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



## U.S. Immigration and Customs Enforcement

2005

MEMORANDUM FOR: b6.b7C Acting Officer-In-Charge El Centro Service Processing Center FROM: b6.b7C Deputy Assistant Diffector Detention Management Division SUBJECT: Detention Review Notification

The Headquarters Office of Detention and Removal intends to perform a review of your facility on July 12, 2005. This review will be performed under the supervision of Headquarters staff. The review is expected to conclude on or about July 14, 2005. The review team will conduct a complete closeout and share the preliminary findings of the review at that time.

In preparation for this inspection, you are requested to provide working space for the review team. Additionally, a master copy of the facility's Policies and Procedures, Post Orders, and Emergency Plans should be available to the review team during the review. The Reviewer-in-Charge (RIC) may request additional materials during or prior to the scheduled review.

The designated RIC for your review is	b6, b7C		Should your staff have any questions
regarding this review, please have them con	ntact	b6, b7C	Chief, Detention Standards
Compliance Unit, at (202) 305 b6, b7C			



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



## U.S. Immigration and Customs Enforcement

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MEMORANDUM FOR:

Ronald Smith Field Office Director San Diego Field Office

FROM:

John P. Torres Acting Director

SUBJECT:

El Centro Processing Center Annual Detention Review

Headquarters Detention and Removal Operations conducted a detention review of the El Centro Processing Center July 12-14, 2005, in El Centro, California. A final rating of <u>Acceptable</u> has been assigned.

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

- The Field Office Director, Detention and Removal Operations, shall notify the facility <u>within</u> five business days of receipt of this memorandum. Notification shall include copies of the Form G-324A, *Detention Facility Review Form*, the G-324A Worksheet, RIC Summary Memorandum, and a copy of this memorandum.
- 2) The Field Office Director is responsible for ensuring that the facility responds to all findings and a Plan of Action is submitted to the Review Authority (RA) within 30 days.
- 3) The RA will advise the Field Office Director once the Plan of Action is approved.
- 4) Once a Plan of Action is approved, the Field Office Director shall schedule and follow-up on the above noted deficiencies within 90 days.

Should you or your staff have any questions regarding this matter, please contaction b6, b7C v, Deputy Assistant Director, Detention Management Division at (202) 305 b2 high

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



# U.S. Immigration and Customs Enforcement

MEMORANDUM FOR:

John P. Torres Acting Director

FROM:



SUBJECT:

El Centro Processing Center Detention Review Summary Report.

The Detention Management Division, Detention Standards Compliance Unit performed a Headquarters Detention Review of the El Centro Processing Center in El Centro, California from July 12-14, 2005. This is an Immigration and Customs Enforcement operated facility. The review was performed under the guidance of b6.b7C, Reviewer-In-Charge. Team members included b6.b7C benver DRO, b6.b7C, Phoenix DRO and b6.b7C, San Antonio DIHS.

## **Type of Review**

This review is a scheduled Headquarters Review, which is performed to determine overall compliance with the Immigration Customs Enforcement (ICE) National Detention Standards (NDS). The facility received a previous rating of "Acceptable" during the July 2004 review.

#### **Review Summary**

The American Correctional Association (ACA) has not accredited the El Centro Processing Center. The National Commission on Correctional Health Care (NCCHC) and the Joint Commission on Accreditation of Health Organizations (JCAHO) accredit the facility.

#### Standards Compliance

The following information is a summary of the standards that were reviewed and overall compliance that was determined as a result of the 2004 and 2005 detention reviews:

2004 Review		<b>2005 Review</b>	
Compliant	35	Compliant	34
Deficient	1	Deficient	3
<b>Repeat Deficiency</b>	1	<b>Repeat Deficiency</b>	1





#### Memorandum for John P. Torres

El Centro Processing Center Detention Review Summary Report Page 2

#### **Detainee Classification System - Deficient**

- The facility conducts classification at intake. Reclassification after entry is not conducted.
  - Reclassification at 45 and 60-day intervals after arrival is not conducted. Subsequent re classification at 60 and 90-day intervals is not conducted. Twenty-five detention files were reviewed which revealed this as a recurring deficiency.

#### **Staff Detainee Communications – Deficient**

- The facility does not document visits of detainee living and activity areas by department heads and deportation officers
- The facility does not document or consistently track the receipt of detainee request forms
- The facility does not maintain copies of the ICE response to detainee request forms
  - The facility could not provide documentation signifying that department heads and deportation officers conduct unannounced visits to the facility's living and activity areas. Logs are not maintained tracking detainee request form receipt and response activity. Copies of detainee request forms are not maintained in detention files.

#### **Tool Control - Deficient**

- The tool room officer did not have accountability of items on shadow board
- Multi purpose tool set missing and not accounted for
- Water hoses twenty-five feet in length were found in housing units not under inventory control

Multiple cutting grinding wheels displayed on the tool room shadow boards were not accounted for by the tool room officer. Parts belonging to a multi purpose tool set located in the tool room were missing and not properly accounted for. Water hoses twenty-five feet in length, which could be used as a security breach, were located within each housing unit unaccounted for. Assessment of the unit logbooks revealed that housing units were not maintaining inventory of the water hose's.

#### Hold Rooms - Repeat Deficiency

- Detainees are held longer than twelve hours in hold rooms.
  - Review of the hold room logbook entries revealed that detainees were held longer than twelve hours on three occasions during the rating period. The facility was previously found deficient in this standard. Further improvement is needed to assure that the facility remains in compliance with the standard by effectively monitoring hold rooms/logs to assure that detainees are removed from the hold rooms in a timely manner.

### Memorandum for John P. Torres El Centro Processing Center Review Summary Report Page 3

#### Significant Observations and Best Practices

#### Staff Appearance - Significant Observation

ICE and contract security staff dressed appropriately and presented a neat a professional appearance appearance. They appeared to be very knowledgeable about their individual post assignments. Staff was also very thorough in conducting searches of incoming personnel to prevent contraband from entering the facility via the main entrance.

#### Facility Operation During Unforeseen Incident-Significant Observation

During the annual review, the facility experienced an unforeseen incident with the rupture of a main fire suppression water line serving the facility (Water used for daily facility operation was never affected). Facility staff immediately responded to the situation and assured the health and safety of detainees and employees was maintained. Calls were made to the local police and fire departments to advise of the facility's situation, in the event additional support was requested. Mobile water generating pumps were set up near irrigation canals immediately outside of the perimeter fence, in the event that water needed to be pumped into the facility for fire suppression. Facility personnel immediately worked out particulars that were necessary to have the suppression system repaired and back into operational order.

#### Main Entrance Security - Best Practice

Security officers at the facility's main entrance were very keen and attentive to all persons entering and departing the facility. Officers effectively searched incoming articles within handbags and computer carriers. Officers requested and verified photo identification of all individuals at entry prior to the issuance of a visitors pass. Officers subsequently verified the photo identification of individual's prior to their departure from the facility.

#### **RIC Observations**

The ICE Officer-In-Charge, Private Security Project Manager and their entire staff were very supportive of the review team and assisted the team completely throughout the review.

#### **RIC Issues and Concerns:**

Water and gas service valve cover caps on the asphalt surface within the perimeter are not secured. The metal caps could easily be removed and used as a weapon to cause injury. The facility is currently preparing for accreditation by the American Correctional Association (ACA). The facility may experience limitations in their ability to become compliant with the ACA standards without permanent guidance in place to conduct proper oversight and guidance.

#### **Recommended Rating and Justification:**

The Reviewer-In-Charge recommends that the facility receive a rating of "Acceptable." The facility complies with 34-of-38 applicable ICE National Detention Standards. The facility should respond to all findings and initiate a Plan of Action in response to the deficiencies.

Memorandum for John P. Torres El Centro Processing Center Detention Review Summary Report Page 4

## **<u>RIC Assurance Statement:</u>**

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



# •

A.	Type	of	Facility	Reviewed
C. 1. 4	1 1 1 1 1	U.	I acturey	Trenew

ICE Service Processing Center

ICE Contract Detention Facility

ICE Intergovernmental Service Agreement

#### **B.** Current Inspection

Type of Inspection	
Field Office HQ Inspection	
Date[s] of Facility Review	
July 12-14, 2005	

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

Date[s] of Last Facility Review July 27-29, 2004
Previous Rating
Superior Good Acceptable Deficient At-Risk

#### D. Name and Location of Facility

Name
El Centro Processing Center
Address (Street and Name)
1115 North Imperial Avenue
City, State and Zip Code
El Centro, California 92243
County
Imperial
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)
b6. b7C ee, Acting Officer-In-Charge
I clephone # (Include Area Code)
760-336 b6,b7c
Field Office / Sub-Office (List Office with oversight responsibilities)
San Diego Field Office
Distance from Field Office
120 Miles

#### E. ICE Information

Name of Inspec	tor (Last Name, Title and Duty Station)	
b6, b7C	/ D&D Officer / HQ/DRO	
Name of Team	Member / Title / Duty Location	
b6, b7C	/ DO / Denver Field Office	
Name of Team	Member / Title / Duty Location	
b6, b7C	/ SIEA / Phoenix Field Office	
Name of Team	Member / Title / Duty Location	
b6, b7C	/ LCDR / San Antonio Field Office DIHS	

#### F. CDF/IGSA Information Only

Contract Number		Date of Contract or IGSA	
None			
Rasic Rates r	ber Man-Day		
Dusie Mates p	or shad buy		
•	es: (If None, In	idicate N/A)	

#### G. Accreditation Certificates

Lis	t all State or National Accreditation[s] received:
JA	CHO, NCCHC
	Check box if facility has no accreditation[s]

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

The Facility is under C	ourt Order or Class Action Finding
Court Order	Class Action Order
The Facility has Signifi	cant Litigation Pending
☐ Major Litigation	Life/Safety Issues
Check if None.	

#### I. Facility History

Date Built 1975	
Date Last Remodeled Continuous	d or Upgraded
Date New Construct None	ion / Bedspace Added
Future Construction	
Current Bedspace	Future Bedspace (# New Beds only)
500	Number: Date:

#### J. Total Facility Population

Total Facility Intake for previous 12 months	
8, 109	
Total ICE Mandays for Previous 12 months	
8.5	

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

	L-1	L-2	L-3
Adult Male	257	182	10
Adult Female	None	None	None

#### L. Facility Capacity

Rated	Operational	Emergency
544	450	560
None	None	None
	544	544 450

#### M. Average Daily Population

	ICE	USMS	Other
Adult Male	435	None	None
Adult Female	None	None	None

#### N. Facility Staffing Level

Security:	Support:
b2 high	b2 high

#### Significant Incident Summary Worksheet

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

Incidents	Description	Jan – Mar	Apr – Jun	Jul - Sept	Oct - Dec
Assault:	Types (Sexual <sup>2</sup> , Physical. etc.)	1	2	1	3
Offenders on Offenders <sup>1</sup>	With Weapon	0	0	0	0
	Without Weapon	0	0	0	0
Assault:	Types (Sexual Physical, etc.)	0	0	0	0
Detainee on Staff	With Weapon	0	0	0	0
	Without Weapon	0	0	0	0
Number of Forced Moves, incl. Forced Cell moves <sup>3</sup>		0	0	0	0
Disturbances <sup>4</sup>		1	0	0	0
Number of Times Chemical Agents Used		0	0	0	0
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
Restraints applied/used	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	0
Offender / Detaince Medical Referrals as a result of injuries sustained.		0	0	2	1
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	17	3	0	0 .
	# Resolved in favor of Offender/Detainee	2	1	0	0
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	0	A	0	0
	Number	0	1	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	30	11	4	11
	# Psychiatric Cases referred for Outside Care	0	0	0	0

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

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

Form G-324A (Rev. 8/13/04) No Prior Version May Be Used After 10/1/04

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

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.

DHS	/ICE Detention Standards Review Summary Report	
	ceptable 2. Deficient 3. At Risk 4. Repeat Finding 5. Not Applicable	
- framework	Access Standards	1. 2. 3. 4. 5.
1.	Access to Legal Materials	
2.	Group Presentations on Legal Rights	
3.	Visitation	
4.	Telephone Access	
	inee Services	
5.	Admission and Release	
6.	Classification System	
7.	Correspondence and Other Mail	
8.	Detainee Handbook	
9.	Food Service	
10.	Funds and Personal Property	
11.	Detainee Grievance Procedures	
12.	Issuance and Exchange of Clothing, Bedding, and Towels	
13.	Marriage Requests	
14.	Non-Medical Emergency Escorted Trip	
15.	Recreation	
16.	Religious Practices	
17.	Voluntary Work Program	
	th Services	
18.	Hunger Strikes	
19.	Medical Care	
20.	Suicide Prevention and Intervention	
21.	Terminal Illness, Advanced Directives and Death	
-	rity and Control	
22.	Contraband	
23.	Detention Files	
24.	Disciplinary Policy	
25.	Emergency Plans	
26.	Environmental Health and Safety	
27.	Hold Rooms in Detention Facilities	
28.	Key and Lock Control	
29.	Population Counts	
30.	Post Orders	
31.	Security Inspections	
32.	Special Management Units (Administrative Segregation)	
33.	Special Management Units (Disciplinary Segregation)	
34.	Tool Control	
35.	Transportation (Land management)	
36.	Use of Force	
37.	Staff / Detainee Communication (Added August 2003)	
38.	Detainee Transfer (Added September 2004)	

All findings (Deficient and At-Risk) 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 Inspection Report are supported by evidence that is sufficient and reliable. Furthermore, findings of noteworthy accomplishments are supported by sufficient and reliable evidence. Within the scope of the review, the facility is operating in accordance with applicable law and policy, and property and resources are efficiently used and adequately safeguarded, except for the deficiencies noted in the report.

