# ICE Detention Standards Compliance Review

# Port Isabel Service Processing Center

February 17-19, 2009

REPORT DATE - February 26, 2009



Contract Number: ODT-6-D-0001 Order Number: HSCEOP-07-F-01016

Executive Vice President
Creative Corrections
6415 Calder, Suite B
Beaumont, TX 77706

U.S. Immigration and Customs Enforcement
Detention Standards Compliance Unit
500 12th St, SW
Washington, DC 20024



6415 Calder, Suite B . Beaumont, Texas 77706

Making a Difference!

February 26, 2009			
MEMORANDUM FOR:	James T. Hayes, Jr., Director Office of Detention and Removal	- Carlo Carlos	
FROM:	Reviewer-In-Charge	b6.b7c	b6,b7c
SUBJECT:	Port Isabel Service Processing Cent Annual Detention Review	er	

Creative Corrections conducted the An	nual Detent	ion Review (ADR)	of the Port	Isabel Service
Processing Center (PISPC) located in P	ort Isabel, 🛚	Texas, on February	17-19, 200	9. As noted on
the attached documents, my team of Su	bject Matte	<u>Experts included:</u>	b6.b7c	for Security;
for Health Services;	b6, b7c	, for Safety; and	b6	for Food
Services.				
An introduction meeting was held on Fe	ebruary 17,	2009 with	b6,b7c	Acting A
Deputy Field Office Director, and	66,67c	acting Assistant Fi	eld Office I	Director, 56,670
b6,67c and 66,67c were unable to	attend the	inal closeout meet	ing due to a	an unavoidable,
professional, scheduling conflict.				
A closeout meeting was held on Februa	rv 10 2000		eficiencies	
recommendations were discussed with				
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	r, Public Health Se		
Team member, 1966 Nakamot	to Represen	tative see to the	ATSI V	ice President,
ATSI Program Manag	er and key l	PISPC staff.		

# 2008 Life Safety Finding, Progress Update

ICE National Detention Standards require, "Entrance/exit door locks of housing units, work areas, chapel, gyms, and other areas with room capacity of 50 or more people shall meet the standards specified in the Occupational Safety and Environmental Health (OSHA) Manual (Chapter 3) and in the National Fire Protection Association (NFPA) Life Safety Code (#101). Specifically, "doors shall be equipped with prison-type locking devices modified to function when pressure is applied from inside the room." Locks in Units C and D are not pressure sensitive.

In accordance with Contract Order, GS-07F-0565N dated December 18, 2008 entitled; "Detention Dormitory C and Detention Dormitory D replacement of security door, security door frames, transoms, security door hardware sets, security door/frame glass, electric security door control wiring, and electronic security door Main Control", the contract has been awarded to Southern Folger Detention Equipment Company.

As indicated in the Statement of Work, this project is to include the installation of Detention Grade Locks, in compliance with Life Safety Code 101. This project is currently scheduled for completion by July, 2009.

# Type of Review

This review is a scheduled ADR to determine compliance with ICE National Detention Standards for facilities used over 72 hours.

# **Review Summary**

The Port Isabel Service Processing Center is accredited by American Correctional Association, the National Commission on Correctional Health Care, and the Joint Commission on Accreditation of Healthcare Organizations.

# Standards Compliance:

The following statistical information provides a direct comparison of the February 2008 ADR and the ADR conducted in February 2009.

February 2008	Review		February 20	009 Review
	The state of the s		- and completely displayed the end from	ns induten
Compliant	37		Compliant	37
THE RESIDENCE OF THE PARTY OF T			Deficient	
<b>Deficient</b>	# 1		Dencient	
At Risk	1216 ALT		At Risk	0
		可加加斯克拉拉克		
Non-Applicable			Non-Applica	Die

# Key and Lock Control - Deficient (Repeat)

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

• Only authorized locks (as specified in the Detention Standard) may be used in detainee accessible areas. Locks in use in Housing Units Charlie and Bravo are not pressure sensitive locking systems.

# Recommendation

A total of 28 unauthorized locks in Units C and B should be replaced with authorized locks in accordance with standards specified in OSHA (Chapter 3) and NFPA Life Safety Code Section (101), 21.2.11.2. Specifically, "doors shall be equipped with prison-type locking devices modified to function when pressure is applied from inside the room." As outlined above, relative to Contract Order, GS-07F-0565N, dated December 18, 2008, work to correct this deficiency will be completed no later than July 2009.

# Commendation

The PISPC has been uniquely challenged throughout the previous year. The remarkable response to Hurricane Dolly, which required a total facility evacuation, is noteworthy. The facility sustained significant property damage, but staff and detainee safety remained the foremost priority. As a result, no injuries were sustained and the facility was successfully evacuated without incident.

Once detainees were returned, staff continued efforts to restore the physical plant, simultaneous to their efforts to prepare for the ACA review for accreditation. The accreditation process ordinarily would totally consume the efforts of most facilities, under normal circumstances. Some would have simply postponed the process under the weight of the storm recovery process. This facility's leadership elected to accept this daunting task and proudly prevailed in their pursuit of accreditation.

In addition to these accomplishments, the facility's Medical Department sustained their NCCHC and JCAHO accreditations.

The achievements most certainly demanded the complete cooperation of all concerned. The collective dedication and personal sacrifice of all staff is worthy of special attention.

# RIC Observation

A review of the Emergency Power Generators, designed to provide back-up electricity to the inner compound (excluding Administration Building) revealed all 17 are inoperable. This was also verified by the Facilities Maintenance Supervisor.

A proposal to replace existing emergency generators with an earmarked amount of \$2.9 million, under contract number, ICE RWA COW-07DRO-0069, dated January 29, 2008, was provided for the review team's perusal. The Army Corp of Engineers is responsible for advertising and awarding the project. At the time of this review there was no information available as to when the advertisement would be initiated.

There are five emergency light units with generators, and 20 portable generators identified as back-up units for emergency (interim) use. The current interim evacuation/temporary power generation plan provides adequate protection and services, but the emergency generators' replacements should remain a high priority.

# Recommended Rating and Justification

It is the Reviewer-in-Charge recommendation that the facility receive a rating of "Good." It is recommended by the RIC that a Plan of Action be required for this facility to identify and implement necessary corrective actions.

# **RIC Assurance Statement**

All findings of this review have been documented on the Detention Review Worksheet attached and are supported by the written documentation contained in the review file.

A. Type of Facility Reviewed		G. Accreditatio	n Certificate	S :				
ICE Service Processing Center		List all State or National Accreditation[s] received:						
ICE Contract Detention Facility ICE Interpovernmental Service Agreement		ACA, 08/2008, NCCHC, 02/2006, JCAHO, 03/2008  Check box if facility has no accreditation[s]						
ICE Intergovernmental Service Agreement	4	Check box if facility has no accreditation[5]						
B. Current Inspection		H. Problems / C	omplaints (C	opies m	ust be attacl	ied)		
Type of Inspection		The Facility is un	der Court Ord	ler or Cl	ass Action Fi	nding		
☐ Field Office ☐ HQ Inspection	ic yangu i jaga	Court Order			Action Order			
Date[s] of Facility Review		The Facility has S	Significant Lit	igation I	ending afety Issues			
February 17-19, 2009		Check if Non		T Pire/9	arcty issues			
C. Previous/Most Recent Facility Review				Programme Contractor				
2Date[s] of Last Facility Review		I. Facility His	tory:	8.3				
February 19-21, 2008		Date Built	priestation (					
Previous Rating		Facility – 1950 /			007			
☐ Superior ☐ Good ☐ Acceptable ☐ Deficient ☐ At-Risk		Date Last Remod 2007	eled or Upgra	aea	en e	**		
D. Name and Location of Facility	Automobile	Date New Constr	uction / Bed s	pace Ad	ded	<del></del>		
Name		2001						
Port Isabel, Detention Center		Future Constructi		±		<del></del>		
Address (Street and Name)		Yes ⊠ No□	Date:	Pending		y July II		
27991 Buena Vista Blvd City, State and Zip Code								
Los Fresnos, Texas 78566	Current Bed Space Future Bed Space (# New I				Beds only)			
County	1200 Number: Unknown Date:							
Cameron	a Bak	J. Total Facility Population						
Name and Title of Chief Executive Officer		Total Facility Inta			nths			
(Warden/OIC/Superintendent)  Acting Assistant Field Office Director		6006						
Telephone # (Include Area Code)		Total ICE Manda	ys for Previou	s 12 mo	nths			
956 b6,b7c		246,067			7.7			
Field Office / Sub-Office (List Office with oversight responsibilities	)							
San Antonio / Harlingen Resident Office		K. Classificatio	n Level (ICE	SPCs a	nd CDFs Or	ilva.		
Distance from Field Office				A	L-2	L-3		
San Antonio – 250 / Harlingen – 30 Miles		Adult Male		30	268	274		
E. Creative Corrections Review Team	1	Adult Female	i - L. Pitowalia	50	08	0		
			150 - 150 -	2002				
b6,b7c Reviewer in Charge		L. Facility Cap	acity					
b6,b7c SME, Security			Rated	Ор	erational	Emergency		
b6,b7c SME, Security		September of Section 2		5) 1.500.00				
b6 SME, Health Services		Adult Male	756	4 9 -	750	1050		
	Talmi,	Adult Female	108		100	150		
SME, Safety and Environmental Health		☐ Facility holds	Juvennes O	ttenaers	to and olde	ras Aduits		
SME, Food Service		M. Average Dai	ly Population					
b6 SME, Food Service			The state of the s	CE	USMS	Other		
F. CDF/IGSA Information Only		Adult Male		84	N/A	N/A		
Contract Number Date of Contract or IGSA		Adult Female		i9	N/A	N/A		
N/A N/A		8 3 3 4 3 3 <b>3 3 3 3 3 3 3</b> 3				ara (MAN) s.J.		
Basic Rates per Man-Day		N. Facility Staff	fing Level					
N/A Other Charges: (If None, Indicate N/A)		Security:		Supp				
N/A	// veluper	b2HighAsset/Ahtna (	Contractors	b2Hig				
Estimated Man-days per Year		ICE-137			, dat 2			
N/A .		1000年代表 1000年代第二						
PROGRAMMED PROCESSOR		resultation of satisficial privateur.			ran regetamili i i i i i i i i i i i i i i i i i i			

# SIGNIFICANT INCIDENT SUMMARY WORKSHEET

In order for Creative Corrections to complete its review of your facility, you <u>must</u> complete the following worksheet prior to your scheduled review dates. This worksheet must contain data for the past twelve months. We will use this worksheet in conjunction with the ICE Detention Standards to assess your detention operations with regard to the needs of ICE and its detainee population. Failure to complete this worksheet will result in a delay in processing this report, and may result in a reduction or removal of ICE detainees from your facility.

INCIDENTS	DESCRIPTION	Jan – Mar	- Apr - Jun	Jul – Sep	Oct - Dec
Assaults	Types (Sexual <sup>1</sup> , Physical, etc.)	0	0	0	0
	With Weapon	0	0	0	0
	Without Weapon	54 P	38 P	6 P	16P
Assault:	Types (Sexual Physical, etc.)		0	O 100 100 100 100 100 100 100 100 100 10	0
Detainee on Staff	With Weapon	10 to	0	0	0
	Without Weapon	21 P	12 P	2 P	5 P
Number of Forced Moves, incl. Forced Cell Moves <sup>2</sup>		0	0	0	0
Disturbances <sup>3</sup>		0	0	0	0
Number of Times Chemical Agents Used		0	0	0	0
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point	Number/Reason (M-Medical, V=Violent Behavior, O=Other)	0	0	0	0
Restraints Applied/Used	Type (C=Chair, B=Bed, BB=Board, O=Other)	0		0	0
Offender / Detainee Medical Referrals as a Result of Injuries Sustained.		247	211	21	84
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances	# Received	16	82		32
	# Resolved in Favor of Offender/Detainee	14	53		22
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	Å	A A	0	A
1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Number	6	3	0	2
Psychiatric / Medical Referrals	# Medical Cases Referred for Outside Care	178	141	45	122
	# Psychiatric Cases Referred for Outside Care	0	0	3.0	0

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"

Any incident that involves four or more detainces/offenders, includes gang fights, organized multiple hunger strikes, work stoppages, hostage situations, major fires, or other large scale incidents

# DHS/ICE DETENTION STANDARDS REVIEW SUMMARY REPORT

1. A	CCEPTABLE	2. DEFICIENT	3. AT-RISK	4. REPEAT FINDING	5. NOT APPLICABLE			
LEG	AL ACCESS	STANDARDS	tion district	上:"多·		1.	2. 3	3, 4, 5.
1.	Access to	Legal Materials				M		
2.	Group Pre	sentations on Legal R	ights					
3.	Visitation							
4.	Telephone	Access						
DET	AINEE SERV	ICES .						, 50. 排入物
5.	Admission	and Release	Africa Company					
6.	· · · · · · · · · · · · · · · · · · ·	ion System						
7.		dence and Other Mail						
8.	Detainee I	RECORDERED TO THE REST OF THE PARTY OF THE P						
9.	Food Serv	Mallactic and the second of th						
10.		Personal Property	li disebelah di kacamatan dan da		ologo egye (1806) iyo dha			
11.		rievance Procedures						
12.		nd Exchange of Cloth	ing, Bedding, and To	wels				
13.	Marriage I	BITE BY BOLLO						
14.		cal Emergency Escort	ed Trip					
15.	Recreation	\$1,6600 ( ) . Y						
16.	Religious l					X		alary
17.		Work Program						
1.00 / 10 mfg (c)	LTH SERVIC	ACTION OF THE PROPERTY OF THE				154   K2		
18.	Hunger Str							
19.	Medical C							
20.	re de la compaña de la comp	evention and Intervent						
21.	***************************************	llness, Advanced Dire	cuives and Death					
	URITY AND Contraban			The state of the s		ĪΜ		
22. 23.	Detention					闌		
23. 24.	Disciplinar Disciplinar					崮		
24. 25.	Emergency	The remaining of the second of				園		
25. 26.		ntal Health and Safet				崮		
20. 27.	1300mmin 440 MP 150 CONTRACTOR	ns in Detention Facilit	BC C 1979 104			岗		
28.		ock Control				Ħ		
29.	Population	HARMON MARKETON TO THE PARTY OF				X	i di la	
30.	Post Order	SECTION AND ADDRESS OF THE PROPERTY OF THE PRO	Francisco de la companya del companya de la companya del companya de la companya			岗	liiti	
31.	Security In					I		
32.		nagement Units (Ad	ministrative Detentio	n)		N		
33.		nagement Units (Dis				M		
34.	Tool Contr	THE CONTRACT OF THE PARTY OF TH						
35.		tion (Land manageme	ent)			Ø		
36.	Use of For							
37.		ninee Communication	(Added August 200	3)		N		
38.	30.00	ransfer (Added Septe				M		
	A STATE OF THE STA	p Depressor (A)	- CONTRACTOR OF THE STATE OF TH					

ALL FINDINGS OF DEFICIENT AND AT-RISK REQUIRE WRITTEN COMMENT DESCRIBING THE FINDING AND WHAT IS NECESSARY TO REACH COMPLIANCE.

