

12/22/04

**MEMORANDUM FOR:** 

Neil Clark

Field Office Direct

Seattle

FROM:

Victor X. Gerda

Acting Director

SUBJECT:

Northwest Detention Center - Headquarters Detention Review

This office is in receipt of the Headquarters Detention Review of the Northwest Detention Center conducted on July 27-29, 2004, in Tacoma, Washington. A final rating of <u>Good</u> has been assigned and this review is closed.

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

- 1) The Field Office Director, Detention and Removal Operations, shall notify the facility within five business days of receipt of this memorandum. Notification shall include copies of the G-324A form, the G-324A worksheet, RIC Summary Memorandum, and a copy of this memorandum.
- 2) The Field Office Director shall schedule the next Annual Review on or before July 29, 2005.

Should you or your staff have any questions regarding this matter, please contact Timothy L. Perry, Acting Deputy Assistant Director, Detention Management Division at (202) 305.

(b)(2)



MEMORANDUM FOR:

Victor X. Cerda

**Acting Director** 

FROM:

(b)(6), (b)(7)(C)

Detention and Deportation Officer Detention Compliance Branch

SUBJECT:

Northwest Detention Center - Headquarters Detention Review

The Detention Management Division, Detention Compliance Unit performed a headquarters detention review of the Seattle Field Office Northwest Detention Center (NDC) during July 27 through 29, 2004. This review was performed under the direction of as Reviewer-In-

Charge, with team members

(b)(6), (b)(7)(C)

## Type of Review:

This review was a scheduled Headquarters Review to determine overall compliance with the Immigration and Customs Enforcement (ICE) Detention Standards. The NDC is a new facility and has no previous rating. Prior to April 2004, the contractor, Correctional Services Corporation (CSC), operated the Seattle Service Processing Center in Seattle, Washington. During 2002 and 2003 the Seattle facility received ratings of Deficient and At-Risk. The CSC made significant staffing changes at all levels as a result of those reviews and prior to opening the NDC. Operations and compliance were greatly improved as a direct result of these changes.

#### **Review Summary:**

The Northwest Detention Center has not received an accreditation certification. The facility has been open approximately 90 days and is in the process of implementing its policies and procedures and preparing for accreditation for its detention programs. Medical accreditation will be sought separately by the Division of Immigration Health Services prior to the next scheduled headquarters review.

The NDC was found to be generally compliant in all areas reviewed. The following information is a summary of the standards reviewed and overall compliance:

2003 Review			<u>2004 Review</u>				
Compliant	-	17	Compliant	-	35		
Deficient	-	8	Deficient	-	1		
At-Risk	-	10	At-Risk	-	0		

REPEAT - 10 REPEAT - 0
Non-Applicable - 1 Non-Applicable - 1
Food Service (Deficient):

- Detainee workers did not receive proper medical clearance before being authorized to work.
- Detainee workers had not completed voluntary work program information sheets.
  - ✓ The facility contractor allowed detainees to work in the food service areas prior to receiving a medical clearance to perform such duties. This provides an avenue for the spread of infectious disease that jeopardizes both detainees and staff. The problem was corrected during the review and only follow-up by Immigration and Customs Enforcement staff is required to ensure that detainees continue to be cleared before being assigned to food service.

#### **RIC Observations:**

- The contractor has made the largest single improvement in a contractor rated facility during this rating period. The efforts applied by the contractor in coordination with ICE staff have turned the Seattle detention operation into one of the best viewed during the 2004 review year. The facility is expected to achieve a Superior rating in 2005 if it continues to operate at its current level.
- BEST PRACTICE: The facility training program is outstanding. The contractor was
  previously deficient in all areas of training, has now employed an outstanding training
  administrator who schedules and provides all training within the facility. Records are
  excellent and often contain more information than is needed. Training records are
  maintained both electronically and in individual files.
- BEST PRACTICE: The facility property control room is automated and all inventory is maintained electronically. All property is easily accessible and available. A property control officer maintains control over the property area.
- CONTRACT STAFF: The staff is extremely well versed in policies and procedures at this location. They exhibited confidence and courtesy throughout the review. The team commends the efforts and accomplishments of the NDS and ICE staff. Contract staff exhibited a professional esprit de corps. The team observed that the facility operated in a calm and orderly fashion throughout the review. The contract staff was eager to display their abilities and working knowledge of facility operations.
- COMMUNICATION: Communication between the contractor and ICE is excellent throughout the facility and there are no significant concerns or issues as a result of this review. Both contract and ICE management teams exhibit exemplary oversight and operation of this facility.
- The contractor is currently developing an open area recreation yard that will be utilized to allow detainees additional access to fresh air and sunlight. The recreation yard exceeds requirements of the contract and is viewed as an additional asset to assist with detainee

morale. The facility has very few windows and relies primarily on skylights. Long term deprivation of a view to the outside of the institution can be problematic for detainees in an enclosed environment, so the contractor has taken great strides to alleviate this issue.

#### RIC Issues and Concerns:

• Communication between the contractor and the Division of Immigration Health Services was unacceptable. It was immediately observed by the RIC that the health services unit had not opened its Short Stay Medical unit. This unit was designed to allow ICE to maintain a non-acute care health unit to monitor detainees who are in need of short-term care in a controlled environment.

The failure to open the short stay unit lies with all concerned parties. A lack of communication to resolve the issue in a reasonable time period and the inability of both sides to endeavor to find an amicable solution was unacceptable. A meeting was mediated to resolve security issues within the unit and a no-cost solution was identified and agreed upon by all parties involved. The unit was open by the departure of the review team. Notification was in progress for change orders to the contract. No further problems were identified.

#### Recommended Rating and Justification:

The Reviewer in Charge recommends that the facility receive a rating of "Good." The facility complies with 35-of-36 applicable ICE Detention Standards. The facility corrected deficiencies during the inspection and it is the recommendation of the RIC that no plan of action is required and this review should be closed.

#### **RIC Assurance Statement:**

The findings of compliance and noncompliance are documented on the G-324a Inspection form and are supported by documentation in the review file.

## U.S. Department Of Homeland Security

## U.S. Immigration and Customs Enforcement

4	
J	<b>Detention Facility Review Form</b>
	Facilities Used Over 72 hours

☐ ICE Service Processing Center		litation Certi	ficates	
ICE Service Processing Center  ICE Contract Detention Facility  ICE Intergovernmental Service Agreement	Accredited By:	_	_	
☐ ICE Intergovernmental Service Agreement	ACA:	NCCHC:	_	
	Date:	Date:	Date:	,
A. Current Inspection  Type of Review	F. Proble	ms / Complai	ints (Copies mu	st be attached)
☐ Field Office ☐ HQ Review			der or Class Acti	
Date[s] of Review	Court Order		Class Action Or	
July 27 - 29, 2004 - New Facility	The Facility has	Significant L	itigation Pending	
2,3201	Major Litiga		Life/Safety Issue	
Previous/Most Recent Review	Checked Box at	ove requires a	detailed written	memorandum.
Date[s] of Last Review	<u> </u>			
July 29, 2003 - Old Facility	G. Facility His	tory		
Previous Rating	Date Built			
☐ Superior ☐ Good ☐ Acceptable ☐ Deficient ☒ At-Risk	April 23, 2004			į
	Date Last Remo	deled or Upgi	aded	
B. Name and Location of Facility	N/A			1
Name	Date New Cons	truction / Bed:	space Added	
Northwest Detention Center Seattle	July 21, 2004 -	Outdoor recre	ation Yard	
Address (Street and Name) 1623 East J Street	Future Construc	tion Planned		
City, State and Zip Code	Yes No	Date:		
Facomba, WA 98421 TACOMA	Current Bedspa	ce	Future Bedspace	3
County	760		NA	
Pierce				
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)	H. Total Facil	ity Populatio	n	
Telephone # (Include Area Code) (b)(6), (b)(7)(C)	Total Intake for	previous 12 m	ionths	
	1,855 (4/23/04 t	hrough 07/23/	04)	
District Seattle	Total Mandays	for Previous 12	2 months	(b)(2)
Distance from District Office				(-)(-)
33 Miles				
	Classificati	on Level (IC	E SPCs and CD	
C. ICE Information		L-	1 L-2	L-3
Name of Reviewer (Last Name, Title and Duty Station)	Adult Male			
/ DDO / HQDRO  Last Name / Title of Team Members (Reviewers) (b)(6), (b)(7)	Adult Female			
Last Name / Tige of Team Members (Reviewers)			(b)(2)	1
/ IEA / DO;	I. Facility Ca	pacity		
Controlling Field Office		Rated	Operational	Emergency
Seattle	Adult Male	618	618	618
Nearest Field or Sub-Office	Adult Female	142	142	142
Same as Facility				
	Average Da	aily Populatio	······································	
D. CDF/IGSA Information Only		IC	E USMS	Other
Contract Number Date of Contract or IGSA	Adult Male	268	3	
	Adult Female	25		
Basic Rates per Man-Day				
	Staffing Le	vel		
Other Charges: (If None, Indicate N/A)	Security:		Support:	
;				
Estimated Man-days Per Year				· <del></del>
		(b)(2)		

(b)(2)

#### Significant Incident Summary Worksheet

For ICE to complete its Review of your facility, the following information must be completed prior to the scheduled review dates. The information on this form should contain data for the past twelve months in the boxes provided. The information on this form is used in conjunction with the ICE Detention Standards in assessing your Detention Operations against the needs of the ICE and its detained population. This form should be filled out by the facility prior to the start of any inspection.

Incidents	Description	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault:	Types (Sexual <sup>2</sup> , Physical, etc.)		P-9	P-2	
Offenders on Offenders <sup>1</sup>	With Weapon		0	0	
	Without Weapon		9	2	
Assault:	Types (Sexual Physical, etc.)		P-6	P-1	
Detainee on Staff	With Weapon		4	0	
	Without Weapon		2	1	
Number of Forced Moves, incl. Forced Cell moves <sup>3</sup>			3	3	
Disturbances <sup>4</sup>			0	0	
Number of Times Chemical Agents Used			0	0	
Number of Times Special Reaction Team Deployed/Used	Company of the Compan		0	0	
# Times Four/Five Point	Number/Reason (M=Medical, V=Violent Behavior, O=Other)		0	0	
Restraints applied/used	Type (C=Chair, B=Bed, BB=Board, O=Other)		0	0	
Offender / Detainee Medical Referrals as a result of injuries sustained.			0	0	
Escapes	Attempted		0	0	
	Actual		0	0	
Grievances:	# Received		65	35	
	# Resolved in favor of Offender/Detainee		13	5	
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)		0	0	
	Number		0	0	
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care		6	4	
	# Psychiatric Cases referred for Outside Care		0	0	

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

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

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

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

1. A	cceptable 2. Deficient 5.Not Applicable (IGSA's Only)			
Lega	al Access Standards	1.	2. 3.	4.
1.	Access to Legal Materials			
2.	Group Presentations on Legal Rights	$\boxtimes$		
3.	Visitation	$\boxtimes$		
4.	Telephone Access	X		
Deta	inee Services			
5.	Admission and Release			
6.	Classification System			
7.	Correspondence and Other Mail	$\boxtimes$		
8.	Detainee Handbook	$\boxtimes$		
9.	Food Service			
10.	Funds and Personal Property			
11.	Detainee Grievance Procedures	$\boxtimes$		
12.	Issuance and Exchange of Clothing, Bedding, and Towels			
13.	Marriage Requests	$\boxtimes$		
14.	Non-Medical Emergency Escorted Trip			
15.	Recreation	X		
16.	Religious Practices	$\boxtimes$		
17.	Voluntary Work Program	X		
Heal	th Services			
<b>18</b> .	Hunger Strikes	X		
19.	Medical Care	X		
20.	Suicide Prevention and Intervention	X		
21.	Terminal Illness, Advanced Directives and Death	×		
Secu	rity and Control			
22.	Contraband	$\boxtimes$		
23.	Detention Files	X		
24.	Disciplinary Policy	X		
25.	Emergency Plans	$\overline{\boxtimes}$		
26.	Environmental Health and Safety	X		
27.	Hold Rooms in Detention Facilities	Ø		
28.	Key and Lock Control			
29.	Population Counts	図		
30.	Post Orders	$\boxtimes$		
31.	Security Inspections	$\boxtimes$		
32.	Special Management Units (Administrative Segregation)	$\boxtimes$		
33.	Special Management Units (Disciplinary Segregation)	$\boxtimes$		
34.	Tool Control	$\boxtimes$		
35.	Transportation (Land management)	$\boxtimes$		
36.	Use of Force	$\boxtimes$		
37.	Staff / Detainee Communication	$\boxtimes$		
38.	Detainee Transfer			
<b>39</b> .	Detainee Search			

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

#### **RIC Review Assurance Statement**

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

Reviewer-In-Charge: (Print Name)		
		(b)(6), (b)(7)(C)
Title & Duty Location	Date //	· · · · · · · · · · · · · · · · · · ·
Detention and Deportation Officer - HQDRO	august 4,2004	
m Nr1		
Team Members	······································	
Print Name & Duty Location	Print Name & Duty Location	
ATL	- DAL	<del>(b)(6), (b)(</del> 7)(C)
Print Name & Duty Location	Print Name & Duty Location	(0)(0); (0)(1)(0)
- DIHS/FLO		
RIC Rating Recommendation:		
⊠ Good		
Acceptable		
_ Deficient		
At-Risk		

RIC Comments: The Northwest Detention Center opened and accepted detainees effective April 23, 2004. The previous rating for this location involved the same contractor under a previous contract and within the confines of a government owned building that was approximately 100 years old. This review was conducted under a newly issued contract that included compliance with the national detention standards and construction of a new facility with modern security and control features.

As required by the Detention Management Control Program, this facility has been reviewed within 90 days of accepting detainees. A rating of Good is supported for this review. All supporting documentation is attached.

HEADQUARTERS EXECUTIVE REVIEW	
Review Authority	
The signature below constitutes review of this report and	acceptance by the Review Authority. FD/OIC/CEO will have 30 days
from receipt of this report to respond to all findings a	
HQDRO EXECUTIVE REVIEW: (Please Print Name)	Signature
Victor X. Cerda	
Title	Date
Acting Director	
Office of Detention and Removal	
Final Rating:  Superior  Good  Acceptable  Deficient  At-Risk	

Comments: In accordance with the Detention Management Control Program a rating of "Good" has been assigned based upon the Detention review and accompanying documentation.

HEADQUARTERS EXECUTIVE REVIEW	
receipt of this report to respond to all findings and recom	eptance by the Review Authority. OIC/CEO will have 30 days from mendations
HQDRO EXECUTIVE REVIEW: (Please Print Name)  Victor X. Cerda  Title	Signante Signature For
Acting Director	Date 12/22/04
Final Rating: Superior  Good Acceptable	
☐ Deficient ☐ At-Risk	

Comments: The Review Authority concurs with the Reviewer-In-Charge (RIC) recommended rating of "Good" based on the RIC Memorandum and G324A Worksheets. Oversight is required to ensure Immigration and Customs Enforcement detainees are managed according to the National Detention Standards.

## **Condition of Confinement Review Worksheet**

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

This Form to be used for Detention Reviews of SPCs

# **Headquarters Detention and Removal Operations**



Headquarters and Field Operational Review Worksheet

ICE Service Processing Center	
Name NORTHWEST DETENTION CENT	EL
Address (Street and Name)	•
City, State and Zip Code	
County	
Name	C/Superintendent)
Name and the or Foviewer-In-Charge	(b)(6), (b)(7)(C)
Date[s] of Review	
<u>Ty</u> pe of Review	
🔀 Headquarters 🔲 Operational 🔲 Special Asses	ssment Other

ACCESS TO LEGA	_ MAT	ERIAL	.s		
Policy: Facilities holding ICE detainees shall permit detainees' access to a law library, and provide legal materials, facilities, equipment and document copying privileges, and the opportunity to prepare legal documents.					
Components	Α	U	NA	Remarks	
The facility provides a designated law library for detainee use.					
The library contains a sufficient number of chairs, is well lit and is reasonably isolated from noisy areas.	$\boxtimes$				
The law library is adequately equipped with typewriter, computers or both and has sufficient supplies for daily use by the detainees.				(b)(6), (b)(7)(0	
There is a designated ICE employee responsible for ensuring the equipment is in good working order and supplies are adequately stocked.	×			is the responsible party.	
Outside persons and organizations are permitted to submit published legal material for inclusion in the legal library. Outside published material is forwarded and reviewed by the ICE prior to inclusion.	$\boxtimes$			Chain of Command is adhered to. ICE is kept informed throughout.	
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 ICE office subscribes to updating Services where applicable and legal materials requiring updates are current.	×			(b)(6), (b)(7)(C)	
There is a designated ICE employee who inspects, updates, and maintain/replace legal material on a routine basis. The designee properly disposes outdated supplements and replaces damaged or missing material promptly.	×			is designated person.	
If material submitted by outside organizations need to be replaced, does the facility contact ICE?				Procedures in place.	
Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.	×				
Detainees may request material not currently in the law library. Each request is reviewed and where appropriate an acquisition request is initiate and timely pursued. Request for copies of court decisions are accommodate within 3 – 5 business days.	$\boxtimes$				
The facility permits detainees to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	×				
The ICE ensures that illiterate or non-English-speaking detainees without legal representation receive more than access to English-language law books after indicating their need for help.	×				
Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.	$\boxtimes$				

ACCESS TO LEGAL MATERIALS						
<b>Policy:</b> Facilities holding ICE detainees shall permit detainees' access to a law library, and provide legal materials, facilities, equipment and document copying privileges, and the opportunity to prepare legal documents.						
Components	Α	U	NA	Remarks		
Detainees housed in Administrative Segregation and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.	×					
All denials of access to the law library fully documented.	$\boxtimes$					
ICE Management is aware of each instance where detainees are denied access to the law library or law materials.	×					
Indigent detainees are provided with free envelopes and stamps for mail related to legal matters. Indigent detainees may mail up to 3 first class letters at no charge while in ICE custody.	×					
Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	$\boxtimes$					
Standard Rating:  Acceptable Deficient At-Risk Repeat Deficiency						
Remarks: (Record significant facts, observations, alternate $(b)(6), (b)(7)(C)$				•		

is the person in charge (oversees) of the Law Library. Adequate space and materials are available. Nice overall layout.