Reviewer-In-Charge: (Print Name)	Signature
66, b7C	b6, b7C
Title & Duty Location	Date
Detention and Deportation Officer, Washington, DC	July 14, 2005

Print Name, Title, & Duty Location
b6, b7C I, SIEA, Phoenix Field Office
Print Name, Title, & Duty Location

#### **Recommended Rating:**

	Superior
	Good
$\times$	Acceptable
	Deficient
	At-Risk

Comments:

## **HEADQUARTERS EXECUTIVE REVIEW**

At-Risk

#### **Review Authority**

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

HQDRO EXECUTIVE REVIEW: (Please Print Name)	Signature
John P. Torres	Andle
The second s	
Title	Date
Acting Director	
	· · · · · · · · · · · · · · · · · · ·
	,
Final Rating: Superior	
Good	
🛛 Acceptable	
Defisiont	
I I DEFICIENT	

Comments: The Review Authority (RA) concurs with the recommended rating of "Acceptable" made by the Reviewer-In-Charge (RIC) as justified in the RIC Memorandum and the G-324A Worksheets.

Form G-324A (Rev. 8/1/01) No Prior Version May Be Used After 12/31/01

Department of Homeland Security

Immigration and Customs Enforcement Office of Detention and Removal

## **Condition of Confinement Review Worksheet**

(This document must be attached to each G-324a Inspection Form) This Form to be used for Inspections of all IGSA Facilities Used over 72 Hours



# **Headquarters Detention Review Worksheet**

Local Jail – IGSA
State Facility – IGSA
ICE Contract Detention Facility
ICE Service Processing Center
Name
El Centro Service Processing Center
Address (Street and Name)
1115 North Imperial Avenue
City, State and Zip Code
El Centro, California 92243
County
Imperial
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)
ьб. b7C Acting Officer-In-Charge
Name and title of Reviewer-In-Charge
b6, b7C D&D Officer, HQ/DRO
Date[s] of Review
July 12-14, 2005
Type of Review
Headquarters Operational Special Assessment Other

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DETAINEE SERVICES STANDARDS	(SECTION I)	
ACCESS TO LEGAL MATERIALS		
FOOD SERVICE		
		•••••••••••••••••••••••••••••••••••••••
		OWELS
NON-MEDICAL ESCORTED TRIPS		
RECREATION		
RELIGIOUS PRACTICES		
ACCESS TO TELEPHONES		
VISITATION		
VOLUNTARY WORK PROGRAM		
HEALTH SERVICES STANDARDS (S	SECTION II)	
HINGER STRIKES		
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SECURITY AND CONTROL STANDA	RDS (SECTIO	N III)40
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For each standard rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. Each facility should examine the entire worksheet to identify areas of improvement including those standards where an overall finding of acceptable was achieved.

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

# Section I

# Detainee Services Standards

Page 3 G-324A Detention Inspection Form Worksheet for IGSAs - Rev: 10/18/04





**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	Y	Ν	NA	Remarks
The facility provides a designated law library for detainee use.	$\boxtimes$			
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.	$\boxtimes$			
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.	$\boxtimes$			
In lieu of/or in addition to the physical law library, ICE detainees have access to the Lexus Nexus electronic law library.				
The Lexus Nexus library is updated and is current.				SEE REMARKS
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.				
There is a designated ICE or facility employee who inspects, updates, and maintain/replace legal material and equipment on a routine basis. The designee properly disposes outdated supplements and replaces damaged or missing material promptly.				
Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.				
Detainees may request material not currently in the law library. Each request is reviewed and where appropriate an acquisition request is initiate and timely pursued. Request for copies of court decisions are accommodated within 3 – 5 business days.				
The facility permits detainees to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.				
Staff ensures that illiterate or non-English-speaking detainees without legal representation receive more than access to English-language law books after indicating their need for help.				
Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.				
Detainees housed in Administrative Segregation and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.				
All denials of access to the law library fully documented.				
Le martine et accesse to the last incluing accession to the	<u>, Ky</u>		البينية الم	

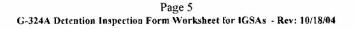
			orary, and provide lega
			tunity to prepare lega
Y	N	NA	Remarks
$\boxtimes$			
MATE	RIALS		

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

There were three computers in the law library used for access to Lexus Nexus. The computers are located behind a wall in a secured room. Inmates have access to the key board and can view the monitor behind the wall through a window. The disks in the computers were checked for revision dates. The reviewer found that the computers contained disks in which the Lexus Nexus information was downloaded to. The disks were labeled as "INSERTS". The law library officer stated that the ADP personnel down load the Lexus Nexus information (two disks) to one disk which eliminates the need of changing floppy disks. The reviewer suggested to the OIC that the ADP personnel may want to add a revision date to the floppy's in which the Lexus Nexus information is downloaded to.

It should be noted that this facility has a complete physical law library in addition to the Lexus Nexus.

b6, b7C	b6, b7C
AUTION & DUBNALUIE I DALE	10414105





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

Components	Y	N	NA	Remarks
In processing includes an orientation of the facility. The orientation includes; Unacceptable activities and behavior, and corresponding sanctions. How to contact ICE. The availability of <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.				Facility uses a good processing/admission check list which is approved by a supervisor once completed.
Medical screenings are performed by a medical staff <u>or</u> persons who have received specialized training for the purpose of conducting an initial health screening.	$\boxtimes$			
When available, accompanying documentation is used to identify and classify each new arrival.	$\boxtimes$			
All new arrivals are searched in accordance with the "Detainee Search" standard. An officer of the same sex as the detainee conducts the search and the search is conducted in an area that affords as much privacy as possible.				
Detainees are stripped searched only when cause has been established and not as routine policy. Non-criminal detainees are never strip-searched but are patted down unless cause or reasonable suspicion has been established.	x			
The "Contraband" standard governs all personal property searches. IGSAs/CDFs use or have a similar contraband standard. Staff prepares a complete inventory of each detainee's possessions. The detainee receives a copy.				
Staff completes Form I-387 or similar form for CDFs and IGSAs for every lost or missing property claim. Facilities forward all I-387 claims to ICE.				
Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.				
The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE Detainees are not charged for these items.				
All releases are coordinated with ICE.	$\square$			
Staff completes paperwork/forms for release as required.	$\square$			
ADMISSIONS AND R	ELEAS	E - Ratii	ng	

Acceptable	Deficient	At-Risk	Repeat Finding	
Remarks: (Record significent	Acts, poservations,	əther sources used, etc.	)	
b6, b7C	6, b7C	5		
Autor polyname / Date /19	<b>7</b>			

Page 6 G-324A Detention Inspection Form Worksheet for IGSAs - Rev: 10/18/04





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

Components		N	NA	Remarks
The facility has a system for classifying detainees. In CDFs and IGSAs, an Objective Classification System or similar is used.				
<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>				
The intake/processing officer reviews work-folders, A- files, etc., to identify and classify each new arrival.	$\boxtimes$			
Staff use only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/ unconfirmed reports may be filed but are not used to score detainees classifications.				
Housing assignments are based on classification- level.	$\boxtimes$			Level 1 and 2 only.
A detainee's classification-level does not affect his/her recreation opportunities. Detainees recreate with persons of similar classification designations.				
Detainee work assignments are based upon classification designations.	$\boxtimes$			
The classification process includes reassessment/reclassification. For IGSA's detainees may request reassessment between 45 and 60 days after arrival. For CDF's detainees are re-assessed approximately every 60 days.				SEE REMARKS
The classification system includes standard procedures for processing new arrivals' appeals. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.				
Classification appeals are resolved within five business days and detainees are notified of the outcome within 10 business days.				
Classification designations may be appealed to a higher authority such as the Warden or equivalent.				
The Detainee Handbook or equivalent for IGSAs explains the classification levels, with the conditions and restrictions applicable to each.				

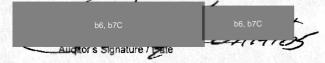
		CLAS	SSIFICATION SYSTE		
Acceptable	🛛 Deficient		At-Risk	Repeat Finding	

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

During the review this reviewer pulled 25 files at random from the level 2 drawers. Of the 20 files 5 files were found to be lacking reclassification as required by the standards. The following is a list of the A-Files found not to be in compliance:

	Booked in on 05/09/05	
b6. b7C	Booked in on 05/10/05 Booked in on 05/02/05	
50, 570	Booked in on 12/17/03	Last reclassification on 02/05/04
	Booked in on 12/08/04	Last reclassification on 02/17/05

When questioned as to the non-compliance, officers stated that the classification officer was on annual leave and that no ether officer was assigned the duties during the classification officer's absence.









#### CORRESPONDENCE AND OTHER MAIL

**Policy:** All facilities will ensure that detainees send and receive correspondence in a timely manner, subject to limitations required for the safety, security, and orderly operation of the facility. Other mail will be permitted, subject to the same limitations. Each facility will widely distribute its guidelines concerning correspondence and other mail.

Components	Yes	No. :	NA	Remarks
The rules for correspondence and other mail are posted in each housing or common area or provided to each detainee via a detainee handbook.	$\boxtimes$			
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 within 24 hours or 1 business day after it is received and inspected.	$\boxtimes$			
Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	$\boxtimes$			
IN CDFs: Staff maintain a logbook-recording acceptance of priority, priority overnight, and certified mail delivered to the facility for a detainee.				
Staff do not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized in writing by the Warden or equivalent for prevailing security reasons.				
Staff does not ever read incoming general correspondence without the Warden'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 are prohibited from reading or copying incoming special correspondence.	$\boxtimes$			
Staff are only authorized to inspect outgoing correspondence or other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity.				
Correspondence to a politician or to the media is processed as special correspondence and is not read or copied.				
The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.				
The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.				
Staff maintains a written record of every item removed from detainee mail.				SEE REMARKS
The Warden or equivalent monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.				

<b>Policy:</b> All facilities will ensure that detainees send and reco limitations required for the safety, security, and orderly ope subject to the same limitations. Each facility will widely distri- other mail.	eration of	of the fa	cility. C	Other mail will be permitted
The procedure for safeguarding cash removed from a detainee protects the detainee from loss of funds and theft. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.				
Original identity documents (e.g., passports, birth certificates) are immediately removed and forwarded to ICE staff for placement in A-files.	$\boxtimes$			
Staff provides the detainee a copy of his/her identity document(s) upon request.	$\boxtimes$			
Staff disposes of prohibited items found in detainee mail in accordance with the "Control and Disposition of Contraband" Standard or the similar prevailing policy in IGSAs and CDFs.				
Every indigent detainee has the opportunity to mail, at government expense: Reasonable correspondence about a legal matter: Three one ounce letters per week: Packages deemed necessary by ICE.				
The facility has a system for detainees to purchase stamps and for mailing all special correspondence and a minimum of 5 pieces of general correspondence per week.				
The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	$\boxtimes$			
CORRESPONDENCE AND C	THER	MAIL -	Rating	

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

Staff does not maintain a log book for items removed from detainee mail. However, legal contraband is placed in the detainess's property and is recorded on the detainee' property card. Illegal contraband is seized and logged and secured for future disposition. It is this reviewer's opinion that the intent of the standard has been met.

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#### DETAINEE HANDBOOK

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

Components	Y	N	NA	Remarks
The detainee handbook is written in English and translated into Spanish or into the next most-prevalent Language(s).				
The handbook supplements the facility orientation video where one is provided.	$\boxtimes$			
All staff members receive a handbook and training regarding the handbook contents.	$\boxtimes$			
The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.				
There an annual review of the handbook by a designated committee or staff member.	$\boxtimes$			
<ul> <li>The detainee handbook address the following issues:</li> <li>Personal items permitted to be retained by the detainee.</li> <li>Initial issue of clothes, bedding and personal hygiene items.</li> </ul>				
The detainee handbook states in clear language basic detainee responsibilities.				
The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.				·
The handbook states when a medical examination will be conducted.	$\boxtimes$			
The handbook describes the facility, housing units, dayrooms, In-dorm activities and special management units.				
The handbook describes; Official count times and count procedures Meal times, feeding procedures, procedures for medical or religious diets, smoking policy, Clothing exchange schedules and if authorized, clothes washing and drying procedures and expected personal hygiene practices.				
The handbook describe times and procedures for obtaining disposable razors and allows that detainees attending court will be afforded the opportunity to shave first.				
The handbook describes barber hours and hair cutting restrictions.	$\boxtimes$			
The handbook describes; the telephone policy, debit card procedures, direct and frees calls; locations of telephones; policy when telephone demand is high; and policy and procedures for emergency phone calls.				
The handbook addresses religious programming.				
The handbook states times and procedures for commissary or vending machine usage. (where available)				
The handbook describes the detainee voluntary work program.				
The handbook describes the library location and hours of operation and law library procedures and schedules.				