# RIC REVIEW ASSURANCE STATEMENT

BY SIGNING BELOW, THE REVIEWER-IN-CHARGE (RIC) CERTIFIES THAT:

- 1. ALL FINDINGS OF NON-COMPLIANCE WITH POLICY OR INADEQUATE CONTROLS, AND FINDINGS OF NOTEWORTHY ACCOMPLISHMENTS, CONTAINED IN THIS INSPECTION REPORT, ARE SUPPORTED BY EVIDENCE THAT IS SUFFICIENT AND RELIABLE; AND
- 2. WITHIN THE SCOPE OF THIS REVIEW, THE FACILITY IS OPERATING IN ACCORDANCE WITH APPLICABLE LAW AND POLICY, AND PROPERTY AND RESOURCES ARE BEING EFFICIENTLY UTILIZED AND ADEQUATELY SAFEGUARDED, EXCEPT FOR ANY DEFICIENCIES NOTED IN THE REPORT.

Rev	viewer-In-Charge		
Reviewer-In-Charge: (Print Name)	Signature /-		
b6,b7c	b8.b7c		
Title & Duty Location	<b>ip lic</b>		
Reviewer in Charge, Creative Corrections	February 20, 2009		
Team Members			
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location		
SME Food Services	ьс.ьтс SME Safety and Environmental Health		
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location		
b6.67c SME Security	56 SME Health Services		
RECOMMENDED RATING: Superior			
⊠ Good	12. 등 등 : : : : : : : : : : : : : : : : :		
DEFICIENT			
AT-RISK			

# COMMENTS:

Attached are approval and funding documents outlining the Statement of Work for the Security Doors/Locks and Fencing/Perimeter Detection projects underway at Port Isabel Detention Center.

U.S. Department of Homeland Security Port Isabel Detention Center 27991 Buena Vista Boulevard Los Fresnos, Texas: 78566



March 24, 2009

**MEMORANDUM FOR:** 

Field Office Director

THROUGH:

Official Channels

FROM:

Assistant Field Office Director (Acting)

SUBJECT:

Plan-of-Action for the National Detention

b6,b7c

Standards Annual Review

# <u>Purpose</u>

This memorandum is in reference to the National Detention Standards (NDS) Annual Review at the Port Isabel Detention Center (PIDC). This memorandum will serve as a Plan-of-Action and will address in specific detail the one noted deficiency by the Reviewer in Charge (RIC)

# Background

The Port Isabel Detention Center under went its annual NDS review during February 17-19, 2009 by the government-contractor, Creative Corrections. The RIC has noted a deficiency as a "Life Safety Finding" relating to the types of locks within the dormitories of Charlie and Delta units.

On February 26, 2009 a draft copy of the RIC Memorandum for the Annual Review was issued to the Port Isabel Detention Center. The memorandum requested confirmation that the deficiencies had been corrected or were in the process of being corrected. This information is an essential part of the Annual Review so that the file can be completed and forwarded to the Review Authority for issuance of a final rating.

### Discussion

The Reviewer-In-Charge in the Memorandum for the Annual Review described the one noted deficiency as follows:

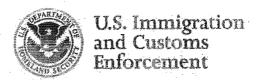
ICE National Detention Standards requires, "Entrance/exit door locks of housing units, work areas, the chapel, gyms, and other areas with room capacity of 50 or more people shall meet the standards specified in the Occupational Safety and Environmental health Manual (Chapter 3) and in the National Fire Protection Association Life Safety Code

(#101). Specifically, the doors shall be equipped with prison-type locking devices modified to function when pressure is applied from inside the room".

The RIC stated in the Memorandum for the Annual Review that

b2High	ı	
Plan-of-Action		
The corrective action to replace t	he unauthorized locks is u	nderway. Contract order, GS-07F-
0565N entitled: "	b2High	," Replacement of
	b2High	
b2High		was awarded to Southern Folgers
Detention Equipment Company	on December 18, 2008.	As evidenced in the Statement of
Work, this project is to include t	the installation of detention	n grade locks in b2High
to attain compliance completion by July, 2009.	with all applicable standa	ards. The project is scheduled for

U.S. Department of Homeland Security 500 12th Street, SW Washington, DC 20536



MAY 18 2009

**MEMORANDUM FOR:** 

Michael Pitts

Field Office Director

San Antonio Field Office

FROM:

Hames T. Hayes, Jr.

Director

SUBJECT:

Port Isabel Service Processing Center Annual Detention Review

The annual review of the Port Isabel Service Processing Center, located in Port Isabel, Texas, conducted on February 17-19, 2009, was received. A final rating of <u>Good</u> has been assigned. The G-324A worksheets provided by the Reviewer-In-Charge indicated the facility was deficient with the Key and Lock Control Standard. On March 16, 2009, <u>b6.67c</u> Assistant Field Office Director, advised <u>b6.67c</u>, Detention Officer, that the facility has been advised of the deficient finding and will address the deficiency. A Plan of Action is required to address this deficiency and the line item deficiencies noted in the Food Service, Emergency Plans, and Environmental Health and Safety standards.

The rating is based on the RIC Summary Memorandum and supporting documentation. The Field Office Director must initiate the following actions in accordance with the Detention Management Control Program.

- 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-324A, Detention Facility Review Form, G-324A Worksheet, RIC Summary Memorandum, and 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 a follow-up on the above noted deficiencies within 90 days.

Subject: Port Isabel Service Processing Center Annual Detention Review Page 2

The Field Office is responsible for assisting the facility in the implementation of corrective actions 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 review, please contact

b6.b7c

Acting Deputy Assistant Director, Detention Management Division, at (202)-732b6.b7c

cc: Official File ICE:HQDRO: 66.67c 2-3503:3/17/09

# HEADQUARTERS EXECUTIVE REVIEW **Review Authority** The signature below constitutes review of this report and acceptance by the Review Authority. OIC/CEO will have 30 days from receipt of this report to respond to all findings and recommendations. HODRO EXECUTIVE REVIEW: (Please Print Name) James T. Hayes, Jr. Title Date Director Superior Final Rating: Good Acceptable **Deficient** At-Risk No Rating The Review Authority has downgraded the recommended rating of "Good" to Deficient due to the use of Comments: EMDDs (Electro Muscular Disruption Devices) as part of the facility's use of force policy. A Plan of Action is required for the deficient areas identified in the Food Service, Classification System, Emergency Plans, Environmental Health and Safety, Post Orders, Special Management Unit (Administrative Segregation) and Special Management Unit (Disciplinary Segregation) standards.

# Condition of Confinement Review Worksheet

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

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



# **ICE Detention Standards Review Worksheet**

Local Jail - IGSA	
State Facility - IGSA	
ICE Contract Detention Facility	
Service Processing Center	
Name	
Port Isabel Service Processing Center	
Address (Street and Name) 27991 Buena Vista Blvd	
City, State and Zip Code Los Fresnos, Texas 78566	
County Cameron	
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)  Acting Assistant Field Office Director	
Name and title of Reviewer-In-Charge	
Date[s] of Review	
February 17-19, 2009	
Type of Review	
Headquarters  Operational  Special Assessment  Other	

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DETAINEE HANDBOOK			
FOOD SERVICE			
FUNDS AND PERSONAL PROPERTY			
DETAINEE GRIEVANCE PROCEDURES			
GROUP PRESENTATIONS ON LEGAL RIGHTS.			
ISSUANCE AND EXCHANGE OF CLOTHING, B		ment aut in it follows all the commence of the	
MARRIAGE REQUESTS	The state of the s	CLINE LIE CONTROL OF CONTROL OF CONTROL OF CONTROL OF CASE	N. St. and smile for a first of the factors.
NON-MEDICAL ESCORTED TRIPS			
RECREATION:			
RELIGIOUS PRACTICES			
ACCESS TO TELEPHONES			
VISITATION			
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HEALTH SERVICES STANDARDS (SI	ECTION ID		
HUNGER STRIKES			
ACCESS TO MEDICAL CARE			
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CONTRABAND			
DETENTION FILES			
DISCIPLINARY POLICY	(大)		1.0.
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HOLD ROOMS IN DETENTION FACILITIES			
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SECURITY INSPECTIONS			Hallerië II.
SPECIAL MANAGEMENT UNIT (ADMINISTRA	TIVE SEGREGATION)		
SPECIAL MANAGEMENT UNIT (DISCIPLINAR)	Y SEGREGATION)		
TOOL CONTROL			
TRANSPORTATION (LAND)			
ÚSE OF FORCE			
STAFF/DETAINEE COMMUNICATIONS			
DETAINEE TRANSFER STANDARD			400 x 100 mile   20 mile 20 x 20

**NOTE:** FOR EACH STANDARD RATED <u>BELOW</u> 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, <u>INCLUDING</u> THOSE STANDARDS WHERE AN OVERALL FINDING OF ACCEPTABLE WAS ACHIEVED.

# SECTION I DETAINEE SERVICES STANDARDS

# ACCESS TO LEGAL MATERIALS

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

FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPOR		Character where the works	1914-1914	OCUMENTS:
COMPONENTS	Y	N.	NA .	REMARKS
The facility provides a designated law library for detainee use.				In accordance with Policy 5.5.1, Library Services.
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 typewriters and/or computers, and has sufficient supplies for daily use by the detainees.	$\boxtimes$			Five computer stations and one typewriter are available in the Law Library.
In addition to the physical law library, detainees have access to the Lexis Nexis electronic law library.	×			
Where provided, the Lexis Nexis library is updated and is current.	$\boxtimes$			2009 version of Lexis Nexis is the most recent one available.  The most recent quarterly updates are included.
Outside persons and organizations are permitted to submit published legal material for inclusion in the legal library. Outside published material is forwarded and reviewed by ICE prior to inclusion.				
There is a designated ICE or facility employee who inspects, updates, and maintains/replaces legal materials and equipment on a routine basis.	$\boxtimes$			
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.	$\boxtimes$			Law Library is available to detainees from 7:00 AM to 7:00 PM daily.
Detainees may request materials not currently in the law library. Each request is reviewed and, where appropriate, an acquisition request is timely initiated. Requests for copies of court decisions are accommodated within 3 – 5 business days.				The institution has a partnership with San Benito CISD Library to provide additional published legal materials.
Detainees are permitted to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	1 X 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Illiterate or non-English-speaking detainees without legal representation receive access to more than just English-language law books after indicating their need for help.				
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 Detention and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.	⊠.			A traveling cart with Lexis Nexis is taken to the SMU and Hospital Units.
All denials of access to the law library fully documented.	$\boxtimes$			
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.				
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# REMARKS:

PISPC has a well maintained Law Library with current Lexis Nexis and Attachment A materials. The library is accessible to all detainees. Their partnership with San Benito CISD is utilized to acquire additional published legal materials.

b6.67c / February 19, 2009 AUDITOR'S SIGNATURE / DATE

# ADMISSION AND RELEASE

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

COMPONENTS	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 pro bono legal services, and how to pursue such services; schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.	$\boxtimes$		-   🗓	In accordance with, Policy 4.1.1, Detainee Admission Procedures.
Medical screenings are performed by medical staff <u>or</u> persons who have received specialized training for the purpose of conducting an initial health screening.	×			
Each new arrival is classified according to criminal history and threat levels. Criminal history is provided for each detainee by the ICE field office.				In accordance with, Policy 4.2.2, Detainee Classification System all new arrivals are classified in 1 of the following classification categories: Level 1, Level 2, or Level 3.
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 not strip-searched but are patted down, unless reasonable suspicion is established.				
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 1-387 or similar form for CDFs and IGSAs for every lost or missing property claim. Facilities forward all 1-387 claims to ICE.				In accordance with Policy 4.1.3, Detainee Property Processing.
Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	X			In accordance with Policy 4.4.4, Detainee Clothing and Bedding.
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 properly coordinated with ICE using a Form I-203.				
Staff completes paperwork/forms for release as required.				APPROXIMATION OF SUPERIOR
ACCEPTABLE DEFICIENT	] AT-RIS	SK		REPEAT FINDING

REMARKS:

Admissions and Releases of detainees are in accordance with ICE standards. The legality of commitment is checked, the conditions of confinement to which detainees are assigned are appropriate, and the security of the facility/public safety is maintained through appropriate discharges.

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# **CLASSIFICATION SYSTEM**

POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES

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.	· 🛛			In accordance with Policy 4.2.2, Detainee Classification System.
The facility classification system includes:  • Classifying detainees upon arrival;				1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
<ul> <li>Separating from the general population those individuals who cannot be classified upon arrival; and</li> </ul>	$\square$			The black strains
<ul> <li>The first-line supervisor or designated classification specialist reviewing every classification decision.</li> </ul>			Popul 英 (10 元 ) pr   元	
The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.				PISPC has a 3 phase classification system. Each new arrival is initially classified at the Harlingen Staging Unit prior to his/her arrival to PISPC. Upon arrival at the PISPC, a Classification Specialist conducts an in-person review of the initial classification for accuracy and appropriateness. Finally, a Supervisory IEA evaluates each classification within 24 hours.
Staff uses only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/unconfirmed reports may be filed but are not used to score detainees classifications.				
Housing assignments are based on classification-level.	$\boxtimes$ .			Level 1 detainee's are not housed with Level 3 detainees.
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.	$\square$			
The classification process includes reassessment/reclassification. At IGSA's, detainees may request reassessment 60 days after arrival.				All detainees are reclassified within 45 to 60 days of their initial classification and each 90 days thereafter.
Procedures exist for a detainee to appeal their classification assignment. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.				
Classification appeals are resolved within five business days and detainees are notified of the outcome within 10 business days.	$\boxtimes$			
Classification designations may be appealed to a higher authority, such as the Warden or equivalent.				May be appealed to the OIC.
The Detainee Handbook or equivalent for IGSAs explains the classification levels, with the conditions and restrictions applicable to each.	$\boxtimes$			
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REMARKS:

A trained Classification Officer executes the Classification process, utilizing the DCS Primary Assessment Form, upon initial intake of all detainees. Detainees, who are not classified, are not placed into the General Population until classification is completed.

