	DINTINGENCY) PLANS		
Acceptable	Deficient	At-Risk	Repeat Finding	

Remarks: (Record significant facts, observations, other sources used, etc.)

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

ENMIRONMENTAL HEALTH AND SAFETY						
Policy: Every facility will control illammable, 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						
Companents	Y	i n	NA	Remarks		
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.						
Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.						
 The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. The files list all storage areas, and include a plant diagram and legend. The MSDSs and other information in the files are available to personnel managing the facility's safety program. 						
 All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: Wear personal protective Equipment. Report hazards and spills to the designated official. 				Detainees are not in contact with such substances. Officers are provided with protective equipment.		
The MSDSs are readily accessible to staff and detainees in the work areas.						
 Hazardous materials are always issued under proper supervision. quantities are limited. Staff always supervises detainees using these substances. 						
All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.						
Lighting fixtures and electrical equipment are installed in storage rooms and other hazardous areas meet National Electrical Code requirements.						
All toxic and caustic materials stored in their original containers in a secure area.						
Excess flammables, combustibles, and toxic liquids are disposed of properly and in accordance with MSDSs.						
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.						
Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.						
The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association and the Occupational Safety and Health Administration (OSHA).						
A technically qualified officer conducts the fire and safety inspections.	\boxtimes			· · · · · · · · · · · · · · · · · · ·		

ENVIRONMENTAL HEALTH AND SAFETY

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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

Thour pariper materials, and sale manufing procedures				
Components	Ŷ	⊨ Ņ	NA	Remarks
The Safety Office (or officer) maintains files of inspection reports; Including corrective actions taken.				
The facility has an approved fire prevention, control, and evacuation plan.				
 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. 				
Fire drills are conducted and documented monthly.		<u> </u>		Quarterly.
A sanitation program covers barbering operations.	μ	\Box		
The barbershop has the facilities and equipment necessary to meet sanitation requirements.			⊠	
The sanitation standards are conspicuously posted in the barbershop.				
Written procedures regulate the handling and disposal of used needles and other sharp objects.	\boxtimes			
All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.				
 Standard cleaning practices include: Using specified equipment; cleansers; disinfectants and detergents. An established schedule of cleaning and follow- up inspections. 				
The facility follows standard cleaning procedures.	\boxtimes			
Spill kits are readily available.		Χ		
A licensed medical waste contractor disposes of infectious/bio-hazardous waste.				
Staff are trained to prevent contact with blood and other body fluids and written procedures are followed.				
Do the methods for handling/disposing of refuse meet all regulatory requirements.				
 A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. At least monthly. The pest-control program includes preventive spraying for indigenous insects. 				
Drinking water and wastewater is routinely tested according to a fixed schedule.				
 Emergency power generators is tested at least every two weeks. Other emergency systems and equipment receive testing at least quarterly. Testing is followed-up with timely corrective actions (repairs and replacements). 				

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

<u>5/8/06</u>

HOLD ROOMS IN DETENTION FACILITIES							
Policy: Hold rooms will be used only for temporary deter hearings, medical treatment, intra-facility movement, or d							
Components	Y	N	NA	Remarks			
The hold room is situated in a location within the secure perimeter.							
The hold rooms well ventilated, well lighted and all activating switches located outside the room.							
The hold rooms contain sufficient seating for the number of detainees held.							
No bunks/cots/beds or other related make shift							
sleeping apparatuses are permitted inside holdrooms. The walls of the hold rooms escape proof.							
The hold room ceilings are escape and tamper resistant. Individuals are not held in hold rooms for more than 12							
hours.							
Male and females are segregated from each other at all times.							
Every effort is made to ensure that detained detainees under the age of 18 are not held with adult detainees.				-			
Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	\boxtimes						
In older facilities officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.							
All detainees are given a patdown search for weapons or contraband before being placed in the room.							
 Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring.). Hold rooms are irregularly monitored every 15 minutes. Unusual behavior or complaints are noted. 							
 When the last detainee has been removed from the hold room, it is given a thorough inspection. Cleaning. Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair. 							
 There is a written evacuation plan. There is a designated officer to remove detainees from the holdrooms in case of fire and/or building evacuation. 							
An appropriate emergency service is called immediately upon a determination that a medical emergency may exist.							
HOLD ROOMS IN DETEI		FACILIT	IES	in an			
🛛 Acceptable 🗌 Deficient 🗌 At-Ri							

5/8/06

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.

Tertainte nance of an Reys and locks.				······
Components	¥	N	NA	Remarks
The security officer[s], or equivalent in IGSAs, has attended an approved locksmith training program.			\boxtimes	Lock program is outsourced.
The security officer, or equivalent in IGSAs, has responsibly for all administrative duties and responsibilities relating to keys, locks etc.				
The security officer, or equivalent in IGSAs, provides training to employees in key control.				
The security officer, or equivalent in IGSAs, maintains inventories of all keys, locks and locking devices.				
The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.				
Facility policies and procedures address the issue of compromised keys and locks.				
The security officer, or equivalent in IGSAs, develops policy and procedures to ensure safe combinations integrity.				
Only dead bolt or dead lock functions are used in detainee accessible areas.	\boxtimes			
Non-authorized locks (as specified in the Detention Standard) are not used in detainee accessible areas.				
The facility does not use grand master keying systems.	\boxtimes			
All worn or discarded keys and locks cut up and properly disposed of .				
Padlocks and/or chains are not used on cell doors.				
 The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to Occupational Safety and Environmental Health Manual, Chapter 3 National Fire Protection Association Life Safety Code 101. 				
The operational keyboard sufficient to accommodate all the facility key rings including keys in use is located in a secure area.				
 Procedures in place to ensure that key rings are: Identifiable Numbers of keys on the ring are cited? Keys cannot be removed from issued key rings 				Officers have to sign to receive keys.
Emergency keys are available for all areas of the facility.	\boxtimes			
The facilities use a key accountability system.				
Authorization is necessary to issue any restricted key.				
Individual gun lockers are provided.	<u> </u>			
 They are located in an area that permits constant officer observation. In an area that does not allow detainee or public access. 				
The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	\boxtimes			