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#### **DETAINEE HANDBOOK**

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

Components	Y.	N	NA	Remarks
The handbook describes; attorney and regular visitation hours, policies, and procedures.	$\boxtimes$			
The handbook describes the facility contraband policy.	$\boxtimes$			
The handbook describes the facility visiting hours and	$\boxtimes$			
schedule and visiting rules and regulations.				
The handbook describes the correspondence policy and procedures.	$\boxtimes$			
The handbook describes the detainee disciplinary policy				
and procedures:				
Including:	$\boxtimes$			
<ul> <li>Prohibited acts and severity scale sanctions.</li> </ul>				
<ul> <li>Time limits in the Disciplinary Process.</li> </ul>				
<ul> <li>Summary of Disciplinary Process.</li> </ul>				
The grievance section of the handbook explains all				
steps in the grievance process – Including:				
<ul> <li>Informal (if used) and formal grievance</li> </ul>				
procedures;				
<ul> <li>The appeals process;</li> </ul>				
<ul> <li>In CDF facilities: procedures for filing an</li> </ul>				
appeal of a grievance with ICE.				
<ul> <li>Staff/detainee availability to help during the</li> </ul>				
grievance process.				
<ul> <li>Guarantee against staff retaliation for</li> </ul>	1			
filing/pursuing a grievance.				
<ul> <li>How to file a complaint about officer</li> </ul>				
misconduct with the Department of Homeland				
Security.				
The detainee handbook describes the medical sick call	$\boxtimes$			
procedures for general population and segregation.			ļ	
The handbook describes the facility recreation policy				
including:	$\boxtimes$			
Outdoor recreation hours.				
Indoor recreation hours.		ļ		
The handbook describes the detainee dress code for	$\boxtimes$			
daily living; and work assignments.	+	<u> </u>	+	
The handbook specifies the rights and responsibilities of all detainees.				
			I	1

#### DETAINEE HANDBOOK

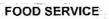
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Remarks: (Record significant facts, observations, other sources used, etc.)

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FOOD SER	VICE		اد د در دیو ممکنه	
<b>Policy:</b> Every facility will provide detainees in its care accordance with the highest sanitary standards.	with nut	ritious a	and app	etizing meals, prepared in
Components	Y	N	NA	Remarks
The food service program is under the direct supervision of a <u>professionally trained</u> and certified service administrator. Responsibilities of cooks and cook foremen are in writing. The Food Service Administrator (FSA) determines the responsibilities of the Food Service Staff.				
The Cook Foreman is on duty on days when the FSA is off duty and vice versa.	$\boxtimes$			
The FSA provides food service employees with training that specifically addresses detainee-related issues. In ICE Facilities this includes a review of the	$\boxtimes$			и.
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.	$\boxtimes$			
All knives not in a secure cutting room are physically secured to the workstation and staff directly supervise detainees using knives at these workstations. Staff monitor the condition of knives and dining utensils				
Special procedures (when necessary) govern the handling of food items that pose a security threat.	$\boxtimes$			
Operating procedures include daily searches (shakedowns) of detainee work areas.	$\boxtimes$			
The FSA monitor staffs implementation of the facility's population counts procedures. Staff are trained in counts procedures.			$\boxtimes$	Conducted by AKAL.
The detainees assigned to the food service department look neat and clean. Their clothing and grooming comply with the "Food Service" standard.				
The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to- date.	$\boxtimes$			
The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.				Training records seen.
<ul> <li>During orientation and training session(s), the CS explains and demonstrates:</li> <li>Safe work practices and methods.</li> <li>Safety features of individual products/ pieces of equipment.</li> <li>Training covers the safe handling of hazardous material[s] the detainee are likely to encounter in their work.</li> </ul>				Training records seen.
The Cook Foreman documents all training in individual detainee detention files.				Observed by reviewer.
Detainees at CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSAs are subject to local and State rules and regulations regarding detainee pay.				Facility is an SPC.



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

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FOOD SERVICE

<b>Policy:</b> Every facility will provide detainees in its care accordance with the highest sanitary standards.	with nut	tritious a	and app	etizing meals, prepared in
Components	Y	N.	NA	Remarks
<ul> <li>The common-fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year.</li> <li>Muslims fasting during Ramadan receive their meals after sundown.</li> <li>Jews who observe Passover but do not participate in the Common-Fare Program receive the same Kosher-for- Passover meals as those who do participate.</li> <li>Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent.</li> </ul>				
The food service program addresses medical diets.	$\boxtimes$			
satellite-feeding programs follow guidelines for proper sanitation.			$\boxtimes$	No satellite feeding.
Hot and cold foods are maintained at the prescribed, "safe" temperature(s) as served.	$\boxtimes$			
All meals provided in nutritionally adequate portions.	$\boxtimes$			
Food is not used to punish or reward detainees based upon behavior.	$\boxtimes$			
<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>				
Everyone working in the food service department complies with food safety and sanitation requirements.				
Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment. • who conducts the inspections?				Conducted by Cook Supervisor. Observed inspection memos completed by Cook Supervisor.
Equipment is inspected for compliance with health and safety codes and regulations. • When was the most recent inspection? • Which agency conducted the inspection?				Health & Safety inspection report. 08/31/04, by b6. b7C b6. b7C CSM
Reports of discrepancies are forwarded to the Warden or designated department head and corrective action is scheduled and completed.	$\boxtimes$			
Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal.				SEE REMARKS.
Staff documents the results of every refrigerator/ freezer temperature check.	$\boxtimes$			
The cleaning schedule for each food service area is conspicuously posted.				
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.				
Storage areas are locked when not in use.	$\boxtimes$			

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

The dishwashing room at the facility is currently under construction due to plumbing and drainage problems. The facility uses Styrofoam plates, paper cups and plastic utensils. Cooking equipment and utensils are washed using the three sink method as described in the Standard.

The facility currently has a staff of 10 employees' in the kitchen. Due to budget constraints, yearly training has not been available from outside sources. In May of 2005, the FSA implemented a video training system which exceeds the standard. Staff is required to complete the video training system yearly. Volunteer workers are also trained with the video system.

The training records of the kitchen staff were checked of which 6 have completed the training and 4 are in the process.

The reviewer observed recording device's used in the refrigeration units which continuously record temperature levels and their duration which is very useful during power outages.

The kitchen staff is to be commended on their successful operation.

omilas Additor's Signature Date





#### FUNDS AND PERSONAL PROPERTY

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

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

Components	Yes	No	NA	Remarks
Detainee funds and valuables are properly separated and stored away. Detainee funds and valuables are accessible to designated supervisor(s) only.				
Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.				
Staff itemizes the baggage and personal property of arriving detainees, including funds and valuables). For IGSAs and CDFs, using a personal property inventory form that meets the ICE standard?				
Staff forwards an arriving detainee's medicine to the medical staff.	$\boxtimes$			
Staff searches arriving detainees and their personal property for contraband.	$\boxtimes$			
There is a written policy for returning forgotten property to detainees and staff follows procedures?				
Property discrepancies are immediately reported to the CDEO or Chief of Security.				
Staff follows written procedures when returning property to detainees.				
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>	$\boxtimes$			
<ul> <li>The facility disposes of abandoned property in accordance with written procedures.</li> <li>If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE.</li> </ul>	×			
*				

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	FUNDS AND P	ERSONAL PROPERTY	
Acceptable	Deficient	At-Risk	🗌 Repeat Findin



**RECOMMENDATION:** Currently the method of conducting the weekly audit of the detainee funds is to count the funds and match the amount to the total of the G-589s. Example, there are 146 G-589s totaling \$12,000.00 and the money is counted to ensure there is \$12,000.00 in cash. The problem is that there is no record of exactly how many G-589s are suppose to be present. If one was missing, it would not be known until the detainee was getting cash off his books. There would be better accountability to have a logbook recording the G-589s in number order and then verifying the G-589 numbers with the numbers in a logbook of the detainees in custody at the facility. On the audit, there is no need to verify the amount of money; the shift supervisors count the money every shift change. The number of G-589s on hand need to be verified with the number of G-589s for the detainees still in custody.



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

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

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

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	GROUP LEGA	L RIGHTS PRESENTA	TIONS – Rating	
Acceptable	Deficient	At-Risk	Repeat Finding	

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

Per the Recreation Specialist, no Group Presentations were conducted in the past 12 months. The Recreation Specialist is responsibly for the law library and group presentations.

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#### DETAINEE GRIEVANCE PROCEDURES

**Policy:** Every facility will develop and implement standard operating procedures (SOPs) for addressing detainee grievances in timely fashion. Each step in the process will occur within the prescribed time frame. Among other things, a grievance will be processed, investigated, and decided (subject to appeal) in accordance with the SOPs; a grievance committee will convene as provided in the SOPs. Standard procedure will include providing the detainee with a written response to any formal grievance, which will include the basis for the decision. The facility will also establish standard procedures for handling emergency grievances. All grievances will receive supervisory review. Reprisal against the filer of a grievance will not be tolerated.

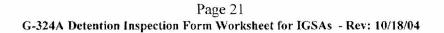
Components	Y	N	NA	Remarks
<ul> <li>Written procedures provide for the informal resolution of oral grievances (Not mandatory).</li> <li>If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff.</li> </ul>				
<ul> <li>Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures.</li> <li>Detainees may seek help from other detainees or facility staff when preparing a grievance.</li> <li>Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary.</li> </ul>				
Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.				
There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodges a complaint. • If yes, explain.				
<ul> <li>Procedures include maintaining a Detainee Grievance Log.</li> <li>If not, an alternative acceptable record keeping system is maintained.</li> <li>"Nuisance complains" are identified in the records.</li> <li>For quality control purposes, staff documents nuisance complaints received but not filed.</li> </ul>				
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.				

#### **DETAINEE GRIEVANCE PROCEDURES**

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Acceptable	Deficient	At-Risk	Repeat Finding
Acceptable	Dencient	ALINISA	increat rinuing

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

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

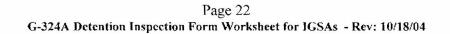
**Policy:** ICE requires that all facilities housing ICE detainees provide clean clothing, bedding, linens and towels to every ICE detainee upon arrival. Further, facilities shall provide ICE detainees with regular exchanges of clothing, linens, and towels for as long as they remain in detention.

Components	Yes	No	NA	Remarks
<ul> <li>The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens and towels.</li> <li>The supply of these items exceeds the minimum required for the number of detainees.</li> </ul>				
<ul> <li>All new detainees are issued clean, temperature- appropriate, presentable clothing during in-processing.</li> <li>Detainees receive <ul> <li>One uniform shirt and one pair of uniform pants or one jumpsuit.</li> <li>One pair of socks.</li> <li>One pair of underwear (Daily change).</li> <li>One pair of facility-issued footwear.</li> </ul> </li> </ul>				
Additional clothing is available for changing weather conditions or is seasonally appropriate.	$\boxtimes$			
<ul> <li>New detainees are issued clean bedding, linens and towel. They receive at a minimum:</li> <li>One mattress</li> <li>One blanket</li> <li>Two sheets</li> <li>One pillowcase</li> <li>One towel</li> <li>Additional blankets are issued based on local weather conditions.</li> </ul>				
Detainees assigned to special work areas are clothed in accordance with the requirements of the job.				
<ul> <li>Detainees are provided clean clothing, linen and towels.</li> <li>Socks and undergarments - exchanged daily.</li> <li>Outer garments - twice weekly.</li> <li>Sheets - weekly.</li> <li>Towels - weekly.</li> <li>Pillowcases - weekly.</li> </ul>				
Food service detainee volunteer workers permitted to exchange outer garments daily.				
Volunteer detainee workers are permitted to exchanges of outer garments more frequently.				

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

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

b6, b7C	b6, b7C
AUDITOPS	Signature



MARRIAGE REG	UESTS	5		
Policy: All detainee marriage requests will receive case-b	y-case	conside	ration fr	om ICE management.
Components	Y	N	NA	Remarks
The Field Office considers detainee marriage requests on a case-by-case basis.	$\boxtimes$			
The Field Office Director reviews every marriage request rejected by a Warden/OIC or IGSA. Rejections are documented.	$\boxtimes$			
It is standard practice to require a written request for permission to marry.	$\boxtimes$			
The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	$\boxtimes$			
The Warden/OIC provides a written copy of his/her decision to the detainee and his/her legal representative.				
When permission is denied, the Warden/OIC states the basis for his/her decision.	$\boxtimes$			
The Warden/OIC provides the detainee with a place and time to make wedding arrangements.	$\boxtimes$			
MARRIAGE REG	QUEST	S		
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Remarks: (Record significant facts, observations, other sources used, etc.)

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#### NON-MEDICAL EMERGENCY ESCORTED TRIPS

**Policy:** The Immigration and Customs Enforcement (ICE) may provide detainees with staff-escorted trips into the community for the purpose of visiting critically ill members of the detainee's immediate family, or for attending funerals.

# Standard NA: Check this box if all ICE Non-Medical Emergency Escorted Trips are handled only by the ICE Field Office or Sub-Office in control of the detainee case.