29 JULY 04

### **ADMISSION AND RELEASE**

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

Components	Yes	No	NA	Remarks
In processing includes an orientation session. At a minimum, orientation addresses: Unacceptable activities and behavior, and corresponding sanctions. How to contact his/her deportation officer. The availability of <i>pro bono</i> legal services, and how to pursue such services. Schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, etc and the detainee handbook.	×			Good combination of workload being shared by both the CSC staff and the ICE agents.
Medical screenings are performed by a medical staff or persons who have received specialized training for the purpose of conducting an initial health screening.	×			Completed within alloted time.
The accompanying documentation is used to identify and classify each new arrival?				
All new arrivals strip-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.	×			Determination is made on a case by case basis (charge, history, presence).
The "Contraband" standard governs all personal property searches. IGSAs use or have a similar contraband standard. Staff prepares a complete inventory of each detainee's possessions. The detainee receives a copy.	×			Detainees given a computer print-out of property upon intake into facility.
Excess funds and valuables accounted for and safeguarded in accordance with the "Funds and Personal Property" standard or a similar policy for IGSAs and the detainee receives a receipt?	⊠			
During detainee in-processing staff inventories every item of personal property and baggage (except funds/valuables) using personal property inventory forms. Each detainee receives a receipt.	×			
Staff completes Form I-387 or similar form for CDFs and IGSAs for every lost or missing property claim. IGSA facilities forward all I-387 claims to ICE.	$\boxtimes$			
Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	$\boxtimes$			
For SPCs and CDFs clothes and wristbands are color-coded.	$\boxtimes$			
The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE Detainees are not charged for these items.	⊠			
The admissions process includes the following components:	×			
All releases are coordinated with the ICE office of jurisdiction.	$\boxtimes$			ICE officers need be present before release of detainee.

ADMISSION AND RELEASE									
<b>Policy</b> : All detainees will be admitted and released in a manner that ensures their health, safety, and welfare. The admissions procedure will, among other things include: medical screening; a file-based assessment and classification process; a body search; and a search of personal belongings, which will be inventoried, documented, and safeguarded as necessary.									
Components Yes No NA Remarks									
Staff completes paperwork/forms for release as required.				Prior to release.					
ICE Staff enter all information on detainees admitted, released, or transferred into the Deportable Alien Control  System (DACS).									
Standard Rating  Acceptable Deficient At-Ris		Repe	at Def	iciency					

Process appears to be completed in a timely fashion and with good cooperation on both sides of the house. All areas covered upon initial entry into facility. There are contingency plans that allow for detainees to be put into POD's away from the general population if alloted time in the intake unit is reached.

29 July 04 (b)(6), (b)(7)(C)

<sup>\*</sup>Remarks: (Record significant facts, observations, other sources used, etc.)

## **CLASSIFICATION SYSTEM**

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

g					
Components	Yes	No	NA	Remarks	
The facility has a system for classifying ICE detainees. In SPCs the system is the Objective Classification System specified in the ICE Standard. In CDFs the system is the ICE Objective Classification System or similar system. In IGSAs, an Objective Classification System or similar is used.				Policy 4.2.1 (b)(6), (b)(7)	(7)(C)
<ul> <li>The facility classification system includes:</li> <li>Classifying detainees upon arrival.</li> <li>Separating individuals who cannot be classified upon arrival from the general population.</li> <li>The first-line supervisor or designated classification specialist reviewing every classification decision.</li> </ul>				is in charge of the classification.	
The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	$\boxtimes$				
In SPCs and CDFs, staff assigns each detainee a color-coded uniform and wristband based on his/her classification level.					
In SPCs every A-file includes original paperwork supporting the classification and the detention file contains a copy.			×		
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. Detainees are assigned to the least restrictive housing unit based and are not assigned more than one level higher or lower than their classification designation.					
Detainees' meals are not based on classification designation.	×				
A detainee's classification-level does not affect his/her recreation opportunities. Detainees recreate with persons of similar classification designations.	$\boxtimes$				
Detainee work assignments are based upon classification designations.	$\boxtimes$			Policy 5.1.1 Section E	
The classification process includes reassessment/reclassification. Reassessments are conducted between 45 and 60 days after arrival and subsequent reassessments are completed every 60 to 90 days?	×			Above policy Section G	
The classification system includes standard procedures for processing new arrivals' appeals. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.	×			Above policy Section H	
Classification appeals are resolved within five business days and detainees are notified of the outcome within 10 business days.	×				

CLASSIFICATIO	N SY	STEM					
Policy: All facilities will develop and implement a system a classification system will ensure that each detainee is place from detainees in other categories	accordir	ng to whi	ch ICE o	detainees are classified. The tegory, physically separated			
Components	Yes	No	NA	Remarks			
Classification designations may be appealed to a higher authority such as the Officer in Charge or equivalent.	☒						
The Detainee Handbook or equivalent for IGSAs explains the classification levels, with the conditions and restrictions applicable to each.	$\boxtimes$						
The Detainee Handbook or equivalent for IGSAs specifies the procedures a detainee must follow to appeal his/her classification or request reclassification.	$\boxtimes$						
Standard Rating:  Acceptable Deficient At-Risk Repeat Deficiency							
*Remarks: (Record significant facts, observations, other s $(b)(6), (b)(7)(C)$	ources	used, et	c.)				
is the Classification Specialist for the Faciliferent levels with in the facility.	ility. Th	ere is a	very sys	tem in place for the			
Dark Red Bright Orange Dark Blue  (b)(2)							
The detainees wristbands and uniforms are color coordina Efforts need to be made to ensure that all files contain a 20				ssibility of mix-ups.			
29 July 09	(b)(d	6), (b)(7	7)(C)				



**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	
	162	NO	NA	Remarks	
The admission process includes informing detainees of the facility's correspondence and other mail policy.	×				
Notification of the policy is made in the detainee handbook and for SPCs and CDFs in the detail required to comply with the ICE standard.	×				
Each detainee receives a detainee handbook upon admittance.	$\boxtimes$				
The rules for correspondence and other mail are posted in each housing or common area.	×				
The facility provides key information in languages other than English; In the language(s) spoken by significant numbers of detainees. List any exceptions.	$\boxtimes$				
Incoming mail distributed to detainees on the day it is received by the facility and in no case more than 24 hours after it is received.	$\boxtimes$				
Outgoing mail routinely delivered to the postal service within one day of its entering the internal mail system (excluding weekends and holidays).	×			Gathered from each POD every morning by or	
Staff records all priority, overnight, and certified mail delivered by the U.S.P.S. and all deliveries from commercial alternatives to the U.S.P.S.	×			Officer (b)(6),	(b)(7)(C)
Staff do not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized by the Officer-In-Charge or equivalent for prevailing security reasons.					
Staff does not ever read incoming general correspondence without the OIC's prior approval.	$\boxtimes$				
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.	$\boxtimes$				
Staff are only authorized to inspect outgoing correspondence or other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity. Inspection of outgoing special correspondence is done in the presence of the detainee and for contraband only.	×				
Correspondence to a politician or to the media is processed as special correspondence and is not read or copied.	$\boxtimes$				
The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	$\boxtimes$				

CORRESPONDENCE A	ND OT	ΓHER	MAIL		
<b>Policy:</b> All facilities will ensure that detainees send and reclimitations required for the safety, security, and orderly op subject to the same limitations. Each facility will widely distorther mail.	eration	of the fa	acility. (	Other mail will be permitted,	
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. In SPCs and CDFs documentation is in accordance with the Standard.	$\boxtimes$			Kept in both the POD as well as by the Mail Officer.	
The OIC monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	×				
The procedure for safeguarding cash removed from a detainee is effective. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.	×				
Detainee identity documents (e.g., passports, birth certificates) are maintained A-files. Only copies of detainee identity documents are maintained in other non-official files.	×				
Staff provides the detainee an ICE-certified copy of	$\boxtimes$			(b)(6), (b)(7)(	(C)
his/her identity document(s) upon request.  Staff disposes of prohibited items found in detainee mail in accordance with the "Control and Disposition of Contraband" Standard or the similar prevailing policy in IGSAs.	×			Lt. is charge of disposing of Contraband. Done all within standards	
Every indigent detainee has the opportunity to mail, at government expense: Correspondence about a legal matter: At least three other letters per week: Packages deemed necessary by ICE.	×				
The facility has a system for detainees to purchase stamps and for mailing all special correspondence and a minimum of 5 pieces of general correspondence per week.	$\boxtimes$				
The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	×				
Standard Ratir ⊠ Acceptable □ Deficient □ At-R	ng: isk 🔲 F	Repeat I	Deficien	cy	
*Remarks: (Record significant facts, observations, other sources	s used. et	tc.)			
(b)(6), (b)(7)(C)	,	,			
Officer is in charge of the above standard. All incorto admittance into the facility. All mail records are kept on available by day or detainee.					
29 July 04 (b	o)(6), (b	)(7)(C	)		

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

Components	Yes	No	NA	Remarks	-
-			137	Romarko	1
Each SPC/CDF have a detainee handbook. Each					
IGSA has a detainee handbook or equivalent.				D 1 D 1:1	
The detainee handbook is written in English and	N .	_		Both English and Spanish	
translated into Spanish or into the next most-prevalent					
Language(s).					
In SPCs and CDFs detainees are required to sign for					
them to ensure accountability.					
The handbook supplements the facility orientation	$\boxtimes$			Video is shown on a daily	
video where one is provided.				basis.	
All staff members receive a handbook and training	$\boxtimes$				
regarding the handbook contents.					
The handbook is revised as necessary and there are				Revisons completed by	
procedures in place for immediately communicating				Compliance Officer	
any revisions to staff and detainees.					
There an annual review of the handbook by a				(b)(6), (	b)(7)(C)
designated committee or staff member.				(-)(-))	7(-)(-)
The detainee handbook address the following issues:					1
<ul> <li>Personal Items permitted to be retained</li> </ul>					
by the detainee.	$\boxtimes$		ΙП		
Initial issue of clothes.	-		—		
<ul> <li>Personal hygiene items issued.</li> </ul>					
The detainee handbook states in clear language basic					1
detainee responsibilities.					
•				***	
The handbook identifies: Initial issue of clothing and	$\boxtimes$				
bedding and initial issue of personal hygiene items.			LJ		
The handbook states when a medical examination will		$\boxtimes$		Details how to see medical	
be conducted.				after admission.	
The handbook describes the facility, housing units,	_				
dayrooms, In-dorm activities and special management					
units.					
The handbook describes; Official count times and					
count procedures Meal times, feeding procedures,					
procedures for medical or religious diets, additional					
information, 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		J	_		
first.					
The handbook describes barber hours and hair cutting	$\boxtimes$				
restrictions.					
The handbook describes; the telephone policy, debit					
card procedures, direct and frees calls; Locations of					
telephones; Policy when telephone demand is high;					
Policy and procedures for emergency phone calls, and					
the Detainee Message System.					
The handbook addresses religious programming.	$\boxtimes$				

•			~					
DETAINEE HA	NDBO	OK						
<b>Policy:</b> Every OIC will develop a site-specific detainee handbook to serve as an overview of, and guide to, the detention policies, rules, and procedures in effect at the facility. The handbook will also describe the services, programs, and opportunities available through various sources, including the facility, ICE, private organizations, etc. Every detainee will receive a copy of this handbook upon admission to the facility.								
Components	Yes	No	NA	Remarks				
The handbook states times and procedures for commissary or vending machine usage. (where available)								
The handbook describes the detainee voluntary work program procedures and pay procedures.	$\boxtimes$							
The handbook describes the library location and hours of operation and law library procedures and schedules.	$\boxtimes$			Specific location not listed / all else covered.				
The handbook describes; attorney visitation hours; Location of the list of pro bono legal organizations; Group legal rights presentations schedule and sign up procedures.	×							
The handbook describes the facility search procedures and contraband policy.	$\boxtimes$							
The handbook describes the facility visiting hours and schedule and visiting rules and regulations.	$\boxtimes$							
The handbook describes the correspondence policy and procedures.	$\boxtimes$							
The handbook describes the detainee disciplinary policy and procedures: Including:  Prohibited acts and severity scale sanctions.  Time limits in the Disciplinary Process.  Summary of Disciplinary Process.	×							
The handbook describes the detainee grievance procedures including appeals.	$\boxtimes$							
The detainee handbook describes the sick call procedures for general population and segregation.	$\boxtimes$							
The handbook describes the facility recreation policy including:  Outdoor recreation hours. Indoor recreation hours. In dorm leisure activities. Rules for television viewing.  The handbook describes the detainee dress code for	$\boxtimes$			Outdoor area is currently being constructed.				
THE HARMONY RESURDES THE REFAILER CLESS CODE TOL	i i							

*Remarks:	(Record	significant	facts	observations	other sources used	l etc )
itelliains.	I LOCOLO	Significant	ıacıs.	UDSGI VALIUIIS.	Onici sources used	I. GIG.I

daily living; Work assignments and in SPCs and CDFs

The handbook specifies the rights and responsibilities

the meaning of color-coded uniforms.

of all detainees.

The layout of the handbook is very clear and concise. All areas are covered and do not leave any stone unturned as far policies and procedures. Revisions are made and implemented on a constant and daily basis in order to attain a maximum level of compliance.

Standard Rating:

☑ Acceptable ☐ Deficient ☐ At-Risk ☐ Repeat Deficiency

 $\boxtimes$ 

 $\boxtimes$ 

29 JVW D4 (b)(6), (b)(7)(C)

FOOD SE	RVICE			
Policy: Every facility will provide detainees in its care accordance with the highest sanitary standards.	with n	utritious	and ap	petizing meals, prepared in
Components	Yes	No	NA	Remarks
The food service program is under the direct supervision of a professionally trained and certified service administrator.				
In larger facilities the Cook Supervisor (CS) assists the FSA in day–to-day management of food service operations.	$\boxtimes$			
Responsibilities of cooks and cook foremen are in writing. The FSA determines the responsibilities of the Food Service Staff.	$\boxtimes$			
The CS is on duty on days when the FSA is off duty and vice versa.	$\boxtimes$			
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.			$\boxtimes$	No knives inside facility.
All knives not in a secure cutting room are physically secured to the workstation and staff directly supervises detainees using knives at these workstations.			$\boxtimes$	
The FSA/CS monitor the condition of knives and dining utensils.			$\boxtimes$	
Special procedures govern the handling of food items that pose a security threat.	$\boxtimes$			
Standard operating procedures include daily searches (shakedowns) of detainee work areas.	$\boxtimes$			CSC officers both before and after shift.
Food service personnel conduct shakedowns along with detention staff.	×			Kitchen staff along with CSC officers.
The FSA monitor staff's implementation of the facilities counting procedures. These procedures in written form and staff are trained in counting procedures.	⊠			Counts also verified by CSC officer.
The detainees assigned to the food service department look neat and clean. Their clothing and grooming				

 $\boxtimes$ 

 $\boxtimes$ 

 $\boxtimes$ 

comply with the "Food Service" standard.

the rules and procedures of the food service

encounter in their work.

department.

deterrence.