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)						
Policy It is the policy of the ICE Service to maintain an maintenance of all keys and locks.	h effi cie i	nt syste	m for I			
Components	Ň	in Nor	NA .	Remarks		
 All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. Detainees are not permitted to handle keys assigned to staff. 						
KEY AND LOCK	CONTRO	DL				
Acceptable Deficient] At-Ris	ĸ		Repeat Finding		

POPULATION	COUNT	S	<u> </u>	·
Policy: All detention facilities shall ensure around-the-clo they conduct at least one formal count of the detainee por counts conducted as necessary.	oulation	pershift		
Components	M	N	NA	Remarks
Staff conducts a formal count at least once each shift.	\square			
Activities cease or are strictly controlled while a formal count is being conducted.				
Do certain operations continue during formal counts.		X		
Is a certain amount of movement tolerated during a formal count.		\boxtimes		
Formal counts in all units take place simultaneously.	\square			
Officers do not allow detainee participation in the count.	\square			
A face-to-photo count follows each unsuccessful recount.	\boxtimes			
Officers positively identify each detainee before counting him/her as present.				
 Written procedures cover informal and emergency counts. They followed during informal counts. During emergencies. 				
The control officer (or other designated position) maintains an out -count record of all detainees temporarily leaving the facility.				
This training is documented in each officer's training folder.				

ing and an and an	Popu	lation Counts	
🖂 Acceptable	Deficient	At-Risk	Repeat Finding

<u> 5/2/06</u> (b)(6), (b)(7)c

POST ORDERS						
Policy: ICE provides officers all necessary guidance for carrying out their duties. This guidance includes the post orders established for every post, which are reviewed at least annually, and given to each officer upon assignment to that post						
Components	La Maria	N	NA	Remarks		
Every Fixed post has a set of post orders.	\square					
Each set contains the latest inserts (emergency memoranda, etc.) and revisions.						
One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.						
The IGSA maintains a complete set (central file) of post orders.	\boxtimes					
The central file accessible to all staff.						
The OIC or Contract / IGSA equivalent initiate/authorizes all post-order changes.						
The OIC or Contract / IGSA equivalent has signed and dated the last page of every section.						
A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.						
Procedures keep post orders and logbooks secure from detainees at all times.						
Every armed-post officer qualifies with the post weapon(s) before assuming post duty.	\boxtimes					
Armed-post post orders provide instructions for escape attempts.						
The post orders for housing units track the event schedule.						
Housing-unit post officers record all detainee activity in a log. The post order include instructions on maintaining the logbook.						
POST ORD	ERS	·····	·····			

Acceptable

Deficient

🗌 At-Risk

Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

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

<u> 5/8/</u>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		Remarks		
The facility has a comprehensive security inspection policy. The policy specifies:		·				
Posts to be inspected						
 Required inspection forms 		· · · ·	[<u> </u>			
 Frequency of inspections 						
 Guidelines for checking security features 	-					
 Procedures for reporting weak spots, 						
inconsistencies, and other areas needing improvement		·				
Every officer is required to conduct a security check of						
his/her assigned area. The results are documented.		┝───				
Documentation of security inspections is kept on file.		<u> </u>	<u> </u>			
Procedures ensure that recurring problems and a failure to						
take corrective action are reported to the appropriate						
manager. The front-entrance officer checks the ID of everyone	· · · · · · · · · · · · · · · · · · ·	<u> </u>				
entering or exiting the facility.	\square					
All visits officially recorded in a visitor logbook or electronically recorded.						
The facility has a secure visitor pass system.		╎───				
Every Control Center officer receives specialized training.			┝┝╡╴			
The Control Center is staffed around the clock.		┝╞┽╴	<u> </u>			
Policy restricts staff access to the Control Center.		┝╌╞╡╌	┝╞┽╴			
Detainees do not have access to the Control Center.			╞┝╤			
Communications are centralized in the Control Center.		┼ ╞╡				
Officers monitor all vehicular traffic entering and leaving		╞┉╘┙┩	┠╴╘┛╶╴			
the facility.						
The facility maintains a log of all incoming and departing		<u> </u>				
vehicles to sensitive areas of the facility. Each entry contains:						
The driver's name						
Company represented						
Vehicle contents						
Delivery date and time						
 Date and time out 						
Vehicle license number						
 Name of employee responsible for the vehicle 		ľ				
during the facility visit						
Officers thoroughly search each vehicle entering and						
leaving the facility.			\boxtimes			
The facility has a written policy and procedures to prevent				· · · ·		
the introduction of contraband into the facility or any of its	\boxtimes					
components.						
Tools being taken into the secure area of the facility are		57				
inventoried before entering and prior to departure.		\boxtimes				
The SMU entrance has a sallyport.			\boxtimes			
Written procedures govern searches of detainee housing						
units and personal areas.	\square					
Housing area searches occur at irregular times.	\square					
Every search of the SMU and other housing units	\boxtimes					
documented.	<u>e</u>					