Detainees are issued a color-coded wrist band and clothing; Red for Level 3 (Highest Threat), Orange for Level 2 (Moderate Threat), and Blue for Level 1 (Lowest Threat).

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# CORRESPONDENCE AND OTHER MAIL

**POLICY:** ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.

COMPONENTS	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 accordance with Policy 5.4.1, Detainee Correspondence.
The facility provides key information in languages other than English; In the language(s) spoken by significant numbers of detainees. List any exceptions.				Spanish
Incoming mail is 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).				
Staff does not open and inspect incoming general correspondence and other mail (including packages and publications) without the detained present unless documented and authorized in writing by the Warden or equivalent for prevailing security reasons.	$\boxtimes$	11 min		Incoming mail is opened in the presence of the detainee.
Staff does not read incoming general correspondence without the Warden's prior written approval.				
Staff does not inspect incoming special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.				
Staff is prohibited from reading or copying incoming special correspondence.	×			
Staff is only authorized to inspect outgoing correspondence or other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity.			Had	
Correspondence to a politician or to the media is processed as special correspondence and is not read or copied.				
The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.				
The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	$\boxtimes$			
Staff maintains a written record of every item removed from detainee mail.	$\square$			
The Warden or equivalent monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.			L	
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.				
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.				

CORRESPONDENCE AND OTHER MAIL							
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO							
LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.							
Staff disposes of prohibited items found in detainee mail in accordance	DEPINES C	JNCEKNI	NG CORRI	ESPONDENCE AND OTHER MAIL:			
with the "Control and Disposition of Contraband" Standard or the similar							
prevailing policy in IGSAs.							
Every indigent detainee has the opportunity to mail, at government expense, reasonable correspondence about a legal matter, in three one ounce letters per week and packages deemed necessary by ICE.				PISPC provides unlimited outgoing mail at the government's expense.			
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.				PISPC provides unlimited outgoing mail at the government's expense.			
The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	X						
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING							

## REMARKS:

Correspondence and mail are processed in accordance with standards. Proper notification for mail is addressed in the Detainee Handbook and appropriate internal controls exist to ensure the accuracy/accountability of all correspondence.

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# DETAINEE HANDBOOK

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

COMPONENTS	Y	N	NA	REMARKS 1
The detainee handbook is written in English and translated into Spanish, or into the next most-prevalent Language(s).	$\boxtimes$			
The handbook is supplemented by 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.	×			Last revision was completed on 1/09/09.
The detainee handbook addresses the following issues:  Personal Items permitted to be retained by the detainee; and Initial issue of clothes, bedding and personal hygiene items.				
The detainee handbook states in clear language the basic detainee responsibilities.				Rights and responsibilities are fully covered in the National Detainee Handbook provided to each detainee.
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.		-4.3		
The handbook describes the facility, housing units, dayrooms, in-dorm activities, and special housing units.	X			
The handbook describes official count times and count procedures; meal times and feeding procedures; procedures for medical or religious diets; smoking policy; clothing exchange schedules; and, if authorized, clothes washing and drying procedures, and expected personal hygiene practices.				
The handbook describe times and procedures for obtaining disposable razors, and allows that detainees attending court will be afforded the opportunity to shave first.	X			
The handbook describes barber hours and hair cutting restrictions.	$\square$	Talia Pere di Ca		
The handbook describes the telephone policy; debit card procedures; direct and free calls; locations of telephones; policy when telephone demand is high; and policy and procedures for emergency phone calls.				
The handbook addresses religious programming.	$\square$			
The handbook states times and procedures for commissary or vending machine usage, where available.				Currently, there are no commissary operations. Vending machines are provided.
The handbook describes the detainee voluntary work program.				· 秦 [[] [[] [[] [[] [[] [[] [[] [[] [[] [
The handbook describes the library location and hours of operation, and law library procedures and schedules.				
The handbook describes attorney and regular visitation hours, policies, and procedures.				
The handbook describes the facility contraband policy.	$\square$ –			(1971年) · 1982年 · 1987年 · 1983年 · 1984年 · 1983年 · 198

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POLICY: EVERY OIC WILL DEVELOP A SITE-SPECIFIC DETAINEE HANDBOOK TO SERVE AS AN OVERVIEW OF, AND GUIDE TO, THE DETERTION 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	Y	N	NA	REMARKS
The handbook describes the facility visiting hours and schedule, and visiting rules and regulations.				Provided in Spanish and English.
The handbook describes the correspondence policy and procedures.	$\square$			
The handbook describes the detainee disciplinary policy and procedures, including:  • Prohibited acts and severity scale sanctions;  • Time limits in the Disciplinary Process; and  • Summary of the Disciplinary Process.	×			
<ul> <li>The grievance section of the handbook explains all steps in the grievance process – Including:</li> <li>Informal (if used) and formal grievance procedures;</li> <li>The appeals process;</li> <li>In CDF facilities: procedures for filing an appeal of a grievance with ICE.</li> <li>Staff/detainee availability to help during the grievance process.</li> <li>Guarantee against staff retaliation for filing/pursuing a grievance.</li> <li>How to file a complaint about officer misconduct with the Department of Homeland Security.</li> </ul>				
The detainee handbook describes the medical sick call procedures for general population and segregation.	$\boxtimes$		·D	
The handbook describes the facility recreation policy including:  Outdoor recreation hours.  Indoor recreation hours.				
The handbook describes the detainee dress code for daily living; and work assignments.				
The handbook specifies the rights and responsibilities of all detainees.				Rights and responsibilities are fully covered in the National Detainee Handbook provided to each detainee.
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### REMARKS:

The detainee handbook consists of nine sections for a total of 46 pages. There is a table of contents at the beginning of the handbook covering each required item addressed in this standard. The handbook is very thorough and written in easy to understand language. The last revision was completed January 2009. The section on grievance procedures is very thorough and provides all the necessary information for detainees to address any concern through the grievance process.

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FOOD SERV	VICE			
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<b>POLICY:</b> EVERY FACILITY WILL PROVIDE DETAINES IN ITS CARE WITH NUTHE HIGHEST SANITARY STANDARDS.	TRITIOUS	AND APPET	'IZING MEA	LS, PREPARED IN ACCORDANCE WITH
COMPONENTS	Y	N	NA .	REMARKS
The food service program is under the direct supervision of a <u>professionally trained</u> and certified food service administrator. Responsibilities of cooks and cook foremen are in writing. The Food Service Administrator (FSA) determines the responsibilities of the Food Service Staff.	×			Food service operations are provided by Ahtna Technical Services, Inc. under contract HSCEDM-080D-00002, dated 02/28/08.
The Cook Supervisor 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.	X			
All knives not in a secure cutting room are physically secured to the workstation and staff directly supervises detainees using knives at these workstations. Staff monitors the condition of knives and dining utensils.	X			
When necessary, special procedures govern the handling of food items that pose a security threat.	X		Ш	
Operating procedures include daily searches (shakedowns) of detainee work areas.	To be provided by the second of the second o		in the state of th	
The FSA monitors staff implementation of the facility's population counts procedures. Staff is trained in count procedures.	Ø		П	
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; and  • Training covers the safe handling of hazardous material[s] the detainees are likely to encounter in their work.				
The Cook Supervisor documents all training in individual detainee detention files.				
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.				and the second s
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		d.		

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The facility has a standard 35-day menu cycle. IGSAs use a 35 day or similar system for rotating meals.

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POLICY: EVERY FACILITY WILL PROVIDE DETAINERS IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH

THE HIGHEST SANITARY STANDARDS.				
COMPONENTS	Y	N	NÀ	REMARKS
The FSA or facility considers the ethnic diversity of the facility's detainee population when developing menu cycles (Provide examples).				Beans, Rice, macaroni, pizza, fish, turkey, beef, smoked turkey sausage.
A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	X			
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				A menu substitution form with justification was put in place last year.
All staff and volunteers know and adhere to written "food preparation" procedures.		and the second		
Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	X			
A common-fare menu available to detainees whose dietary requirements cannot be met on the main line.  Changes to the planned common-fare menu can be made at the facility level;  Hot entrees are offered three times a week;  The common-fare menus satisfy nutritional recommended daily allowances (RDAs);  Staff routinely provide hot water for instant beverages and foods;  Common-fare meals are served with:  Disposable plates and utensils.  Reusable plates and utensils.  Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items.				
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, provides the FSA a schedule of the ceremonial meals for the following calendar year.	×			The Food Service Administrator receives a schedule of ceremonial meals for the upcoming year from the Chaplain.
<ul> <li>The common-fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year.</li> <li>Muslims fasting during Ramadan receive their meals after sundown.</li> <li>Jews who observe Passover but do not participate in the Common-Fare Program receive the same Kosher-for-Passover meals as those who do participate.</li> <li>Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent.</li> </ul>				
The food service program addresses medical diets.				
Satellite-feeding programs follow guidelines for proper sanitation.	$\square$			

# FOOD SERVICE

POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.

THE HIGHEST SANITARY STANDARDS.							
COMPONENTS	Y	N .	NA -	REMARKS			
Hot and cold foods are maintained at the prescribed, "safe" temperature(s) while being served.				Hot food items were not always maintained at 140 degrees, or above. Cold food items were not always maintained at 41 degrees F or below. A new automated Serving Line has been ordered and scheduled for installation within 30 days by the contractor. This should resolve temperature issues.			
All meals are provided in nutritionally adequate portions.							
Food is not used to punish or reward detainees based upon behavior.	$\square$						
<ul> <li>The food service staff instructs detained volunteers on:</li> <li>Personal cleanliness and hygiene;</li> <li>Sanitary techniques for preparing, storing, and serving food; and</li> <li>The sanitary operation, care, and maintenance of equipment.</li> </ul>							
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?			U	Weekly inspections of all food service areas are completed by the Food Service Administrator and or Assistant Food Administrator.			
Equipment is inspected for compliance with health and safety codes and regulations.  • When was the most recent inspection?  • Which agency conducted the inspection?							
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.	X			Dishwashing machine temperatures are being logged at each meal. New temperature gages for the dishwashing machine were placed on order 02-18-09, using requisition number, MAN-09-0290.			
Staff documents the results of every refrigerator/freezer temperature check:	X						
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.							
ACCEPTABLE DEFICIENT	] AT-RIS	SK .		REPEAT FINDING			

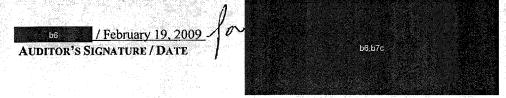
REMARKS:

Hot and cold food items were not always maintained at the prescribed "safe" temperatures while being served. Eighteen hot transport carts have been purchased by the Contractor and placed into operation to assist with temperature management. Currently, the kitchen facility does not have enough electrical power to energize the hot carts. Once this was identified, ICE management staff committed that the required electrical power would be installed not later than March 15, 2009, as evidenced in the memorandum issued by the AFOD, dated 2-19-09. This corrective action will immediately resolve this issue.

Purchase order number 7, dated 01-29-09 approved by the Contractor Vice President, will result in the purchase and installation of an automated hot/cold serving line designed for satellite feeding operations. The proper installation and use of this equipment will also enhance the department's ability to maintain proper food temperatures.

The food service building has undergone extensive remodeling to include flooring and some wall replacement within the last year. A new dishwashing machine has also been scheduled for purchase and installation by the Contractor.

The food service operation is generally meeting the needs of the population, according to ICE standards.



# **FUNDS AND PERSONAL PROPERTY**

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

STANDARD NA: (IGSA ONLY) CHECK THIS BOX IF ALL ICE DETAINEE FUNDS, VALUABLES AND PROPERTY ARE HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.						
COMPONENTS	YES	No	NA	REMARKS		
Detainee funds and valuables are properly separated, stored, and are accessible only by designated supervisor(s).				In accordance with Policy 4.1.3, Detainee Property Processing, dated 01/09.		
Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	$\boxtimes$					
Staff itemizes the baggage and personal property of arriving detainees (including funds and valuables). For IGSAs and CDFs, using a personal property inventory form that meets the ICE standard?	×					
Staff forwards an arriving detainee's medication to the medical staff.	$\square$					
Audits of baggage and non-valuable property occur each quarter and audits are logged and verified.	×					
Two officers are present during the processing of detainee funds and valuables during in-processing to the facility. Both officers verify funds and valuables.						
Staff searches arriving detainees and their personal property for contraband.	X					
Staff procedures follow written policy for returning forgotten property to detainees.	X					
Property discrepancies are immediately reported to the CDEO or Chief of Security.	X		2 199 Law			
Staff follows written procedures when returning property to detainees.	$\square$					
CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.						
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; and  • 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.						
ACCEPTABLE DEFICIENT	AT-RISK	( )	Πī	REPEAT FINDING		
REMARKS			Transport on			

During the week, a complete review was conducted for funds and property. Accurate records are kept of all detained property. Valuables and monies are verified for accuracy and stored according to policy. The department is neat and orderly. Proper checks and balances are in place to ensure effective operations.

b6 / February 19, 2009 AUDITOR'S SIGNATURE / DATE b6,b7c

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### DETAINEE GRIEVANCE PROCEDURES

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

COMPONENTS	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.				Policy 3.5.6, Detainee Grievance Procedures fully outlines all requirements addressed within this standard.
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.	×			
There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodged a complaint:  • If yes, explain.				There were no cases filed.
Procedures include maintaining a Detainee Grievance Log.  If not, an alternative acceptable record keeping system is maintained.  "Nuisance complaints" are identified in the records.  For quality control purposes, staff document nuisance complaints received but not filed.		D		
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.				
ACCEPTABLE DEFICIENT	] AT-RI	SK		REPEAT FINDING

### REMARKS:

Policy 3.5.6, Detainee Grievance Procedures, fully outlines all requirements addressed within this standard. All steps in the process are meeting the expected periods. Procedures are in place and detainees are being provided the necessary requirements to voice their concerns. Inspection of the log and monthly reports did not identify any lodged complaints of staff misconduct incidents that would require further investigation. There were 130 grievances filed since February, 2008 of those 116 were informally resolved. Further review indicated the issues were minor in nature.