Components	Yes	No	NA	Remarks
The Warden/OIC considers and approves, on a case- by-case basis, trips to immediate family member's: • Funeral • Deathbed				
The facility recognizes mother, father, brother, sister, spouse, child, stepparent, and foster parent as "immediate family".				
The CDF/IGSA facility notifies ICE of all detainee requests for non-medical escorts.				
The Field Office Director is the approving official for non-medical escorted trips.				
The detainee's Deportation Officer reviews the file before forwarding a detainee's request, with recommendation, to the approving official. Each recommendation addresses the individual's suitability for travel, e.g., the kind of supervision required.				
Detainees who require overnight housing are placed in approved IGSA facilities.				
<ul> <li>Each escort includes at least two officers.</li> <li>The detainee remains under constant, direct visual supervision of escorting staff.</li> </ul>				
Escorting officers report unexpected situations to the originating facility as a matter of procedure and the ranking supervisor on duty has the authority to issue instructions for completion of the trip.				
Escorting officers have the discretion to: a. Increase or decrease minimum restraints in accordance with written instruction, procedures and classification level of the detainee.				
Escort officers do not accept gifts/gratuities from a detainee, detainee's relative or friend for any reason.				
<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.				

	NON M	EDICAL EMERGENCY	ESCORT
Assentable	Deficient	At-Risk	Repeat Finding
ceptable	benelent		nopour i maning
Acceptable marks: (Res	ord significant facts, obser		





RECREATI	ON							
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	Y	N	NA	Remarks				
Does the facility provide:								
An indoor recreation program?	$\boxtimes$							
An outdoor recreation program?								
A recreational specialist (for facilities with more than 350								
detainees) tailors the program activities and offerings to	$\boxtimes$							
the detainee population.								
Regular maintenance keeps recreational facilities and				······································				
equipment in good condition.	$\boxtimes$							
The recreational specialist or trained equivalent								
supervises detainee recreation workers.	$\square$							
The recreational specialist or trainee equivalent				······································				
oversees recreation programs for Special Management	$\boxtimes$							
Unit and special-needs detainees.								
Dayrooms offer sedentary activities, e.g., board games,	5-7							
cards, television.								
Outside activities are restricted to limited-contact sports.	$\boxtimes$							
Each detainee has the opportunity to participate in daily								
recreation.	$\boxtimes$							
Detainees have access to recreation activities outside								
the housing units for at least one hour daily, 5 days a	$\boxtimes$							
week.								
Staff checks all items for damage and condition when	57							
equipment is returned.	$\boxtimes$							
Staff conducts searches of recreation areas before and	57							
after use.	$\boxtimes$							
All recreation areas under constant staff supervision.			$\square$					
Supervising staff is equipped with radios.								
The facility provides detainees in the SMU at least one								
hour of outdoor recreation time daily, five times per	$\boxtimes$							
week.			-					
Detainees in disciplinary/administrative segregation	1							
receive a written explanation when a panel revokes	$\boxtimes$							
his/her recreation privileges.								
Special programs or religious activities are available to	57							
detainees.	$\boxtimes$							
Volunteers are required to sign a waiver of liability								
before entering a secure portion of the facility where	$\square$							
detainees are present.								
Visitors, relatives or friends are not allowed to serve as	57			-				
volunteers.								
If outdoor recreation is offered check this box. No	further	inform	ation i	s required when outdoor				
recreation is offered.								
If the facility has no outside recreation, are detainees	1		1					
considered for transfer after six months?								
<ul> <li>If yes, written procedures ensure timely review</li> </ul>								
of all eligible detainees.								
Case officers make written transfer recommendations								
about every six-month detainee to the OIC.								
The OIC documents all detainee-transfer decisions,								
whether yes or no.								
The detainee's written decision for or against an offered			[]	10-10-10-10-10-10-10-10-10-10-10-10-10-1				
transfer documented in his/her A-file								

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

🛛 Acceptable	Deficient	At-Risk	Repeat Finding	

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#### **RELIGIOUS PRACTICES**

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

Components	Y	N	NA	Remarks
Detainees are allowed to engage in religious services.	$\boxtimes$			
Space is available for detainees to conduct religious services.	$\boxtimes$			
<ul> <li>The facility allows detainees to observe the major "holy days" of their religious faith.</li> <li>List any exceptions.</li> </ul>				
<ul> <li>The facility accommodates recognized holy-day observances by:</li> <li>Providing special meals, consistent with dietary restrictions.</li> <li>Honoring fasting requirements.</li> <li>Facilitating religious services.</li> <li>Allowing activity restrictions.</li> </ul>				
Each detainee is allowed religious items in his/her immediate possession.	$\boxtimes$			
Volunteer's credentials are checked and verified before allowing participation in detainee programs.	$\boxtimes$			
Members of faiths not represented by clergy conduct may request to present their own services within security allowances.				
Detainees in the Special Management Unit to participate in religious practices unless otherwise documented for the safety and security of the facility.				

#### **RELIGIOUS PRACTICES**

Acceptable

Deficient

At-Risk

Repeat Finding

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

241405 Auditor's Signature / pate





### DETAINEE TELEPHONE ACCESS

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

telephones.			1.1	
Components	Y	N	NA	Remarks
Detainees are allowed access to telephones during established facility waking hours.	$\boxtimes$			
Upon admittance, detainees are made aware of the facility's telephone access policy.	$\boxtimes$			
Access rules are posted in housing units.	$\boxtimes$			
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 by facility staff to ensure that they are in good working order.	$\boxtimes$			
The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.				
The facility administration monitors repair progress and take appropriate measures to ensure that the required repairs are begun and completed timely.				
Detainees are afforded a <i>reasonable degree</i> of <i>privacy</i> for legal phone calls.				
A procedure exists to assist a detainee who is having trouble placing a confidential call.	$\boxtimes$			
The facility provides the detainees with the ability to make non-collect (special access) calls.	$\boxtimes$			
Special Access calls are at no charge to the detainees.	$\square$			
In facilities unable to fully meet this requirement initially because of limitations of its telephone service, the ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.				
No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".				
Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.				
Any telephone restrictions are documented.		$\boxtimes$		
The facility has a system for taking and delivering emergency detainee telephone messages.				
Emergency phone call messages are immediately given to detainees.				
Detainees are allowed to return emergency phone calls as soon as possible.				
Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.				
Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.				
Detainees in disciplinary segregation are allowed phone calls for family emergencies.				

DETAINEE TELEPHONE ACCESS							
Policy: All facilities housing ICE detainees will permit detainees' reasonable and equitable access to telephones.							
Components	Y	Ne	NA		Remar	ks	
Detainees in administrative segregation and protective custody afforded the same telephoning privileges as those in general population.							
When detainee phone calls are monitored, notification is posted by detainee telephones that phone calls made by the detainees may be monitored. Special Access calls are not monitored.				Not	monitored.		
DETAINEE TELEPHONE ACCESS							
Acceptable Deficient At-Risk Repeat Finding							

INS Detention Standard, dated 06/03/00, refers to reasons which may cause telephone use restriction. The Standard also states the OIC may suspend telephone privileges during an emergency. The Standard contains to component requiring the documentation of telephone restrictions.

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		06, b/C

VISITATIO	DN			· · · · · · · · · · · · · · · · · · ·
Policy: ICE shall permit detainees to visit with family, friend the news media.	ds, lega	l represe	entatives	, special interest groups and
Components	Y	. N	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.	$\boxtimes$			
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.	$\boxtimes$			
A visitor dress code is available to the public.	$\boxtimes$			
Visitors are searched and identified according to standard requirements.				
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.				
Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	$\boxtimes$			
There are written procedures governing detainee searches.				
When strip searches are required after every contact visit with a legal representative, the facility provides an option for non-contact visits with legal representatives.				No contact visits.
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.				

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VISITAT	ON				Aug Charles
<b>Policy:</b> ICE shall permit detainees to visit with family, frier he news media.	nds, lega	l represe	entatives	, special inter	est groups and
The decision to permit or deny a tour is not delegated below the level of Field Office Director.					
Provisions for NGO visitation as stated in the Detention Standards are complied with.					
aw enforcement officials, requesting to visit with a detainee, are referred to the ICE Field Office for approval.					
Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the OIC or ICE Field Office.					
Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.					

🛛 Acceptable	Deficient	🗌 At-Risk	Repeat Finding



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**Policy:** In every facility offering a voluntary work program, ICE detainees will have the opportunity to work and earn money by participating. While not legally required, ICE affords detainee workers basic Occupational Safety and Health Administration (OSHA) protections.

## Check here if ICE detainees are not authorized to work at the IGSA facility. Mark NA on Form G-324A, page 3 and move to next section.

Does the facility have a voluntary work program?       Image: Constraint of the second s	Components	Y	N	NA	Remarks
Do ICE detainees participate?  Detainee housekeeping meets neatness and cleanliness standards.  Detainees have the opportunity to participate in special details, however, are never allowed to work outside the	Does the facility have a voluntary work program?	M			
standards.   Image: Constraint of the comportunity to participate in special details, however, are never allowed to work outside the Image: Constraint of the constraint			ليا		
Detainees have the opportunity to participate in special details, however, are never allowed to work outside the		$\boxtimes$			
details, however, are never allowed to work outside the					
	details, however, are never allowed to work outside the	$\boxtimes$			
	secure perimeter.				
Written procedures govern selection of detainees for the Voluntary Work Program.					
The same procedures apply for replacement		$\boxtimes$			
workers as for "new" workers.					
Staff follows written procedures.	<ul> <li>Staff follows written procedures.</li> </ul>				
Where possible, physically and mentally challenged					
detainees participate in the program.					
The facility complies with work-hour requirements for					
detainees, not exceeding:		$\boxtimes$			
Eight hours a day.					
Forty hours a week.					· · · · · · · · · · · · · · · · · · ·
Detainee volunteers generally work according to fixed		$\boxtimes$			
If a detainee is removed from a work detail, staff places				<u> </u>	
the written justification for the action in the detainee's					
detention file.					
Staff, in accordance with written procedure, ensures that			1		
detainee volunteers understand their responsibilities as		$\boxtimes$			
workers before they join the work program.					
The voluntary work program meets:			1		
OSHA standards		X			
NEPA standards					
ACA standards			·	+	
Medical staff screens and formally certifies detainee food			[		
service volunteers.		$\boxtimes$			
Before the assignment begins					
As a matter of written procedure  Detainees receive safety equipment/ training sufficient for		<u> </u>		+	
the assignment		$\boxtimes$			
Proper procedure is followed when an ICE detained is					
injured on the job.					

	VOLUNTARY WORK PROGRAM	VOLUNTAF	
Acceptable 🔲 Deficient 🗌 At-RisK 🔄 Repeat Findin	ient At-Risk Repeat Find	Deficient	Acceptable

Auditor's Signature / Date

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# Section II

## Health Services Standards

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#### 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	Y	N.	NA	Remarks
<ul> <li>The common-fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year.</li> <li>Muslims fasting during Ramadan receive their meals after sundown.</li> <li>Jews who observe Passover but do not participate in the Common-Fare Program receive the same Kosher-for- Passover meals as those who do participate.</li> <li>Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent.</li> </ul>				
The food service program addresses medical diets.	$\boxtimes$			
satellite-feeding programs follow guidelines for proper sanitation.			$\boxtimes$	No satellite feeding.
Hot and cold foods are maintained at the prescribed, "safe" temperature(s) as served.	$\boxtimes$			
All meals provided in nutritionally adequate portions.	$\boxtimes$			
Food is not used to punish or reward detainees based upon behavior.	$\boxtimes$			
<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>				
Everyone working in the food service department complies with food safety and sanitation requirements.				
<ul> <li>Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment.</li> <li>who conducts the inspections?</li> </ul>				Conducted by Cook Supervisor. Observed inspection memos completed by Cook Supervisor.
<ul> <li>Equipment is inspected for compliance with health and safety codes and regulations.</li> <li>When was the most recent inspection?</li> <li>Which agency conducted the inspection?</li> </ul>				Health & Safety inspection report, 08/31/04, by b6, b7C b6, b7C, CSM
Reports of discrepancies are forwarded to the Warden or designated department head and corrective action is scheduled and completed.				
Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal.		$\boxtimes$		SEE REMARKS.
Staff documents the results of every refrigerator/ freezer temperature check.				
The cleaning schedule for each food service area is conspicuously posted.				
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.				
Storage areas are locked when not in use.	$\boxtimes$			

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	FOOD SERVICE	
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The dishwashing room at the facility is currently under construction due to plumbing and drainage problems. The facility uses Styrofoam plates, paper cups and plastic utensils. Cooking equipment and utensils are washed using the three sink method as described in the Standard.

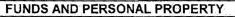
The facility currently has a staff of 10 employees' in the kitchen. Due to budget constraints, yearly training has not been available from outside sources. In May of 2005, the FSA implemented a video training system which exceeds the standard. Staff is required to complete the video training system yearly. Volunteer workers are also trained with the video system.

The training records of the kitchen staff were checked of which 6 have completed the training and 4 are in the process.

The reviewer observed recording device's used in the refrigeration units which continuously record temperature levels and their duration which is very useful during power outages.