The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-

The CS instructs newly assigned detainee workers in

Training includes workplace-hazard recognition and

Training covers the safe handling of every hazardous material the detainee are likely to

FO	$\mathbf{n}$	SFR'	VICE

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

accordance with the highest sanitary standards.					
Components	Yes	No	NA	Remarks	
During orientation and training session(s), the CS explains and demonstrates:  • Safe work practices and methods.  • Safety features of individual products/ pieces of equipment.					
The CS documents all training in individual detainee detention files?		$\boxtimes$		Verification is kept in notebook in kitchen.	
Detainees are paid in accordance with the "Voluntary Work Program" standard or prevailing IGSA standards.	$\boxtimes$				
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.					
IN SPCs only: The ICE supervisor on duty ensure that ICE officers participate in dining room supervision.			$\boxtimes$		
A transparent "sneeze guard" protects both the serving line and salad bar line.			$\boxtimes$		
The facility has a standard 35-day menu cycle. IGSAs use a 35-day or similar system for rotating meals.		⊠		Facility adheres to a 28 day menu cycle.	
The FSA or facility considers the ethnic diversity of the facility's detainee population when developing menu cycles. (Provide examples)				Menu is sent down from contracting companies corporate office.	
A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	$\boxtimes$			- Corp. Office/Phoenix	(7)(6)
Are menus sometimes adopted without the dietitian's certification?  • If yes, under what circumstances		⊠		(b)(6), (l	p)(/)(C)
The CS has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	×				
Does the CS have the authority to change menu items if necessary?  If yes, documenting each substitution, along with its justification  With copy to FSA				Any and all menu changes come from the corporate office.	
All staff and volunteers know and adhere to written "food preparation" procedures.	$\boxtimes$				
Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	$\boxtimes$			Approved by OIC prior to implementation.	!

## **FOOD SERVICE**

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

Components	Yes	No	NA	Remarks
A common-fare menu available to detainees whose dietary requirements cannot be met on the main.  Changes to the planned common-fare menu can be made at the facility level.  Hot entrees are offered three times a week.  The common-fare menus satisfy nutritional recommended daily allowances (RDAs).  Staff routinely provides hot water for instant beverages and foods.  Common-fare meals are served with:  Disposable plates and utensils?  Reusable plates and utensils?  Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items.	×			Brought in by an outside vendor - Noshawa
A Supervisor at the command level must approve a detainee's removal from the Common-Fare Program.  • Under what circumstances?	$\boxtimes$			
The OIC, in conjunction with the Chaplain and/or local religious leaders, provide the FSA a schedule of the ceremonial meals for the following calendar year.	$\boxtimes$			
<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>	$\boxtimes$			
<ul> <li>IN SPCs the FSA prepares quarterly cost estimates for the Common Fare Program.</li> <li>This quarterly estimate is factored into the quarterly budget.</li> </ul>			$\boxtimes$	
The food service program addresses medical diets.	$\boxtimes$			All such needs come from Medical staff.
Satellite-feeding programs follow guidelines for proper sanitation.			$\boxtimes$	
Hot and cold foods are maintained at the prescribed, "safe" temperature(s) after two hours.				
All meals provided in nutritionally adequate portions.	$\boxtimes$			
Food is not used to punish or reward detainees based upon behavior.	$\boxtimes$			The state of the s
ICE SPCs and CDFs, a member of the food service staff prepares the sack lunches for detainee transportation.				

FOOD SEF	RVICE			
<b>Policy:</b> Every facility will provide detainees in its care accordance with the highest sanitary standards.	with no	ıtritious	and ap	petizing meals, prepared in
Components	Yes	No	NA	Remarks
<ul> <li>The food service staff instructs detainee 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>	$\boxtimes$			Training occurs on a monthly basis for each and every detainee.
Everyone working in the food service department complies with food safety and sanitation requirements.  • If not, explain non-compliance.		$\boxtimes$		SEE NOTES BELOW
Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment.  • who conducts the inspections?	X			Safety Officer conducts all inspections. (b)(6), (b)(7)
Either the FSA or the CS inspects all food service areas once every week.	$\boxtimes$			(b)(6), (b)
Equipment is inspected for compliance with health and safety codes and regulations.  • How often?  • When was the most recent inspection?  • Which agency conducted the inspection?	$\boxtimes$			Inspections occur on weekly basis by with last one on July 21, 2004.
Reports of discrepancies are forwarded to the OIC or AOIC and corrective action is scheduled and completed.	×			Chain of command is strictly adhered to.
Standard procedure includes checking and documenting temperatures of all dishwashing machines during each meal.	×			
Staff documents the results of every refrigerator/ freezer temperature check.	$\boxtimes$			
The cleaning schedule for each food service area is conspicuously posted.				
Do procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation?	×			Front gate security unit inspects any and all vehicles prior to entry into facility.
ICE SPCs and CDFs Staff complies with the ICE requirements for "food receipt and storage.	$\boxtimes$			
ICE SPCs and CDFs Are stock inventory levels periodically monitored and adjusted to correct overage and shortage problems?	×			
Storage areas are locked.	$\boxtimes$			
ICE SPCs and CDFs staff complies with all ICE "Housekeeping, Storeroom/Refrigerator" requirements  Identify and explain shortcomings.	×			
Standard Rating: ☐ Acceptable ⊠ Deficient ☐ At-Risl		peat De	ficiency	

(b)(6), (b)(7)(C)

The major problem that was found in this area was the fact that not all of the detainees allowed to work in the kitchen had been properly certified to be there. Detainee was found to be working with not only the lack of a medical clearance but alos! there was no record of her even

filling out the necessary paperwork requesting to be involved in the Voluntary Work Program itself. Records of such thing are kept not only in the detainees A-file but also in a file in the kitchen. The breakdown appears to occur in the communication process between the kitchen/medical & calssification staff. One sugestion is that the form which gives clearance for a detainee to participate in the food service area contain not only the medical ok but also state the individuals classification level. This is the reason for the deficient rating for the above standard.

29 July 01

FIINIDS	PERSONAL	DDODEDT	v

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

Components	Yes	No	NA	Remarks
Detainee funds and valuables are properly separated and stored away. Detainee funds and valuables are accessible to designated supervisor(s) only.	×			
Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	$\boxtimes$			
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?	×			Contained on computer also.
IN SPCs and CDFs staff gives the detainee the original inventory form, filing copies in the detainee's detention file and the personal property container.	×			
Staff forwards an arriving detainee's medicine to the medical staff.	$\boxtimes$			
Staff searches arriving detainees and their personal property for contraband.	×			
ICE SPCs and CDFs staff obtains a forwarding address from each detainee. IN IGSAs, district staff obtains a forwarding address from each detainee.	×			
There is a written policy for returning forgotten property to detainees and staff follows procedures?	×			Given 30 days per policy.
In SPCs and CDFs it is standard procedure for two officers to be present when removing/documenting the removal of funds from a detainee's possession.				
ICE SPCs and CDFs staff issues and maintains property receipts (G-589s) in numerical order. (CDFs may use a similar form if not specified in the contract)	×			
In SPCs and CDFs staff completes and distributes the G-589 in accordance with the ICE standard.	×			
In ICE SPCs and CDFs the processing officer records each G-589 issuance in a G-589 logbook. The record includes the initials and star numbers of receipting officers.	×			Switching over to computer.
In ICE SPCs and CDFs staff tags large valuables with both a G-589 and an I-77?			$\boxtimes$	
In ICE SPCs and CDFs the supervisor verifies the accuracy of every G-589.	$\boxtimes$			
<ul> <li>In ICE SPCs and CDFs the supervisor ensures that:         <ul> <li>Detainee funds are, without exception, deposited into the cash box;</li> <li>Every property envelope is sealed.</li> <li>All sealed property envelopes are placed in the safe.</li> <li>Large, valuable property is kept in the secured locked area.</li> </ul> </li> </ul>	×			
In ICE SPCs and CDFs staff tags every baggage/facility container with an I-77, completed in accordance with the ICE standard.			$\boxtimes$	Only if to big for large property bag.

FUNDS AND PERSONAL PROPERTY											
<b>Policy:</b> All facilities will implement procedures to cor Procedures will provide for the secure storage of funds, vidocumentation and receipting of surrendered property; and funds, valuables, and other property.	aluables,	bagga	ge and	other personal property; the							
In ICE SPCs and CDFs staff secures every container used to store property with a tamper-proof numbered strap.											
In SPCs and CDFs a logbook records detainee name, A- number/detainee-number, baggage-check/ I-77 number, security tie-strap number, property description, date issued and date returned.	×			Both in a logbook and on the computer.							
Property discrepancies are immediately reported to the CDEO or Chief of Security.											
In SPCs and CDFs the DOS (or equivalent) accompanied by a detention staff member conduct a comprehensive weekly audit.		⊠		Policy 4.1.2 Section E							
In SPCs and CDFs the OIC has established quarterly audits of baggage and non-valuable property as facility policy, the audits occur each quarter and audits are entered in the daily log.											
The facility positively identifies every detainee being released or transferred. In SPCs and CDFs in accordance with the ICE standard.											
Staff follows written procedures when returning property to detainees.	$\boxtimes$										
Staff routinely informs supervisors of lost/damaged property claims. Claims are properly investigated and missing or damaged property claim reports are filed.	⊠										
In SPCs and CDFs every lost/damaged property report completed in accordance with the ICE standard on an I-387 (or equivalent). The OIC receives a copy and staff places the original in the detainee's A-file, retaining a copy in facility files.											
The SPC uses the Form SF-95 for all detainee missing/damaged property claims against the government. The claimant signs every SF-95.	×										
CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.											
<ul> <li>The facility attempts to notify an out-processed detainee that he/she left property in the facility.</li> <li>By sending written notice to the detainee's last known address;</li> <li>Via certified mail;</li> <li>The notice state that the detainee has 30 days in which to claim the property, after which it will be considered abandoned.</li> </ul>	⊠										
The facility disposes of abandoned property in accordance with written procedures.  If an SPC, in accordance with the ICE standard (based on ICE' "Personal Property Operations Handbook")  If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE.	⊠										
Standard Rating:											
🛮 Acceptable 🗌 Deficient cy 🔲 A	t-Risk 📙	_ Repea	at Defic	ien							

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

Property room is extremely well organized with the implementation of Golden Eagle computer program for property issues. Everything is accessible within minutes and the space saver storage area makes for little to no problems in finding any and all property and or valuables. Print outs of the property for the entire facility is now at the touch of a simple key stroke. This is the way all property areas should be handled.

29 July 04 (b)(6), (b)(7)(C)

		DICHTS	DDECENT	ATIONIC
GRUUP	LEGAL	KIGH 15	PRESENT	AHUNS

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

Components	Yes	No	NA	Remarks
The ICE/OIC is responsive to requests by attorneys and accredited representatives for group presentations.	$\boxtimes$			
Upon receipt of concurrence by the District Director, the OIC ensures proper notification to attorneys or accredited representatives in a timely manner.	$\boxtimes$			
The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.	⊠			
Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.				
Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.	×			
When the number of detainees allowed to attend a presentation is limited, the facility allows a sufficient number of presentations so that all detainees signed up may attend.	⊠			
Detainees in segregation and 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.	$\boxtimes$			
The facility permits presenters to meet with small groups of detainees to discuss their cases after the group presentation. ICE Staff are present but do not monitor conversations with legal providers.	⊠			
Group presenters who have had their privileges suspended are notified in writing by the OIC and the reasons for suspension are documented. The District Director 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.	$\boxtimes$			
A copy of the Group Legal Rights Presentation policy, including attachments, is available upon request	⊠			
Standard Ratii ⊠ Acceptable □ Deficient □ At-R		Repeat 1	Deficien	cy

Remarks: (Record significant facts, observations, alternate source used for verification, etc.)

29 July 64

#### **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	Yes	No	NA	Remarks
Written procedures provide for the informal resolution of		<u> </u>		policy 3.5.3 Section A
oral grievances.			'	
<ul> <li>If yes, the detainee has up to five days within which to make his/her concern known to a</li> </ul>				
member of the staff.				
Detainees have access to the grievance committee (or				
equivalent in IGSA), using formal procedures.				
Detainees may seek help from other detainees     or facility staff when preparing a grievance.			$ \Box $	
<ul><li>or facility staff when preparing a grievance.</li><li>Illiterate, disabled, or non-English-speaking</li></ul>			L	
detainees receive special assistance when	1	ļ		
necessary.	<u> </u>			
In SPCs/CDFs, the detainee has five days after the			'	
incident or informal-grievance outcome to file a formal grievance.				
Every member of the staff knows how to identify				
emergency grievances, including the procedures for			'	
expediting them.  In SPCs and CDFs, when a Detainee does not accept		<del> </del>		
the grievance committee's decision, he/she files an				
appeal with the ICE OIC.			$  \Box  $	
In all facilities written procedures cover detainee				
appeals and are included in the detainee handbook	'		!	
There are no documented substantiated cases of staff	<del>                                     </del>	<del> </del>	<del>                                     </del>	
harassing, disciplining, penalizing, or otherwise		l , '	l	
retaliating against a detainee who lodges a complaint.				
If yes, explain.  Procedure includes a sixthing participation.	<u> </u>	ļ!	<u>                                     </u>	
Procedures include maintaining a Detainee Grievance Log.	1		'	
If not, an alternative acceptable record keeping	1		'	
system is maintained.			_ '	
"Nuisance complains" are identified in the			╽╙╵	
records.  • For quality control purposes, staff documents				
nuisance complaints received but not filed.				
Staff is required to forward any grievance that includes				
officer misconduct to a higher official or, in a CDF/IGSA	$\square$			
facility, to ICE.  The admissions process includes providing each new	$\vdash$	$\vdash \vdash \vdash$	$\vdash \vdash \vdash$	
arrival with a copy of the detainee handbook (or	$\boxtimes$	<sub> </sub>	m	
equivalent).				

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**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	Yes	No	NA	Remarks					
The grievance section of the handbook explains all steps in the grievance process – Including:  Informal and formal grievance procedures;  The appeals process and step-by-step procedures;  In CDFs/IGSA facilities: procedures for filing an appeal with ICE.  Staff/detainee availability to help during the grievance process  Guarantee against staff retaliation for filing/pursuing a grievance.  How to file a complaint about officer misconduct with the Department of Justice.	⊠								
Standard Rating:  Acceptable Deficient At-Risk Repeat Deficiency									

<sup>\*</sup>Remarks: (Record significant facts, observations, other sources used, etc.)

29 July 04

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

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

Components	Yes	No	NA	Remarks
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
All new detainees are issued clean, temperature- appropriate, presentable clothing during in processing.  Detainees receive  One uniform shirt and one pair of uniform pants or one jumpsuit.  One pair of socks.  One pair of underwear (Daily change).  One pair of facility-issued footwear.	×			
In SPCs and CDFs the uniform/jumpsuit is color-coded to reflect the detainee's classification level.	Ø			
Additional clothing is available for changing weather conditions or is seasonally appropriate.	Ø			
New detainees are issued clean bedding, linens and towel. They receive  One mattress One blanket One pillow Two sheets One pillowcase One towel Additional blankets are issued based on local weather conditions.	⊠			Above policy Section B
Detainees assigned to special work areas are clothed in accordance with the requirements of the job.	×			
Detainees are provided clean clothing, linen and towels.  Socks and undergarments exchanged daily.  Outer garments at least twice weekly.  Sheets at least weekly.  Towels at least weekly.  Pillowcases at least weekly.	⊠			
Food service detainee volunteer workers permitted to exchange outer garments daily.	$\boxtimes$			
Volunteer detainee workers are permitted to exchanges of outer garments more frequently.	×			
Standard Ratio		Reneat I	)eficien	ev .

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

29 July 04

MARRIAGE REQUESTS										
Policy: All detainee marriage requests will receive case-by-case consideration from ICE management.										
Components Yes No NA Remarks										
The OIC/ICE considers detainee marriage requests on a case-by-case basis.	$\boxtimes$									
In SPCs and CDFs the OIC or highest-ranking ICE official on-site is the only officer authorized to approve a request to marry.	$\boxtimes$									
The ADD reviews every marriage request rejected by an OIC or IGSA. Rejections are documented.	$\boxtimes$									
It is standard practice to require a written request for permission to marry.	×									
The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	×									
The OIC provides a written copy of his/her decision to the detainee and his/her legal representative.	$\boxtimes$									
When permission is denied, the OIC states the basis for his/her decision.	$\boxtimes$									
The OIC provides the detainee with a place and time to make wedding arrangements.	$\boxtimes$									
The detainee handbook (or equivalent) explains the marriage request process.	X									
Standard Rating:  Acceptable Deficient ncy At-Risk Repeat Deficie										

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

Procedures in place to handle situation. There has only been one such event in the history of facility and this took place last week. All the proper protocoll was followed.

29 July 04

## **NON-MEDICAL EMERGENCY ESCORTED TRIPS**

**Policy:** The Immigration and Naturalization Service (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.

Components	Yes	No	NA	Remarks
The OIC considers and approves, on a case-by-case basis, trips to immediate family member's:  • Funeral  • Deathbed			$\boxtimes$	
The facility recognizes mother, father, brother, sister, spouse, child, stepparent, and foster parent as "immediate family".			$\boxtimes$	
The IGSA facility notifies ICE of all detainee requests for non-medical escorts.				
The District Director is the approving official for non-medical escorted trips.			×	
The detainee's Deportation Officer reviews the file before forwarding a detainee's request, with recommendation, to the approving official. Each recommendation addresses the individual's suitability for travel, e.g., the kind of supervision required?			$\boxtimes$	
Detainees who require overnight housing placed in approved IGSA facilities.			$\boxtimes$	
At SPCs and CDFs, facility procedures comply with the following ICE Standards:  Non-Medical Emergency Escorted Trips Transportation (Land Transportation) Restraints applied strictly in accordance with the Use of Force standard.			$\boxtimes$	
Each escort includes at least two officers.     The detainee under constant, direct visual supervision of escorting staff.			×	
The Chief Detention Enforcement Officer responsible for training escort officers to follow written procedures.				
Escorting officers report unexpected situations to the originating facility as a matter of procedure and the ranking supervisor on duty has the authority to issue instructions for completion of the trip.			×	
Escorting officers have the discretion to: a. Increase or decrease minimum restraints in accordance with written instruction, procedures and classification level of the detainee.			$\boxtimes$	
Escort officer training includes ICE Firearms Policy, Section 20.012?				
Escort officers do not accept gifts/gratuities from a detainee, detainee's relative or friend for any reason.				