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# GROUP LEGAL RIGHTS PRESENTATIONS

POLICY: FACILITIES HOUSING ICE DETAINES SHALL PERMIT AUTHORIZE PERSONS TO MAKE PRESENTATIONS TO GROUPS OF DETAINESS 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 DETAINESS ABOUT THE IMMIGRATION SYSTEM AND THEIR RIGHTS AND OPTIONS WITHIN IT.

RIGHTS AND OPTIONS WITHIN II.				AND PROPERTY OF THE PARTY OF TH	
CHECK HERE IF NO GROUP PRESENTATIONS WERE CONDUCTED WIT OVERALL AND CONTINUE ON WITH NEXT PORTION OF WORKSHEET.	166. ".			MARK STANDARD AS ACCEPTABLE	
COMPONENTS	YES	No	NA NA	REMARKS	
The Field Office is responsive to requests by attorneys and accredited representatives for group presentations.				ProBar is assigned to provide these services. It is the only organization that sought out an opportunity to provide this service for the facility.	
Upon receipt of concurrence by the Field Office Director, the facility or authorized ICE Field Office ensures timely and proper notification to attorneys or accredited representatives.			APP POPULATION OF THE POPULATI		
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.	X	П		Notices are posted on bulletin boards in each housing unit.	
Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.	M				
When the number of detainees allowed to attend a presentation is limited, the facility provides a sufficient number of presentations so that all detainees signed up may attend.	∑ 1 000 000 2 000 000 1 000 000 1 000 000 1 000 000 1 000 000			ProBar provides group presentations 3 days per week for Spanish speaking detainees and weekly for non-Spanish speaking detainees. Individual presentations are also available for detainees.	
Detainees in segregation, unable to attend for security reasons, may request separate sessions with presenters. Such requests are documented.					
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.					
Presenters are permitted to meet with small groups of detainees to discuss their cases after the group presentation. ICE or authorized detention staff is present but do not monitor conversations with legal providers.					
Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee; and the reasons for suspension are documented. The Headquarters Office for Detention and Removal, Field Operations and Detention management Division, is notified when a group or individual is suspended from making presentations.					
The facility plays ICE-approved videotaped presentations on legal rights at regular opportunities, at the request of outside organizations.		Ď,	Ē		
A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request					
ACCEPTABLE □ DEFICIENT □	AT-RISK			REPEAT FINDING	

# REMARKS:

ProBar is the group identified to provide legal rights presentations to the detainee population. Spanish-speaking presentations are conducted 3 days per week for the predominantly Spanish-speaking population. Weekly presentations are conducted in English. When the need for additional languages arises, there are telephonic interpreters from ProBar available to provide the presentations in additional languages.

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# ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS

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

COMPONENTS	YES	No	NA 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.				Policy 4.4.4, Detainee Clothing, Bedding and Linen Supplies establishes policies and procedures for laundry operations.
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); and  One pair of facility-issued footwear.				
Additional clothing is available for changing weather conditions, or as seasonally appropriate.				
New detainees are issued clean bedding, linens, and towels. They receive at a minimum:  One mattress;  One blanket;  Two sheets;  One pillowcase;  One towel; and  Additional blankets are issued based on local weather conditions.	×			
Detainees assigned to special work areas are clothed in accordance with the requirements of the job.	X			
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 are permitted to exchange outer garments daily.				
Volunteer detainee workers are permitted to exchange outer garments more frequently.		at any and any and any any and any		
ACCEPTABLE DEFICIENT	AT-Risk		<u> </u>	REPEAT FINDING

### REMARKS:

Policy 4.4, Detainee Clothing, Bedding and Linen Supplies establishes the procedures to insure the detainees are afforded the clothing, bedding, and linens as required by this standard. Observations of the laundry process showed that it is very efficient and appropriately supervised. The safety lectures provided to the detainees, and documentation to support the training was excellent. Inspection of the clothing storage area disclosed sufficient amounts of supplies on hand for any emergency. The living units have a washer and dryer for the detainees to wash their own underwear and socks.

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MARRIAGE REQUESTS								
POLICY: ALL DETAINEE MARRIAGE REQUESTS WILL RECEIVE CASE-BY-CASE CONSIDERATION FROM ICE MANAGEMENT.								
COMPONENTS	Y	N	NA _	REMARKS				
The Field Office considers detainee marriage requests on a case-by-case basis.				Policy Number 4.6.2, Detainee Marriages, dated 02/09, was found to address all components of the Marriage Request Standard.				
The Field Office Director reviews every marriage request rejected by a Warden/OIC or IGSA. Rejections are documented.				(A)				
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.	X							
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.			П					
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING								

All marriage requests are reviewed by the AFOD. Rejections for request are reviewed by the DFOD with documentation.

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NON-MEDICAL EMERGENC	Y ESCO	RTED TI	RIPS						
POLICY: THE IMMIGRATION AND CUSTOMS ENFORCEMENT (ICE) MAY PROVIDE DETAINEES WITH STAFF-ESCORTED TRIPS INTO THE COMMUNITY FOR THE PURPOSE OF VISITING CRITICALLY ILL MEMBERS OF THE DETAINEE'S IMMEDIATE FAMILY, OR FOR ATTENDING FUNERALS.									
STANDARD N/A: CHECK THIS BOX IF ALL ICE NON-MEDICAL EMIFIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.	ERGENCY	ESCORT	ED TRIPS	S ARE HANDLED ONLY BY THE ICE					
COMPONENTS	YES	No	NA	REMARKS					
The Field Office Director considers and approves, on a case-by-case basis, trips to an immediate family member's:  • Funeral; or  • Deathbed				The facility forwards all requests to the FOD for approval of non-medical emergency escorted trips.					
The facility recognizes mother, father, brother, sister, spouse, child, step- parent, and foster parent as "immediate family".				Addressed in the Escort Policy 3-1-12. p.1					
The IGSA facility notifies ICE of all detainee requests for non-medical escorts.	1 🔯								
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.									
Each escort includes at least two officers.	$\boxtimes$								
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 increase or decrease minimum restraints in accordance with written procedures and classification level of the detainee.	X								
Escort officers are precluded from accepting gifts/gratuities from a detainee, or detainee's relative or friend for any reason.	X								
<ul> <li>Escort officers ensure that detainees:</li> <li>Conduct themselves in a manner that does not bring discredit to the ICE;</li> <li>Do not violate federal, state, or local laws;</li> <li>Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants;</li> <li>Make no unauthorized phone calls; and</li> <li>Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return.</li> </ul>									
Standard procedure requires the immediate return to the facility of any detainee who violates trip rules.	- 🔯								

The tendity has contracted determed trens	artation with A CCLI Drataation Ca	rvices to include non-medical emergency trips. There
THE INCIDENT HAD COME DELICH COMMITTER	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	A TANADA TO TANADA TANA
have not been envisor medical eccepted t	unculation the promone 1/ months	

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have not been any non-medical escorted trips within the previous 12 mon

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**ACCEPTABLE** 

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REPEAT FINDING

RECREATION	Y			
POLICY: IT IS ICE POLICY TO PROVIDE ACCESS TO RECREATIONAL PROGRAPOSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTEC	A			
COMPONENTS	Y	· N	NA	REMARKS
The facility has a recreation program and facility.	$\square$			In accordance with Policy.
A recreational specialist (for facilities with more than 350 detainees) tailors he program activities and offerings to the detainee population.	$\boxtimes$			
Regular maintenance keeps recreational facilities and equipment in good condition.				
The recreational specialist or trained equivalent supervises detained ecreation workers.	$\boxtimes$			
The recreational specialist or trainee equivalent oversees recreation programs for special housing units (SHU) and special-needs detainees.				
Dayrooms offer sedentary activities, e.g., board games, cards, television.	$\square$	2 125 July 156		
Outside activities are restricted to limited-contact sports.	$\boxtimes$			And the second s
Each detainee has the opportunity to participate in daily recreation.	$\boxtimes$			
Detainees have access to recreation activities outside the housing units for it least one hour daily, 5 days a week.	$\square$			
Staff checks all items for damage and condition when equipment is eturned.	X			
Staff conducts searches of recreation areas before and after use.	$\boxtimes$			
All recreation areas under constant staff supervision.	$\square$			
Supervising staff is equipped with radios.	$\boxtimes$			
The facility provides detainees in the SHU at least one hour of outdoor ecreation time daily, five times per week.	X			
Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his/her recreation privileges.	$\boxtimes$			
Special programs or religious activities are available to detainees.	$\boxtimes$	p Coll	i, laj, ij	
Volunteers are required to sign a waiver of liability before entering a secure portion of the facility where detainees are present.	$\boxtimes$			
Visitors, relatives or friends are not allowed to serve as volunteers.	$\square$			
If outdoor recreation is offered, check this box. No further informa	ition is 1	equired	when or	utdoor recreation is offered.
f the facility has no outside recreation, are detainees considered for ransfer after six months?  • If yes, written procedures ensure timely review of all eligible detainees.				
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.				
"he detainee's written decision for or against an offered transfer				

2 100 45

documented in his/her A-file.

eligibility for all detainees after 60 days.

accept/decline a transfer.

for transfer.

Staff notifies the detainee's legal representative of his/her decision to

If no recreation is available, the ICE Districts routinely review transfer

The A-file of every detainee who is held more than 60 days without access to recreation contains either a transfer-waiver signed by the

detainee, or the OIC's written determination of the detainee's ineligibility

RECREATION  POLICY: IT IS ICE POLICY TO PROVIDE ACCESS TO RECREATIONAL PROGRAMS AND ACTIVITIES TO ALL ICE DETAINEES, TO THE EXTENT POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTECT THEIR SAFETY AND WELFARE.								
The detainee's legal representative is notified of the detainee's/OIC's decision.								
ACCEPTABLE DEFICIENT	AT-RISK	REPEAT FINDING						

Each housing unit is equipped with secure outside recreation yards. A minimum of three hours of outside recreation is afforded daily. There are two Recreation Specialists assigned to provide indoor activities. During the week, the team observed detainees engaging in recreational activities in the times set forth in policy. Recreation staff prepares and supervises programs to meet the needs of general population and special housing unit detainees. Board games, table games, and other unit activities are available for detainees. Detainees interviewed had positive comments about the recreation program.

RELIGIOUS PRA	CTICES	- <b>1</b>		
POLICY: FACILITIES WILL PROVIDE ICE DETAINEES OF ALL FAITHS WITH RE PRACTICES OF THEIR FAITH, LIMITED ONLY BY THE CONSTRAINTS OF SAFE BUDGETARY CONSIDERATIONS.	SCHOOL STREET, CALLED	H-120 K DATE: \$100 Me148833 A H 1790 B	SECTION STATES	
COMPONENTS	Y	N ·	NA	REMARKS
Detainees are allowed to engage in religious services.				In accordance with Policy 5.6.1, Religious Programming.
Space is available for detainees to conduct religious services.				
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; and  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.	M			
Members of faiths not represented by clergy may conduct their own services within security allowances.	$\boxtimes$			
Detainees in the Special Management Unit are allowed to participate in religious practices unless otherwise documented for the safety and security of the facility.				
Acceptable □ Deficient □	AT-RISE			REPEAT FINDING
REMARKS:				

Al	l detaine	es are all	lowed to	practic	e their rel	igion of	choice.	Detaine	es are al	lowed to	receive	accomino	dations f	or rec	ognized	l holv-
<ol> <li>Second</li> </ol>		10.000	.6 13111-1352/051698		NOV 35 1371140 ASIN	allan autorio, colonialo		. "Realistable (1.57)	PY20/01/20/01/20/01/20/01/20/01/20/01/20/01/20/01/20/01/20/01/20/01/20/01/20/01/20/01/20/01/20/01/20/01/20/01/	(B.27 x F0 000 mill F > 1.2 18	Print to the season of the		THE PERSON AND ADDRESS OF THE PERSON	765 K		
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## DETAINEE TELEPHONE ACCESS

POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAIN		EXIILA SA DI PER		
COMPONENTS	Y	N	NA .	REMARKS
Detainees are allowed access to telephones during established facility waking hours.				In accordance with Policy 5.4.3, Detainee Access to Telephone.
Upon admittance, detainees are made aware of the facility's telephone access policy.				
Access rules are posted in housing units.				
The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	<b>X</b>			English and Spanish
Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	Ø			
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 takes appropriate measures to ensure that required repairs are begun and completed timely.	$\square$			
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.				
The facility provides the detainees with the ability to make non-collect (special access) calls.	$\boxtimes$			
Special Access calls are at no charge to the detainees.				
The OIG phone number for reporting abuse is programmed into the detainee phone system and the phone number was checked by the inspector during the review.				The OIG phone number is posted on all living unit bulletin boards however; it was not programmed into the phone system. This was corrected before the conclusion of the review.
In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.	X			
No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".	X			
Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.	×			
Any telephone restrictions are documented.				
The facility has a system for taking and delivering emergency detained telephone messages.				
Emergency phone call messages are immediately given to detainees.		Ta.		
Detainees are allowed to return emergency phone calls as soon as possible.				
Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.				

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 disciplinary segregation are allowed phone calls for family emergencies.									
Detainees in administrative detention and protective custody are afforded the same telephone 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.									
☑ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING									

Detainees have reasonable and fair access to telephones to talk with family members, consulates, and attorneys. Debit Card Telephones are located in each living unit. Debit Cards can be purchased from any of the five machines available in Processing and in each Housing Unit. Unused minutes on the telephone debit card can be refunded following the instruction written on the back of the card. New arrivals are immediately provided one free telephone call upon their arrival to the Processing Unit.