The kitchen staff is to be commended on their successful operation.

enilles SUBLICES SIGNATOR

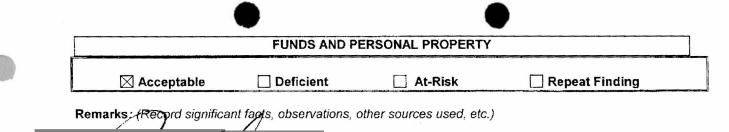


**Policy:** All facilities will implement procedures to control and safeguard detainees' personal property. Procedures will provide for the secure storage of funds, valuables, baggage and other personal property; the documentation and receipting of surrendered property; and the initial and regularly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

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

Components	Yes	No	NA	Remarks
Detainee funds and valuables are properly separated and stored away. Detainee funds and valuables are	$\boxtimes$			
accessible to designated supervisor(s) only.				
Detainees' large valuables are secured in a location			_	
accessible to designated supervisor(s) or processing	$\boxtimes$			
staff only.				
Staff itemizes the baggage and personal property of arriving detainees, including funds and valuables). For				
IGSAs and CDFs, using a personal property inventory	$\boxtimes$			
form that meets the ICE standard?				
Staff forwards an arriving detainee's medicine to the				
medical staff.	$\square$			
Staff searches arriving detainees and their personal	$\boxtimes$			
property for contraband.		L		
There is a written policy for returning forgotten property	$\boxtimes$			
to detainees and staff follows procedures? Property discrepancies are immediately reported to the				
CDEO or Chief of Security.	$\square$			
Staff follows written procedures when returning property	$\boxtimes$			
to detainees. CDF/IGSA facility procedures for handling detainee				
property claims are similar with the ICE standard.	$\boxtimes$			
The facility attempts to notify an out-processed detainee				
that he/she left property in the facility.				
<ul> <li>By sending written notice to the detainee's last</li> </ul>				
known address;	$\boxtimes$			
Via certified mail;				
<ul> <li>The notice state that the detainee has 30 days</li> </ul>				
in which to claim the property, after which it will be considered abandoned.				
The facility disposes of abandoned property in	+			
accordance with written procedures.				2
If a CDF/IGSA facility, written procedure	$\boxtimes$			
requires the prompt forwarding of abandoned				
property to ICE.				
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**RECOMMENDATION:** Currently the method of conducting the weekly audit of the detainee funds is to count the funds and match the amount to the total of the G-589s. Example, there are 146 G-589s totaling \$12,000.00 and the money is counted to ensure there is \$12,000.00 in cash. The problem is that there is no record of exactly how many G-589s are suppose to be present. If one was missing, it would not be known until the detainee was getting cash off his books. There would be better accountability to have a logbook recording the G-589s in number order and then verifying the G-589 numbers with the numbers in a logbook of the detainees in custody at the facility. On the audit, there is no need to verify the amount of money; the shift supervisors count the money every shift change. The number of G-589s on hand need to be verified with the number of G-589s for the detainees still in custody.



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

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

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

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	•		•	
	GROUP LEGA	L RIGHTS PRESENTA	TIONS – Rating	
Acceptable	Deficient	At-Risk	Repeat Finding	

Per the Recreation Specialist, no Group Presentations were conducted in the past 12 months. The Recreation Specialist is responsibly for the law library and group presentations.

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b6, b7C	 b6, b7C
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#### DETAINEE GRIEVANCE PROCEDURES

**Policy:** Every facility will develop and implement standard operating procedures (SOPs) for addressing detainee grievances in timely fashion. Each step in the process will occur within the prescribed time frame. Among other things, a grievance will be processed, investigated, and decided (subject to appeal) in accordance with the SOPs; a grievance committee will convene as provided in the SOPs. Standard procedure will include providing the detainee with a written response to any formal grievance, which will include the basis for the decision. The facility will also establish standard procedures for handling emergency grievances. All grievances will receive supervisory review. Reprisal against the filer of a grievance will not be tolerated.

Components	Y	N	NA	Remarks
<ul> <li>Written procedures provide for the informal resolution of oral grievances (Not mandatory).</li> <li>If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff.</li> </ul>				
<ul> <li>Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures.</li> <li>Detainees may seek help from other detainees or facility staff when preparing a grievance.</li> <li>Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary.</li> </ul>				
Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.				
There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodges a complaint. If yes, explain.		$\boxtimes$		
<ul> <li>Procedures include maintaining a Detainee Grievance Log.</li> <li>If not, an alternative acceptable record keeping system is maintained.</li> <li>"Nuisance complains" are identified in the records.</li> <li>For quality control purposes, staff documents nuisance complaints received but not filed.</li> </ul>				
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.				

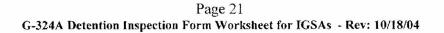
#### **DETAINEE GRIEVANCE PROCEDURES**

\_\_\_\_\_

Repeat Finding Acceptable Deficient At-Risk

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

b6, b7C	b6, b7C
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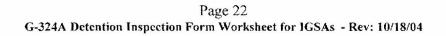


**Policy:** ICE requires that all facilities housing ICE detainees provide clean clothing, bedding, linens and towels to every ICE detainee upon arrival. Further, facilities shall provide ICE detainees with regular exchanges of clothing, linens, and towels for as long as they remain in detention.

Components	Yes	No	NA	Remarks
<ul> <li>The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens and towels.</li> <li>The supply of these items exceeds the minimum required for the number of detainees.</li> </ul>				
<ul> <li>All new detainees are issued clean, temperature- appropriate, presentable clothing during in-processing.</li> <li>Detainees receive <ul> <li>One uniform shirt and one pair of uniform pants or one jumpsuit.</li> <li>One pair of socks.</li> <li>One pair of underwear (Daily change).</li> <li>One pair of facility-issued footwear.</li> </ul> </li> </ul>				
Additional clothing is available for changing weather conditions or is seasonally appropriate.	$\boxtimes$			
<ul> <li>New detainees are issued clean bedding, linens and towel. They receive at a minimum:</li> <li>One mattress</li> <li>One blanket</li> <li>Two sheets</li> <li>One pillowcase</li> <li>One towel</li> <li>Additional blankets are issued based on local weather conditions.</li> </ul>				*
Detainees assigned to special work areas are clothed in accordance with the requirements of the job.	$\square$			
<ul> <li>Detainees are provided clean clothing, linen and towels.</li> <li>Socks and undergarments - exchanged daily.</li> <li>Outer garments - twice weekly.</li> <li>Sheets - weekly.</li> <li>Towels - weekly.</li> <li>Pillowcases - weekly.</li> </ul>				
Food service detainee volunteer workers permitted to exchange outer garments daily.				
Volunteer detainee workers are permitted to exchanges of outer garments more frequently.				
ISSUANCE AND EXCHANGE OF CLOTHING	ment free the free	DING, A		WELS - Rating

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

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

### MARRIAGE REQUESTS

🛛 Acceptable

Deficient

🗌 At-Risk

Repeat Finding

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

b6, b7C	b6, b7C	-
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	

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#### NON-MEDICAL EMERGENCY ESCORTED TRIPS

**Policy:** The Immigration and Customs Enforcement (ICE) may provide detainees with staff-escorted trips into the community for the purpose of visiting critically ill members of the detainee's immediate family, or for attending funerals.

## Standard NA: Check this box if all ICE Non-Medical Emergency Escorted Trips are handled only by the ICE Field Office or Sub-Office in control of the detainee case.

Components	Yes	No	NA	Remarks
The Warden/OIC considers and approves, on a case- by-case basis, trips to immediate family member's: • Funeral • Deathbed				
The facility recognizes mother, father, brother, sister, spouse, child, stepparent, and foster parent as "immediate family".				
The CDF/IGSA facility notifies ICE of all detainee requests for non-medical escorts.				
The Field Office Director is the approving official for non-medical escorted trips.				
The detainee's Deportation Officer reviews the file before forwarding a detainee's request, with recommendation, to the approving official. Each recommendation addresses the individual's suitability for travel, e.g., the kind of supervision required.				
Detainees who require overnight housing are placed in approved IGSA facilities.				
<ul> <li>Each escort includes at least two officers.</li> <li>The detainee remains under constant, direct visual supervision of escorting staff.</li> </ul>				
Escorting officers report unexpected situations to the originating facility as a matter of procedure and the ranking supervisor on duty has the authority to issue instructions for completion of the trip.				
Escorting officers have the discretion to: a. Increase or decrease minimum restraints in accordance with written instruction, procedures and classification level of the detainee.				
Escort officers do not accept gifts/gratuities from a detainee, detainee's relative or friend for any reason.				
<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.				

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NON MEDICAL EMERGENCY ESCORT						
Acceptable Deficient At-Risk Repeat Finding						

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RECREAT	ON			n
Policy: It is ICE policy to provide access to recreational pettent possible, under conditions of security and supervisi				
Components	Y	N	NA	Remarks
<ul> <li>Does the facility provide:</li> <li>An indoor recreation program?</li> <li>An outdoor recreation program?</li> </ul>				
A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.				
Regular maintenance keeps recreational facilities and equipment in good condition.				
The recreational specialist or trained equivalent supervises detainee recreation workers.				
The recreational specialist or trainee equivalent oversees recreation programs for Special Management Unit and special-needs detainees.				
Dayrooms offer sedentary activities, e.g., board games, cards, television.				
Outside activities are restricted to limited-contact sports.	$\boxtimes$			
Each detainee has the opportunity to participate in daily recreation.				
Detainees have access to recreation activities outside the housing units for at least one hour daily, 5 days a week.				
Staff checks all items for damage and condition when equipment is returned.	$\boxtimes$			
Staff conducts searches of recreation areas before and after use.				
All recreation areas under constant staff supervision.	$\square$			
Supervising staff is equipped with radios.				
The facility provides detainees in the SMU at least one hour of outdoor recreation time daily, five times per week.				
Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his/her recreation privileges.				
Special programs or religious activities are available to detainees.				
Volunteers are required to sign a waiver of liability before entering a secure portion of the facility where detainees are present.				
Visitors, relatives or friends are not allowed to serve as volunteers.				*
If outdoor recreation is offered check this box. No	o further	inform	nation i	s required when outdoor
recreation is offered.			<u></u>	
<ul> <li>If the facility has no outside recreation, are detainees considered for transfer after six months?</li> <li>If yes, written procedures ensure timely review of all eligible detainees.</li> </ul>				
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.				

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

	🛛 Acceptable	Deficient	At-Risk	Repeat Finding
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#### **RELIGIOUS PRACTICES**

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

Components	Y	N	NA	Remarks
Detainees are allowed to engage in religious services.	$\boxtimes$			
Space is available for detainees to conduct religious services.	$\boxtimes$			
<ul> <li>The facility allows detainees to observe the major "holy days" of their religious faith.</li> <li>List any exceptions.</li> </ul>	$\boxtimes$			
<ul> <li>The facility accommodates recognized holy-day observances by:</li> <li>Providing special meals, consistent with dietary restrictions.</li> <li>Honoring fasting requirements.</li> <li>Facilitating religious services.</li> <li>Allowing activity restrictions.</li> </ul>				
Each detainee is allowed religious items in his/her immediate possession.	$\boxtimes$			
Volunteer's credentials are checked and verified before allowing participation in detainee programs.	$\boxtimes$			
Members of faiths not represented by clergy conduct may request to present their own services within security allowances.				
Detainees in the Special Management Unit to participate in religious practices unless otherwise documented for the safety and security of the facility.				

#### **RELIGIOUS PRACTICES**

Acceptable

At-Risk

Repeat Finding

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

Deficient



DETAINEE TELEPH	ONE AC	CESS		
Policy: All facilities housing ICE detainees will permittelephones.	t detain	ees' rea	asonable	and equitable access to
Components	Y	N	NA	Remarks
Detainees are allowed access to telephones during established facility waking hours.				
Upon admittance, detainees are made aware of the facility's telephone access policy.	$\boxtimes$			
Access rules are posted in housing units.	$\boxtimes$			
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 by facility staff to ensure that they are in good working order.				
The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.				
The facility administration monitors repair progress and take appropriate measures to ensure that the required repairs are begun and completed timely.				
Detainees are afforded a <i>reasonable degree of privacy</i> for legal phone calls.				
A procedure exists to assist a detainee who is having trouble placing a confidential call.	$\boxtimes$			
The facility provides the detainees with the ability to make non-collect (special access) calls.	$\boxtimes$			
Special Access calls are at no charge to the detainees.	$\square$			
In facilities unable to fully meet this requirement initially because of limitations of its telephone service, the ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.				
No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".				
Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.				
Any telephone restrictions are documented.		$\boxtimes$		
The facility has a system for taking and delivering emergency detainee telephone messages.	$\boxtimes$			
Emergency phone call messages are immediately given to detainees.				
Detainees are allowed to return emergency phone calis as soon as possible.				
Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.				
Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.				-
Detainees in disciplinary segregation are allowed phone calls for family emergencies.				

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Policy: All facilities housing ICE detainees will perm telephones.	iit detair	iees rei	asonabi	e and	equitable access to
Components	Y	Ne	NA		Remarks
Detainees in administrative segregation and protective custody afforded the same telephoning privileges as those in general population.					
When detainee phone calls are monitored, notification is posted by detainee telephones that phone calls made by the detainees may be monitored. Special Access calls are not monitored.				Not r	nonitored.
DETAINEE TELEPH	IONE A	CCESS		ž	

INS Detention Standard, dated 06/03/00, refers to reasons which may cause telephone use restriction. The Standard also states the OIC may suspend telephone privileges during an emergency. The Standard contains no component requiring the documentation of telephone restrictions.

b6, b7C	b6, b7C	
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VISITATI	ON			
Policy: ICE shall permit detainees to visit with family, frien the news media.	ds, lega	l represe	entatives	s, special interest groups and
Components	Y	N.	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.				
The visitation schedule and rules are available to the public.				
The hours for all categories of visitation are posted in the visitation waiting area.				
A written copy of the rules regulating visitation and the hours of visitation is available to visitors.				
A general visitation log is maintained.	$\boxtimes$			
The detainees are permitted to retain personal property item specified in the standard.				
A visitor dress code is available to the public.	$\boxtimes$			
Visitors are searched and identified according to standard requirements.				
The requirement on visitation by minors is complied with.				
At facilities where there is no provision for visits by minors, the ICE arranges for visits by children and stepchildren, on request, within the first 30 days.				
After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.				
Detainees in special housing afforded visitation.	$\square$			
Legal visitation is available seven (7) days a week, including holidays.				
On regular business days legal visitation hours provide for a minimum of eight (8) hours per day and a minimum of four hours per day on weekends and holidays.				
On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.				
Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.				
There are written procedures governing detainee searches.				
When strip searches are required after every contact visit with a legal representative, the facility provides an option for non-contact visits with legal representatives.				No contact visits.
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.				