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Policy: Post assignments in the facility's high-risk areas, w will be restricted to experienced personnel with a thorough				
Components	Yes	No		Remarks
Storage and supply rooms; walls, light and plumbing fixtures, accesses, and drains, etc. undergo frequent, irregular searches. These searches are documented.				
Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	\boxtimes			
 Daily procedures include: Perimeter alarm system tests. Physical checks of the perimeter fence. Documenting the results. 				
Visitation areas receive frequent, irregular inspections.	\square			
	ECTION	S	H	
Acceptable Deficient] At-Ris	ik		Repeat Finding

(b)(6), (b)(7)c <u>s[8]</u>06 Auditor's Signature / Date

SPECIAL MANAGEMENT UNIT (SMU) Administrative Segregation

Policy: The Special Management Unit required in every population. The Special Management Unit will consist a houses detainees isolated for their own protection; the oth the "Special Management Unit Disciplinary Segregation]	of two's erforde	ections. tainees	One,	Administrative Segregation,
Components	Y	N	NA	Remarks
 The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. Detainees are placed in the SMU (administrative) in accordance with written criteria. 			-	
 In exigent circumstances, staff may place a detainee in the SMU (administrative) before a written order has been approved. A copy of the order given to the detainee within 24 hours. 				
 The OIC (or equivalent) regularly reviews the status of detainees in administrative detention. A supervisory officer conducts a review within 72 hours of the detainee's placement in the SMU (administrative). 				
 A supervisory officer conducts another review after the detainee has spent seven days in administrative segregation. Every week thereafter for the first month. Every 30 days after the first month. Does each review include an interview with the detainee. Is a written record made of the decision and the justification. 	×			
 The detainee is given a copy of the decision and justification for each review. The detainee is given an opportunity to appeal the reviewer's decision to someone else in the facility. 				
 The OIC (or equivalent) routinely notifies the Field Office Director (or staff officer in charge of IGSAs) any time a detainee's stay in administrative detention exceeds 30 days. Upon notification that the detainee's administrative segregation has exceeded 60 days, the FD forwards written notice to HQ Field Operations Branch Chief for DRO. 	⊠			
 The OIC or equivalent) reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU. A written record is made of the decision and the justification. The detainee receives a copy of this record. 				
The detainee is given the right to appeal to the OIC (or equivalent) the conclusions and recommendations of any review conducted after the detainee has remained in administrative segregation for seven consecutive days.				

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 tandetainees being disciplined for wrongdoing (see the "Special Management Unit [Disciplinary Segregation]" standard).

Components	Y		NA	Remarks
Administratively segregated detainees enjoy the same general privileges as detainees in the general				
population.				
The SMU well ventilated.				
Adequately lighted.				
Appropriately heated.			L	
Maintained in a sanitary condition.	ļ. <u></u>			
All cells are equipped with beds.	57			ļ
 Every bed securely fastened to the floor or wall. 				
The number of detainees in any cell does not exceed				
the occupancy limit.				
When occupancy exceeds recommended			-	
capacity, do basic living standards decline?	_			
Do criteria for objectively assessing living				
standards exist?				
If yes, are the criteria included in the written				
procedures?				· · · · · · · · · · · · · · · · · · ·
The segregated detainees do not have fewer	57			
opportunities to exchange/launder clothing, bedding,				
and linen than detainees in the general population.		<u> </u>		
Detainees receive three nutritious meals per day.				
From the general population's menu of the day.	\square			
Do detainees eat only with disposable utensils.	1			
Is food ever used as punishment. Each detainee maintains a normal level of personal		<u> </u>		
hygiene in the SMU.				
The detainees have the opportunity to shower	\boxtimes			
and shave at least three times a week.		 -1		
If not, explain.				
The detainees are provided:		[
Barbering services.				
 Recreation privileges in accordance with the 				
"Detainee Recreation" standard.	-			
 Non-legal reading material. 				
Religious material.		╎└┙╷		
• The same correspondence privileges as				
detainees in the general population.				
 Telephone access similar to that of the general population. 				
 Personal legal material. 				
A health care professional visits every detainee at least			-	······································
three times a week.				
The shift supervisor visits each detainee daily.				
Weekends and holidays.				
Procedures comply with the "Visitation" standard.				
The detainee retains visiting privileges.				
 The visiting room available during normal 				
visiting hours.				
Visits from clergy are allowed				

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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).						
 Detainees do not have less law-library access than the general population. Are they required to use the law library separately, as a group? If so: Legal materials brought to them. 						
 The SMU maintains a permanent log. Detainee-related activity, e.g., meals served, recreation, visitors etc. 						
 <u>SPC procedures</u> include completing the SMU Housing Record (I-888) immediately upon a detainee's placement in the SMU. Staff completes the form at the end of each shift. <u>CDFs and IGSA</u> facilities use Form I-888 (or local equivalent). 						
 Staff record whether the detainee ate, showered, exercised and took any medication during every shift. Logs record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc The medical officer/health care professional signs each individual's record during each visit The housing officer initials the record when all detainee services are completed or at the end of the shift. 						
 A new record is created for each week the detainee is in Administrative Segregation. These weekly records are retained in the SMU until the detainee's return to the general population. 						

astrese str	an the statement of		AGEMENT UNIT (SMU) ative Segregation	∯ an the antibus
Ac	ceptable	Deficient	At-Risk	Repeat Finding