NON-MEDICAL EMERGENCY ESCORTED TRIPS					
<b>Policy:</b> The Immigration and Naturalization Service (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.					
Components	Yes	No	NA	Remarks	
<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>Do not arrange to visit family or friends unless approved before the trip.</li> <li>Make no unauthorized phone calls.</li> <li>Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return to the facility.</li> </ul>			×		
Standard procedure requires the immediate return to the facility of any detainee who violates trip rules.					
Standard Rating:  Acceptable Deficient Repeat Deficiency At-Risk					

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

29 Juy 14 (b)(6), (b)(7)(C)

### 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.

Components	Yes	No	NA	Remarks
The facility provide:				Outdoor rec area is in
An indoor recreation program	$\boxtimes$			construction.
An outdoor recreation program	_			
In each SPC and CDF the facility has a full-time:				
Recreational Specialist and recreational assistant where	$\boxtimes$			
required by the standard.				
The recreational specialist tailors the program activities				
and offerings to the particular detainee population.				
Regular maintenance keeps recreational facilities and	$\boxtimes$			Walk through occurs
equipment in good condition.				every morning.
In SPCs and CDFs the recreational specialist	$\boxtimes$			
supervises approved recreation activities.				
The recreational specialist supervises detainee				
recreation workers.				
The recreational specialist oversees recreation				
programs for Special Management Unit and special-			ш	
needs detainees.				
Dayrooms offer sedentary activities, e.g., board games, cards, television.	$\boxtimes$			
Outside activities are restricted to limited-contact sports.				
Each detainee has the opportunity to participate in daily				
recreation.	$\boxtimes$			
Detainees have access to recreation activities outside				Every POD contains own
the housing units for at least one hour daily, 5 days a	$\boxtimes$			recreation area.
week.				
Staff checks all items for damage and condition when				
equipment is returned.				
Staff conducts searches of recreation areas before and	N			Conducted every
after use.				morning.
All recreation areas under constant staff supervision.	$\boxtimes$			
Supervising staff is equipped with radios.	X			
The facility provides detainees in the SMU at least one	$\boxtimes$			
hour of recreation time daily.		Ш		
Detainees in disciplinary segregation receive a written			_	
explanation when a panel revokes his/her recreation				
privileges.				
Does the OIC review the panel's decision before it	<b>5</b> 7			Located in Seg files.
becomes effective.		Ш		
If yes, in every case?				
Detainees in administrative segregation receive a written explanation for denied recreational privileges.	$\boxtimes$			
Volunteer groups present special programs or religious				Different languages
activities.				brought in each week.
Volunteers are required to sign a waiver of liability				broagin in each week.
before entering a secure portion of the facility where				
detainees are present.	<b>E</b> 3			
Visitors, relatives or friends are not allowed to serve as				
volunteers.	$\boxtimes$			

<b>Policy:</b> It is ICE policy to provide access to recreational pextent possible, under conditions of security and supervisi				
If the facility has no outside recreation, are detainees considered for transfer after six months?  • If yes, written procedures ensure timely review of all eligible detainees.				Average length of si currently 11.9 days. Outdoor facility is currently under construction.
Case officers make written transfer recommendations about every six-month detainee to the OIC.			☒	
The OIC documents all detainee-transfer decisions, whether yes or no.				
The detainee's written decision for or against an offered transfer documented in his/her A-file.			×	
Staff notifies the detainee's legal representative of his/her decision to accept/decline a transfer.				
If no recreation is available, the ICE District routinely review transfer eligibility for all detainees after 60 days.				Recreation is availab
Does the A-file of every detainee is held more than 60 days without access to recreation contains either a transfer-waiver signed by the detainee or the OIC's written determination of the detainee's ineligibility for transfer.				
The detainee's legal representative is notified of the detainee's/OIC's decision.			$\boxtimes$	
Standard Ratin ⊠ Acceptable □ Deficient □ At-R		Repeat I	Deficier	ıcv
Remarks: $(b)(6), (b)(7)(C)$ Capt. review all seg reviews per regs. developed by the recreation specialists in anticipation of the				
	e outdori		tion are	ea being completed.

R	EL	IGIO	US	PR	ACTICE	ES
,						

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

Components	Yes	No	NA	Remarks
Detainees are allowed to engage in religious services.	$\boxtimes$			Policy 5.6.1
Space is available for detainees to conduct religious services.	$\boxtimes$			Conducted with in multi- purpose rooms.
The facility allows detainees to observe the major "holy days" of their religious faith.  a. List any exceptions.	$\boxtimes$			None noted
The facility accommodates recognized holy-day observances by:  Providing special meals, consistent with dietary restrictions.  Honoring fasting requirements.  Facilitating religious services.  Allowing activity restrictions.	×			
Each detainee is allowed religious items in his/her immediate possession.	×			Unless it comprises the safety of the facility.
Volunteer's credentials are checked and verified before letting him/her participate in detainee programs.	$\boxtimes$			NCIC & backgrounds are completed on all.
Members of faiths not represented by clergy conduct may request to present their own services within security allowances.	$\boxtimes$			
Detainees in the Special Management Unit to participate in religious practices unless otherwise documented for the safety and security of the facility.	$\boxtimes$			
Standard Ratin ⊠ Acceptable □ Deficient □ At-R		Repeat I	Deficien	cy

<sup>\*</sup>Remarks: (Record significant facts, observations, other sources used, etc.)

29 Jiv of (b)(6), (b)(7)(C)

### **DETAINEE TELEPHONE ACCESS**

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

L	telepriones.				
	Components	Yes	No	NA	Remarks
	Detainees allowed access to telephones during established facility waking hours.				
	Upon admittance, detainees are made aware of the facility's telephone access policy.	×			Contained in the handbook.
ſ	Notification of this policy is in the detainee handbook.	$\boxtimes$			
	The telephone access rules are posted in each housing area.	$\boxtimes$			
	The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	×			
	Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	×			
	Telephones are inspected regularly (daily in SPCs/CDFs), by designated facility staff, to ensure that they are in good working order.	×			
	The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.				
	The facility administration monitors repair progress and take appropriate measures to ensure that the required repairs are begun and completed timely.	×			Have log for repairs.
	Detainees are afforded a reasonable degree of privacy for legal phone calls.	$\boxtimes$			
	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.	⋈			
	Special Access calls are at no charge to the detainees.	$\boxtimes$			
	In facilities unable to fully meet this requirement initially because of limitations of its telephone service, the ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.			×	
	No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".	⊠			
	Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another SPC or CDF?	⊠			Policy 5.4.2 Section H
	Use of general access phones is ordinarily not restricted.	×			
	Any restrictions are documented and fall within one of the categories in paragraph VIII section G?	☒			
	The facility has a system for taking and delivering detainee telephone messages.	Ø			
	Emergency phone call messages are immediately given to detainees.	×			
	Detainees are allowed to return emergency phone calls as soon as possible.	Ø			
	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					
<b>Policy:</b> All facilities housing ICE detainees will permit detainees' reasonable and equitable access to telephones.					
Components	Yes	No	NA	Remarks	
Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	$\boxtimes$				
Detainees in disciplinary segregation allowed phone calls for family emergencies.	$\boxtimes$				
Detainees in administrative segregation and protective custody afforded the same telephoning privileges as those in general population.	$\boxtimes$				
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.	×				
Standard Rating:  Acceptable Deficient At-Risk Repeat Deficiency					
Remarks: (Record significant facts, observations, alternate source used for verification, etc.)					

29 Juy 64

### **VISITATION**

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

the news media.				
Components	Yes	No	NA	Remarks
There is a written visitation schedule and hours for general visitation.	$\boxtimes$			
The visitation hours tailored to the detainee population and the demand for visitation.	$\boxtimes$			
Upon admittance detainees are made aware of the facility's visitation policy and the hours of visitation for the following categories: general visitation (including visitation by minors), legal visitation, consultation visitation for expedited removal, consular visitation, and special family visits, in the detainee handbook.				Completed via the handbook and the orientation video.
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.	$\boxtimes$			
A general visitation log is maintained.	$\boxtimes$			
The detainees are permitted to retain personal property item specified in the standard.	$\boxtimes$			Policy 5.4.3 Section D
A visitor dress code is available to the public.	X			
Visitors are searched and identified according to standard requirements.	×			Log record kept at front post.
The requirement on visitation by minors is complied with.	×			
At facilities where there is no provision for visits by minors, the ICE arranges for visits by children and stepchildren, on request, within the first 30 days.			×	
After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.			×	
Detainees in special housing afforded visitation.	$\boxtimes$			
Legal visitation is available seven (7) days a week, including holidays?	☒			
On regular business days legal visitation hours provide for a minimum of eight (8) hours per day and a minimum of four hours per day on weekends and holidays.	×			
On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	$\boxtimes$			
In SPCs and CDFs, the facility has a written procedure allowing legal service providers and assistants to telephone the facility in advance of a visit to determine whether a particular detainee is detained in that facility. After consultation with a detainee, the attorney files the appropriate Form EOIR-28 with the court and a copy is maintained in the detainees file.				

VISITATION							
<b>Policy:</b> ICE shall permit detainees to visit with family, friends, legal representatives, special interest groups and the news media.							
The call ahead inquiry policy is available to legal service providers.							
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. The procedure is also listed in the detainee handbook or equivalent.	×						
When strip searches are required after every contact visits with a legal representative, the facility provides an option for non-contact visits with legal representatives.	×						
Prior to each visit, legal service providers and assistants are identified per the standard.	☒						
The current list of <i>pro bono</i> legal organizations is posted in the detainee housing areas and other appropriate areas.	×						
The decision to permit or deny a tour is not delegated below the level of District Director?	×						
Provisions for NGO visitation as stated in the Detention Standards are complied with.	×						
Law enforcement officials, requesting to visit with a detainee, are referred to the OIC for approval.	×						
Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the OIC.			×	Not allowed in facility.			
Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	×						
Standard Rati ☑ Acceptable ☐ Deficient ☐ At-1		Repeat 1	Deficien	cy			

29 Juy 64

<sup>\*</sup>Remarks: (Record significant facts, observations, other sources used, etc.)

### **VOLUNTARY WORK PROGRAM**

Policy: In every	facility offering a voluntary wo	ork program, ICE detainees will	have the opportunity to work and earn
money by particip	pating. While not legally require	ed, ICE affords detainee worker	s basic Occupational Safety and Health
Administration (C	OSHA) protections.		

Components	Yes	No	NA	Remarks			
Does the facility have a voluntary work program?  If yes, do detainees participate?							
In SPCs and CDFs staff maintains a written chart with work assignments and the corresponding classification levels.	$\boxtimes$						
Detainee housekeeping meets neatness and cleanliness standards.	X						
In SPCs and CDFs, low level-three detainees have the opportunity to participate in special details, however, are never allowed to work outside the secure perimeter.	$\boxtimes$			Only if non-violent.			
<ul> <li>Written procedures govern selection of detainees for the Voluntary Work Program.</li> <li>The same procedures apply for replacement workers as for "new" workers.</li> <li>Staff follows written procedures.</li> </ul>	×						
Where possible, physically and mentally challenged detainees participate in the program.	X						
The facility complies with work-hour requirements for detainees, not exceeding:  • Eight hours a day.  • Forty hours a week.							
Detainee volunteers generally work according to fixed schedule.	$\boxtimes$						
In SPCs and CDFs volunteers receive the \$1/day stipend.	$\boxtimes$			Placed in detainee acct.			
In SPCs and CDFs every participating detainee signed the Voluntary Work Program agreement?	$\boxtimes$						
If a detainee is removed from a work detail, staff places the written justification for the action in the detainee's detention file.	$\boxtimes$						
Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.				Covered in detainee handbook.			
The voluntary work program meets:	X						
Medical staff screens and formally certifies detainee food service volunteers.  Before the assignment begins As a matter of written procedure	$\boxtimes$						
Detainees receive safety equipment/ training sufficient for the assignment	×			Completed by supervisor prior to assignment.			
Does the OIC have the latest OSHA standards? NFPA? ACA? EOSH?	$\boxtimes$						
Proper procedure is followed when an alien is injured on the job.	☒						
Standard Ratin	ıg:						
Standard Rating:  Acceptable Deficient y At-Risk Repeat Deficienc							

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

 $29 \int (b)(6), (b)(7)(C)$ 

### **Condition of Confinement Review Worksheet**

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

This Form to be used for Inspections of SPCs and CDFs

## **Headquarters Detention and Removal Operations**



Headquarters and Field Operational Review Worksheet

<ul> <li>☐ INS Service Processing Center</li> <li>☐ INS Contract Detention Facility</li> </ul>
Name
Seattle - Northwest Detention Center
Address (Street and Name)
City, State and Zip Code
County
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)
Name and title of Reviewer-In-Charge
Date[s] of Review
Type of Review
Headquarters Operational Special Assessment Other

HUNGER STRIKES						
<b>Policy:</b> All facilities will follow standard guidelines for the medical and administrative management of INS detainees engaging in hunger strikes. By monitoring of the health and welfare of the individual detainees, facilities will strive to sustain their lives.						
Components	Yes	No	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.	Ø					
The OIC immediately reports a hunger strike to the DD. CDFs and IGSAs immediately report a hunger strike to the INS.	☒					
The facility has established procedures to ensure staff respond immediately to a hunger strike.	$\boxtimes$					
Policy and procedure require that staff isolate a hunger- striking detainee from other detainees.  • If yes, in an observation room?	×					
Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	×					
Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	×			***		
The OIC of the facility obtains a hunger striker's consent before medical treatment.	⊠					
A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.	×					
During a hunger strike, staff documents and provides the hunger-striking detainee three meals a day.	☒					
Staff maintains the hunger striker's supply of drinking water/other beverages.	×					
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.				Two charts reviewed and form I- 839 was not consistently used for every day that the detainee remained on the Hunger Strike.		
The medical staff has written procedures for treating hunger strikers.						
Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.	×					
Staff has received training in identification of hunger strikes. Medical staff receives early training in hunger-strike evaluation and treatment. Staff remains current in evaluation and treatment techniques.						
Standard Rating:  ☑ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk						

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

Advisory: Hunger Strike form I-839 must be utilized for each day that the detainee remains on a hunger strike. This form was initiated but not utilized consistently for each day of the hunger strike.



ACCESS TO MEDI	CAL CA	RE		
Policy: Every facility will establish and maintain an accregeneral well being of INS detainees.	edited/ac	credita	tion-wo	orthy health program for the
Components	Yes	No	NA	Remarks
For INS SPCs and CDFs a Health Services Administrator (HSA) position exists and this administrator directs both the health care program and medical facilities. IGSA facilities operate a health care facility in compliance with State and Local laws and guidelines.	×			
For INS SPCs and CDFs, the health program in compliance with NCCHC standards and the facility is currently accredited by NCCHC.			$\boxtimes$	Facility has not been open long enough to have accreditation
The medical facility currently has JCAHO accreditation.			$\boxtimes$	Same as above
The facility's in-processing procedures of arriving detainees include medical screening.	×			
All detainees have access to and receive medical care.				
In INS SPCs and CDFs, the health program cost- effective.		☒		***See Advisory
In INS SPCs and CDFs the facility has access to prearranged specialized health care and hospitalization arrangements in the local community. For IGSAs, the district has access to a Managed Health Care Coordinator.				
The medical staff large enough to provide examine and treat the facility's detainee population.	×			1 physician, 2 PAs, 5 RNs, 3 f/t LVNs, 3 p/t LVNs
The facility has sufficient space and equipment to afford each detainee privacy when receiving health care.	×			
The medical facility has its own restricted-access area.  The restricted access area is located within the confines of the secure perimeter and no detainees have gained access in the past twelve months.	×			
The medical facility entrance includes a holding/waiting room.	×			***See Advisory
The medical facility's holding/waiting room under the direct supervision of custodial staff.	$\boxtimes$			
Detainees in the holding/waiting room have access to a toilet and a drinking fountain.	Ø			
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.	×			

 $\boxtimes$ 

Procedurally, no copies made and placed in

Pharmaceuticals are stored in a secure area. In INS SPCs and CDFs they are stored in a manner consistent with all requirements of the INS standard.

detainee files.