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ends, lega	l represe	entatives	, special inte	rest groups and
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(		ends, legal represe	ends, legal representatives	ends, legal representatives, special inte

🛛 Acceptable	Deficient	At-Risk	Repeat Finding
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		b6, b7C
	b6, b7C	50, 570
100		
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**Policy:** In every facility offering a voluntary work program, ICE detainees will have the opportunity to work and earn money by participating. While not legally required, ICE affords detainee workers basic Occupational Safety and Health Administration (OSHA) protections.

## Check here if ICE detainees are not authorized to work at the IGSA facility. Mark NA on Form G-324A, page 3 and move to next section.

Components	Y	N	NA	Remarks
<ul> <li>Does the facility have a voluntary work program?</li> <li>Do ICE detainees participate?</li> </ul>	$\boxtimes$			
Detainee housekeeping meets neatness and cleanliness standards.	$\boxtimes$			
Detainees have the opportunity to participate in special details, however, are never allowed to work outside the secure perimeter.	$\boxtimes$			
<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>	$\boxtimes$			
Where possible, physically and mentally challenged detainees participate in the program.	$\boxtimes$			
<ul> <li>The facility complies with work-hour requirements for detainees, not exceeding:</li> <li>Eight hours a day.</li> <li>Forty hours a week.</li> </ul>				
Detainee volunteers generally work according to fixed schedule.	$\boxtimes$			
If a detainee is removed from a work detail, staff places the written justification for the action in the detainee's detention file.				
Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	$\boxtimes$			
<ul> <li>The voluntary work program meets:</li> <li>OSHA standards</li> <li>NFPA standards</li> <li>ACA standards</li> </ul>	$\boxtimes$			
Medical staff screens and formally certifies detainee food service volunteers. Before the assignment begins As a matter of written procedure				
Detainees receive safety equipment/ training sufficient for the assignment				
Proper procedure is followed when an ICE detainee is injured on the job.				

and the second second	VOL	UNTARY WORK PRO	GRAM
Acceptable	Deficient	At-RisK	Repeat Finding
	Dencient	L AL-RISK	Repeat Finding
	significant facts, observ	vations, other sources u	sed, etc.)
	significant facts, observ	rations, other sources u	sed, etc.)
	significant facts, observ	rations, other sources u	sed, etc.)

1

# Section II

## Health Services Standards

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#### HUNGER STRIKES

**Policy:** All facilities will follow standard guidelines for the medical and administrative management of ICE detainees engaging in hunger strikes. By monitoring of the health and welfare of the individual detainees, facilities will strive to sustain their lives.

Components	Y	N	NA	Remarks
When a detainee has refused food for 72 hours, it is standard practice for staff to refer him/her to the medical department.				PHS policy 811 updated 6/05 ICE policy present
CDFs and IGSAs immediately report a hunger strike to the ICE.			$\boxtimes$	
The facility has established procedures to ensure staff respond immediately to a hunger strike.	$\boxtimes$			
<ul> <li>Policy and procedure require that staff isolate a hunger- striking detainee from other detainees.</li> <li>If yes, in an observation room?</li> </ul>	$\boxtimes$			Detainee's admitted to the Infirmary
Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	$\boxtimes$			
Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.				
The OIC of the facility obtains a hunger striker's consent before medical treatment.	$\boxtimes$			
A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.	$\boxtimes$			See below
During a hunger strike, staff documents and provides the hunger-striking detainee three meals a day.	$\boxtimes$			
Staff maintains the hunger striker's supply of drinking water/other beverages.	$\boxtimes$			
During a hunger strike, staff removes all food items from the hunger striker's living area.				
Staff is directed to record the hunger striker's fluid intake and food consumption, does staff always use Hunger Strike Monitoring Form I-839. IGSA's use a similar form.				Per PHS policy – no reference made in ICE policy.
The medical staff has written procedures for treating hunger strikers.	$\boxtimes$			
Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.				1 documented attempt in the past 12 months.
Staff has received training in identification of hunger strikes. Medical staff receives early training in hunger- strike evaluation and treatment. Staff remain current in evaluation and treatment techniques.				See below

HUNGER STRIKES				
2	🗙 Acceptable	Deficient	At-Risk	Repeat Finding

Refusal forms – 2/5 forms completed – 3/5 missing either complete documentation on form or required signatures. 2/5 supportive documentation noted in SOAP notes (by providers) 3/5 not referenced in SOAP notes.

Refusal Charts:	b6, b7C
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eMR primary source of Medical Record Access - forms kept in Hard copy of charts - 5/5 not currently scanned into the eMR due to no scanner available. ( Consultations, MAL, rejused forms, Y-Ra 1/5 MAR did not reflect refusal of medication per signed refusal form (marked as given but refusal form signed)

repults

Training last done 2003 for all staff; 2004 2 people had training; 2005 1 person trained. Plan to hold training today at 1400 7/14/05.

LCI	b6, b7C	nis, RN	7-14-05	Looe	b6, b7C	, en
Auditor	's Signatu					



#### ACCESS TO MEDICAL CARE

ACCESS TO MEDIC	JAL UA	INE .		te t
Policy: Every facility will establish and maintain an accre general well-being of ICE detainees.	dited/ac	creditat	and the second	
Components	Y	N	NA	Remarks
Facilities operate a health care facility in compliance with State and Local laws and guidelines.				
The facility's in-processing procedures of arriving detainees include medical screening.	$\boxtimes$			
All detainees have access to and receive medical care.	$\boxtimes$			Handbook - PHS LOP 1021
The facility has access to a Managed Health Care Coordinator.				CD and Mid-level providers in clinic daily
The medical staff is large enough to provide, examine, and treat the facility's detainee population.				
The facility has sufficient space and equipment to afford each detainee privacy when receiving health care.	$\boxtimes$			
The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.				
The medical facility entrance includes a holding/waiting room.	$\boxtimes$			
The medical facility's holding/waiting room under the direct supervision of custodial staff.				
Detainees in the holding/waiting room have access to a toilet and a drinking fountain.				
<ul> <li>Medical records are kept apart from other files. They are:</li> <li>Secured in a locked area within the medical unit.</li> <li>With physical access restricted to authorized medical staff.</li> <li>Procedurally, no copies made and placed in detainee files.</li> </ul>				Unit locked in an area where detainee's do not have access.
Pharmaceuticals are stored in a secure area.				Locked door/room/Pill Line
<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 detainee's are X-ray'd upon arrival prior to being placed in the general population within 12 hours on a routine basis.
<ul> <li>All detainees receive a mental-health screening upon arrival. It is conducted:</li> <li>By a health care provider or specially trained officer;</li> <li>Before a detainee's assignment to a housing unit.</li> </ul>				
The facility health care provider promptly reviews all I- 794s (or equivalent) to identify detainees needing medical attention.				Form present in hard copy of chart – not being scanned into eMR.
The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.				1/7 done; 6/7 left before day 14.; 15/15 chronic charts done

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ACCESS TO MEDI	CAL CA	RE		
<b>Policy:</b> Every facility will establish and maintain an accregeneral well-being of ICE detainees.	dited/ac	creditat	ion-wo	rthy health program for the
Detainees in the Special Management Unit have access to health care services.	$\boxtimes$			Rounds daily by medical – sick call slips available
<ul> <li>Staff provides detainees with health- services (sick call) request slips daily, upon request.</li> <li>Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population.</li> <li>Service-request slips are delivered in a timely fashion to the health care provider.</li> </ul>				Spanish Box available in the Mess Hall for detainee's to request medical attention. Emergencies are called into the unit by officers.
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.				Medical Staff present in clinic 24hrs/7days/365days
The plan includes an on-call provider.	$\square$			On-call schedule
The plan includes a list of telephone numbers for local ambulances and hospital services.	$\boxtimes$			
The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.				
Detention staff is trained to respond to health-related emergencies within a 4-minute response time.	$\boxtimes$			
Where 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 Warden/Facility of a detainee that has special medical needs.				
A signed and dated consent form is obtained from a detainee before medical treatment is administered.	$\boxtimes$			3/32 charts
Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.				
The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.				Strong Social Worker program (Pokr and TB)
Detainee's medical records or a copy thereof, are available and transferred with the detainee.				Per policy
Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL".				

	•					
	ACCESS TO MEDICAL CARE					
Acceptable	Deficient	At-Risk	Repeat Finding			

Great dental program - tool control and chemicals - sick call processes

Pharmacy with strong program - temperature log missing a few days of temperature checks.

Sick call seen within 48 hours of recieveing requests. Urgent requests seen that day/evening – remaining are scheduled for the next day.

Chronic Care noted during intake screening – scheduled to be evaluated by Mid-level within that shift or the next morning. Urgent care seen immediately or provider on-call notified and orders received and/or they come in.

Pill Line and Lab processes meet requirements – Staff well versed on protocols and procedures for tool control and sharps. No deviations noted.

Refusal forms 3/5 incomplete -	b6, b7C	, b6, b7C	b6, b7C	b6, b7C	A#
h6 h7C					

Currently only items scanned into eMR is the Lab results – equipment not available to scan (consents, refusal forms, consultations, or other items) 100% of 32 charts reviewed.

 Chronic Care Charts
 b6, b7C
 1 

 P.E.'s charts:
 b6, b7C
 b6, b7C
 1

HIV charts: b6, b7C - follow up education related to lab results not documented in chart 2/2 charts audited 7-13-05. Was shown a chart 7-14-05 a chart with completed documentation.

Policies for NDS Review all current and documented reviewed as of 06/05. However, the majority of the remaining policies in the LOP PHS had not been updated/reviewed since 10/02. Cover sheet of LOP book last signed from administrative review 3/10/04. Some policies missing the attachments.

LCDR	b6, b7C	, RN	7-14-2005	LCOR	b6, b7C	, RN
Auditor's	Signature /	Date				

#### SUICIDE PREVENTION AND INTERVENTION

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

Components	Ŷ	N	NA	Remarks
Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.	$\boxtimes$			Done all staff 8/2004
<ul> <li>Training prepares staff to:</li> <li>Recognize potentially suicidal behavior;</li> <li>Refer potentially suicidal detainees, following facility procedures;</li> <li>Understand and apply suicide-prevention techniques.</li> </ul>	$\boxtimes$			Copy of training provided – prepared by Social Worker.
<ul> <li>A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process.</li> <li>Screening does not occur later than one working day after the detainee's arrival.</li> </ul>				
Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.	$\boxtimes$			PHS LOP 1703 revised and reviewed 6/05
The facility has a designated isolation room for evaluation and treatment.	$\boxtimes$			SSU and SMU has padded room
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.	$\boxtimes$			
Staff observes and documents the status of a suicide- watch detainee at least once every 15 minutes.	$\boxtimes$			

SUICIDE PREVENTION AND INTERVENTION						
🔀 Acceptable	Deficient	At-Risk	Repeat Finding			

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

#### 4 charts reviewed

100% compliance on Q 15 minute checks 4/4 charts with inconsistent Q 2hours nursing noted recorded.

#### Strong training program with Social Worker.

1/4 charts with consent not signed by Medical Staff - given to Medical Records Clerk.

MARs noted with blank spaces (average 4 to 6 days) upon investigation these detainees noted to have left the camp, encouraged staff to note that on MAR's once they are removed and placed back in the chart. This will eliminate any questions related why the medications were not given on those days verses blank boxes.

LCDR b6, b7C	RN 7-14-2005	LCDY	b6. b7C	pn
Auditor's Signature	/ Date		50, 51 0	

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

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

Components	Y	ga N	NA	Remarks
Detainees, who are chronically or terminally ill, are transferred to an appropriate offsite medical facility.				ICE Policies available PHS LOP 821 revised 6/05
<ul> <li>The facility or appropriate ICE office promptly notifies the next of kin of the detainee's: medical condition.</li> <li>The detainee's location.</li> <li>The limitations placed on visiting.</li> </ul>				Infirmary in medical who house 10 beds (4 Isolation rooms)
<ul> <li>There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives.</li> <li>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.</li> </ul>				
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"	$\boxtimes$			PHS LOP 828-A
Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation?	$\boxtimes$			None in camp since approximately 2003
The facility notifies the DIHS Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSAs, this notification is made through the local ICE representative.	$\boxtimes$			
The facility has written procedures to address the issues of organ donation by detainees.				
The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.				
The facility has a policy and procedure to address the death of a detainee while in transport.	$\boxtimes$			
At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.				
<ul> <li>In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures.</li> <li>If the detainee's is a U.S. military veteran is the Department of Veterans Affairs notified.</li> </ul>				
An original or certified copy of a detainee's death certificate is placed in the subject's a-file.	$\boxtimes$			

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

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

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

		Sector 1	 Remarks
<ul> <li>The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as</li> <li>Performance of an autopsy.</li> <li>Who will perform the autopsy.</li> <li>Obtaining State approved death certificates.</li> <li>Local transportation of the body.</li> </ul>			
ICE staff follow established procedures to properly close the case of a deceased detainee.	$\boxtimes$		

TERI	MINAL ILLNESS, ADV	ANCED DIRECTIVES, A	ND DEATH		
Acceptable	Deficient	At-Risk	🗌 Repe	at Finding	

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

Policies are reflective of requirements for Detention Standards – have not had any cases since approximately 2003 – unable to review charts or documentation for compliance.