(b)(6), (b)(7)c 06 Auditor's Signature / Date

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SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)							
Policy: Each facility will establish a Special Management Unit in which to isolate certain detainees from the general population. The Special Management Unit will have two sections, one for detainees in Administrative Segregation; the other for detainees being segregated for disciplinary reasons.							
Components	NA NA						
Officers placing detainees in disciplinary segregation follow written procedures.							
The sanctions for violations committed during one incident do not exceed 60 days.							
 A completed Disciplinary Segregation Order accompanies the detainee into the SMU. The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation. 							
 Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at set intervals. After each formal review, the detainee receives a written copy of the decision and reasons for it. 							
The conditions of confinement in the SMU are proportional to the amount of control necessary to protect detainees and staff.							
Detainees in disciplinary segregation have fewer privileges than those housed in administrative segregation.							
 Living conditions in disciplinary SMUs modified to reinforce acceptable behavior. If yes, does staff prepare written documentation for this action. Does the OIC sign to indicate approval. 							
Every detainee in disciplinary segregation receive the same humane treatment, regardless of offense.	\boxtimes						
 The quarters used for segregation are: Well-ventilated. Adequately lighted. Appropriately heated. Maintained in a sanitary condition. 							
 All cells are equipped with beds. The beds securely fastened to the floor or wall of the cell. 							
 The number of detainees confined to each cell or room do not exceed the number for which the space was designate. Does the OIC approve excess occupancy on a temporary basis. 							
When a detainee is segregated without clothing, mattress, blanket, or pillow, (in a dry cell setting) a justification is made and the decision is reviewed each shift. Items are returned as soon as it is safe.	\boxtimes						
Detainees in the SMU have the same opportunities to exchange clothing, bedding, etc., as other detainees.					•		

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)

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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.

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)						
Polley: 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	Ý	N	NA	Remarks		
All detainee-related activities are documented, e.g., meals served, recreation activities, visitors, etc.	\boxtimes					
Is the <u>SPC's</u> , the Special Management Housing Unit Record (I-888or equivalent) is prepared as soon as the detainee is placed in the SMU. • All I-888s filled out by the end of each shift • The <u>CDF/IGSA</u> facility use Form • I-888 (or equivalent local form).						
 SMU staff records whether the detainee ate, showered, exercised, took medication, etc. Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc. The health care official sign individual records after each visit. The housing officer initials the record when all detainee services are completed or at the end of the shift. A new record is created weekly for each detainee in the SMU. The SMU retains these records until the detainee leaves the SMU. 						

l - San - Sa		SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)		and Altino, and
	Deficient	At-Risk	Repeat Finding	

(b)(6), (b)(7)c <u> 5/8/06</u>

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 Y N NA Remarks								
There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.								
Department heads are responsible for implementing this standard in their departments.								
 Tool inventories are required for: Maintenance Department Medial Department Food Service Department Electronics Shop Recreation Department Armory 								
 The facility has a facility policy for the regular inventory of all tools. The policy sets minimum time lines for physical inventory and all necessary documentation. ICE facilities use AMIS bar code labels when required. 								
 The facility has a tool classification system. Tools are classified according to: Restricted (dangerous/hazardous) Non Restricted (non-hazardous). 				Don't keep restricted tools in jail.				
Department heads are responsible for implementing tool-control procedures.								
The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable.		⊠						
 The facility has an approved tool storage system. The system ensures that all stored tools are accountable. Commonly used tools (tools that can be mounted) are stored in such a way that missing tool are readily notice. 								
Each facility has procedures for the issuance of tools to staff and detainees.	\boxtimes							
 The facility has policies and procedures to address the issue of lost tools. The policy and procedures include: Verbal and written notification. Procedures for detainee access. Necessary documentation/review for all incidents of lost tools. 								
Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	\boxtimes							
All private or contract repairs and maintenance workers under contract to the ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility.	\boxtimes							

	TOC	OL CONTROL	
Acceptable	Deficient	At-Risk	Repeat Finding

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

5/8/06

TRANSPORTATION (Land Transportation)

Policy The Immigration and Naturalization Service will take all necessary precautions to protect the lives, safety, and welfare of our officers, the general public, and those in ICE custody during the transportation of detainees. Standards have been established for professional transportation under the supervision of experienced and trained Detention Enforcement Officers or authorized contract personnel.

Standard NA: Check this box if all ICE Transportation are handled only by the ICE Field Office or Sub-Office in control of the detainee case.

I.	Jub-Office III control on the Mexanice Case.	-	101 a		
F	Components	Yes	No	NA	Remarks
-	Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.				
	Every transporting officer required to drive a commercial size bus has a valid Commercial Driver's License (CDL) issued by the state of employment.				
ſ	Supervisors maintain records for each vehicle operator.				
	 Officers use a checklist during every vehicle inspection. Officers report deficiencies affecting operability. Deficiencies are corrected before the vehicle goes back into service. 				
	 Transporting officers: Limit driving time to 10 hours in any 15 hour period. Drive only after eight consecutive off-duty hours. Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours. Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days. During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a safe area-exceeding the 10-hour limit. 				
	 Two officers with valid CDLs required in any bus transporting detainees. When buses travel in tandem with detainees, there two qualified officers per vehicle. An unaccompanied driver transport an empty vehicle. 				
	Before the start of each detail, the vehicle is thoroughly searched.				
	Positive identification of all detainees being transported is confirmed.				
	All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.				
	The facility ensures that the number of detainees transported does not exceed the vehicles manufacturers occupancy level.				
	Protective vests are provided to all transporting officers.				
	 The vehicle crew conducts a visual count once all passengers are on board and seated. Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop. 				