ACCESS TO MED	ICAL CA	RE		
Policy: Every facility will establish and maintain an accordance general well being of INS detainees.	edited/ad	ccredita	tion-wo	orthy health program for the
<ul> <li>Medical screening includes a Tuberculosis (TB) test.</li> <li>Every arriving detainee receives a TB test.</li> <li>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.</li> <li>Detainees not screened are housed separate from the general population.</li> </ul>				
All detainees receive a mental-health screening upon arrival. It is conducted:              By a health care provider or specially trained officer;             Before a detainee's assignment to a housing unit.				
In INS SPCs and CDFs the screener records all findings on the in-processing health screening form (I-794). In IGSAs the screening is recorded on an approved mental health screening form in an industry accepted format.				
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.	$\boxtimes$			
Detainees in the Special Management Unit have access to health care services.	$\boxtimes$			
Staff provides detainees with health- services request slips daily, upon request.  Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population.  Service-request slips are delivered in a timely fashion to the health care provider.	×			
In SPCs and CDFs sick call is scheduled in accordance with the guideline in paragraph VIII section E.	$\boxtimes$			
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.	×			
The plan includes an on-call provider.	$\boxtimes$			
The plan includes a list of telephone numbers for local ambulances and hospital services.	×			
The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.	×			
In SPCs and CDFs the health authority approved the contents, number, location, and procedures for monthly inspection of the first-aid kit(s).	×			
In SPCs and CDFs the health authority has developed written procedure for use of the first-aid kits by non-medical staff.	×			
Detention staff is trained to respond to health-related emergencies within a 4-minute response time.				

ACCESS TO MED	ICAL CA	RE		
Policy: Every facility will establish and maintain an accregeneral well being of INS detainees.	edited/ad	credita	tion-wo	orthy health program for the
In SPCs and CDFs the training contains at least the five mandated elements in paragraph VIII section G?	Ø			
In INS SPCs and CDFs detention officers do not distribute medication to detainees.	$\boxtimes$			
In IGSAs, if staff is used to distribute medication, a health care provider properly trains these officers.	$\boxtimes$			
The medical unit keeps written records of medication that is distributed.	$\boxtimes$			
The I-819 (or IGSA equivalent) is used to notify the OIC/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.	$\boxtimes$			
Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	⊠			
In INS SPCs and CDFs the written request from the detainee contains the six elements in paragraph VIII section K.	⊠			
A copy of this request is maintained in the detainee's A-file or facility detention file for IGSAs.	$\boxtimes$			
The INS/CDF/IGSA assists the detainee in filling out this request and forwarding it to the health care provider.	$\boxtimes$			
In INS SPCs and CDFs the OIC notified, in writing, by the medical staff when a detainee needs medical clearance prior to being transferred or released.	⊠			
In SPCs and CDFs this notification will is forwarded from the HSA or Clinical Director of the medical facility on a Medical/Psychiatric Alert form (I-834).	⊠			
In SPCs and CDFs when an alert has been received on a detainee, the detainee's Booking Record (I-385) is appropriately flagged to ensure appropriate consultation with medical staff before release or transfer.				
The facility health care/IGSA provider is given advance notice prior to the release, transfer, or removal of a detainee.				
Detainee's medical records or a copy thereof, are available and transferred with the detainee.	$\boxtimes$			
Medical records are placed in a sealed envelope or other container labeled with the detainee's name and Anumber and marked "MEDICAL CONFIDENTIAL".	×			
In SPCs and CDFs formal documented meetings are held at least quarterly between the OIC of the facility and the HSA of the medical facility.	×			
In SPCs and CDFs the meetings cover the four mandated elements in paragraph VIII section.	$\boxtimes$			

Verification Sources:						
SOURCE	TIME	DATE	LOCATION			
Detainee handbook	1100	7/27/04				
Forms						
Sick-call logbook	1000	7/28/04				
Facility's written policy and procedures		7/27/04				
Inspecting medical area(s)		·				
MOU(s) provisions						
Observing the detainee-intake process						
Quarterly-meeting minutes						
Detainee and staff Interviews *						

MA 1 1 MA 11	
Standard Dating:	
Standard Rating:	
🔀 Acceptable 🗌 Deficient 🔲 Repeat Deficiency 🔲 At-Risk	
□ Acceptable    □ Deficient    □ Repeat Deficiency    □ At-Risk	
M voochtable - periotett - tropeat periotette - ve-triet	

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

#### Advisory:

- #1 Food service workers were found to be receiving a temporary medical clearance prior to a physical exam being completed. Medical clearances must be obtained for each detainee being allowed to work in the food service area. Per DIHS policy each detainee will receive a physical exam prior to being granted a medical clearance.
- #2 Three biohazard canisters within the clinic were checked for appropriate contents. All three containers had inappropriate refuse in them. Due to the exorbitent cost of biohazard disposal this practice needs to be discontinued immediately. Biohazard canisters are only to be used for blood and body fluid type medical waste.
- #3 The hold cells in the medical unit do not have a clearly marked capacity posted. The officer who was questioned thought that the capacity was ten per cell but later came back to state that the first cell's capacity is 7 and the second is 10. Upon counting the detainees who were in the cells there were in fact ten in each cell. There was clearly not enough room for the detainees who were in the cell. Some of the detainees were seated on the floor and one was on a plastic chair that was not attached to the floor. The chair could easily be used as a weapon should a detainee become a behavioral or psychiatric problem.
- The medical unit had not been using a sick call log as is defined in DIHS policy. There is a filing system in place that attempts to meet the spirit of the standard, but does not place medical in full compliance with the policy.
- #5 At the onset of this detention review the facility has been open for over 90 days with all areas in full operation except the Short Stay Unit (SSU). The issue that has kept this unit from being fully utilized is to the need for more security presence during the day shift when the SSU has detainees in present. The design and layout of the clinic/SSU does not allow for one security officer to be in both areas at the same time. If the nurse is providing direct patient care in a SSU room then there must a security officer present. At these times there would be no security officer on the clinic side and therefore no detainees would beable to be out side of the hold cells.

  (b)(6), (b)(7)(C)

The lead surveyor, conducted a round table discussion with all parties to resolve the issue. The Contractors agreed to place another security officer in the clinic area to be utilized during the day/evening shift hours when detainees have been admitted to the SSU. It was agreed by all parties that the SSU would be open within a few days.

Auditor's Signature / Date

SUICIDE PREVI	ENTION A	AND INT	ERV	ENTIO	N
Policy: All detention staff working with INS de will handle potentially suicidal individuals with will receive preventive supervision and treatm	sensitivity, sı	be trained upervision	d to rec , and re	ognize : eferrals.	suicide-risk indicators. Staff A clinically suicidal detainee
Components		Yes	No	NA	Remarks
Every new staff member receives suicide-pre training.	-	$\boxtimes$			
orientation program.	icide-prevention training occurs during the employee entation program.				
Training prepares staff to:  Recognize potentially suicidal behavior;  Refer potentially suicidal detainees, following facility procedures;  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.					
Written procedures cover when and how to re	Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.				
The facility has a designated isolation room for evaluation and treatment.	The facility has a designated isolation room for				- Malacini del manero
The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.		×			
Medical staff has approved the room for this	purpose.				
Staff observes a suicide-watch detainee at lea every 15 minute.		$\boxtimes$			
	<u> </u>				
	fication S	<del>,</del>	:		<del></del>
SOURCE	TIME	DATE			LOCATION
Special Management Unit logbook	1000	7/00/04			
Inspection of Special Management Unit	1000	7/28/04			
Observation of detainee intake process.	1400	7/00/04			·
Facility's written policy and procedures  Detainee and staff interviews *	1400	7/28/04 7/28/04			
Detainee and stair interviews	1300	1/20/04			4-7-4-1
St ⊠ Acceptable ☐ Deficie	andard Rat ent ☐ Rep	ing: eat Defic	iency	☐ At-	Risk
Remarks: (Record significant facts, observational states)	ons, other so	ources us		•	(b)(7)(C)
Auditor's Signature / Date					

### TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

**Policy** All facilities housing INS 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 INS 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.

Components	Yes	No	NA	Remarks
Detainees, who are chronically or terminally ill, are transferred to an appropriate offsite medical facility.	$\boxtimes$			
The facility or appropriate INS office promptly notifies the next of kin of the detainee's: medical condition.  The detainee's location.  The limitations placed on visiting.				
For SPCs and CDFs There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives.  • The guidelines include instructions for detainees who wish to have a living will other than the generic form the DIHS provides or who wish to appoint another to make advance decisions for him or her.	⊠			
The guidelines provide the detainee the opportunity to have a private attorney prepare the documents.	$\boxtimes$			
There is a policy addressing "Do Not Resuscitate Orders."	$\boxtimes$			
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 INS representative.	X			
The facility has written procedures to address the issues of organ donation by detainees.  INS SPCS and CDFs the procedures adhere to the detention standard requirements, if not, state the difference(s)				
The facility has written procedures to notify INS officials, deceased family members and consulates, when a detainee dies while in Service.				
The facility has a policy and procedure to address the death of a detainee while in transport.  In SPCs and CDFs the procedures adhere to the requirements in the detention standard.				

### **TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH**

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Components	Yes	No	NA	Remarks
<ul> <li>At all INS locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.</li> <li>The family has seven calendar days of the date of notification (in writing or in person) to claim the remains.</li> <li>If the family chooses to claim the body, they are told that they will assume responsibility for making the necessary arrangements and paying all associated costs (transportation of body, burial, etc.).</li> <li>If the family wants to claim the remains, but cannot afford the transportation costs, they are aware that INS may assist the family by transporting the remains to a location in the United States.</li> <li>The consulate is notified.</li> <li>When family members cannot be located or decline, orally or in writing, to claim the remains, the consulate is notified in writing.</li> <li>The consulate is given seven calendar days to claim the remains.</li> </ul>				
In the event that neither family nor consulate claims the remains, the DD 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.	$\boxtimes$			
An original or certified copy of a detainee's death certificate is placed in the subject's a-file.	$\boxtimes$			
The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as  Performance of an autopsy.  Who will perform the autopsy.  Obtaining State approved death certificates.  Local transportation of the body.				
INS staff follows established procedures to properly close the case of a deceased detainee.	$\boxtimes$			

Verif	ication	Sources:	
SOURCE	TIME	DATE	LOCATION
Reviewing facilities medical policy	1000	7/27/04	
Interviews with OIC, medical staff and district staff	1300	7/28/04	
Facility's written policy and procedures	1000	7/27/04	
Review of relevant post orders			

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

Standard Rating:
Standard Nating.
🛮 Acceptable 🔲 Deficient 🔲 Repeat Deficiency 🔲 At-Risk
Acceptable Deficient Repeat Deficiency At-Nisk

Auditors Signature / Date

### **Condition of Confinement Review Worksheet**

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

This Form to be used for Inspections of SPCs and CDFs

## **Headquarters Detention and Removal Operations**

# Section III

# Security and Control

Headquarters and Field Operational Review Worksheet

<ul> <li>☐ INS Service Processing Center</li> <li>☐ INS Contract Detention Facility</li> </ul>	
Name Northwest Detention Center	
Address (Street and Name) 1623 East J. Street	
City, State and Zip Code	
County Pierce	
Name and Title of Object Foresetting Officer (Warden/OIC/Superintendent)	4)(0)(1)(7)(0
Name and title of Reviewer-In-Charge	<del>(b)(6),</del> (b)(7)(C)
Date[s] of Review 07/27/04-7/29/04	
Type of Review  ☐ Headquarters ☐ Operational ☐ Special Assessment ☐ Other	

CONTRAB	AND					
<b>Policy:</b> All detention facilities will ensure the proper handling and disposal of all contraband. Documentation of contraband destruction is required.						
Components	Yes	No	NA	Remarks		
The facility follows a written procedure for handling illegal contraband. Staff inventories, holds, and reports it when necessary to the proper authority for action/possible seizure.	×			Contained in policies and procedures.		
Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.						
Staff returns property not needed as evidence to the proper authority. Written procedures cover the return of such property.						
Altered property is destroyed following documentation and using established procedures.	×					
Before confiscating religious items, the OIC or designated investigator contacts a religious authority.	$\boxtimes$					
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.						
All identity documents (birth certificates, passports, etc.) are held in A-files. Detainees receive copies upon request. In SPCs and CDFs the detainee handbook (or equivalent) tells detainees that a copy of each identity document is available upon request.	$\boxtimes$			Detainee handbook page 2 "initial admission"		
Upon admittance, detainees receive notice of items they can and cannot possess.				Detainee handbook		
New arrivals receive copies of the rules regarding contraband.	×			Detainee handbook		
Detainees receive notification of contraband rules and procedures in the detainee handbook (or equivalent).	⊠					

Verification Sources:							
SOURCE	TIME	DATE	LOCATION				
Detainee Handbook	1100	7/27	conference room				
Contraband Logbook	1000	7/28	Captain's office				
A-File/Detention file							
Review of facility policy and procedure for control and disposition of contraband	1100	7/27	conference room				
Observation of contraband confiscation							
Detainee and staff interviews							

Standard Datings							
Standard Rating:							
Acceptable Deficient Repeat Deficiency At-Risk	į						
Acceptable Deficient Repeat Deficiency At-Risk							

<sup>\*</sup>Remarks: (Record significant facts, observations, other sources used, etc.)

 $\frac{7}{2}$ ?  $\frac{1}{2}$ ?  $\frac{1}{2}$ % (b)(6), (b)(7)(C)

### **DETENTION FILES**

Policy: Every facility will create a detention file for every INS 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.

	/////-51 NO 1008	Carrior Sources		
Components	Yes	No	NA	Remarks
A detention file is created for every new arrival whose stay will exceed 24 hours. In SPCs and CDFs written procedures for in processing cover creation of the detention file.	⊠			1.5.1 of policies and procedures
The OIC or staff designate ensures that necessary equipment and supplies, including copier(s) and copier paper, are available; that all equipment is maintained in good working order, and that equipment has the capacity to handle the volume of work generated.	$\boxtimes$			
The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process. In SPCs and CDFs, if necessary, copies of documents and forms contained are in the detainee's A-File.	$\boxtimes$			viewed in file
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	×			viewed in file
The Chief Detention Enforcement Officer (CDEO) or equivalent directs certain documents be added to an alien's detention file.	$\boxtimes$			
The detention files are located and maintained in a secured area. If not the cabinets are lockable and distribution of the keys is limited to supervisors.	⊠			Area has capability of being secured as well as cabinets.
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.				Viewed
The officer closing the detention file makes a notation that the file is complete and ready to be archived.	$\boxtimes$			Stored in separate cabinet
Staff makes copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.				Only when approval is given through chain of command
In SPCs and CDFs archived files are purged after three (3) years by shredding or burning.				policy states after 2 years staff said 3 years
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				per facility policy

DETENTION	FILES		4.5	And the second s
Policy: Every facility will create a detention file for every II detainees scheduled to depart within 24 hours. The deten original of specified documents concerning the detainee questionnaire, property inventory sheet, disciplinary documents	tion file s s stay ir	will con the fa	tain cop	pies and, in some cases, the
Components	Yes	No	NA	Remarks
Field offices controlling detention in IGSA facilities create and maintain detention files on all detainees admitted to IGSA facilities. These files contain the forms and documents set forth for SPC/CDF detention files to the extent that the field office creates them or the IGSA forwards them.			⊠	

Ver	ification	Sources:	
SOURCE	TIME	DATE	LOCATION
Review of facility policy and procedures.	1300	7/27/04	conference room
Observation of in processing procedures			
Review of detention files	1430	7/28/04	Records

	A	
	Standard Datings	
i	Standard Rating:	
·		
	Deficient Repeat Deficiency	A4 D1-1
XI ACCANTANIA I	Deficient     Reneat Deficiency	AT-RICK
	Delicione itebeat beneficiency	761719K

Advisory Only:

- 1. Two of the detention files reviewed contained 216's for the wrong detainee. However the files contained the appropriate 203's. It is not necessary to place a copy of the 216 in the file when the detainee comes into custody of the facility. To avoid confusion it is advised that 216's are only placed in the file after the detainee is no longer in the custody of the facility.
- 2. The records office has the ability to be a secure area via door locks and locks on each filing cabinet. When the review was conducted the door was unsecure and so were all the filing cabinets. It should be noted that staff was present at the time, however the door should be secure regardless in order to maintain the securtiy of the records department.

<sup>\*</sup>Remarks: (Record significant facts, observations, other sources used, etc.)