LCDR	b6, b7C	RN	7-14-2005	LCOR	b6. b7C	RN
Auditor's S	ignature /	Date			50, 510	-

# Section III

## Security and Control

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CONTRAB	AND			
<b>Policy:</b> All detention facilities will ensure the proper handli contraband destruction is required.	traband. Documentation of			
Components	Y	N	NA	Remarks
The facility follows a written procedure for handling illegal contraband. Staff inventories, holds, and reports it when necessary to the proper authority for action/possible seizure.				
Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.				
Staff returns property not needed as evidence to the proper authority. Written procedures cover the return of such property.				
Altered property is destroyed following documentation and using established procedures.				
Before confiscating religious items, the OIC or designated investigator contacts a religious authority.				
Staff follows written procedures when destroying hard contraband that is illegal.				
Hard contraband that is illegal (under criminal statutes) may be retained and used for official use, e.g. training purposes. If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use.				

### CONTRABAND

Acceptable	Deficient	🗌 At-Risk	Repeat Finding	

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

b6, b7

7/14/05

Auditor & Signature / Date

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#### **DETENTION FILES**

**Policy:** Every facility will create a detention file for every ICE detainee booked into the facility, excluding only detainees scheduled to depart within 24 hours. The detention file will contain copies and, in some cases, the original of specified documents concerning the detainee's stay in the facility: classification sheet, medical questionnaire, property inventory sheet, disciplinary documents, etc.

Components	Y	N	NA	Remarks
A detention file is created for every new arrival whose stay will exceed 24 hours.	$\boxtimes$			
The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	$\boxtimes$			Checked 15 files.
<ul> <li>The detainee's detention file also contains documents generated during the detainee's custody.</li> <li>Special requests</li> <li>Any G-589s and/or I-77s closed-out during the detainee's stay</li> <li>Disciplinary forms/Segregation forms</li> <li>Grievances, complaints, and the disposition(s) of same</li> </ul>				
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.	$\boxtimes$			Secured in Processing, only the Processing Officer and SIEAn have keys.
The detention file remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent and other documentation.				
The officer closing the detention file makes a notation that the file is complete and ready to be archived.	$\boxtimes$			
Staff makes copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.				
Appropriate staff has access to the detention files and other departmental requests are accommodated by making a request for the file. Each file is properly logged out and in by a representative of the responsible department.				

# DETENTION FILES

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

ь6, b7C \_\_\_\_\_ 7/14/05

Auditor sysignature / Date





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

-				
DISCIPLINARY	POLICY			· · ·
Policy: All facilities housing ICE detainees are authorized t not in compliance with facility rules and regulation		e discip	line on	detainees whose behavior is
Components	Y	N	NA	Remarks
The duration of punishment set by the OIC, as recommended by the disciplinary panel does not exceed established sanctions. The maximum time in disciplinary segregation does not exceed 60 days for a single offense.				Disciplinary Panel Chairman states detainees are never given more than 3 days D/S time.
Written procedures govern the handling of confidential- informant information. Standards include criteria for recognizing "substantial evidence"				
All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.				

	DISCIPI		
🛛 Acceptable	Deficient	At-Risk	Repeat Finding

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

7/14/05 nucitor a orginatore / Date

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#### EMERGENCY (CONTINGENCY) PLANS

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

Components	Y	N	NA	Remarks
No Detainee or detainee groups exercise control or authority over other detainees.	$\boxtimes$			
Detainees are protected from: Personal abuse Corporal punishment Personal injury Disease Property damage Harassment from other detainees				Not in Emergency Plans, however it is in the Detainee Handbook.
<ul> <li>Staff are trained to identify signs of detainee unrest.</li> <li>What type of training and how often?</li> </ul>	$\boxtimes$			
Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Officer In Charge (OIC)				
There is a designated person or persons responsible for emergency plans and their implementation. Sufficient time is allotted to the person or group for development and implementation of the plans.				
<ul> <li>The plans address the following issues:</li> <li>Confidentiality</li> <li>Accountability (copies and storage locations)</li> <li>Annual review procedures and schedule</li> <li>Revisions</li> </ul>	$\boxtimes$			
Contingency plans include a comprehensive general section with procedures applicable to most emergency situations.				
<ul> <li>The facility has cooperative contingency plans with applicable:</li> <li>Local law enforcement agencies</li> <li>State agencies</li> <li>Federal agencies</li> </ul>				
All staff receive copies of Hostage Situation Management policy and procedures.	$\boxtimes$			
Staff is trained to disregard instructions from hostages, regardless of rank. Within 24 hours after release hostages are screened for medical and psychological effects.				
Emergency plans include emergency medical treatment for staff and detainees during and after an incident.				
The food service maintain at least 3-days' worth of emergency meals for staff and detainees.				
Written plans locate shut-off valves and switches for all utilities (water, gas, electric).				See Note below

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

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

	EMERGENCY (C	ONTINGENCY) PLANS			
🛛 Acceptable	Deficient	🗌 At-Risk	🗌 Repea	t Finding	

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

b6, b7C	~	7/14/05
Augurs Signature / L	Jate	

The written plans showing the shut-off valves and switches for all utilities are excellent. The drawings are CAD drawings of all buildings with the shut-offs clearly marked.

The CCTV control room runs mock drills every shift. They run different scenarios to be prepared for actual incidents. The mock drills cover all possible scenarios such as bombthreats, civil disturbances, HAZ-MAT incident, hostage situation, etc. Excellent preparedness tool.

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#### ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Y	Nation	NA	Remarks
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.				Brand new system put into place – unable to trend at this time.
Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	$\boxtimes$			Listed on cabinets and MSDS books.
<ul> <li>The manufacturer's Material Safety Data Sheet (MSDS)</li> <li>file is up-to-date for every hazardous substance used.</li> <li>The files list all storage areas, and include a plant diagram and legend.</li> <li>The MSDSs and other information in the files are available to personnel managing the facility's safety program.</li> </ul>				Random check done on 3 items in Maintenance –. 2 cleaning items. Random check done on 2 items in dental - all with MSDS and signout logs
<ul> <li>All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They:</li> <li>Wear personal protective</li> <li>Equipment.</li> <li>Report hazards and spills to the</li> <li>designated official.</li> </ul>				
The MSDSs are readily accessible to staff and detainees in the work areas.	$\boxtimes$			PHS + ; available around the camp.
<ul> <li>Hazardous materials are always issued under proper supervision.</li> <li>quantities are limited.</li> <li>Staff always supervises detainees using these substances.</li> </ul>				Control room in maintenance with signout books.
All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.				Yellow cabinets /locked – inventory sheets present
Lighting fixtures and electrical equipment are installed in storage rooms and other hazardous areas meet National Electrical Code requirements.				
All toxic and caustic materials stored in their original containers in a secure area.	$\boxtimes$			
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 receive a list of products containing diluted methyl alcohol, e.g., shoe dye. All such products clearly labeled as such. "Accountability" includes issuing such products to detainees in the smallest workable quantities.				Not kept in camp or used by detainee's. These items are kept in Maintenance and used by
Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.				Recent training of Safety Officer noted.
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).				

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ENVIF	ONME	NTAL HE	ALTH AND	SAFETY

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

Components	Y	N	NA	Remarks
A technically qualified officer conducts the fire and safety inspections.				an a
The Safety Office (or officer) maintains files of inspection reports; Including corrective actions taken.				Strong documentation – weak on followup actions for deviations from expected ranges.
The facility has an approved fire prevention, control, and evacuation plan.	$\boxtimes$			
<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>				
Fire drills are conducted and documented monthly.	$\square$			Strong documentation
A sanitation program covers barbering operations.	$\boxtimes$			
The barbershop has the facilities and equipment necessary to meet sanitation requirements.	$\boxtimes$			
The sanitation standards are conspicuously posted in the barbershop.				
Written procedures regulate the handling and disposal of used needles and other sharp objects.				
All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.				
<ul> <li>Standard cleaning practices include:</li> <li>Using specified equipment; cleansers; disinfectants and detergents.</li> <li>An established schedule of cleaning and follow- up inspections.</li> </ul>				Dental with Strong program
The facility follows standard cleaning procedures.	$\boxtimes$			
Spill kits are readily available.				
A licensed medical waste contractor disposes of infectious/bio-hazardous waste.				Has a break in contract due to "unfunded" for several months – current now
Staff are trained to prevent contact with blood and other body fluids and written procedures are followed.				
Do the methods for handling/disposing of refuse meet all regulatory requirements.				
<ul> <li>A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin.</li> <li>At least monthly.</li> <li>The pest-control program includes preventive spraying for indigenous insects.</li> </ul>				
Drinking water and wastewater is routinely tested according to a fixed schedule.				Use city water – annual reports present



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

Components	Y	N	NA	Remarks
<ul> <li>Emergency power generators is tested at least every two weeks.</li> <li>Other emergency systems and equipment receive testing at least quarterly.</li> <li>Testing is followed-up with timely corrective actions (repairs and replacements).</li> </ul>				No contract in place for quarterly checks due to "unfunded" Not done since 8/04. Automated weekly generator tests scheduled - no documentation available.

	ENVIRONMENTA	L HEALTH AND SAFET	۲Y
X Acceptable	Deficient	At-Risk	Repeat Finding

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

Fingernail clippers located in each housing unit (9) with 2 or 3 sets in each unit secured. Check out is done by detainee's with Security taking ID card – items are soaked upon return for 5 minutes in soluation before another detainee is allowed to use them. However, chemicals were removed from units Monday – nothing available for cleaning during rounds 7-13-05 – problem corrected by closeout and clippers pulled back to the Barber Shop on 7-14-05.

Chemical found in locker in the SMU 7/13/05 – to be removed based on current practice to control chemicals resently put into place – 7/14/05 follow up – chemicals still in Locker SMU – IEA to removed immediately.

Strong documentation Fire Drills and Diaster Drills

Shower in SMU 7/13/05 noted to have 3 open bottles of shampoo and  $\sim$  3 bars of soap on shower head. Follow up 7/14/05 nothing noted left in shower unit. Concerns expressed related to infection control and potential contraband.

Cleaning tools (mops, buckets, and brooms) securely stored in locked cages outside housing units – however there is not inventory list or methods to document when items are out for accountability.

Fire Extinguishers – Monthly inspection systems / tags recently changed with only one or two dates on 75% of extinguishers

Lockout-Tagout checklist – paperwork supported practice. (old tags unable to tell what item they were for – current tags had item listed on them.)

AED secured around camp – Training records reflected current and annual training for Officers and Security Staff.

Temperature, Lighting and noise checks done routinely – however, when scores fell out of range for exceptable levels there was no way to determine if the problem had been address or corrected. No action plan or follow up.

LCDP b6, b7C	RN	July 14,02
Auditor's Signature / Date		00

HOLD ROOMS IN DETEN	NION	-ACILIT	IES	*****			
Policy: Hold rooms will be used only for temporary detention for detainees awaiting removal, transfer, EOIR hearings, medical treatment, intra-facility movement, or other processing into or out of the facility.							
Components	Y	N	NA	Remarks			
The hold room is situated in a location within the secure perimeter.	$\boxtimes$						
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.	$\boxtimes$						
<ul> <li>The walls of the hold rooms escape proof.</li> <li>The hold room ceilings are escape and tamper resistant.</li> </ul>							
Individuals are not held in hold rooms for more than 12 hours.	$\boxtimes$			A.			
Male and females are segregated from each other at all times.			$\boxtimes$	No females held in Hold rooms.			
Every effort is made to ensure that detained detainees under the age of 18 are not held with adult detainees.							
Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.							
In older facilities officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.	$\boxtimes$						
All detainees are given a patdown search for weapons or contraband before being placed in the room.							
<ul> <li>Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring.).</li> <li>Hold rooms are irregularly monitored every 15 minutes.</li> <li>Unusual behavior or complaints are noted.</li> </ul>							
<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>	Ø						
<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.			□.				
HOLD ROOMS IN DETE	NTION	FACILI	TIES				

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At-Risk

Repeat Findings

Acceptable

🛛 Deficient



#### HOLD ROOMS IN DETENTION FACILITIES

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



Although there were a few detainees being held in the hold rooms slightly longer than 12 hours, the vast majority were out of the cells in leass than 12 hours.