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## VISITATION

POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, PRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS

MEDIA.				
COMPONENTS	Y	·N	NA	REMARKS
There is a written visitation schedule and hours for general visitation.				In accordance with Policy 5.4.4, Detainee Visiting.
The visitation hours tailored to the detainee population and the demand for visitation.				Visiting hours are 8:00am-4:00pm on Saturday, Sunday, and Federal holidays. Detainees are allowed a minimum of one, 30-minute visit with as many as four family members each weekend.
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.	X			
A general visitation log is maintained.				
The detainees are permitted to retain personal property items specified in the standard.		⊠		Detainees are not allowed to carry or exchange personal items in the Visiting Room. Legal documents may be exchanged between a detainee and his legal representative.
A visitor dress code is available to the public.	M			
Visitors are searched and identified according to standard requirements.	Ø			Pat searches only.
The requirement on visitation by minors is complied with.				
At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, within the first 30 days.				
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 are afforded visitation.	$\square$	Д		
Legal visitation is available seven (7) days a week, including holidays.				Legal visits are conducted Monday through Friday until 9:00pm.
On regular business days legal visitation hours are provide for a minimum of eight (8) hours per day, and a minimum of four hours per day on weekends and holidays.	X			Legal visits are conducted daily until 9:00pm.
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.				In accordance with Policy 4.1.1, Detainee Admissions Procedures.

VISITATION									
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.									
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.				In accordance with Policy 4.1.1, Detainee Admissions Procedures. Strip searches are conducted with the approval of a supervisor for probable cause, only. Females are never strip searched by a male officer.					
Prior to each visit, legal service providers and assistants are identified per the standard.	$\boxtimes$								
The current list of <i>pro bono</i> legal organizations is posted in the detainee housing areas and other appropriate areas.	$\square$								
The decision to permit or deny a tour is not delegated below the level of Field Office Director.	X		П						
Provisions for NGO visitation, as stated in the Detention Standards, are complied with.	×	П	đ						
Law enforcement officials who request to visit with a detainee are referred to the ICE Field Office for approval.	$\boxtimes$		П						
Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the OIC or ICE Field Office.			Ш						
Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	X								
ACCEPTABLE DEFICIENT	AT-RIS	SK.	П	REPEAT FINDING					

Visiting for detainees is on weekends; however, legal visits are Monday through Friday. Notifications of the visiting policy are described in the Detainee Handbook. Notice to visitors is displayed in the lobby and available on PISPC website. Detainees are not allowed to retain personal property items specified in the standard.

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UNTARY WORK PROGRAM, I		

POLICY: IN EVERY FACILITY OFFERING A VOLU IND EARN MONEY BY PARTICIPATING. WHILE NOT LEGALLY REQUIRED, ICE AFFORDS DETAINEE WORKERS BASIC OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA) PROTECTIONS. CHECK HERE IF ICE DETAINEES ARE NOT AUTHORIZED TO WORK AT THE IGSA FACILITY. MARK NA ON FORM G-324A, PAGE 3 AND MOVE TO NEXT SECTION. COMPONENTS REMARKS NA Does the facility have a voluntary work program? In accordance with Policy Do ICE detainees participate? Number 5.1.2, Detainee Employment, and, 5.1.3, X П Detainee Pay, both dated 02/09; provide for all components of the Voluntary Work Program. Detainee housekeeping meets neatness and cleanliness standards. Ø Detainees have the opportunity to participate in special details, however, M П are never allowed to work outside the secure perimeter. Written procedures govern selection of detainees for the Voluntary Work X П Program. Where possible, physically and mentally challenged detainees participate 図 П in the program. The facility complies with work-hour requirements for detainees, not 冈  $\Box$ П exceeding: Eight hours a day and Forty hours a week. Detainee volunteers generally work according to fixed schedule. M If a detainee is removed from a work detail, staff places the written X П П 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 X П the work program. The voluntary work program meets: X OSHA, NFPA, ACA standards Medical staff screen and formally certify detainee food service volunteers. 冈 П ं, Before the assignment begins; and 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. DEFICIENT AT-RISK ACCEPTABLE REPEAT FINDING REMARKS All detainees are allowed to participate in the voluntary work program. Work schedules are a fixed eight hours per day, five days per

VOLUNTARY WORK PROGRAM

week, with no more than 40 hours per week. Detainees assigned to the Kitchen receive \$3.00 per day. All other working detainees receive \$1.00 per day

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# SECTION II HEALTH SERVICES STANDARDS

## HUNGER STRIKES

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

COMPONENTS	Y	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.				This is addressed in Emergency Plan 4, Hunger Strike Plan.
CDFs and IGSAs immediately report a hunger strike to the ICE.				This is an ICE facility.
The facility has established procedures to ensure staff respond immediately to a hunger strike.				This is addressed in SOP 8.14, Hunger Strike/Forced Feeding.
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.	$\boxtimes$			Feb.
A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.	$\boxtimes$			
During a hunger strike, staff document and provide the hunger-striking detainee three meals a day.	Ø		integral S.	
Staff maintains the hunger striker's supply of drinking water/other beverages.	$\square$			
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 or similar IGSA form.	X			
The medical staff has written procedures for treating hunger strikers.	$\boxtimes$			
Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.	×	П		
Staff has received training in identification of hunger strikes. Medical staff receives early training in hunger-strike evaluation and treatment. Staff remains current in evaluation and treatment techniques.				
ACCEPTABLE DEFICIENT	AT-RISE	₹ <sup>†</sup> Tiggreen	III	REPEAT FINDING

#### REMARKS:

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## ACCESS TO MEDICAL CARE

POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL

WELL-BEING OF ICE DETAINEES.				
COMPONENTS	Y	N	NA ·	REMARKS
Facilities operate a health care facility in compliance with state and local laws and guidelines.				The health care facility is operated by the DIHS. It is JCAHO, NCCHC, and ACA accredited. I reviewed the credential files and found that all licenses and certifications are current.
The facility's in-processing procedures for arriving detainees include medical screening.				Medical screening is conducted at the Harlingen Processing Center. The screenings are reviewed by a nurse when the detainee arrives here.
All detainees have access to and receive medical care.				And a phillipped seedow as well as a seed as a
The facility has access to a PHS/DIHS Managed Health Care Coordinator.	×	П		This is a DIHS staffed facility.
The medical staff is large enough to provide, examine, and treat the facility's detainee population.	$\square$			
The facility has sufficient space and equipment to afford detainee privacy when receiving health care.				The triage area was reconfigured and now has four cubicles (instead of 6), which allows for greater separation and more privacy.
The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	X		Д	
The medical facility entrance includes a holding/waiting room.				
The medical facility's holding/waiting room is under the direct supervision of custodial staff.	$\square$			
Detainees in the holding/waiting room have access to a drinking fountain.				
Medical records are kept apart from other files. They are:  • Secured in a locked area within the medical unit;  • With physical access restricted to authorized medical staff; and  • Procedurally, no copies made and placed in detainee files.	×			Medical records are a combination of electronic and paper. All records generated here are electronic. They are secure and access is restricted to medical staff.
Pharmaceuticals are stored in a secure area.				
<ul> <li>Medical screening includes a Tuberculosis (TB) test.</li> <li>Every arriving detainee receives a TB test during the admission process;</li> <li>Detainee's TB-screening does not occur more than one business day after his/her arrival at the facility; and</li> <li>Detainees not screened are housed separate from the general population.</li> </ul>				Medical screening including digital chest x-rays on all arriving detainees are done at the Harlingen Processing Center.
All detainees receive a mental-health screening upon arrival. It is conducted:  By a health care provider or specially trained officer; and Before a detainee's assignment to a housing unit.				Mental health screening is conducted at the Harlingen Processing Center, by medical staff, and reviewed by a nurse upon arrival here.

ACCESS TO MEDICAL CARE										
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED WELL-BEING OF ICE DETAINEES.	/ACCREDIT	ATION-W	ОВТНҮН	EALTH PROGRAM FOR THE GENERAL						
The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.										
The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.				Review of 30 medical records of randomly selected detainees who have been at this facility over 14 days, revealed that all had physical examinations performed within 14 days of admission.						
Detainees in the Special Management Unit have access to health care services.	$\boxtimes$			A nurse makes rounds at least daily.						
Staff provides detainees with health services (sick call) request slips daily, upon request.  • Request slips are available in languages other than English, including every language spoken by a sizeable number of the facility's detainee population.  • Service-request slips are delivered in a timely fashion to the health care provider.				Sick call request slips are available in English and Spanish and are picked up in each unit daily.						
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.	<u>-</u> X			Medical staff are on duty 24/7. Policy 4.5.3 addresses outside medical attention.						
The plan includes an on-call provider.										
The plan includes a list of telephone numbers for local ambulance and hospital services.	×	Ď								
The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.	X									
Detention staff is trained to respond to health-related emergencies within a 4-minute response time.		×D								
Where staff is used to distribute medication, a health care provider properly trains these officers.				Medication is only distributed by medical staff.						
The medical unit keeps written records of medication that is distributed.	$\boxtimes$			Electronic MAR is utilized.						
The Form 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.	X									
Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.		Д								
The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.				新りませる。 本ででは、1965 美元						
Detainee's medical records or a copy thereof, are available and transferred with the detainee.	$\square$									
Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL".	×									
ACCEPTABLE DEFICIENT	AT-RISK	É	_ I j	REPEAT FINDING						

The medical department is a modern, spacious, and well equipped facility that includes a 32-bed, short stay unit, and 12 negative pressure isolation rooms. Staffing includes DIHS uniformed commissioned officers and contract staff. Policies and Procedures are well written and organized to provide guidance for staff to perform their duties.

Privacy has been improved in the triage area and physical examinations/assessments are completed within 14 days of arrival.

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

COMPONENTS	Y	N	NA	REMARKS
Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.				All staff receive training.
Training prepares staff to:  Recognize potentially suicidal behavior; Refer potentially suicidal detainees, following facility procedures; and Understand and apply suicide-prevention techniques.				
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.	×			Mental screening, to include suicide potential, is performed at the Harlingen Processing Center, prior to arrival at this facility. The screening forms are reviewed by a nurse upon arrival here.
Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.	×			This is addressed in Attachment C to DIHS policy 15, Suicide Prevention Program.
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.	$\boxtimes$			
Medical staff has approved the room for this purpose.	$\square$			
Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes.				Detainees on suicide watch are under constant, direct, one-on-one observation.
ACCEPTABLE DEFICIENT	AT-RIS	K st. w		REPEAT FINDING

## REMARKS:

All staff receives training in suicide prevention/intervention prior to assuming a post and two hours annually thereafter. Policies, procedures, and practices are excellent and in compliance with all standards. No suicides have occurred at this facility.

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## TERMINAL ILLNESS, 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.

☐ CHECK 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	Y	LE N	NA .	REMARKS
Detainees who are chronically or terminally ill are transferred to an appropriate offsite medical facility.	Ø			
The facility or appropriate ICE office promptly notifies the next of kin of the detainee's medical condition, to include:  • The detainee's location; and  • The limitations placed on visiting.				
There are guidelines addressing the 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 generic form the DIHS provides or who wishes to appoint another to make advance decisions for him or her.	$\boxtimes$			This is addressed in DIHS Policy, Chapter 2.6.1.
The guidelines provide the detainee the opportunity to have a private attorney prepare the documents.	×			
There is a policy addressing "Do Not Resuscitate Orders"	M			This is addressed in DIHS Policy, Chapter 2.6.2.
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.	X			This is addressed in DIHS Policy, Chapter 2.6.4.
The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.	×			This is addressed in Policy 4.5.11.
The facility has a policy and procedure to address the death of a detainee while in transport.				This is addressed in Policy 4.5.11.
At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	X			
In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures.  • 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.	$\square$			

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH					
POLICY ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLICIES AN INJURY, MEDICAL ADVANCED DIRECTIVES, AND DETAINEE DEATH, TO IN PROVIDED TO ICE OFFICIALS, FAMILY MEMBERS AND OTHER INTERESTED PAINJURED OR DEATH OF A DETAINEE OCCURS. IN ADDITION, THE POLICY WILL OCCURS WHILE IN TRANSIT.	ICLUDE TI ARTIES IN T	HE PROCE HE EVENT	DURES TO	DENSURE PROPER NOTIFICATION IS AINEE BECOMING TERMINALLY ILL OR	
CHECK THIS BOX IF THE FACILITY DOES NOT ACCEPT ICE DETAINED	ES WHO A	RE SEVER	RELY OR T	ERMINALLY ILL. INDICATE NA IN	
THE APPROPRIATE BOX FOR THIS PORTION OF THE WORKSHEET. ALW RELATED NOTIFICATIONS.	VAYS CO	MPLETE	ALL REFE	RENCES TO DETAINEE DEATH AND	
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; and  • Local transportation of the body.					
ICE staff follows established procedures to properly close the case of a deceased detainee.					
ACCEPTABLE DEFICIENT	AT-RIS	K 🦠		REPEAT FINDING	

Policy 4.5.11 and DIHS Policy Chapter 2 are comprehensive and detailed. They address all aspects of serious illness and death of a detainee. Medical staff is knowledgeable of procedures to be followed for a seriously ill, dying, or dead detainee. No detainee deaths have occurred in the past year.

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## SECTION III SECURITY AND CONTROL STANDARDS

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POLICY: ALL DETENTION FACILITIES WILL ENSURE THE PROPER HANDLING AND DISPOSAL OF ALL CONTRABAND. DOCUMENTATION OF CONTRABAND DESTRUCTION IS REQUIRED.

CONTRABAND DESTRUCTION IS REQUIRED.	2			
COMPONENTS	Y	N .	NA	REMARKS
The facility follows a written procedure for handling illegal contraband. Staff inventory, hold, and report it when necessary to the proper authority for action/possible seizure.	$\boxtimes$			The policy on Collection of Contraband 3.1.17.1 covers procedures for handling illegal contraband.
Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.				The facility properly retains contraband 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.	X		Ē	
Altered property is destroyed following documentation and using established procedures.	×			Proper disposal procedures are used when altered detainee property is discovered.
Before confiscating religious items, the OIC or designated investigator contacts a religious authority.	X			
Staff follows written procedures when destroying hard contraband that is illegal.	Ø			
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.	$\boxtimes$			Policy 3.1.17, p. 5 includes procedures required for retaining hard contraband for training purposes.
□ ACCEPTABLE □ DEFICIENT □	AT-RISI	ζ.		REPEAT FINDING

#### REMARKS:

The PISPC has effective controls in place to ensure the proper handling and disposal of all contraband. The Collection of Evidence policy instructs staff on proper procedures for confiscation, chain of evidence, and disposal. Procedures are also in place to maintain hard contraband for official use, to include training.