#### **DISCIPLINARY POLICY** Policy: All facilities housing INS detainees are authorized to impose discipline on detainees whose behavior is not in compliance with facility rules and regulations. Components Yes No NA Remarks The facility has a written disciplinary system using 冈 П progressive levels of reviews and appeals. The facility rules state that disciplinary action shall not X be capricious or retaliatory. Written rules prohibit staff from imposing or permitting per the policy manual the following sanctions: corporal punishment deviations from normal food service clothing deprivation $\boxtimes$ bedding deprivation denial of personal hygiene items loss of correspondence privileges deprivation of physical exercise The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all $\boxtimes$ detainees verbally and in writing. The following conspicuously posted in Spanish and In each living quarters as English or other dominate languages used in the facility: well as the detainee Rights and Responsibilities handbook. **Prohibited Acts** П $\boxtimes$ П Disciplinary Severity Scale Sanctions If so, where posted When minor rule violations or prohibited acts occur. Ø $\Box$ informal resolutions are encouraged. If informal resolutions are not appropriate, incident reports and Notice of Charges are promptly forwarded to $\bowtie$ $\Box$ the INS/CDF supervisor. Incident reports are investigated within 24 hours of the incident report. The Unit Disciplinary Committee (UDC) X П $\Box$ or equivalent does not convene before investigations have ended. An intermediate disciplinary process is used to $\boxtimes$ adjudicate minor infractions. A disciplinary panel (or equivalent in IGSAs) adjudicates Per Policy 3.3.1 pg. 15 infractions. The panel: and 16 Conducts hearings on all charges and allegations referred by the UDC Considers written reports, statements, physical evidence, and oral testimony $\boxtimes$ П Hears pleadings by detainee and staff representative Bases its findings on the preponderance of evidence Imposes only authorized sanctions A staff representative is available, if requested for a Per policy 3.3.1 pg. 14 Ø detainee facing a disciplinary hearing The facility permits hearing postponements or Per policy 3.3.1 pg. 16 continuances when conditions warrant such a $\boxtimes$ continuance. Reasons for are documented.

DISC	IPLINAR	Y POLI	CY .			
Policy: All facilities housing INS detainees are not in compliance with facility rules ar	e authorized	l to impos		oline on	detainees whose behavior is	
Components		Yes	No	NA	Remarks	
The duration of punishment set by the OIC/recommended by the disciplinary panel dexceed established sanctions. The maximum disciplinary segregation does not exceed 60 desingle offense.	time in				In manual 3.3.1 pg. 16	
Written procedures govern the handling of co- informant information. Standards include crite recognizing "substantial evidence"		$\boxtimes$				
All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.		$\boxtimes$			Per Policy	
Veri	fication :	Source:	<b>S</b> :		LOCATION	
Observing posted notices of rights	1400	7/28	А-р	od, Inta		
Observing disciplinary hearings						
Review of written disciplinary actions	1500	7/28		regatio		
Facility's written policy and procedures	1400	7/27	con	conference room		
Detainee and staff interviews *						
	Standard R		ficienc	y 🗆 A	At-Risk	
*Remarks: (Record significant facts, observation 7/29/0	,					
1/29/0	7	(D)	(6), (b)	(/)(C)		

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### **EMERGENCY (CONTINGENCY) PLANS**

Policy All facilities holding INS 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.

or emergency.  Components	Yes	No	NA	Remarks	
	1.03	'''		Francisco de la Contra de la Co	
No Detainee or detainee groups exercise control or authority over other detainees.					
Detainees are protected from:		1		Per Policy	
Personal abuse	1	1		'	
Corporal punishment				1	
Personal injury	$\boxtimes$				
Disease		_			
Property damage				l i	
Harassment from other detainees					
Staff are trained to identify signs of detainee unrest.		<u> </u>		At academy	
What type of training and how often?				/ tradadomy	
Does staff effectively disseminates information on facility			-		
climate, detainee attitudes, and moods to the Officer In					
Charge (OIC)?				<u> </u>	
From the OIC to line staff?					
There is a designated person or persons responsible for		<u> </u>		Captain	
emergency plans and their implementation. Sufficient time					
is allotted to the person or group for development and				(1)(6) (1)(7)(6	<b>~</b> \
implementation of the plans.				(b)(6), (b)(7)(0	(ز
The plans address the following issues:					
Confidentiality					
<ul> <li>Accountability (copies and storage locations)</li> </ul>					
Annual review procedures and schedule	_	_			
Revisions					
Contingency plans include a comprehensive general section	521				
with procedures applicable to most emergency situations.					
The facility has cooperative contingency plans with					
applicable:				<u> </u>	
Local law enforcement agencies					
State agencies					
Federal agencies					
All staff receives copies of Hostage Situation Management				At academy	
policy and procedures.					
Staff is trained to disregard instructions from hostages,				Per training manual and	
regardless of rank. Within 24 hours after release hostages				facility policy	
are screened for medical and psychological effects. In					
SPCs and CDFs, the OIC has a plan that includes the use					
of a victim assistance team for released hostages and					
hostage families.					
In SPCs and CDFs a review team visits the facility after every	$\boxtimes$			Per Manual	
hostage taking.					
Emergency plans include emergency medical treatment for	$\boxtimes$			Per Manual	
staff and detainees during and after an incident.					
The food service maintain at least 3-days' worth of	$\boxtimes$			Viewed at Food Service	
emergency meals for staff and detainees.				1.6.	
Written plans locate shut-off valves and switches for all	$\boxtimes$			Viewed in Manual	
utilities (water, gas, electric).				Btii	
In SPCs and CDFs emergency plans describe alternative	$\boxtimes$			Route is in manual	
routes to the facility.					

EMERGENCY	CONTIN	CENC)	/\ DI /	ANIS	
Policy All facilities holding INS detainees will respond in the harming of human life and the destruinto agreement, via Memorandum of Understandir of emergency.	ction of pro	perty. It is	s recon	nmende	ed that SPCs and CDFs enter
Components		Yes	No	NA	Remarks
In SPCs and CDFs emergency procedure notification of neighbors.		$\boxtimes$			Captain and have plan
<u>In SPCs and CDFs</u> Do plans specify procedures emergency debriefings and discussion?	•		×		Was not located in manual
In SPCs the OIC periodically schedule emergency test the facility's emergency preparedness (rea implement contingency plan(s)) The plans reviewe	adiness to				Conducted monthly
Written procedures cover:  Work/Food Strike  Disturbances  Escapes  Bomb Threats  Adverse Weather  Internal Searches  Facility Evacuation  Detainee Transportation System Plan  Internal Hostages  Civil Disturbances					in manual
Verific	ation So				
Facility's written policy and procedures	1445	7/27/04	con	ference	LOCATION
Reviewing facility records	1440	1727704	0011	TOI CITO	2 100111
Detainee and staff interviews	1430	7/28/04	Cap	otains o	office
S Acceptable   Defici	tandard Raient 🔲 Re	ating: peat De	ficienc	y 🗆 /	At-Risk
Remarks: (Record significant facts, observation Advisory Only:  1. The emergency response plan did not contain discussion. This action would be conducted in the composition needs to be in the plan.	n any infori	mation fo	r a pos	st-emer	gency debriefing or $(b)(6)$ , $(b)(7)$ aptain however the
<del>- 1/</del>	(b)	(6), (b)(	7)(C)		

### **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

moonipauble materials, and sale-nanding procedures				
Components	Yes	No	NA	Remarks
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	$\boxtimes$			Bulk stored outside perimeter.
Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	×			
The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used.  • The files list all storage areas, and include a plant diagram and legend.  • The MSDSs and other information in the files are available to personnel managing the facility's safety program.				
All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They:  • Wear personal protective  • Equipment.  • Report hazards and spills to the  • designated official.	×			Handled by safety officer only when in concentrated forms.
The MSDSs are readily accessible to staff and detainees in the work areas.				In storage rooms
Hazardous materials are always issued under proper supervision.  • quantities are limited.  • Staff always supervises detainees using these substances.	⊠			
"Flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.			×	None on-site
Lighting fixtures and electrical equipment are installed in storage rooms and other hazardous areas meet National Electrical Code requirements.	⊠			
In SPCs and CDFs the storage rooms meet the security and structural requirements specified in the standard. Storage cabinets meet the physical requirements specified in the standard?	⊠			
All toxic and caustic materials 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.	$\boxtimes$			
Staff directly supervises and accounts for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, e.g., shoe dye. All such products clearly labeled as such. "Accountability" includes issuing such products to detainees in the smallest workable quantities.				None issued to detainees
Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal	$\boxtimes$			

### **ENVIRONMENTAL HEALTH AND SAFETY**

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		SCEND MORIGINATIO		
Components	Yes	No	NA	Remarks
The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association and the Occupational Safety and Health Administration (OSHA).	×			
A technically qualified officer conducts the fire and safety inspections. In SPCs and CDFs, these inspections are conducted informally on a weekly basis and formally monthly. Every written inspection report forwarded to the OIC.	×			Log shows evidence of this.
The Safety Office (or officer) maintains files of inspection reports? Including corrective actions taken.	×			
The facility has an approved fire prevention, control, and evacuation plan.	$\boxtimes$			Approved by fire marshall
<ul> <li>The plan requires:</li> <li>Monthly fire inspections.</li> <li>Fire protection equipment strategically located throughout the facility.</li> <li>Public posting of emergency plan with accessible building/room floor plans.</li> <li>Exit signs and directional arrows.</li> <li>An area-specific exit diagram conspicuously posted in the diagrammed area.</li> </ul>				Viewed throughout the facility
Fire drills are conducted and documented monthly.	$\boxtimes$			Viewed Logbook
A sanitation program covers barbering operations.	$\boxtimes$			
The barbershop has the facilities and equipment necessary to meet sanitation requirements.		×		Need better equipment for sheer blades.
The sanitation standards are conspicuously posted in the barbershop.	$\boxtimes$			
Written procedures regulate the handling and disposal of used needles and other sharp objects.	$\boxtimes$			
All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	$\boxtimes$			Viewled Inventory sheets
In SPCs and CDFs, the Health Services Administrator (HSA) has implemented a program supporting a high level of environmental sanitation.	$\boxtimes$			
In SPCs and CDFs the HSA conducts medical-facility inspections every day. Each inspection includes noting the condition of floors, walls, windows, horizontal surfaces, and equipment.				
Standard cleaning practices include:  Using specified equipment; cleansers; disinfectants and detergents.  An established schedule of cleaning and follow-up inspections.	⊠			
The facility follows standard cleaning procedures.  • For SPCs and CDFs list discrepancies between INS standard and facility procedures and isolation-cleaning procedures been implemented as required.	×			
Spill kits are readily available.	Ø			

### **ENVIRONMENTAL HEALTH AND SAFETY**

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

Components	Yes	No	NA	Remarks
A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	×			Handled by contract company
In SPCs and CDFs staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	$\boxtimes$			
Do the methods for handling/disposing of refuse meet all regulatory requirements.	$\boxtimes$			
A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin.  • At least monthly.  • The pest-control program includes preventive spraying for indigenous insects.	×			Handled by contract company
Drinking water and wastewater is routinely tested according to a fixed schedule.	$\boxtimes$			observed certification
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).	×			

¥	rification	Sources				
SOURCE	TIME	DATE	LOCATION			
Observe maintenance crews	0900	7/28	Tool Control			
Observe detainee work crews	1100	7/28	Food Service			
Inspect storage facilities	1000	7/28	Outside perimeter			
Facility's written policy and procedures	1100	7/27	conference room			
Inspect inspection reports	1100	7/28	office			
Inspect medical facilities			(b)(6), (b)(7)			
Review waste removal contracts	1000	7/28	office			
Review evacuation routes/maps	1000	7/28	office/conference room			
Detainee and staff interviews *	1000	7/28	office			

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	Standard Rating:			
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<b>▼</b> • • • • • • • • • • • • • • • • • • •	Definitions   Demand Definition		A4 Diala	
XI Acceptable	Deficient   Repeat Deficien	ICV I I	At-RISK	
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	Deficient Repeat Deficien	ісу 🔲	At-Risk	

### Advisory Only:

- 1. The MSDS sheets are posted in almost all work areas with chemicals. The only exception was during the initial walk through in food service the book was in the staff office instead of being in easy access to the detainee's.
- 2. The sanitary methods for the sheers did not suffice during the review. The blades on the sheers are not being cleaned only the guards.

3. The facility has an excellent system for the storing and handling of chemicals.

<sup>\*</sup>Remarks: (Record significant facts, observations, other sources used, etc.)

### HOLD ROOMS IN DETENTION FACILITIES

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

ricalings, medical deadners, inda-racinty movement, or o		/Cessing	into Ot	out of the lacility.
Components	Yes	No	NA	Remarks
The hold room is situated in a location within the secure perimeter.	⋈			
In SPCs and CDFs the single occupant hold rooms contain a minimum of 37 square feet (7 unencumbered square feet for the detainee, 5 square feet for a combination lavatory/toilet fixture, and 25 square feet for a wheelchair turn-around area).  • If multiple-occupant hold rooms are used, there is an additional 7 unencumbered square feet for each additional detainee.	⊠			
The hold rooms well ventilated, well-lighted and all activating switches located outside the room.	$\boxtimes$			
The hold rooms contain sufficient seating for the number of detainees held.	$\boxtimes$			
No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside holdrooms.	$\boxtimes$			
In SPCs and CDFs constructed after 1998 the hold rooms are equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They are:  Compliant with the American Disabilities Act. Small hold rooms (1 to 14 detainees) have at least one combi-unit. Large hold rooms (15 to 49 detainees) are provided with at least two combi-units.			×	New facility
In SPCs and CDFs constructed after 1998 the hold room have floor drain(s).	$\boxtimes$			Viewed
The walls of the hold rooms escape proof.  • The hold room ceilings are escape and tamper resistant.	×			Concrete block design.
In SPCs and CDFs constructed after 1998 the door to the hold room swings outward the door complies with the specifications outlined in the standard.	×			
Individuals are not held in hold rooms for more than 12 hours.	$\boxtimes$			Verified with logbook
In SPCs, CDFs are family units, persons of advanced age (over 70), females with children, and unaccompanied juvenile detainees (under the age of 18) placed in hold rooms?			×	Do not house juveniles at this facility
Male and females are segregated from each other at all times.	$\boxtimes$			
Every effort is made to ensure that detained detainees under the age of 18 are not held with adult detainees.			$\boxtimes$	Do not house juveniles at this facility
Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	$\boxtimes$			Viewed
In older facilities officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.			⊠	New facility
In SPCs and CDFs Officers inspect all property, including parcels, suitcases, bags, bundles, boxes, before accepting the property.	$\boxtimes$			Observed

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meanings, medical treatment, intra-racinty movement, or other processing into or out or the racinty.					
Components	Yes	No	NA	Remarks	
All detainees are given a putdown search for weapons or contraband before being placed in the room.	×			Observed	
For SPCs and CDFs, each detention facility maintains a detention log (manually or by computer) for each detainee placed in a hold cell.  • The log includes the required information specified in the standard.	×			Computerized	
<ul> <li>In SPCs and CDFs officers provide a meal to any detainee detained more than six hours.</li> <li>Juveniles, babies and pregnant women have access to snacks, milk or juice?</li> <li>Meal are served to juveniles regardless of time in custody</li> </ul>	×				
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.	×			Direct supervision from intake desk	
In SPCs and CDFs policy prevents an officer to enter an occupied detention hold room unless another officer is stationed outside the door.	$\boxtimes$			Per Policy	
<ul> <li>When the last detainee has been removed from the hold room, it is given a thorough inspection.</li> <li>Cleaning.</li> <li>Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair.</li> </ul>				Viewed during walk through	
<ul> <li>There is a written evacuation plan?</li> <li>There is a designated officer to remove detainees from the holdrooms in case of fire and/or building evacuation.</li> </ul>	×				
An appropriate emergency service is called immediately upon a determination that a medical emergency may exist.	$\boxtimes$			Per policy	

Veri	fication	Sources	
SOURCE	TIME	DATE	LOCATION
Hold room logbook review	1500	7/27	Intake
Observation of hold rooms	1500	7/27	Intake
Review of facility policy and procedure for control and disposition of contraband	1330	7/27	conference room
Detainee and staff interviews	1500	7/27	Intake

Standard Rating: ☑ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk				
*Remarks: (Record significant facts, observations, other s	ources used, etc.)			
7/29/04	(b)(6), (b)(7)(C)			

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

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

maintenance of all keys and locks.				
Components	Yes	No	NA	Remarks
In SPCs and CDFs each facility has the position of Security Officer. If not  A staff member appointed the collateral duties of security officer.	×			(b)(6), (b)(
In SPCs and CDFs the security officer has a written position description.	$\boxtimes$			(b)(6), (b)(7)(C)
The security officer[s], or equivalent in IGSAs, has attended an approved locksmith-training program.	×			Best Locksmith Training and Southern Steel
The security officer, or equivalent in IGSAs, has responsibly for all administrative duties and responsibilities relating to keys, locks etc.	×			is asst. to security officer and handles admin. duties.
The security officer, or equivalent in IGSAs, provides training to employees in key control.	$\boxtimes$			Annual training provided
The security officer, or equivalent in IGSAs, maintains inventories of all keys, locks and locking devices.	Ø			In assistants office
The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	×			Computerized Log
Facility policies and procedures address the issue of compromised keys and locks.	×			3.1.12 page 3 of policy
The security officer, or equivalent in IGSAs, develops policy and procedures to ensure safe combinations integrity.	$\boxtimes$			3.1.12 page 4 of policy
Only dead bolt or dead lock functions are used in detainee accessible areas.	$\boxtimes$			
Non-authorized locks (as specified in the Detention Standard) are not used in detainee accessible areas.	×			
The facility does not use grand master keying systems.				
All worn or discarded keys and locks cut up and properly disposed of .	Ø			Ground down and witness verifies disposal
Padlocks and/or chains are not used on cell doors.				non visualized
The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to  Occupational Safety and Environmental Health Manual, Chapter 3  National Fire Protection Association Life Safety Code 101.				
The operational keyboard sufficient to accommodate all the facility key rings including keys in use is located in a secure area.	Ø			Located in central control
In SPCs/CDFs, is the key cabinet constructed so keys will not be visible except during issue.	$\boxtimes$			Doors fold in
Procedures in place to ensure that key rings are:  Identifiable  Numbers of keys on the ring are cited?  Keys cannot be removed from issued key rings	×			Viewed
Emergency keys are available for all areas of the facility.	$\boxtimes$			Located in tool control
The facilities use a key accountability system.	$\boxtimes$			Chit system

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

					n for the u		
		d locks.					

maillenance of all keys and locks.				
Components	Yes	No	NA	Remarks
Authorization is necessary to issue any restricted key.	×			3.1.12 page 7 of policy
<ul> <li>Individual gun lockers are provided.</li> <li>They are located in an area that permits constant officer observation.</li> <li>In an area that does not allow detainee or public access.</li> </ul>				
The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	⊠			Viewed log
In SPCs and CDFs the designated key control officer the only employee who is authorized to add or remove a key from a ring.	X			
In SPCs and CDFs the splitting of key rings into separate rings is authorized in writing and documented.	$\boxtimes$			Never split key rings
<ul> <li>All staff members are trained and held responsible for adhering to proper procedures for the handling of keys.</li> <li>Issued keys are returned immediately in the event an employee inadvertently carries a key ring home.</li> <li>When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified.</li> <li>Detainees are not permitted to handle keys assigned to staff.</li> </ul>	⊠			

Verification Sources:							
SOURCE	TIME	DATE	LOCATION				
A. Observing key distribution	1500	7/27	Central command				
B. Observing Officer behavior							
A. Inspection of Lockshop	0930	7/28	Central command and tool control				
B. Facility's written policy and procedures.	1130	7/27	conference room				
C. Detainee and staff interviews *							

Standard Rating:	
🛛 Acceptable 🗌 Deficient 🔲 Repeat Deficiency 🔲 At-Risk	
□ Acceptable □ Deficient □ Repeat Deficiency □ At Alak	

From my observations the facility has a very excellent key accountability and control procedure in place. The system appears to be very secure and maintains the integrity of the standard.