TRANSPORTATION (Land Transportation)					
Policy The Immigration and Naturalization Service will take all necessary precautions to protect the lives, safety, and welfare of our officers, the general public, and those in ICE custody during the transportation of detainees. Standards have been established for professional transportation under the supervision of experienced and trained Detention Enforcement Officers or authorized contract personnel.					
Components	Yes	No	NA	inanih min	Remarks
Policies and procedures are in place addressing the use of					
 restraining equipment on transportation vehicles. Officers ensure that no one contacts the detainees. One officer remains in the vehicle at all times when detainees are present. 					
 Meals are provided during long distance transfers. The meals meet the minimum dietary standards, as identified by dieticians utilized by the Service. 					
 The vehicle crew inspects all Food Service pickups before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative. Basins, latrines, and drinking-water containers/dispensers are cleaned and sanitized on a fixed schedule. 					
 Vehicles have: Two-way radios. Cellular telephones. Equipment boxes stocked in accordance with the Use of Force Standard. 					
The vehicles are clean and sanitary at all times.					· · · · · · · · · · · · · · · · · · ·
 Personal property of a detainee transferring to another facility: Is inventoried. Is inspected. Accompanies the detainee. 					
 The following contingencies are included in the written procedures for vehicle crews: Attack Escape Hostage-taking Detainee sickness Detainee death Vehicle fire Riot Traffic accident Mechanical problems Natural disasters Severe weather Passenger list is not exclusively men or women or minors 					

TRANSPORTATION (Wand Transportation)					
Acceptable	Deficient	At-Risk	Repeat Finding		

(b)(6), (b)(7)c 5/8/06

USE OF FO	RCE			
Policy: The U.S. Department of Homeland Security author other reasonable efforts to resolve a situation have failed. of the detainee, to protect and ensure the safety of detain damage and to ensure institution security and good order r control of algetainee who appears to be dangerous may b	Only tha nees, sta nay be ι	t amoui aff and ised. P	nt of for oth <mark>er</mark> s, hysical	ce necessary to gain control to prevent serious property restraints necessary to gain
Components	Yes	No	NA	Remarks
Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.				
When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, officers must try to resolve the situation without resorting to force.				
Written policy asserts that calculated rather than immediate use of force is feasible in most cases.				
 The facility subscribes to the prescribed Confrontation Avoidance Procedures. Ranking detention official, health professional, and others confer before every calculated use of force. 				
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. • Under staff supervision.				
Staff members are trained in the performance of the Use-of-Force Team Technique.				
All use-of-force incidents are documented and reviewed.	\boxtimes			·
 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 impractical. 				
Mecication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.				
Use-of-Force Team follow written procedures that attempt to prevent injury and exposure to communicable disease(s).				

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 togain control of the detainee, to protect and ensure the safety of detainees, staff and others, to prevent serious property damage and to ensure institution security and good order may be used. Physical restraints necessary to gain control of a detainee who appears to be dangerous may be employed when the detainee:

Components	Yes	No	NA	Remarks
 Standard procedures associated with using four-point restraints include: Soft restraints (e.g., vinyl) Dressing the detainee appropriately for the temperature. A bed, mattress, and blanket/sheet. Checking the detainee at least every 15 minutes. Logging each check. Turning the bed-restrained detainee often enough to prevent soreness or stiffness. Medical evaluation of the restrained detainee twice per eight-hour shift. When qualified medical staff is not immediately available, staff position the detainee "face-up". 				
 The shift supervisor monitors the detainee's position/condition every two hours. He/she allow the detainee to use the rest room at these times under safeguards. 				
All detainee checks are logged.	\square			· · · · · · · · · · · · · · · · · · ·
In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	\boxtimes			
 When the OIC authorizes use of non-lethal weapons: Medical staff is consulted before staff use pepper spray/non-lethal weapons. Medical staff review the detainee's medical file before use of a non-lethal weapon is authorized. 				
Special precautions are taken when restraining pregnant detainees. Medical personnel are consulted 	\boxtimes			
Protective gear is worn when restraining detainees with open cuts or wounds.	\boxtimes			
Staff documents every use of force and/or non-routine application of restraints.	\boxtimes			
It standard practice to review any use of force and the non-routine application of restraints.	\boxtimes			
 All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. Specialized training is given Officers are certified in all devices they use. 				
The officers are thoroughly trained in the use of soft and hard restraints.				
In SPCs is the Use of Force form is used. In other facilities (IGSAs / CDFs) this form or its equivalent is used.				

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Acceptable	Deficient	At-Risk	Repeat Finding

(b)(6), (b)(7)c 18 06

Auditor's Signature / Date

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STAFF DETAINEE CON			1101	
Policy: Procedures must be implace to allow for formal a ICE staff and ICE detainee and to permit detainees to mal answer in an acceptable time frame.				
Components	Y	N	NÁ	Remarks
The ICE Field Office Director ensures that weekly announced and unannounced visits occur at the IGSA.				No Deportation Officers at this office.
Detention and Deportation Staff conduct scheduled weekly visits with detainees held in the IGSA.				Detainees are moved within a week.
Scheduled visits are posted in ICE detainee areas.		\square		
Visiting staff observe and note current climate and conditions of confinement at each IGSA.				
ICE information request Forms are available at the IGSA for use by ICE detainees.				
The IGSA treats detainee correspondence to ICE staff as Special Correspondence.	\boxtimes			
ICE staff respond to a detainee request from an IGSA within 72 hours.	\boxtimes			
ICE detainees are notified ion writing upon admission to the facility of their right to correspond with ICE staff regarding their case or conditions of confinement.				

🛛 Acceptable 🗌 Deficient 🗌 At-Risk 🔲 Repeat Finding
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Remarks: (Record significant facts, observations, other sources used, etc.)