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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	Y	N	NA	REMARKS
A detention file is created for every new arrival whose stay will exceed 24 hours.				In accordance with Policy 4.1.1, Detainee Admission Procedures.
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	$\boxtimes$			
The detention files are located and maintained in a secure area. If not, the cabinets are lockable and distribution of the keys is limited to supervisors.				All detention files are maintained in a secure space within the Processing Unit.
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.			П.	
The officer closing the detention file makes a notation that the file is complete and ready to be archived.				All Detention Files are closed out within 24 hours of the detainee's releases.
Staff makes copies and sends documents from the file when properly requested by supervisory personnel at the receiving facility or office.	Ø			
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.				A log book is maintained documenting when and by whom a file is checked out.
ACCEPTABLE DEFICIENT	AT-RISE			REPEAT FINDING

#### REMARKS:

Twenty Detention Files were reviewed for detainees from Columbia. All files reviewed contained appropriate documentation to include: Booking Slip, Fingerprints, Photo, NCIC Check, Property Receipts, Discipline Actions, Classification, Processing Officer Name, Charge or Reason for Detainment, and Date Detained.

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## 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 facility has a written disciplinary system using progressive levels of reviews and appeals.				The facility has written procedures located in the Disciplinary Policy 3.3.1 which instruct progressive levels of disciplinary action.
The facility rules state that disciplinary action shall not be capricious or retaliatory.				The facility rules state disciplinary action shall not be capricious or retaliatory.
Written rules prohibit staff from imposing or permitting the following sanctions:	$\boxtimes$			
The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	$\boxtimes$			
The following items are conspicuously posted in Spanish and English, and 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.	M			The facility policy 3.3.1 encourages informal resolution in cases of minor rule violations.
Incident reports and Notice of Charges are promptly forwarded to the designated supervisor.				Ten discipline files were reviewed, incident reports were forwarded to the shift supervisor before the end of the shift.
Incident reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before an investigation ends.				
An intermediate disciplinary process is used to adjudicate minor infractions.	. <b>X</b> .			The facility disciplinary process is used to adjudicate minor infractions when possible.
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 detainees and staff representatives;  Bases its findings on the preponderance of evidence; and Imposes only authorized sanctions				

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		
A staff representative is available if requested for a detainee facing a disciplinary hearing.	X			The facility policy 3.3.1 p. 7 and 11 afford staff representation, if requested by detainee. Files indicated detainees have used staff representatives.		
The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.						
The duration of punishment set by the OIC, as recommended by the disciplinary panel, does not exceed established sanctions. The maximum time in disciplinary segregation is limited to 60 days for a single offense.				The duration of punishment is addressed in policy p.13.		
Written procedures govern the handling of confidential-informant information. Standards include criteria for recognizing "substantial evidence"	$\boxtimes$			The facility procedures for handling confidential informants is addressed in policy p. 15		
All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	$\boxtimes$					
ACCEPTABLE □ DEFICIENT □	AT-RISI	ζ.		REPEAT FINDING		

The facility disciplinary process was very well detailed in policy to meet the guidelines established by ICE. The PISPC encourages informal resolutions for minor infractions, as was evidenced in files reviewed. PISPC has properly posted rules and sanctions in the housing units.

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## EMERGENCY (CONTINGENCY) PLANS

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

COMPONENTS'	Y	N .	NA -	REMARKS
Policy precludes detainees or detainee groups from exercising control or authority over other detainees.	$\boxtimes$			
Detainees are protected from:  Personal abuse				
Corporal punishment     Personal injury     Disease				
Property damage     Harassment from other detainees		. 2005.u-6 - 2005.u-6	a de la companya de l	
Staff is trained to identify signs of detainee unrest.  • What type of training and how often?	×			
Staff effectively disseminates information on facility climate, detained attitudes, and moods to the Officer In Charge (OIC)	Ø		П	
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.	×			IEA Gomez is the designated person responsible for emergency plans and their implementation.
The plans address the following issues:  Confidentiality Accountability (copies and storage locations) Annual review procedures and schedule Revisions	$\boxtimes$			
Contingency plans include a comprehensive general section with procedures applicable to most emergency situations.				The PISPC General Plans include a comprehensive section for procedures to meet most emergency situations.
The facility has cooperative contingency plans with applicable:      Local law enforcement agencies     State agencies     Federal agencies				The facility has emergency numbers and contacts for assistance, no MOU's with state and local hospital were available.
All staff receives copies of Hostage Situation Management policy and procedures.	X			
Staff is trained to disregard instructions from hostages, regardless of rank. Within 24 hours after release, hostages are screened for medical and psychological effects.				PISPC Hostage plan instructs staff to disregard instructions from hostages.
Emergency plans include emergency medical treatment for staff and detainees during and after an incident.				The facility plans also provide instructions for medical treatment during and after an incident.
Food service maintains at least 3 days' worth of emergency meals for staff and detainees.				
Written plans identify locations of shut-off valves and switches for all utilities (water, gas, electric).		<b>,</b> []		The facility plans identify locations of shut off valves and switches for utilities.

EMERGENCY (CONTING	FINC () I	LANS		
POLICY ALL FACILITIES HOLDING ICE DETAINEES WILL RESPOND TO EMERGEN	ICIES WITE	( A PREDE	TERMINED STA	NDARDIZED PLAN TO MINIMIZE
THE HARMING OF HUMAN LIFE AND THE DESTRUCTION OF PROPERTY. IT IS RECO				
MEMORANDUM OF UNDERSTANDING (MOU), WITH FEDERAL, LOCAL AND S'	TATE AGE	NCIES TO	ASSIST IN TIM	ES OF EMERGENCY.
COMPONENTS	Y	N	NA	REMARKS
Written procedures cover:				
Work/Food Strike				
Disturbances				
• Escapes		The off rad		
Bomb Threats	1.27			
Adverse Weather	$\square$			
Infernal Searches				
Facility Evacuation		12.56		
Detainee Transportation System Plan				
Internal Hostages				
Civil Disturbances	riene seige Facili			
- Acceptable Deficient At-Risk Repeat Finding				

The PISPC Contingency Plans instruct staff on procedures in the event of an emergency. The General Section was very detailed and included all required areas to meet this standard. The facility's specific plans cover all required areas in the standard and are well written to include a checklist attached to each plan. The facility has cooperative emergency contacts with other agencies but cooperative plans (MOU'S) were not developed.

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## ENVIRONMENTAL HEALTH AND SAFETY

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

COMPONENTS	Y	N.	NA	REMARKS
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.				Policy 3.2.5, Control and Use of Hazardous Materials establish a system for control and use of hazardous chemicals.
Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	$\boxtimes$			
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.	#   <b>X</b>			
All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They:  • Wear personal protective equipment; and • Report hazards and spills to the designated official.	×			
The MSDSs are readily accessible to staff and detainees in work areas.	$\boxtimes$			
Hazardous materials are always issued under proper supervision.  • Quantities are limited; and • Staff always supervises detainees using these substances.	×			
All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	X			
Lighting fixtures and electrical equipment installed in storage rooms and other hazardous areas meet National Electrical Code requirements.	X		П	
The facility has sufficient ventilation, and provides and ensures clean air exchanges throughout all buildings.	X			
Vents return vents, and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility.	M		iblica i i i i i i i i i i i i i i i i i i	
Living units are maintained at appropriate temperatures in accordance with industry standards. (68 to 74 degrees in the winter and 72 to 78 degrees in the summer.)				
Shower and sink water temperatures do not exceed the industry standard of 120 degrees.	X			
All toxic and caustic materials are stored in their original containers in a secure area.	$\boxtimes$			
Excess flammables, combustibles, and toxic liquids are disposed of properly and in accordance with MSDSs.				
Staff directly supervise and account for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, e.g., shoe dye. All such products are clearly labeled. "Accountability" includes issuing such products to detainees in the smallest workable quantities.		$\boxtimes$		There are no products identified as having methyl alcohol.
Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.				

## ENVIRONMENTAL HEALTH AND SAFETY

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

SAFE-HANDLING PROCEDURES  COMPANIENTS	l y	l no	l N/A	Drawnye
COMPONENTS  The Socilies complice with the west appropriate adition of applicable godes.	Y	N	NA NA	REMARKS  Durayant to the items addressed
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).				Pursuant to the items addressed in the February 2008, ADR and in accordance with Contract
				Order, GS-07F-056N dated December 18, 2008 entitled; (Detention Dormitory C and Detention Dormitory D
				Replacement of Security Door, Security Door Frames, Transoms, Security Door
		$\boxtimes$		Hardware sets, Security Door/Frame Glass, Electric Security Door Control Wiring,
				and Electronic Security Main Control) a contract was awarded to the Southern Folger Detention Equipment Company. As indicated in the statement of
				work, this project is to include the installation of detention grade locks in compliance with Life Safety Code 101. This
		eli 2 iku 20 - Na gibigi		project is currently scheduled for completion by July 2009.
A technically qualified officer conducts the fire and safety inspections.				
The Safety Office (or officer) maintains files of inspection reports.	Ø			
The facility has an approved fire prevention, control, and evacuation plan.	· 🛛			The Deputy State Fire Marshal has reviewed and approved the fire plan.
The plan requires:  Monthly fire inspections; Fire protection equipment strategically located throughout the				
facility;  Public posting of emergency plans with accessible building/room floor plans;				
<ul> <li>Exit signs and directional arrows; and</li> <li>An area-specific exit diagram conspicuously posted in the diagrammed area.</li> </ul>				
Fire drills are conducted and documented monthly.	×			Fire drills are conducted monthly from all areas of the facility and on each shift.
A sanitation program covers barbering operations.	×			
The barber shop has the facilities and equipment necessary to meet sanitation requirements,				
The sanitation standards are conspicuously posted in the barbershop.			XIII I	

## ENVIRONMENTAL HEALTH AND SAFETY

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

COMPONENTS	Y	N	- NA	REMARKS	
Written procedures regulate the handling and disposal of used needles and other sharp objects.					
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.  •	×			Policy 4.4.2 outlines sanitation standards for the facility.	
The facility follows standard cleaning procedures.	X			Sanitation throughout was found to be very good.	
Spill kits are readily available.	×				
A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	×		П	Enserv South Central, LLC provides medical waste service.	
Staff is 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 preventative spraying for indigenous insects.				Facility has a licensed pest control operator on staff.	
Drinking water and wastewater is routinely tested according to a fixed schedule.				Tested daily, weekly, and monthly.	
Emergency power generators are 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).				Generators for the Administration Building and others outside the secure perimeter are being tested as required. A proposal has been submitted to replace all emergency generators located within the secure perimeter.	
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING					

Review of policies and procedures indicate they are well written and comprehensive. Staff and detainees have a clear understanding of their responsibilities. The hazardous materials program met all the requirements of this standard. The supply lines used to dispense chemicals to washers in the laundry should be secured.

Pursuant to the items addressed in the February 2008, ADR and in accordance with Contract Order, GS-07F-056N dated December 18. 2008 entitled; (Detention Dormitory C and Detention Dormitory D Replacement of Security Door, Security Door Frames, Transoms, Security Door Hardware sets, Security Door/Frame Glass, Electric Security Door Control Wiring, and Electronic Security Main Control) has been awarded to the Southern Folger Detention Equipment Company. As indicated in the statement of work, this project is to include the installation of detention grade locks in compliance with Life Safety Code 101. This project is currently scheduled for completion by July 2009.

The hood suppression system in the kitchen noted in the February 2008, ADR has been replaced. The fire safety program is viable and affords staff and detainees a level of safety that is constantly monitored and reviewed.

Sanitary standards were found to be above average throughout the facility. The interaction with staff during the review indicated that staff take pride in their positions and perform their duties in a professional manner.

A review of the Emergency Power Generators, designed to provide back-up electricity to the inner compound (excluding Administration Building) indicated they are all in-operable. The Facilities Maintenance Supervisor indicates none of the 17 innercompound, emergency generators are functional at this time.

A proposal to replace existing emergency generators with an earmarked amount of \$2.9 million under contract number; ICE RWA COW-07DRO-0069 dated January 29, 2008 was provided to the Review Team. The Army Corp of Engineers is responsible for advertising and awarding the project. However, at the time of this review there was no information available as to when the advertisement and contract award would occur.

There are five emergency light units with generators, and 20 portable generators identified to provide back-up units for emergency use as an interim solution. The current interim evacuation/temporary power generation plan provides adequate protection and services. However, the emergency generators should remain a high priority for replacement as soon as possible.



HOLD ROOMS IN DETENTION FACILITIES						
POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS,						
MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSING INTO OR OUT OF THE FACILITY.						
COMPONENTS	Y	N	NA	REMARKS		
The hold rooms are situated within the secure perimeter.						
The hold rooms are well ventilated well lighted, and all activating switches are located outside the room.	×					
The hold rooms contain sufficient seating for the number of detainees held.				The facility has nine Hold Rooms for female detainees and 14 hold rooms for male detainees. All Hold Rooms were equipped with toilets and drinking water.		
Bunks, cots, beds, or other related make-shift sleeping apparatus are precluded from use inside hold rooms.	$\boxtimes$					
The walls and ceilings of the hold rooms are tamper and escape proof.	Ø					
Individuals are not held in hold rooms for more than 12 hours.	$\boxtimes$					
Male and females are segregated from each other.	$\bowtie$					
Detainees under the age of 18 are not held with adult detainees.	Ø					
Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	×		3			
In older facilities, officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.	×		Ш			
All detainees are given a pat down search for weapons or contraband before being placed in the room.	$\boxtimes$					
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.				Recorded observations are maintained, documenting at each15- minute observation.		
When the last detainee has been removed from the hold room, it is given a thorough inspection.	×					
There is a written evacuation plan that includes a designated officer to remove detainees from hold rooms in case of fire and/or building evacuation.			ton Salaton	The written evacuation plan (including a designated officer to remove detainees from hold rooms in case of fire or evacuation) was completed prior to conclusion of review.		
An appropriate emergency service is called immediately upon a determination that a medical emergency may exist.						
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

The Hold Rooms were found to be sufficient to handle detainees. Staff assigned in the Processing Area are skilled and knowledgeable, and provided excellent supervision of detainees in Hold Rooms. During intake screening, staff conduct themselves professionally. Detainees are searched appropriately and interviewed by staff to determine classification, housing, separation, and medical concerns. The hold rooms provide access to toilets, and drinking water is available.