<sup>\*</sup>Remarks: (Record significant facts, observations, other sources used, etc.)

POPUL					

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

Components	Yes	No	NA	Remarks
Staff conducts a formal count at least once each shift.				5 times a day
Activities cease or are strictly controlled while a formal count is being conducted.	⋈			Per Policy and visualized
Do certain operations continue during formal counts?		$\boxtimes$		
Is a certain amount of movement tolerated during a formal count?		×		
Formal counts in all units take place simultaneously.	$\boxtimes$			per policy
In SPCs and CDFs at least two officers participate in the count in each area/unit.	Ø			
In SPCs and CDFs count procedures include sending a count slip to the control officer after each count.	$\boxtimes$			per policy
In SPCs and CDFs both officers conducting the count prepare and sign the count slip in indelible ink.	×			
Officers do not allow detainee participation in the count.	$\boxtimes$			viewed
In SPCs and CDFs every area/unit conducts a recount whenever an incorrect count is reported.	X			
A face-to-photo count follows each unsuccessful recount.	X			according to policy
In SPCs and CDFs the two officers conducting the area/unit count switch positions for the recount.	X			
Officers positively identify each detainee before counting him/her as present.	$\boxtimes$			viewed
Written procedures cover informal and emergency counts.  They followed during informal counts.  During emergencies.				
The control officer (or other designated position) maintains an out -count record of all detainees temporarily leaving the facility.	$\boxtimes$			
In SPCs and CDFs the facility train all officers to follow all requirements of INS' "Population Count Detention Standard".	$\boxtimes$			
This training is documented in each officer's training folder.	$\boxtimes$			

Verification Sources:								
Source	Time	Date	Location					
Observation of facility counts	1100	7/28	A-Pod					
Observation of escort procedures (whether out counts are maintained)								
Facility log books								
Written policy and procedures	1030	7/28	conference room					
Detainee and staff interviews*								

Standard Rating: ☑ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk							
*Remarks: (Record significant factscopservations, other sources used, etc.)							

			Submitte unaccide survey	
Policy: INS provides officers all necessary guidance for compost orders established for every post, which are reviewe assignment to that post.	arrying o			
Components	Yes	No	NA	Remarks
Every Fixed post has a set of post orders.	$\boxtimes$			
Each set contains the latest inserts (emergency	Ø			
memoranda, etc.) and revisions.				
One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.	⊠			
In SPCs and CDFs the CDEO's office or contract equivalent maintains a complete set (central file) of post orders.	⊠			
In SPCs and CDFs the central file accessible to all staff.	$\boxtimes$			
The OIC or Contract / IGSA equivalent		ПП		
initiate/authorizes all post-order changes.		<u> </u>		
The OIC or Contract / IGSA equivalent has signed and dated the last page of every section.	⊠			
In SPCs and CDFs, the post orders contain the required		ΙП		
six sections.	<del>                                     </del>	<u> </u>		No provide data
A review/updating/reissuing of post orders occurs regularly. At a minimum, Annually.  • In SPCs and CDFs the facility follows written post-order review procedures.				No annual to date. Facility opened on 4/24
In SPCs and CDFs the OIC or Contract equivalent		<del>                                     </del>		
initiates the annual review by soliciting suggestions from affected staff.  • Staff has sufficient notice to prepare and submit	$\boxtimes$			
written suggestions by the due date	-	-		
In SPCs and CDFs the OIC or contract equivalent retains all written suggestions, whether accepted or rejected, in a historical file.  • The records are retained for two years.  • The historical file includes comments, if any, from the reviewing official(s).	⊠			Per policy
Procedures keep post orders and logbooks secure from detainees at all times.	$\boxtimes$			
In SPCs and CDFs emergency changes to post orders are made by memorandum.	$\boxtimes$			
<ul> <li>In SPCs the post orders for armed posts provide instructions for:         <ul> <li>Recognizing conditions when use of weapons is authorized.</li> <li>The care and safe handling of firearms.</li> </ul> </li> </ul>			$\boxtimes$	No armed post
Every armed-post officer qualifies with the post weapon(s) before assuming post duty.			$\boxtimes$	No armed post
In SPCs armed-post post orders clearly state that if an official is taken hostage, he/she loses all authority normally associated with his/her position, regardless of rank or seniority.			$\boxtimes$	No armed post

 $\boxtimes$ 

 $\boxtimes$ 

No armed post

Viewed Log

Armed-post post orders provide instructions for escape attempts.

The post orders for housing units track the event

schedule.

POST ORDI	ERS			
<b>Policy:</b> INS provides officers all necessary guidance for capost orders established for every post, which are reviewed assignment to that post.				
Components	Yes	No	NA	Remarks
Housing-unit post officers record all detainee activity in a log. The post order includes instructions on maintaining the logbook.	×			Viewed
In SPCs and CDFs the SDEO/contract supervisor visits each housing area and reviews the logbooks at least once per shift.	×			Viewed Signature on log

Verification Sources:							
SOURCE	TIME	DATE	LOCATION				
Post orders in use at posts	1530	7/28	Several different posts of facility				
Master copy of post orders	0900	7/27	Conference room				
Documentation of firearms qualifications			N/A				
Housing unit logbooks	1330	7/28	Several different posts of facility				
Facility policy & procedures for post orders	0930	7/27	conference room				
History file for each set of post orders							
Staff Interview(s) *	1500	7/28	Seg, A pod, B pod				

Standard Rating:	
🛛 Acceptable 🗌 Deficient 🔲 Repeat Deficiency 🔲 At-Risk	

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

**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 per policy 3.1.8 policy. The policy specifies: Posts to be inspected Required inspection forms Frequency of inspections X П Guidelines for checking security features Procedures for reporting weak spots. inconsistencies, and other areas needing improvement Every officer is required to conduct a security check of X his/her assigned area. The results are documented. X Documentation of security inspections is kept on file. In SPCs and CDFs an officer been assigned responsibility Captain for ensuring the security inspection process covers all X areas of the facility. Procedures ensure that recurring problems and a failure to notify first line supervisor take corrective action are reported to the appropriate  $\boxtimes$ manager. In SPCs and CDFs the front entrance has a sallyport-type Ø entrance, with interlocking electronic doors or grilles. The front-entrance officer checks the ID of everyone Ø entering or exiting the facility. All visits officially recorded in a visitor logbook or  $\boxtimes$ П electronically recorded. In SPCs and CDFs the Control Center maintain employee Central Control Lt. stated Ø Personal Data Cards (Form G-74 or contract equivalent). no to this. Ø The facility has a secure visitor pass system. Every Control Center officer receives specialized training. received by company  $\boxtimes$ who installed equipment X X The Control Center is staffed around the clock. Per policy/visualized Policy restricts staff access to the Control Center. X Detainees do not have access to the Control Center. Communications are centralized in the Control Center. In SPCs and CDFs the recall list includes the current home telephone number of each employee. Phone  $\boxtimes$ numbers are updated as needed. In SPCs and CDFs staff makes watch calls every half-hour Captain verified  $\boxtimes$ between 6 PM and 6 AM. Officers monitor all vehicular traffic entering and leaving Posted guard X the facility. The facility maintains a log of all incoming and departing Viewed log at front gate vehicles to sensitive areas of the facility. Each entry contains: The driver's name Company represented Vehicle contents  $\boxtimes$ Delivery date and time Date and time out Vehicle license number Name of employee responsible for the vehicle during the facility visit

SECURITY INSI	ECTIO	ONS				
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						
	163	110	1474	Aviilarko		
Officers thoroughly search each vehicle entering and leaving the facility.	$\boxtimes$					
The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	$\boxtimes$					
Tools being taken into the secure area of the facility are inventoried before entering and prior to departure.	$\boxtimes$					
The SMU entrance has a sallyport.	$\boxtimes$					
Written procedures govern searches of detainee housing units and personal areas.	$\boxtimes$					
Housing area searches occur at irregular times.						
Every search of the SMU and other housing units documented.	⋈			Log book visualized		
Storage and supply rooms; walls, light and plumbing fixtures, accesses, and drains, etc. undergo frequent, irregular searches. These searches are documented.						
Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	$\boxtimes$			per policy and log book		
Perimeter alarm system tests.     Physical checks of the perimeter fence.     Documenting the results.				viewed log book		
In SPCs and CDFs the maintenance supervisor and CDEO/ Chief of Security make monthly fence checks.	⊠			once daily		
Visitation areas receive frequent, irregular inspections.	$\boxtimes$					

Verification Sources:								
SOURCE	TIME	DATE	LOCATION					
Observing inspection procedures								
Observing procedures at front entrance	daily	daily	front gate and visitor lounge					
Reviewing logbooks	1500	7/28	captains office					
Facility's written policy and procedures	1100	7/28	conference room					
Detainee and staff interviews	1000	7/28	several					

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	Standard Rating	9: I
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<sup>\*</sup>Remarks: (Record significant facts, observations, other sources used, etc.)

#### Advisory Only:

- 1. The front entrance personnel allowed visitors to enter the visitation waiting area without a more thorough inspection after the metal detectors went off.
- 2. Upon entrance to the facility a gentleman exited the facility and did not show any identification to the front entrance personnel.
- 3. Employee Personal Data Cards are not kept in the control center.
- 4. Doors have been unsecure in the same areas of the facility throughout the review. (Records, Maintenance, gate to sally port)
- 5. The evacuation plan moves the detainees to a fenced in area on the exterior of the facility. This area consists of loose rock for ground which could easily be used as a weapon against staff during and evacuation.

# SPECIAL MANAGEMENT UNIT (SMU) Administrative Segregation

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

Components	Yes	No	NA	Remarks
The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation.  • Detainees are placed in the SMU (administrative) in accordance with written criteria.				
In exigent circumstances, staff may place a detainee in the SMU (administrative) before a written order has been approved.  • A copy of the order given to the detainee within 24 hours.	×			per policy 3.4.1 pg 2
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).	$\boxtimes$			viewed files
A supervisory officer conducts another review after the detainee has spent seven days in administrative segregation.  • Every week thereafter for the first month.  • Every 30 days after the first month.  • Does each review include an interview with the detainee.  • Is a written record made of the decision and the justification.				viewed files
<ul> <li>The detainee is given a copy of the decision and justification for each review.</li> <li>If not, why not?</li> <li>The detainee is given an opportunity to appeal the reviewer's decision to someone else in the facility.</li> </ul>	⊠			Per policy 3.4.1 pg 3
The OIC (or equivalent) routinely notifies the Assistant District Director (or staff officer in charge of IGSAs), Detention and Deportation (ADDD), 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 ADDD forwards written notice to the Assistant Regional Director 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.	$\boxtimes$			

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Components	Yes	No	NA	Remarks
The detainee is given the right to appeal to the OIC (or equivalent) the conclusions and recommendations of any review conducted after the detainee has remained in administrative segregation for seven consecutive days.				
Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	$\boxtimes$			
The SMU well ventilated.      Adequately lighted.     Appropriately heated.     Maintained in a sanitary condition.				
All cells are equipped with beds.     Every bed securely fastened to the floor or wall.	$\boxtimes$			
The number of detainees in any cell does not exceed the occupancy limit.  Does the OIC approve excess occupancy on a case-by-case basis?  When occupancy exceeds recommended capacity, do basic living standards decline?  Do criteria for objectively assessing living standards exist?  If yes, are the criteria included in the written procedures?	⊠			Two man rooms for admin seg. Single cells for disciplinary seg.
The segregated detainees do not have fewer opportunities to exchange/launder clothing, bedding, and linen than detainees in the general population.				
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.	×			Viewed Log
Each detainee maintains a normal level of personal hygiene in the SMU.     The detainees have the opportunity to shower and shave at least three times a week.     If not, explain.				
<ul> <li>The detainees are provided:</li> <li>Barbering services.</li> <li>Recreation privileges in accordance with the "Detainee Recreation" standard.</li> <li>Non-legal reading material.</li> <li>Religious material.</li> <li>The same correspondence privileges as detainees in the general population.</li> <li>Telephone access similar to that of the general population.</li> <li>Personal legal material.</li> </ul>	×			Detainee requests are in detention files

# SPECIAL MANAGEMENT UNIT (SMU) Administrative Segregation

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

Components	Yes	No	NA	Remarks
A health care professional visits every detainee at least three times a week.  The shift supervisor visits each detainee daily.  Weekends and holidays.	×			Every day
Procedures comply with the "Visitation" standard.  The detainee retains visiting privileges.  The visiting room available during normal visiting hours.	⊠			
Visits from clergy are allowed.				
Detainees do not have have less law-library access than the general population.  • Are they required to use the law library separately, as a group? If so:  • Legal materials brought to them.	⊠			
<ul> <li>The SMU maintains a permanent log.</li> <li>Detainee-related activity, e.g., meals served, recreation, visitors etc.</li> </ul>	$\boxtimes$			Viewed Log
SPC procedures include completing the SMU Housing Record (I-888) immediately upon a detainee's placement in the SMU.  Staff completes the form at the end of each shift.  CDFs and IGSA facilities use Form I-888 (or local equivalent).	×			
<ul> <li>Does staff record whether the detainee ate, showered, exercised and took any medication during every shift?</li> <li>Does the log record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc.?</li> <li>Does the medical officer/health care professional sign each individual's record during each visit?</li> <li>Does the housing officer initial the record when all detainee services are completed or at the end of the shift?</li> </ul>	$\boxtimes$			Viewed Log
A new record is created for each week the detainee is in Administrative Segregation.  These weekly records are retained in the SMU until the detainee's return to the general population.	×			Viewed Files

Verification Sources:							
SOURCE	TIME	DATE	LOCATION				
SMU Observation	1400	7/28	Unit				
SMU logs	1400	7/28	Unit				
Review of the facility's Administrative Segregation policy and procedures	1500	7/27	conference room				
Detainee and staff interviews	1400	7/28					
*Other							

Standard Rating:
🛛 Acceptable 🔲 Deficient 🔲 Repeat Deficiency 🔲 At-Risk

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

The adminstrative segregation unit is performing within the standards and no deficiencies were discovered during the review.

# SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)

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

Components	Yes	No	NA	Remarks
Officers placing detainees in disciplinary segregation follow written procedures.	Ø			Entropy of the material and the second and the seco
The sanctions for violations committed during one incident do not exceed 60 days.	×			per policy
<ul> <li>A completed Disciplinary Segregation Order accompanies the detainee into the SMU?</li> <li>The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation.</li> </ul>				
Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at set intervals.  • Who conducts the review?  • What is reviewed?  • How is the review documented?  • Does the reviewer interview the detainee?  • Can the reviewing officer recommend an early release from the SMU?  • If yes, under what circumstances?  • After each formal review, does the detainee receive a written copy of the decision and reason(s) for it?	×			per policy 3.4.2 pg 3  Seg. Lt. Conducts Rules are abided by D. Seg review form Yes No  Yes.
The conditions of confinement in the SMU are proportional to the amount of control necessary to protect detainees and staff.	×			
Detainees in disciplinary segregation have fewer privileges than those housed in administrative segregation.	$\boxtimes$			
Living conditions in disciplinary SMUs modified to reinforce acceptable behavior.  If yes, does staff prepare written documentation for this action.  Does the OIC sign to indicate approval.	⊠			All steps are followed
Every detainee in disciplinary segregation receives the same humane treatment, regardless of offense.	$\boxtimes$			
The quarters used for segregation are:	$\boxtimes$			Viewed sinlge cell
All cells are equipped with beds.     The beds securely fastened to the floor or wall of the cell.				
The number of detainees confined to each cell or room does not exceed the number for which the space was designate.  • Does the OIC approve excess occupancy on a temporary basis.				Single cell only

# SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)

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

Components	Yes	No	NA	Remarks
	103			I CHIQIRO
Is a dry cell part of the disciplinary SMU?	<u> </u>			
When a detainee is segregated without clothing, mattress, blanket, or pillow, a justification is made and				
the decision is reviewed each shift. Items are returned				
as soon as it is safe.				
Detainees in the SMU have the same opportunities to		<del> </del>	<u> </u>	
exchange clothing, bedding, etc., as other detainees.				:
Detainees in the SMU receive three nutritious				Recorded in log book
meals/days.				1 Treestrated in log Book
Selected from the Food Service's menu of the				
day.				
<ul> <li>Food is not used as punishment.</li> </ul>				
Detainees are allowed to maintain a normal level of				Recorded in log
personal hygiene, including the opportunity to shower				
and shave at least three times/week.	_	_		
The detainees receive, unless documented as a threat				Viewed requests
to security:				·
<ul> <li>Barbering services.</li> </ul>				
<ul> <li>Recreation privileges.</li> </ul>				
<ul> <li>Other-than-legal reading material.</li> </ul>				
<ul> <li>Religious material.</li> </ul>				
<ul> <li>The same correspondence privileges as other</li> </ul>	İ			
detainees.				
Personal legal material.				
When phone access is limited by number or type of calls,				
limits do not apply to the following:				
Calls about the detainee's immigration case or				
other legal matters.				
Calls to consular/embassy officials.				
Calls during family emergencies (as determined     DICAN and an)				
by the OIC/Warden).				Delle
A health care professional visits every detainee in disciplinary segregation every day, Monday through				Daily
Friday.				
The shift supervisor visit each segregated	$\square$			
detainee daily				
Weekends and holidays.				
SMU detainees are allowed visitors, in accordance with				Viewed logs
the "Visitation" standard.	$\boxtimes$			Tiened logo
SMU detainees receive legal visits, as provided in the				
"Visitation" standard.	N .		_	
<ul> <li>Legal service providers notified of security</li> </ul>			$\sqcup$	
concerns arising before a visit.				
Visits from clergy are allowed.				
The clergy member given the option of			ĺ	
visiting/not visiting the segregated detainee.	$\boxtimes$			
Violent/uncooperative detainees denied access			ᆜᅵ	
to religious services when safety and security				
would otherwise be affected.				,

# SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)

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

Components	Yes	No	NA	Remarks
SMU detainees have law library access.  • Violent/uncooperative detainees retain access				Viewed request forms
to the law library unless adjudicated a security threat in writing.				
<ul> <li>Legal material brought to individuals in the SMU on a case-by-case basic.</li> </ul>	_	_		
<ul> <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.	☒			Viewed log
Is the <u>SPC's</u> , the Special Management Housing Unit Record (I-888) is prepared as soon as the detainee is				
placed in the SMU.  • All I-888s filled out by the end of each shift	$\boxtimes$			
<ul> <li>The <u>CDF/IGSA</u> facility use Form</li> <li>I-888 (or equivalent local form).</li> </ul>				
SMU staff records whether the detainee ate, showered,				Viewed Log
exercised, took medication, etc.				
<ul> <li>Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc.</li> </ul>				
<ul> <li>The health care official sign individual records after each visit.</li> </ul>	$\boxtimes$			
<ul> <li>The housing officer initials the record when all detainee services are completed or at the end of the shift.</li> </ul>				
<ul> <li>A new record is created weekly for each detainee in the SMU.</li> </ul>				
<ul> <li>The SMU retains these records until the detainee leaves the SMU.</li> </ul>				

Verification Sources:							
SOURCE	TIME	DATE	LOCATION				
Detainee Detention Files	1400	7/28	Unit				
SMU Logs	1400	7/28	Unit				
Facility Policy and Procedures	1500	7/27	Conference room				
Detainee and staff interviews	1400	7/28	Unit				
Observations of SMU							

Standard Rating: ☑ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk				
*Remarks: (Record significant facts, observations, otherwise)  Disciplinary Segregation is ran in compliance with the facility	•			
7/29/01	(b)(6), (b)(7)(C)			

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

Components	Yes	No	NA	Remarks
There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	×			and (b)(6), (b)(7)
Department heads are responsible for implementing this standard in their departments.	⋈			
Tool inventories are required for:  • Maintenance Department  • Medial Department  • Food Service Department  • Electronics Shop  • Recreation Department  • Armory	×			Viewed Inventory sheets
<ul> <li>The facility has a facility 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>INS facilities use AMIS bar code labels when required.</li> </ul>	×			3.1.13 pg 5 and 6 of policy
In SPCs and CDFs, the tool inventories are conducted as specified in the detention standard.	$\boxtimes$			
The facility has a tool classification system. In SPCs and CDFs tools classified according to:  Restricted (dangerous/hazardous)  Non Restricted (non-hazardous).	⊠			Two seperated cages that are clearly labeled
Department heads are responsible for implementing tool-control procedures. In SPCs and CDFs they are required to:  • Prepare a computer-generated inventory of all class "R" tools.  • Post a copy of the class "R" tool inventory with the equipment, in a prominent position.  • Post a copy of the class "R" tool inventory with the equipment, in a prominent position.  • Submit a second copy of the inventory to the CDEO.  • Repeat the class "R" tool inventory on a regular schedule (at least weekly, monthly, or quarterly), as follows:  • Food service department—weekly  • Maintenance department medical facility—monthly  • Electronics work area, recreation area(s), and armory—quarterly.  • Send a copy of inventory report to the OIC.  • Report missing tools in accordance with procedures in the standard. (see section III.H., below).				

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

Components	Yes	No	NA	Remarks
The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable.	×			
The facility has an approved tool storage system.  The system ensures that all stored tools are accountable.  Commonly used tools (tools that can be mounted) are stored in such a way that missing tool are readily notice.	×			Peg board system with painted background.
<ul> <li>Each facility has procedures for the issuance of tools to staff and detainees. In SPCs and CDFs:</li> <li>Restricted tools are issued only to the individual who will be using it.</li> <li>Detainees are not permitted to use non-restricted tools except under supervision.</li> <li>A metal or plastic chit receipt used to sign out tools.</li> <li>The OIC has established site-specific procedures for the control of ladders, extension cords, and ropes.</li> <li>The CDEO or contract equivalent approves the issuance of tools to a specified project for extended periods.</li> </ul>	$\boxtimes$			Observed a request for acquiring a tool at tool control
The facility has policies and procedures to address the issue of lost tools. The policy and procedures include:  • Verbal and written notification.  • Procedures for detainee access.  • Necessary documentation/review for all incidents of lost tools.	×			3.1.13 pg 8 of policy
Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	$\boxtimes$			appropriate forms are on file
All private or contract repairs and maintenance workers under contract to the INS, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility.	×			appropriate paperwork is on file and was viewed

Verification Sources:							
SOURCE	TIME	DATE	LOCATION				
Tool inventories	0900	7/28	Maintenance				
Review of facility policy and procedure	1030	7/27	conference room				
Housing unit log books							
Observation of tool issuance	0930	7/28	Maintenance				
Detainee and staff interviews *	0900	7/28	Maintenance				

Standard Rating: ☑ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk					
*Remarks: (Record significant facts, observations, other sources used, etc.)					
Advisory Only:					
1. The tool control area door was unsecure during most of the review. This is an area that should be secure at all times in order to maintain the security of an area which presents a great hazard to the facilities security should detainees gain access.  (b)(6), (b)(7)(C)					
7/29/04	(b)(6), (b)(7)(C)				

#### 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 INS 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.

expendition and trained Detention Emotocritical Officers	<i>-</i> , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	JOIOONINGI,
Components	Yes	No	NA	Remarks
Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	⊠			Per Policy
Every transporting officer required to drive a commercial size bus has a valid Commercial Driver's License (CDL) issued by the state of employment.	×			
Supervisors maintain records for each vehicle operator.	$\boxtimes$			
Officers use a checklist during every vehicle inspection.  Officers report deficiencies affecting operability.  Deficiencies are corrected before the vehicle goes back into service.	×			
<ul> <li>Transporting officers: <ul> <li>Limit driving time to 10 hours in any 15-hour period.</li> <li>Drive only after eight consecutive off-duty hours.</li> <li>Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours.</li> <li>Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days.</li> <li>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.</li> </ul> </li> </ul>				Per ICE regulations
Two officers with valid CDLs required in any bus transporting detainees.  When buses travel in tandem with detainees, there two qualified officers per vehicle.  An unaccompanied driver transports an empty vehicle.	×			Per ICE regulations
Before the start of each detail, the vehicle is thoroughly searched.	$\boxtimes$			
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.	×			Viewed at intake area
The facility ensures that the number of detainees transported does not exceed the vehicles manufacturers occupancy level.	$\boxtimes$			
Protective vests are provided to all transporting officers.	$\boxtimes$			
The vehicle crew conducts a visual count once all passengers are on board and seated.  • Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop.	⊠			Viewed
Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	$\boxtimes$			

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Components	Yes	No	NA	Remarks
Officers ensure that no one contacts the detainees.  One officer remains in the vehicle at all times when detainees are present.	⊠			Per policy
Meals are provided during long distance transfers.     The meals meet the minimum dietary standards, as identified by dieticians utilized by the Service.	$\boxtimes$			
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.	×			
<ul> <li>INS Vehicles have:</li> <li>Two-way radios.</li> <li>Cellular telephones.</li> <li>Equipment boxes stocked in accordance with the Use of Force Standard.</li> </ul>				Viewed
The vehicles are clean and sanitary at all times.				
Personal property of a detainee transferring to another facility:  Is inventoried. Is inspected. Accompanies the detainee.	⊠			Viewed in intake and receipts are in detention files
The following contingencies are included in the written procedures for vehicle crews:				

Verification Sources:							
SOURCE	TIME	DATE	LOCATION				
Observing transportation activities	1600	7/27	Intake				
Traveling with vehicle crew							
Observing search procedures	1600	7/27	Intake				
Observing restraining procedures	1600	7/27	Intake				
Facility's written policy and procedures	1400	7/27	conference room				
Detainee and staff interviews*	1600	7/27	Intake				

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

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**Policy:** The U.S. Immigration & Naturalization Service 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.	×			3.1.7 pg 1 of policy
When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, officers must try to resolve the situation without resorting to force.	×			
Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	$\boxtimes$			
The facility subscribes to the prescribed Confrontation Avoidance Procedures.  • Ranking detention official, health professional, and others confer before every calculated use of force.	×			Viewed Video
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.  • In SPCs and CDFs a Physician's Assistant is present prior to and during the Use-of-Force Team Technique to observe and immediately treat any injuries.	×			Video Viewed of forced feeding
Staff members are trained in the performance of the Use-of-Force Team Technique.	$\boxtimes$			Contained in employee training book
All use-of-force incidents are documented and reviewed.	$\boxtimes$			
In SPCs and CDFs the calculated-use-of-force video sequentially presents the following:  Team Leader's introduction  Face of each team member (without helmet), identified by name and title  Team Leader offering detainee a last chance to comply, and explaining the use-of-force results of noncompliance  Unedited coverage of the operation, from the use-of-force order to the end  Medical staff examining the detainee in restraints, with close-ups recording the presence or absence of injuries on the detainee's body  Staff injuries, with oral description(s)	×			Viewed Video
All videotapes of use-of-force incidents catalogued and preserved for at least 2-1/2 years after last documented use.  • The videotapes available for incident review.	$\boxtimes$			3.1.7 pg 4 of policy

#### **USE OF FORCE**

**Policy:** The U.S. Immigration & Naturalization Service 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
<ul> <li>Staff:</li> <li>Does not use force as punishment.</li> <li>Attempts to gain the detainee's voluntary cooperation before resorting to force</li> <li>Uses only as much force as necessary to control the detainee.</li> <li>Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical.</li> </ul>				Viewed video
Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	×			policy 3.1.7 pg 6
SPCs and CDFs use INS-authorized restraint equipment.	$\boxtimes$			
Use-of-Force Team follow written procedures that attempt to prevent injury and exposure to communicable disease(s).				
In SPCs and CDFs the OIC contacts higher command before restraining a detainee beyond eight hours.	$\boxtimes$			ICE is contacted
Standard procedures associated with using four-point restraints include:  Soft restraints (e.g., vinyl) Dressing the detainee appropriately for the temperature. A bed, mattress, and blanket/sheet. Checking the detainee at least every 15 minutes. Logging each check. Turning the bed-restrained detainee often enough to prevent soreness or stiffness. Medical evaluation of the restrained detainee twice per eight-hour shift. When qualified medical staff is not immediately available, staff positions the detainee "face-up".				Per policy
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.	×			3.1.7 pg 8 of policy
All detainee checks are logged.				
In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	$\boxtimes$			
When the OIC authorizes use of non-lethal weapons:  Medical staff is consulted before staff use pepper spray/non-lethal weapons.  Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized.	⊠			3.1.7 pg 9 of policy

#### **USE OF FORCE**

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Components	Yes	No	NA	Remarks
Special precautions are taken when restraining pregnant detainees.  • Medical personnel are consulted	×			
Protective gear is worn when restraining detainees with open cuts or wounds.				
Staff documents every use of force and/or non-routine application of restraints.	×			videotaped and logged
It standard practice to review any use of force and the non-routine application of restraints.	$\boxtimes$			
In SPCs and CDFs After-Action Review Teams review the videotape for the following:  Professionalism  Use of Force Team's protective gear Appropriate/excessive use of force Proper application of restraints Time needed to restrain the detainee Removal of protective gear before entering the cell or area Prompt medical examination of the detainee after the move Proper use of chemical agents or pepper mace Opportunity for detainee to submit voluntarily to the placing of restraints before the team enters the cell Derogatory, demeaning, taunting, or other inappropriate language between team members and the detainee, or between team members and individuals outside the cell or area	$\boxtimes$			3.1.7 pg 11 of policy
In SPCs and CDFs the After-Action Review Report is completed within two working days of the detainee's release from restraints.				
If the reviewers decide the matter requires further investigation, the Office of Internal Affairs, the Office of the Inspector General, and/or the FBI are notified.	$\boxtimes$			ICE notified first
All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees.  • Specialized training is given Officers are certified in all devices they use.	⊠			
The officers are thoroughly trained in the use of soft and hard restraints.	$\boxtimes$			Contained in training book
In SPCs is the Use of Force form is used.  In other facilities this form or its equivalent is used.	$\boxtimes$			

Verification Sources:					
SOURCE	TIME	DATE	LOCATION		
Facility policy and procedure for Use of Force	1000	7/29	conference room		
Use of Force log and forms	1400	7/28	detention files/captains office		
Observation of Use of Force (actual or simulated)	1000	7/29	video tape		
Detainee and staff interviews	1000	7/29	conference room		

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1	Standard Rating:	1
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\*Remarks: (Record significant facts, observations, other sources used, etc.)

7/29/04

Advisory Only:

1. Video was viewed of a calculated use of force in order to force feed a detainee who was on a hunger strike. The entire procedure was excellent and a text book example of what to do with the only exception being that the team was wearing their helmets during introductions.

STAFI	DETAINEE CON	MUNIC	ATION	S	
Policy: Procedures must be in place to allow for formal and informal contact between key facility staff and ICE staff and ICE detainee and to permit detainees to make written requests to ICE staff and receive an answer in an acceptable time frame.					
Components		Yes	No	NA	Remarks
The ICE Field Office Director ensures the announced and unannounced visits occur	ur at the IGSA.			X	ICE works on site
Detention and Deportation Staff conduct weekly visits with detainees held in the I				X	
Scheduled visits are posted in ICE detail	nee areas.			$\boxtimes$	
Visiting staff observe and note current conditions of confinement at each IGSA					
ICE information request Forms are avail IGSA for use by ICE detainees.	able at the			$\boxtimes$	
The IGSA treats detainee corresponden as Special Correspondence.	ce to ICE staff			$\boxtimes$	
ICE staff respond to a detainee request within 72 hours.	from an IGSA			$\boxtimes$	
ICE detainees are notified ion writing upon admission to the facility of their right to correspond with ICE staff regarding their case or conditions of confinement.				$\boxtimes$	
Staff Detainee Communications - Rating  When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.					
Standard Rating:					
☑ Acceptable					
*Remarks; (Record significant facts, observations, other sources used, etc.) $\frac{1}{2} \sqrt{2} \sqrt{3} \sqrt{3}$ (b)(6), (b)(7)(C)					