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

<u>5 | 8 | 06</u> Auditor's Signature / Date

Page 73 G-324A Detention Inspection Form Worksheet for IGSAs - Rev: 10/18/04



200000-000688



DETAINEL THANSFE		1 4 1 1 h 1 h 1 h 1 h 1 h 1 h 1 h 1 h 1					
Policy: ICE will make all necessary notifications when a transferred vialitie Justice Prisoner Alien Transportation S protocols. In deciding whether to transfer a detainee, ICE is represented before the immigration court. In such case detainee's stage within the removal process, whether the	System (will take es, the Fi	IPATS) Into co eld Offi	, ICE w onsideration ce Dire	vill adhere to JPATS ation whether the detainee ctor will consider the			
driving distance of the facility and where the immigration court proceedings are taking place.							
Components	Y	N	NA	Remarks			
When a detainee is represented by legal counsel or a	a desta di orrangi di di	illi tetterit van		No D.O. in the Knoxville			
 legal representative, and a G-28 has been filed, the representative of record is notified by the detainee's Deportation Officer. The notification is recorded in the detainee's file When the A File is not available, notification is noted within DACS 				QRT Office.			
Notification includes the reason for the transfer and the							
location of the new facility,				· · · · · · · · · · · · · · · · · · ·			
The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.							
The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.							
 Facility policy mandates that: Times and transfer plans are never discussed with the detainee prior to transfer. The detainee is not notified of the transfer until immediately prior to departing the facility. The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 							
The detainee is provided with a completed Detainee Transfer Notification Form.							
Form G-391 or equivalent authorizing the							
removal of a detainee from a facility is used.	\square						
 For medical transfers: The Detainee Immigration Health Service (or IGSA)(DIHS) Medical Director or designee approves the transfer. Medical transfers are coordinated through the local ICE office. A medical transfer summary is completed and accompanies the detainee. 							
Detainees in ICE facilities having DIHS staff and medical care are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number and the envelope is marked Medical Confidential.							
For medical transfers, transporting officers receive instructions regarding medical issues.							
Detainee's funds and valuables and property are returned and transferred with the detainee to his/her new location.							
Transfer and documentary procedures outlined in Section C and D are followed.			Ø				
Meals are provided when transfers occur during normally schedule meal times.							

DETAINEE TRANSFEI	R STAN	DARD		
Policy: ICE will make all necessary notifications when a d transferred via the Justice Prisoner Alien Transportation S protocols. In deciding whether to transfer a detainee, ICE is represented before the immigration court. In such cases detainee's stage within the removal process, whether the c griving distance of the regulity, and where the immigration c	ystem (will take s, the F letainee	JPATS) e into co ield Offi e's attor	, IOE w prisiden ce Dire ney is l	illiadhere to JPATS ation whether the detainee ctor will consider the scated within reasonable
Components	Y	N	NA	Remarks
An A File or work folder accompanies the detainee when transferred to a different field office or sub-office.	\boxtimes			
A Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.				

	Detainee	Transfer Standard	in a contrart	
Acceptable	Deficient	At-Risk	Repeat Finding	

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6), (b)(7)c 5/8/06 Auditor's Signature / Date

The following items must be inspected for compliance with those Justice Core Standards not covered by the ICE Detention Standards:

	Standard – Policy Development and Monitoring			
	Item	Α	U	NA
1	Written Policy and Procedures are in place to provide staff with the necessary information to operate and maintain the facility on a daily basis and in accordance with local, state, and federal law			
2	Written policy and procedure are reviewed annually and updated accordingly	\boxtimes		
	Standard - Reporting Requirement			
3 4 5	The facility provides for a system of monitoring through internal audits and reviews The internal administrative audit is separate from any external audits or reviews Audit or inspection reports identify areas of concern, identify necessary corrective	\boxtimes		
ວ	action, and provide for a system follow-up	\boxtimes		
6	Audit and Inspection reports are maintained on file until at least the next review is conducted	\boxtimes		
	Standard Direct Supervision	100 C. 10		
7	To the extent Possible, physical plant design facilitates continuous personal contact and interaction between staff and detainees in the housing unit and recreation / leisure areas.	\boxtimes		
8	Written policies and procedures are in place that outline a comprehensive program that promotes and encourages staff/detainee communications. A daily rotation schedule should be established to ensure adequate staff coverage is provided throughout the meal.			
·. ·	<u> Standard – Cultural Diversity</u>			· .
9	Staff are provided appropriate annual cultural diversity or sensitivity training. Such training is designed and implemented in a fashion that will further enhance staff members' ability to communicate with detainees in an effective manner.			

	DOU Core Standards - Rating IGSA's Only	er and a second s
Acceptable 🗌 De	ficient 🗌 Repeat Deficiency 🔲 At-Risk	

*Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6), (b)(7)c <u>5 |8|</u>06

Auditor's Signature / Date

of Detention and Removal Operations U.S. Department of Homeland Security 425 I Street, NW Washington, DC 20536



U.S. Immigration and Customs Enforcement

May 8, 2006

MEMORANDUM FOR:

John P. Torres Director (Acting) Office Of Detention and Removal

Immigration Enforcement Agent

FROM:

Chattanooga, Tennessee QRT Office

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

SUBJECT:

Blount County Jail, 2006 Annual Detention Review

The New Orleans Field Office, Office of Detention and Removal conducted a detention review of the Blount County Jail on April 17, 2006. This review was conducted by IEA Hale and DO Hoth. This facility is used for detainees requiring housing over 72 hours.

Type of Review:

This review is a scheduled Operational Review to determine general compliance with established Immigration and Customs Enforcement (ICE) National Detention Standards. The last review of this facility was in May 2004.

Review Summary:

The facility is accredited by the Tennessee Correction Institution. Blount County Jail serves the needs of ICE officers for the Knoxville, Tennessee Quick Response Team. This facility received a favorable inspection review in March 2006 by the U.S. Marshal's Service and is also approved by the Bureau of Prisons.

Review Findings:

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

-	34
-	1
-	0
	3

Subject: Detention Review Summary Report Page 2



Standards Summary Findings:

Access to Legal Material – Deficient:

Detainees are housed at Blount County Jail until they are medically cleared to travel. Once a detainee has a clear TB test they are moved to either the Memphis Sub-Office, Oakdale SPC, or New Orleans District Office. This usually takes place somewhere between 3 to 21 days (depending if they need a chest X-Ray).