AUDITOR'S SIGNATURE / DATE b6,b7c

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

POLICY IT IS THE POLICY OF THE ICE SERVICE TO MAINTAIN AN EFFICIENT SYSTEM FOR THE USE, ACCOUNTABILITY AND MAINTENANCE OF ALL

KEYS AND LOCKS.				
COMPONENTS	Y	iro N	NA	REMARKS
The security officer[s], or equivalent in IGSAs, has attended an approved locksmith training program.	$\boxtimes$			The security officer has attended locksmith training at "Lockmasters" in 2007.
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.				Staff receive key control training during new-hire orientation and annual training.
The security officer, or equivalent in IGSAs, maintains inventories of all keys, locks and locking devices.	M			
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.	Ø			
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.	×			
Only authorized locks (as specified in the Detention Standard) are used in detainee accessible areas.		X		The Detainee Services Building currently has padlocks in detainee accessible areas. (barber shop, law library).
Grand master keying systems are prohibited.	X			Property March 20 September 1997
All worn or discarded keys and locks are cut up and properly disposed of.				
Padlocks and/or chains are prohibited from use 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, Ch. 3; National Fire Protection Association Life Safety Code 101.				In accordance with Contract Order, GS-07F-0565N dated December 18, 2008; all unauthorized locks will be replaced by July, 2009.
The operational keyboard is sufficient to accommodate all the facility key rings, including keys in use, and is located in a secure area.				The facility keyboard is sufficient to accommodate all required keys and located in secure area.
Procedures are in place to ensure that key rings are:  Identifiable;  The numbers of keys are cited; and Keys cannot be removed.	×			
Emergency keys are available for all areas of the facility.				
The facilities use a key accountability system.	$\boxtimes$			The facility accounts for all keys on each shift.
Authorization is necessary to issue any restricted key.				In accordance with Policy 3.1.14. Keys and Locks.

#### KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) POLICY IT IS THE POLICY OF THE ICE SERVICE TO MAINTAIN AN EFFICIENT SYSTEM FOR THE USE, ACCOUNTABILITY AND MAINTENANCE OF ALL KEYS AND LOCKS. COMPONENTS N NA REMARKS Individual gun lockers are provided. They are located in an area that permits constant officer X observation. In an area that does not allow detainee or public access. The facility has a key accountability policy and procedures to ensure key $\boxtimes$ accountability. The keys are physically counted daily. 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. $\boxtimes$ ln.' 11 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. **DEFICIENT** AT-RISK REPEAT FINDING ACCEPTABLE

#### REMARKS:

Pursuit to the items addressed in the February, 2008 ADR, corrective action to replace the unauthorized locks is underway. Contract Order, GS-07F-0565N dated December 18, 2008 entitled "Detention Dormitory "C" and Detention Dormitory "D", Replacement of Security Door, Security Door Frames, Transoms, Security Door hardware, Security Door/Frame Glass, Electronic Security Door Main Control: has been awarded to Southern Folgers Detention Equipment Company.

As evidenced in the SOW, this project is to include the installation of Detention Grade Locks in C&D Dormitories in compliance with Life Safety Code 101. The project is currently scheduled for completion by July, 2009.

February 19, 2009
AUDITOR'S SIGNATURE / DATE



#### POPULATION COUNTS POLICY: ALL DETENTION FACILITIES SHALL ENSURE AROUND-THE-CLOCK ACCOUNTABILITY FOR ALL DETAINEES. THIS REQUIRES THAT THEY CONDUCT AT LEAST ONE FORMAL COUNT OF THE DETAINEE POPULATION PER SHIFT, WITH ADDITIONAL FORMAL AND INFORMAL COUNTS CONDUCTED AS NECESSARY. COMPONENTS NA REMARKS Staff conduct a formal count at least once each shift. In accordance with the Detainee M Accountability Policy 3.1.10, Activities cease or are strictly controlled while a formal count is being X conducted. Certain operations cease during formal counts. $\boxtimes$ All movement ceases for the duration of a formal count. All detainee movement ceases M during the counts. Formal counts in all units take place simultaneously. Detainee participation in counts is prohibited. M A face-to-photo count follows each unsuccessful recount. The facility conducts a face to X photo count daily at 7:30pm. Officers positively identify each detained before counting him/her as 図 present. Written procedures cover informal and emergency counts. X П П They are followed during informal counts and emergencies. The control officer (or other designated position) maintains an out -X П count record of all detainees temporarily leaving the facility. This training is documented in each officer's training folder. Twenty training files were

#### REMARKS:

Observation of a facility count was conducted and all counts were called into Main Control to a shift supervisor. Reviewers observed all housing unit counts and observed appropriate count procedures.

DEFICIENT

X

AT-RISK

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Auditor's Sign	ATURE	/DATE

**ACCEPTABLE** 



reviewed and appropriate

each.

REPEAT FINDING

documentation was included in

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	Y	N	NA	REMARKS		
Every fixed post has a set of post orders.			إعلالي	The Control of the Co		
Each set contains the latest inserts (emergency memoranda, etc.) and revisions.				In accordance with Policy 3.1.2.		
One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.	$\square$			The SDDO and AFOD ensure post orders remain current.		
The IGSA maintains a complete set (central file) of post orders.				The Chief of Security maintains the post orders.		
The central file is accessible to all staff.			5040	The second of th		
The OIC or Contract / IGSA equivalent initiates/authorizes all post-order changes.	×					
The OIC or Contract / IGSA equivalent has signed and dated the last page of every section.	×		The second			
A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.	$\boxtimes$					
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.	M					
Armed-post post orders provide instructions for escape attempts.	X.	Page 1				
The post orders for housing units track the event schedule.	$\boxtimes$					
Housing-unit post officers record all detainee activity in a log. The post order includes instructions on maintaining the logbook.						
☑ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING						

The Post Orders contained general and specific instructions for all post assignments. All post orders were recently updated, and reviews were conducted annually. All Post Orders have staff signature sheets attached for verification of staff review.

AUDITOR'S SIGNATURE / DATE

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## SECURITY INSPECTIONS

POLICY: POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHERE SPECIAL SECURITY PROCEDURES MUST BE FOLLOWED, WILL BE RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNDING IN FACILITY OPERATIONS.

COMPONENTS	YES	No	NA	REMARKS
The facility has a comprehensive security inspection policy. The policy	r Kirls i Village			
specifies:				
Posts to be inspected;				
Required inspection forms;		i i i	la	In accordance with Policy
Frequency of inspections;		E andres		3.1.16, Security Inspections.
Guidelines for checking security features; and				
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.		C 45 27 11	ap : (A) - space	
Documentation of security inspections is kept on file.	$\square$			
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 entering or exiting				The front entrance records all
the facility.	<b>⊠</b>			visitors entering and exiting with
캠프 얼마나는 집에 다른 회사 사람들이 다른 사람들이 다른	$\boxtimes$			the use of a log book. All staff
[2] : [1] : [2] :				are electronically recorded in and out of facility.
All visits are officially recorded in a visitor logbook or electronically				and out of facility.
recorded.	$\square$	Ш.,		
The facility has a secure visitor pass system.	×		illange - y	
Every Control Center officer receives specialized training.	Ø			
The Control Center is staffed around the clock.	X			
Policy restricts staff access to the Control Center.				The Control Policy and Post
	$\square$			Orders restricts staff access into
				control
Detainees are restricted from access to the Control Center.	$\square$			
Communications are centralized in the Control Center.				
Officers monitor all vehicular traffic entering and leaving the facility.	$\square$			
The facility maintains a log of all incoming and departing 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; and				
Name of employee responsible for the vehicle during the visit		1062		
Officers thoroughly search each vehicle entering and leaving the facility.			<u> </u>	
The facility has a written policy and procedures to prevent the	$\boxtimes$	П		
introduction of contraband into the facility or any of its components.				

SECURITY INSPI	ECTIONS	8		
POLICY: POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHER RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNDING COMPONENTS	CANCELLE TO CAMPACHER S. AND SETTING		#859035 HESSETTHERE	OURES MUST BE FOLLOWED, WILL BE
Tools being taken into the secure area of the facility are inventoried before entering and prior to departure.				All tools entering the institution are inventoried before entering and prior to departure from the facility. An inventory form for this purpose has been implemented since the last review.
The SMU entrance has a sally port.				
Written procedures govern searches of detainee housing units and personal areas.				The facility Security Inspection Policy 3.1.16 and post orders provide procedures for searching detainee housing units.
Housing area searches occur at irregular times.	$\boxtimes$	i Sieki		The state of the s
Every search of the SMU and other housing units is documented.		2. Em 6.3.		
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.	×			
Daily procedures include:      Perimeter alarm system tests;     Physical checks of the perimeter fence; and     Documenting the results.				
Visitation areas receive frequent irregular inspections	N N	1 1 1		

**ACCEPTABLE** 

PISPC has all guard services and detainee transportation services contracted to Asset Protective Security Services, Contract # HSCEDM-08-D-00002 dated 2-282009.

DEFICIENT

PISPC has requested and been approved for a fence and gate security upgrade, Project # 145441 for a total cost of \$1.65 million. The contract is being managed by the Army Corp of Engineers and has not yet been awarded.

AT-RISK

REPEAT FINDING

A systematic method of physical inspection of all parts of the institution has been established to ensure institutional security is not comprised.

b6,67c / February 19, 2009 AUDITOR'S SIGNATURE / DATE

## SPECIAL MANAGEMENT UNIT (SMU) **ADMINISTRATIVE SEGREGATION**

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

COMPONENTS	Y	_ N	NA 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.			June 1	
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.			##.	In accordance with Policy 3.4
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, and:  • Every week thereafter for the first month; and  • Every 30 days after the first month.  • Does each review include an interview with the detainee?  • Is a written record made of the decision and the justification?	$\boxtimes$			
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.			application of the state of the	All detainees are provided a copy of all reviews conducted and the opportunity to appeal the reviewer's decision.
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 have remained in administrative segregation for seven consecutive days.				All detainees are provided written notification of their right to appeal the reviewer's decision.
Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	$\square$			
The SMU is:      Well ventilated;     Adequately lighted;     Appropriately heated; and     Maintained in a sanitary condition.				
All cells are equipped with beds.  • Every bed is securely fastened to the floor or wall.	×			All beds in SMU were secured to the wall.

# SPECIAL MANAGEMENT UNIT (SMU) Administrative Segregation

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

COMPONENTS	Y	N	NA	REMARKS
The number of detainees in any cell does not exceed the occupancy limit.				
When occupancy exceeds recommended capacity, do basic living standards decline?				
<ul> <li>Do criteria for objectively assessing living standards exist?</li> <li>If yes, are the criteria included in the written procedures?</li> </ul>				
The segregated detainees have the same opportunities to exchange/launder clothing, bedding, and linen as detainees in the general population.				SMU detainees are allowed to exchange clothing and bedding three times each week.
Detainees receive three nutritious meals per day, from the general population's menu of the day.  • Do detainees eat only with disposable utensils?  • Is food ever used as punishment?	⊠	Tagarina di dia		
<ul> <li>Each detainee maintains a normal level of personal hygiene in the SMU.</li> <li>The detainees have the opportunity to shower and shave at least three times a week.</li> <li>If not, explain.</li> </ul>	$\boxtimes$	Ī		
The detainees are provided:  Barbering services; Recreation privileges in accordance with the "Detainee Recreation" standard; Non-legal reading material; Religious material; Religious material; The same correspondence privileges as detainees in the general population; Telephone access similar to that of the general population; and Personal legal material.	×			
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; and  The visiting room is available during normal visiting hours.				
Visits from clergy are allowed.				
<ul> <li>Detainees have the same law-library access as the general population.</li> <li>Are they required to use the law library   Separately, or  As a group?</li> <li>Are legal materials brought to them?</li> </ul>				SMU detainees have access to Lexis Nexis located within the unit.
The SMU maintains a permanent log of detainee-related activity, e.g., meals served, recreation, visitors etc.				The SMU maintains a seven-day activity log on all detainees.
<ul> <li>SPC procedures include completing the SMU Housing Record (I-888) immediately upon a detainee's placement in the SMU.</li> <li>Staff completes the form at the end of each shift.</li> <li>CDFs and IGSA facilities use Form I-888 (or local equivalent).</li> </ul>				

#### SPECIAL MANAGEMENT UNIT (SMU) ADMINISTRATIVE SEGREGATION POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD). **COMPONENTS** REMARKS Staff record whether the detainee ate, showered, exercised, and took any applicable medication during every shift. Staff logs record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc; $\boxtimes$ 2/4 E.A. The medical officer/health care professional signs each individual's record during each visit; and The housing officer initials the record when all detainee services are completed or at the end of the shift. A new record is created for each week the detainee is in Administrative Segregation. $\boxtimes$ The weekly records are retained in the SMU until the detainee's return to the general population. ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING

#### REMARKS:

The SMU staff is very knowledgeable of their duties and maintains excellent documentation of detainee's daily activities. Management and supervisory staff conduct rounds throughout the unit at least weekly.