RIC Observations:

Facility Staff: The staff was extremely well versed in policy and procedure at this location. Staff exhibited confidence and courtesy throughout the review. The team commends the efforts and accomplishments of the Facility staff.

Security Staff: The staff exhibited professionalism. The staff was questioned regarding their policy and procedures. The staff's initial orientation and continued training allows them to operate the facility in a calm and orderly fashion. The Security staff was eager to display their abilities and working knowledge of facility operations.

RIC Issues and Concerns

There are no concerns with this facility.

Recommended Rating and Justification:

It is the Reviewer in Charge recommendation that the facility receive a rating of "Acceptable". The facility fully implements ICE Detention Standards. The facility fully complies with all standards.

RIC Assurance Statement:

All findings of this review have been documented on Form G-324A and are supported by the written documentation contained in the review file.





U.S. Department of Homeland Security Immigration and Customs Enforcement

2150 Stein Drive Chattanooga, Tennessee

March 28, 2006

MEMORANDUM FOR: Blount County Jail Maryville, Tennessee

FROM: (b)(6), (b)(7)c Immigration Enforcement Agent

SUBJECT: Inspection of Blount County Jail.

To assist us in the inspection scheduled for April 17, 2006, I would ask that you fill out the provided forms and that copies of the following documents be made available for inclusion in the report.

- Copy of Detainee Handbook and Policies.
- The most recent Commission of Accreditation for Corrections Standards Certification and a copy of your latest state inspection.
- Latest Health Inspection.
- Copy of recent Recreation Schedule.
- Latest Water Certification
- Copy of current Food Service Menu and the name of the dietician who prepared it.

I would also like to request that a copy of the Department's Policy and Procedures manual be made available for our inspection.

Should you have any questions regarding this review, you may contact me at (423) 553 1716 ext. (b)(2) or (423) 421-(b)(2).

Α.	Туре	of Facility	Reviewed

- **ICE Service Processing Center**
 - **ICE Contract Detention Facility**
- \square **ICE Intergovernmental Service Agreement**

B. Current Inspection

Type of Inspection	
Field Office HQ Inspection	
Date[s] of Facility Review	
4/16/06-04/19/06	-

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
July 2004
Previous Rating
Superior Good Acceptable Deficient At-Risk

D. Name and Location of Facility

Name
Blount County Jail
Address (Street and Name)
940 East Lamar Alexander Parkway
City, State and Zip Code
Maryville, Tennessee 37804-5002
County
Blount
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent) Captain (b)(2)Low and a second
Telephone # (Include Area Code)
(b)(2)Low
Field Office / Sub-Office (List Office with oversight responsibilities)
NOL
Distance from Field Office
600 miles

E. ICE Information

Name of Inspector (Last Name, Title and Duty Station) (b)(6)/ IEA / Chattanooga, TN	
Name of Team Member / Title / Duty Location (b)(6), (b)(7)9 Gadsden, AL	
Name of Team Member / Title / Duty Location	
Name of Team Member / Title / Duty Location	

CDF/IGSA Information Only Date of Contract or IGSA

Contract Number	ſ
74 00 0246	

74-99-0246 1999 Basic Rates per Mah-Day

42.00

Other Chargest (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 Co	ourt Order or Class Action Finding
Court Order	Class Action Order
The Facility has Signifi	cant Litigation Pending
Major Litigation	Life/Safety Issues
Check if None.	

I. Facility History

Date Built 1999 Date Last Remodeled or Upgraded Date New Construction / Bedspace Added Future Construction Planned 🗌 Yes 🛛 No Date: Current Bedspace Future Bedspace (# New Beds only) 352 Number: Date:

J. Total Facility Population

Total Facility Intake for previous 12 months

Total ICE Mandays for Previous 12 months

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	288	281	
Adult Female	64	55	
Facility holds Juveniles Offenders 16 and older as Adults			

M. Average Daily Population

	ICE	USMS	Other
Adult Male	5	90	175
Adult Female	0	10	51

N. Facility Staffing Level

Security:	Support:
	(b)(6

Significant Incident Summary Worksheet

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

Incidents	Description	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
		0	0	0	0
Assault:	Types (Sexual ² , Physical, etc.)				
Offenders on Offenders ¹	With Weapon	0	1	0	0
Offenders	with weapon	1	0	0	0
	Without Weapon				l •
		0	0	0	0
Assault:	Types (Sexual Physical, etc.)				
Detainee on		0	0	0	0
Staff	With Weapon		-		-
	Without Weapon	0	0	0	0
Number of Forced Moves,		6	8	6	12
incl. Forced Cell moves ³		Ŭ .		0	12
		0	1	0	0
Disturbances ⁴					
Number of Times Chemical		2	1	3	4
Agents Used					
Number of Times Special Reaction Team		0	0	0	0
Deployed/Used					
Deployed Csea	Number/Reason (M=Medical,	3	5	2	5
# Times Four/Five Point	V=Violent Behavior, O=Other)	2	–	-	
Restraints applied/used	Type (C=Chair, B=Bed,	В	В	В	В
	BB=Board, O=Other)				
Offender / Detainee Medical		1	0	0	0
Referrals as a result of					
injuries sustained.		0	0	0	1
Escapes	Attempted	U .	U		
Licupes		0	0	0	1
	Actual				
Grievances:		26	34	20	37
	# Received				
	# Resolved in favor of	2	1	0	3
Deaths	Offender/Detainee Reason (V=Violent, I=Illness,	0	0	0	S
Deauis	S=Suicide, A=Attempted	v		V	
	Suicide, O=Other)				
	Number	0	0	0	1
Psychiatric / Medical	# Medical Cases referred for	6	3	5	4
Referrals	Outside Care	·			
	# Psychiatric Cases referred for	0	0	0	0
	Outside Care				

- Any attempted physical contact or physical contact that involves two or more offenders
- Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting
 - Routine transportation of detainees/offenders is not considered "forced"

3

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.

	cceptable 2. Deficient 3. At Risk 4. Repeat Finding			
Lega	al Access Standards		1.	 3. 4.
1.	Access to Legal Materials			
2.	Group Presentations on Legal Rights			
3.	Visitation		\square	
4	Telephone Access		\square	
	inee Services			
5.	Admission and Release			
б.	Classification System		\boxtimes	
7.	Correspondence and Other Mail		\square	
8.	Detainee Handbook		\boxtimes	
9.	Food Service		\boxtimes	
10.	Funds and Personal Property		\square	
11.	Detainee Grievance Procedures			
12.	Issuance and Exchange of Clothing, Bedding, and Towels		\square	
13.	Marriage Requests			
14.	Non-Medical Emergency Escorted Trip			
15.	Recreation		\boxtimes	
16.	Religious Practices		\square	
<u>17.</u>	Voluntary Work Program			
Heal	th Services			
18.	Hunger Strikes		\square	
19.	Medical Care		\square	
20.	Suicide Prevention and Intervention		\square	
21.	Terminal Illness, Advanced Directives and Death			
Secu	rity and Control			
22.	Contraband		\boxtimes	
23.	Detention Files		\boxtimes	
24.	Disciplinary Policy			
25.	Emergency Plans		\square	
26.	Environmental Health and Safety		\square	
27.	Hold Rooms in Detention Facilities		\square	
28.	Key and Lock Control		\square	
29.	Population Counts		\boxtimes	
50 .	Post Orders		\boxtimes	
1.	Security Inspections		X	
12.	Special Management Units (Administrative Segregation)		\boxtimes	
3.	Special Management Units (Disciplinary Segregation)		\boxtimes	
4.	Tool Control		\boxtimes	
5.	Transportation (Land management)			
6.	Use of Force		X	
37.	Staff / Detainee Communication (Added August 2003)	ĺ	\boxtimes	
8.	Detainee Transfer (Added September 2004)		\boxtimes	

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

RIC Review Assurance Stat	ement
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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)	(b)(6), (b)(7)c
(b)(6), (b)(7)c	
Title & Duty Location	
IEA, Chattanooga, Tennessee	5-10-06

Team Members	
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
(b)(6), (b)(7); Deportation Officer, Gadsden, Alabama	
Frint Name, Title, & Duty Location	Print Name, Title, & Duty Location

Recommended Rating:

	Superior
	Good
Х	Acceptable
	Deficient
	At-Risk

Comments: This facility is used by the Knoxville Quick Response Team as a holding area until the detainee can be moved to the Memphis Sub-Office, Oakdale SPC, or the New Orleans District Office. The detainee is held at this location only as long as it takes to get him/her medically cleared. This facility doesn't have a law library, but they have it where the detainee can request legal documents and staff will research it and give the information to the detainee.

MANAGEMENT REVIEW

Review Authority

The signature below constitutes review of this report and acceptance by the Office of Detention and Removal. The Facility has 30 days from receipt of this report to respond to all findings and recommendations.

HQDRO MANAGEMENT REVIEW: (Print Name)	Signature
Title	Date

Final Rating:

Superior Good Acceptable Deficient At-Risk

Comments:

HEADQUARTERS EXECUTIVE REVIEW

Review Authority

HQDRO EXECUTIVE REVIEW: (Please Print Name)	Signe	
Chief	Date 6/21/	arp
nal Rating: Superior Good Acceptable Deficient At-Risk No Rating		

Comments: The Review Authority concurs with the Acceptable rating. The facility must address deficient areas in the Access to Legal Materials Standard. The Field Office must address the deficiencies in Staff/Detainee Communication. A plan of action is required.

Office of Detention and Removal Operations

U.S. Department of Homeland Security 425 I Street, NW Washington, DC 20536



U.S. Immigration and Customs Enforcement

MEMORANDUM FOR	Steve Boll Acting Field Office Director ^{(b)(6), (b)(7)c} New Orleans Field Offic é
FROM:	Chief Detention Standards Compnance Office

SUBJECT:

Blount County Jail Annual Review

The annual review of the Blount County Jail conducted April 17, 2006 in Maryville, Tennessee has been received. A final rating of Acceptable has been assigned.

The rating was based on the Reviewer-In-Charge (RIC) Summary Memorandum and supporting documentation. The Field Office Director must remedy the deficiencies in the RIC Memorandum, and 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 is responsible for ensuring that the facility responds to all findings and a Plan of Action is submitted to the Review Authority (RA) within 30 days.
- 3) The RA will advise the Field Office Director once the Plan of Action is approved.
- 4) Once a Plan of Action is approved, the Field Office Director shall schedule and followup on the above noted deficiencies within 90 days.

Subject: Blount County Jail Annual Detention Review Page 2

The RIC is responsible for assisting the Intergovernmental Service Agreement (IGSA) facility to respond to the Immigration and Customs Enforcement findings when assistance is requested. Notification to the facility shall include information that this assistance is available.

Should you or your staff have any questions regarding this matter, please contact $\binom{(b)(6), (b)(7)c}{(b)(6), (b)}$ Deputy Assistant Director, Detention Management Division at (202) 732- $\binom{(b)(6), (b)}{(b)}$

cc: Official File

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