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	Y	N	NA	REMARKS
Officers placing detainees in disciplinary segregation follow written procedures.				In accordance with Policy 3.4.3.
The sanctions for violations committed during one incident are limited to 60 days.	$\boxtimes$			
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 supporting reasons.	×		П	
The conditions of confinement in the SMU are proportional to the amount of control necessary to protect detainees and staff.	Ø	П		
Detainees in disciplinary segregation have fewer privileges than those housed in administrative segregation.	×			
Living conditions in disciplinary SMUs remain the same regardless of behavior.  If no, does staff prepare written documentation for this action?  Does the OIC sign to indicate approval.				
Every detainee in disciplinary segregation receives the same humane treatment, regardless of offense.	×		E James a	
The quarters used for segregation are:				The SMU unit is ventilated, adequately lighted, and very clean.
All cells are equipped with beds that are securely fastened to the floor or wall of the cell.	×			All beds were secured to the wall.
The number of detainees confined to each cell or room is limited to 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.	M			
Detainees in the SMU have the same opportunities to exchange clothing, bedding, etc., as other detainees.	$\boxtimes$			
Detainees in the SMU receive three nutritious meals per day, selected from the Food Service's menu of the day.  • Food is not used as punishment.				
Detainees are allowed to maintain a normal level of personal hygiene, including the opportunity to shower and shave at least three times/week.	×			

### 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	Y	Ň	NA	REMARKS
Detainees receive, unless documented as a threat to security:				Detainees housed in disciplinary segregation receive barbering, recreation, reading material, religious materials, correspondence privileges, and legal material access.
<ul> <li>When phone access is limited by number or type of calls, the following areas are exempt:</li> <li>Calls about the detainee's immigration case or other legal matters;</li> <li>Calls to consular/embassy officials; and</li> <li>Calls during family emergencies (as determined by the OIC/Warden).</li> </ul>	×			
A health care professional visits every detainee in disciplinary segregation every week day.  • The shift supervisor visits each segregated detainee daily  • Weekends and holidays.	X			
SMU detainees are allowed visitors, in accordance with the "Visitation" standard.				
SMU detainees receive legal visits, as provided in the "Visitation" standard.  • Legal service providers are notified of security concerns arising before a visit.				
Visits from clergy are allowed.  The clergy member is given the option of visiting/not visiting the segregated detainee.  Violent/uncooperative detainees are denied access to religious services when safety and security would otherwise be affected.				
<ul> <li>SMU detainees have law library access.</li> <li>Violent/uncooperative detainees retain access to the law library unless adjudicated a security threat in writing.</li> <li>Legal material brought to individuals in the SMU on a case-bycase basis.</li> <li>Staff documents every incident of denied access to the law library.</li> </ul>				
All detainee-related activities are documented, e.g. meals served, recreation activities, visitors, etc.	X			
The SPC's, the Special Management Housing Unit Record (I-888or equivalent), is prepared as soon as the detainee is placed in the SMU.  • All I-888s are filled out by the end of each shift.  • The CDF/IGSA facility use Form.  • I-888 (or equivalent local form).				

### 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	Y	N	NA	REMARKS
<ul> <li>SMU staff record whether the detainee ate, showered, exercised, took medication, etc.</li> <li>Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc.</li> <li>The health care official sign individual records after each visit.</li> <li>The housing officer initials the record when all detainee services are completed or at the end of the shift.</li> <li>A new record is created weekly for each detainee in the SMU.</li> <li>The SMU retains these records until the detainee leaves the SMU.</li> </ul>				
ACCEPTABLE DEFICIENT	AT-RI	sk	<u></u> [] i	REPEAT FINDING

#### REMARKS:

The SMU staff is very knowledgeable of their duties and maintains excellent documentation of detainee's daily activities. Management and supervisory staff conduct rounds throughout the unit at least weekly.

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## 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.				In accordance with Policy 3.1.15, Tool Control.
Department heads are responsible for implementing this standard in their departments.	⊠			
Tool inventories are required for the:  Maintenance Department; Medial Department; Food Service Department; Electronics Shop; Recreation Department; and Armory.	×			
<ul> <li>The facility has a policy for the regular inventory of all tools.</li> <li>The policy sets minimum time lines for physical inventory and all necessary documentation.</li> <li>ICE facilities use AMIS bar code labels when required.</li> </ul>	<b>₩</b>			
The facility has a tool classification system. Tools are classified according to:  • Restricted (dangerous/hazardous); and • Non-Restricted (non-hazardous).				The facility uses a Class A for restricted and Class B for unrestricted tools.
Department heads are responsible for implementing tool-control procedures.	M 2			
The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable.				Tools throughout the facility were appropriately marked and secured.
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 is readily notice.				
Each facility has procedures for the issuance of tools to staff and detainees.	$\square$			
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; and  • 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.			Ď,	
All private or contract repairs and maintenance workers under contract to ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility.	×			
□ ACCEPTABLE □ DEFICIENT □	AT-RISK			REPEAT FINDING

#### REMARKS:

Tool control is well organized and appropriately managed throughout the facility. Shadow boards and accurate tool inventories were available in all assigned tool areas.

Written policy and procedures are in effect that govern the control and use of tools. Culinary and medical equipment are controlled in a safe and secure manner and are only used for their intended purpose.

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## 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 IS HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE. COMPONENTS YES No REMARKS Transporting officers comply with applicable local, state, and federal A review of 15 transporting motor vehicle laws and regulations. Records support this finding of M compliance. Every transporting officer required to drive a commercial size bus has a valid Commercial Driver's License (CDL) issued by the state of M

Officers use a checklist during every vehicle inspection.		Vehicle inspection is addressed
<ul> <li>Officers report deficiencies affecting operability; and</li> </ul>		in Vehicle Operation policy
Deficiencies are corrected before the vehicle goes back into		3.1.23. Form 873.
service.		

X

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Supervisors maintain records for each vehicle operator.

Transporting officers:

- 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 are two qualified officers per vehicle.
- An unaccompanied driver may 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

Protective vests are provided to all transporting officers.

The vehicle crew conducts a visual count once all passengers are on board and seated.

exceed the vehicles manufacturer's occupancy level.

Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop.

	officers records, verified state, local, and motor vehicle law compliance.
	Vehicle inspection is addressed in Vehicle Operation policy 3.1.23, Form 873.

# 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.

ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL.  STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS CONTROL OF THE DETAINEE CASE.	HANDLED	ONLY BY	THE ICE	FIELD OFFICE OR SUB-OFFICE IN
CONTROL OF THE BETAINEE CASE.  COMPONENTS	YES	No	NA .	REMARKS
Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.				Transportation Post Orders included direction on the appropriate use of restraints. Observation of detainee movement confirmed compliance.
Officers ensure that no one contacts the detainees.  • One officer remains in the vehicle at all times when detainees are present.			To a managing strongs	
Meals are provided during long distance transfers.  • The meals meet the minimum dietary standards, as identified by dieticians utilized by ICE.	×	П		
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; and Equipment boxes stocked in accordance with the Use of Force Standard.				
The vehicles are clean and sanitary at all times.	Ø		20 20	
Personal property of a detainee transferring to another facility is:  Inventoried; Inspected; and Accompanies the detainee.				

TRANSPORTATION LAND TRANSPORTATION									
POLICY: THE IMMIGRATION AND NATURALIZATION SERVICE WILL TAKE ALL WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUSTO HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL.  STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS HERE	ODY DURI THE SUPE	NG THE TI RVISION (	RANSPOR OF EXPER	TATION OF DETAINEES, STANDARDS RIENCED AND TRAINED DETENTION					
CONTROL OF THE DETAINEE CASE.		Flynnig.							
COMPONENTS  The following contingencies are included in the written procedures for	YES	No	NA	REMARKS					
vehicle crews:									
Attack     Escape									
Hostage-taking									
Detainee sickness  Detainee death									
<ul> <li>Detainee death</li> <li>Vehicle fire</li> </ul>	Ø								
• Riot	en e								
Traffic accident									
Mechanical problems									
Natural disasters		4	1.5						
Severe weather									
Passenger list includes women or minors	in also in	<u> </u>							
ACCEPTABLE    □ DEFICIENT    □	AT-RISH	<b>(</b>	П	REPEAT FINDING					

#### REMARKS:

All detainee transportation duties are contracted to Asset Protective Security Services; Contract # HSCEDM-08-D-00002 dated 2-28-2009. Weapon and CDL certification for all Transport Officers are compliant. Transport staff is very knowledgeable of all transport requirements. Policy and procedures are in effect for detainee transfers to and from this facility. Detainees are transported in a safe and humane manner and are in compliance with local, state, and federal regulations. Transportation is conducted under the supervision of trained and experienced staff.

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#### USE OF FORCE

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

COMPONENTS	YES	No	NA	REMARKS
Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.				In accordance with Policy 3.1.8, Use of Force.
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.		1		
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.	×	mil two		
When a detainee must be forcibly moved and/or restrained, and there is time for a calculated use of force, staff uses the Use-of-Force Team Technique.  • Under staff supervision.	u. 🔀 🥫	Г		
Staff members are trained in the performance of the Use-of-Force Team Technique.	Ø			
All use-of-force incidents are documented and reviewed.	×			A review of ten Uses of Force files indicated appropriate review processes are in place.
Staff:  Do not use force as punishment;  Attempt to gain the detainee's voluntary cooperation before resorting to force;  Use only as much force as necessary to control the detainee; and  Use restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical.	×			
Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	×			
Use-of-Force Team follows written procedures that attempt to prevent injury and exposure to communicable disease(s).				
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; and  When qualified medical staff is not immediately available, staff position the detainee "face-up".				Use of Force policy, page #9, addresses approved procedures for use of four-point restraints.

#### **USE OF FORCE**

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

COMPONENTS	YES	No	NA	REMARKS
The shift supervisor monitors the detainee's position/condition every two hours.  • He/she allows the detainee to use the rest room at these times under safeguards.				
All detainee checks are logged.		Ang III. isi		
In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.				
<ul> <li>When the OIC authorizes use of non-lethal weapons:</li> <li>Medical staff is consulted before staff use pepper spray/non-lethal weapons.</li> <li>Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized.</li> </ul>				
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.	×	П		
Staff documents every use of force and/or non-routine application of restraints.				
It is standard practice to review any use of force and the non-routine application of restraints.	X			
All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees.  • Specialized training is given and Officers are certified in all devices they use.				
<u>In SPCs</u> , is the Use of Force form is used? In other facilities (IGSAs / CDFs) is this form or its equivalent used?	X		ĮД	
ACCEPTABLE DEFICIENT	AT-RISE			REPEAT FINDING

### REMARKS:

PISPC provides staff with proper training and guidance on the permissible use of force to ensure that force is used only within the guidelines of the NDS. The use of force security equipment and restraint equipment are intended only as a control measure and used only when necessary.

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## STAFF DETAINEE COMMUNICATIONS

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

FRAME,				
COMPONENTS	Y	N.	NA.	REMARKS
The ICE Field Office Director ensures that weekly announced and unannounced visits occur at the IGSA.				In accordance with Policy 1.1.7, Detainee and Staff Communication.
Detention and Deportation Staff conduct scheduled weekly visits with detainees held in the IGSA.				Deportation, IEA, OIC, and Compliance Team staff visit each unit at least weekly.
Scheduled visits are posted in ICE detainee areas.	$\square$			
Visiting staff observe and note current climate and conditions of confinement at each IGSA.		The second secon		While this facility is not an IGSA facility, climate and conditions are monitored daily by Contract and ICE Detention staff. Observations are documented on daily housing unit logs and security inspection logs.
ICE information request Forms are available at the IGSA for use by ICE detainees.			Ē.	While this facility is not an IGSA facility, ICE Request Forms are made available.
The IGSA treats detainee correspondence to ICE staff as Special Correspondence.	×	<b>L</b>	Ш	
ICE staff responds to a detainee request from an IGSA within 72 hours.	X			
ICE detainees are notified in writing upon admission to the facility of their right to correspond with ICE staff regarding their case or conditions of confinement.	×	П	°П	
ACCEPTABLE DEFICIENT	AT-RISI	<b>S</b> ald a	) [T]	REPEAT FINDING

#### REMARKS:

All postings to include OIG Hotline, Sexual Harassment/Assault Prevention and Reporting, Pro-Bono Legal Telephone Numbers and Consulate Office numbers are available in all housing units. Deportation Officers make at least weekly rounds to every housing unit. Visits are recorded in a Log Book and responded ordinarily within 72 hours. The OIG telephone number is now programmed into the Telephone System.

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#### DETAINEE TRANSFER STANDARD

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

COMPONENTS	Y	N	NA.	REMARKS
When a detainee is represented by legal counsel or a legal representative, and a G-28 has been filed, the representative of record is notified by the detainee's Deportation Officer.  • The notification is recorded in the detainee's file; and • When the A File is not available, notification is noted within DACS				
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.	×			Notification is made by the assigned Deportation Officer
<ul> <li>Facility policy mandates that:</li> <li>Times and transfer plans are never discussed with the detainee prior to transfer;</li> <li>The detainee is not notified of the transfer until immediately prior to departing the facility; and</li> <li>The detainee is not permitted to make any phone calls or have contact with any detainee in the general population.</li> </ul>	$\boxtimes$			
The detainee is provided with a completed Detainee Transfer Notification Form.				Provided upon removal.
Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	X	[ ] 29 .		
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; and  • 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.	X			
Detainee's funds, valuables, and property are returned and transferred with the detainee to his/her new location.				In accordance with Policy 4.7.1, Release and Transfer Procedures.
Transfer and documentary procedures outlined in Section C and D are followed.				
Meals are provided when transfers occur during normally schedule meal times.	×			

#### DETAINEE TRANSFER STANDARD POLICY: ICE WILL MAKE ALL NECESSARY NOTIFICATIONS WHEN A DETAINEE IS TRANSFERRED. IF A DETAINEE IS BEING TRANSFERRED VIA THE JUSTICE PRISONER ALIEN TRANSPORTATION SYSTEM (JPATS), ICE WILL ADHERE TO JPATS PROTOCOLS. IN DECIDING WHETHER TO TRANSFER A DETAINEE, ICE WILL TAKE INTO CONSIDERATION WHETHER THE DETAINEE IS REPRESENTED BEFORE THE IMMIGRATION COURT. IN SUCH CASES, THE FIELD OFFICE DIRECTOR WILL CONSIDER THE DETAINEE'S STAGE WITHIN THE REMOVAL PROCESS, WHETHER THE DETAINEE'S ATTORNEY IS LOCATED WITHIN REASONABLE DRIVING DISTANCE OF THE FACILITY, AND WHERE THE IMMIGRATION COURT PROCEEDINGS ARE TAKING PLACE. COMPONENTS N NA REMARKS An A File or work folder accompanies the detainee when transferred to a M different field office or sub-office. Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer. $\boxtimes$ **ACCEPTABLE** DEFICIENT AT-RISK REPEAT FINDING

#### REMARKS:

Five A-Files were reviewed which evidenced that when a G-28 is filed, the attorney of record is notified of the detainee's transfer no earlier than the actual day of movement. Post Order Custody Reviews (POCR) for 90 and 180 days were reviewed with no discrepancies noted. There are currently 44 detainees on the 90-180 day POCR and 14 detainees on the 180 day and over POCR. Those referenced on the 180 day POCR have been referred to ICE Headquarters.

#### A-Files Reviewed:



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