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KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) Policy It is the policy of the ICE Service to maintain an efficient system for the use, accountability and maintenance of all keys and locks.					
The security officer[s], or equivalent in IGSAs, has attended an approved locksmith training program.				The standard states must have attended the BOP Locksmith Course. The security officer has attended a commercially available course.	
The security officer, or equivalent in IGSAs, has responsibly for all administrative duties and responsibilities relating to keys, locks etc.					
The security officer, or equivalent in IGSAs, provides training to employees in key control.					
The security officer, or equivalent in IGSAs, maintains inventories of all keys, locks and locking devices.					
The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	$\boxtimes$				
Facility policies and procedures address the issue of compromised keys and locks.	$\boxtimes$				
The security officer, or equivalent in IGSAs, develops policy and procedures to ensure safe combinations integrity.	$\boxtimes$				
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.	$\boxtimes$				
The facility does not use grand master keying systems.	$\boxtimes$				
All worn or discarded keys and locks cut up and properly disposed of .	$\boxtimes$				
Padlocks and/or chains are not used on cell doors.	$\boxtimes$				
<ul> <li>The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to</li> <li>Occupational Safety and Environmental Health Manual, Chapter 3</li> <li>National Fire Protection Association Life Safety Code 101.</li> </ul>					
The operational keyboard sufficient to accommodate all the facility key rings including keys in use is located in a secure area.					
<ul> <li>Procedures in place to ensure that key rings are:</li> <li>Identifiable</li> <li>Numbers of keys on the ring are cited?</li> <li>Keys cannot be removed from issued key rings</li> </ul>					
Emergency keys are available for all areas of the facility.	$\boxtimes$				
The facilities use a key accountability system.					
Authorization is necessary to issue any restricted key.				On duty ICE supervisor.	

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KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)							
Policy It is the policy of the ICE Service to maintain an efficient system for the use, accountability and maintenance of all keys and locks							
Components	Y	Ņ	NA	Remarks			
<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 gun boxes are in an area that visitors have access to. They are under constant officer observation.			
The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.		$\boxtimes$		See Note Below.			
<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>							
KEY AND LOCK	CONTR	OL					
🛛 Acceptable 🗌 Deficient	] At-Ri	sk		Repeat Finding			

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

7/14/05

Auditor sysignature / Date

The control officer counts key rings every shift, but not keys. There is no written records of daily key counts.





#### **POPULATION COUNTS**

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

Components	Y	N	NA	Remarks
Staff conducts a formal count at least once each shift.	$\boxtimes$			
Activities cease or are strictly controlled while a formal count is being conducted.	$\boxtimes$			
Do certain operations continue during formal counts.	$\boxtimes$			Food Service Outcounts
Is a certain amount of movement tolerated during a formal count.	$\boxtimes$			
Formal counts in all units take place simultaneously.	$\boxtimes$			
Officers do not allow detainee participation in the count.	$\boxtimes$			
A face-to-photo count follows each unsuccessful recount.	$\boxtimes$			
Officers positively identify each detainee before counting him/her as present.	$\boxtimes$			
<ul> <li>Written procedures cover informal and emergency counts.</li> <li>They followed during informal counts.</li> <li>During emergencies.</li> </ul>				
The control officer (or other designated position) maintains an out -count record of all detainees temporarily leaving the facility.				
This training is documented in each officer's training folder.				

	Population Counts						
🛛 Acceptable	Deficient	At-Risk	Repeat Finding				

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

7/15/05

Auditor staignature / Date

POST ORDE				
<b>Policy:</b> ICE provides officers all necessary guidance for ca post orders established for every post, which are reviewed assignment to that post.	rrying or I at leas	ut their t annua	duties. Illy, and	I given to each officer upon
Components	Y	N	NA	Remarks
Every Fixed post has a set of post orders.	$\boxtimes$			
Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	$\boxtimes$			
One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.	$\boxtimes$			
The IGSA maintains a complete set (central file) of post orders.	$\boxtimes$			
The central file accessible to all staff.	$\boxtimes$			
The OIC or Contract / IGSA equivalent initiate/authorizes all post-order changes.	$\boxtimes$			
The OIC or Contract / IGSA equivalent has signed and dated the last page of every section.	$\boxtimes$			
A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.				
Procedures keep post orders and logbooks secure from detainees at all times.	$\boxtimes$			
Every armed-post officer qualifies with the post weapon(s) before assuming post duty.			$\boxtimes$	No armed posts.
Armed-post post orders provide instructions for escape attempts.			$\boxtimes$	No armed posts.
The post orders for housing units track the event schedule.				
Housing-unit post officers record all detainee activity in a log. The post order include instructions on maintaining the logbook.				

POST ORDERS								
Acceptable	Deficient	At-Risk	Repeat Finding					

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

7/14/05 Auditor - organice - Date

Checked 12 posts and all officers had signed the post orders.





#### SECURITY INSPECTIONS

Policy: Post assignments in the facility's high-risk areas, where special security procedures must be followed, will be restricted to experienced personnel with a thorough grounding in facility operations. Components Yes No NA Remarks The facility has a comprehensive security inspection policy. The policy specifies: Posts to be inspected Required inspection forms  $\boxtimes$ Frequency of inspections  $\Box$ 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  $\boxtimes$  $\square$ his/her assigned area. The results are documented.  $\boxtimes$ Documentation of security inspections is kept on file Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate  $\boxtimes$ Π  $\square$ manager. The front-entrance officer checks the ID of everyone  $\boxtimes$  $\square$ entering or exiting the facility. All visits officially recorded in a visitor logbook or  $\boxtimes$ electronically recorded.  $\boxtimes$ The facility has a secure visitor pass system. Every Control Center officer receives specialized training. X The Control Center is staffed around the clock. Policy restricts staff access to the Control Center.  $\boxtimes$  $\boxtimes$ Detainees do not have access to the Control Center.  $\boxtimes$ Communications are centralized in the Control Center. Officers monitor all vehicular traffic entering and leaving  $\boxtimes$  $\square$  $\square$ the facility. The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: The driver's name • Company represented .  $\boxtimes$ Vehicle contents  $\square$ Delivery date and time Date and time out Vehicle license number Name of employee responsible for the vehicle during the facility visit Officers thoroughly search each vehicle entering and  $\boxtimes$  $\square$  $\square$ leaving the facility. The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its  $\boxtimes$  $\Box$ components. Tools being taken into the secure area of the facility are  $\boxtimes$  $\square$  $\Box$ inventoried before entering and prior to departure. X Π The SMU entrance has a sallyport. Π Written procedures govern searches of detainee housing  $\boxtimes$  $\Box$ units and personal areas. Housing area searches occur at irregular times.  $\boxtimes$ Every search of the SMU and other housing units  $\boxtimes$ documented.

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	-			-	
	SECURITY INSP	ECTION	S		
	in the facility's high-risk areas, v enced personnel with a thoroug				
Con	iponents	Yes	No	NA	Remarks
fixtures, accesses, and a	ns; walls, light and plumbing drains, etc. undergo frequent, e searches are documented.				
Walls, fences, and exits, inspected for defects once	including exterior windows, are e each shift.				
<ul> <li>Daily procedures include:</li> <li>Perimeter alarm s</li> <li>Physical checks o</li> <li>Documenting the</li> </ul>	of the perimeter fence.				
Visitation areas receive fr	equent, irregular inspections.				
	SECURITY INSP	PECTION	IS		
⊠ Acceptable	Deficient	] At-Ris	sk		Repeat Finding
Remarks: (Record sianific	ant facts, observations, other so	ources us	sed, etc	.)	
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The front security officers performed their duties in a very professional and through manner. The system of logging all employees into the facility, moving their Personal Data Cards (Form G-74) from the out box to the in box is exactly to standards. The process is reversed when the employee leaves the facility. This creates excellent accountable of all personnel inside the facility.

Auditor & Signature / Date





#### SPECIAL MANAGEMENT UNIT (SMU) Administrative Segregation

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

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

#### SPECIAL MANAGEMENT UNIT (SMU) Administrative Segregation

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

Components	Y	N	NA	Remarks
Administratively segregated detainees enjoy the same general privileges as detainees in the general population.				Detainees in administrative segregation do not get to see television as the general population does.
<ul> <li>The SMU well ventilated.</li> <li>Adequately lighted.</li> <li>Appropriately heated.</li> <li>Maintained in a sanitary condition.</li> </ul>				
<ul> <li>All cells are equipped with beds.</li> <li>Every bed securely fastened to the floor or wall.</li> </ul>	$\boxtimes$			
<ul> <li>The number of detainees in any cell does not exceed the occupancy limit.</li> <li>When occupancy exceeds recommended capacity, do basic living standards decline?</li> <li>Do criteria for objectively assessing living standards exist?</li> <li>If yes, are the criteria included in the written procedures?</li> </ul>				
The segregated detainees do not have fewer opportunities to exchange/launder clothing, bedding, and linen than detainees in the general population.				
<ul> <li>Detainees receive three nutritious meals per day.</li> <li>From the general population's menu of the day.</li> <li>Do detainees eat only with disposable utensils.</li> <li>Is food ever used as punishment.</li> </ul>				
<ul> <li>Each detainee maintains a normal level of personal hygiene in the SMU.</li> <li>The detainees have the opportunity to shower and shave at least three times a week.</li> <li>If not, explain.</li> </ul>				
<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>	⊠			The amount of recreation exceeds the recreation standard of 5 hours per weeks. The average is 7 hours a week.
<ul> <li>A health care professional visits every detainee at least three times a week.</li> <li>The shift supervisor visits each detainee daily.</li> <li>Weekends and holidays.</li> </ul>				

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#### SPECIAL MANAGEMENT UNIT (SMU) Administrative Segregation

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

Components	Y	N	NA	Remarks
<ul> <li>Procedures comply with the "Visitation" standard.</li> <li>The detainee retains visiting privileges.</li> <li>The visiting room available during normal visiting hours.</li> </ul>	$\boxtimes$			
Visits from clergy are allowed.	$\boxtimes$			
<ul> <li>Detainees do not have less law-library access than the general population.</li> <li>Are they required to use the law library separately, as a group? If so:</li> <li>Legal materials brought to them.</li> </ul>				
<ul> <li>The SMU maintains a permanent log.</li> <li>Detainee-related activity, e.g., meals served, recreation, visitors etc.</li> </ul>	$\boxtimes$			
<ul> <li><u>SPC procedures</u> include completing the SMU Housing Record (I-888) immediately upon a detainee's placement in the SMU.</li> <li>Staff completes the form at the end of each shift.</li> <li><u>CDFs and IGSA</u> facilities use Form I-888 (or local equivalent).</li> </ul>				
<ul> <li>Staff record whether the detainee ate, showered, exercised and took any medication during every shift.</li> <li>Logs record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc</li> <li>The medical officer/health care professional signs each individual's record during each visit</li> <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 for each week the detainee is in Administrative Segregation.</li> <li>These weekly records are retained in the SMU until the detainee's return to the general population.</li> </ul>				

		AGEMENT UNIT (SMU) ative Segregation		
🛛 Acceptable	Deficient	At-Risk	🗌 Repeat Findir	ng

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

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SPECIAL MANAGEMENT UNIT (Disciplinary Segregation) Policy: Each facility will establish a Special Management Unit in which to isolate certain detainees from the general population. The Special Management Unit will have two sections, one for detainees in Administrative Segregation; the other for detainees being segregated for disciplinary reasons. Components NA Remarks N Officers placing detainees in disciplinary segregation  $\boxtimes$ follow written procedures. The sanctions for violations committed during one This facility normally does  $\boxtimes$ not exceed 3 days in D/S incident do not exceed 60 days. status. A completed Disciplinary Segregation Order accompanies the detainee into the SMU.  $\boxtimes$ The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation. Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at  $\boxtimes$ set intervals. After each formal review, the detainee receives . a written copy of the decision and reasons for it. The conditions of confinement in the SMU are proportional to the amount of control necessary to  $\boxtimes$ protect detainees and staff. Detainees in disciplinary segregation have fewer privileges than those housed in administrative  $\boxtimes$ segregation. Living conditions in disciplinary SMUs modified to reinforce acceptable behavior. If yes, does staff prepare written  $\boxtimes$ documentation for this action. Does the OIC sign to indicate approval. Every detainee in disciplinary segregation receive the  $\boxtimes$  $\square$  $\Box$ same humane treatment, regardless of offense. The quarters used for segregation are: Well-ventilated. Adequately lighted.  $\boxtimes$ Appropriately heated. Maintained in a sanitary condition. All cells are equipped with beds. The beds securely fastened to the floor or wall of  $\times$ the cell. The number of detainees confined to each cell or room do not exceed the number for which the space was  $\boxtimes$ designate. Does the OIC approve excess occupancy on a temporary basis. When a detainee is segregated without clothing, mattress, blanket, or pillow, (in a dry cell setting) a  $\boxtimes$ 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  $\boxtimes$ 

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exchange clothing, bedding, etc., as other detainees.

#### SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)

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

Components	Y	N	NA	Remarks
Detainees in the SMU receive three nutritious				
meals/days.			1	
Selected from the Food Service's menu of the	$\boxtimes$			
day.	_	_		
<ul> <li>Food is not used as punishment.</li> </ul>				
Detainees are allowed to maintain a normal level of				
personal hygiene, including the opportunity to shower	$\boxtimes$			
and shave at least three times/week.				
The detainees receive, unless documented as a threat to security:				
to security:				
<ul> <li>Barbering services.</li> <li>Recreation privileges.</li> </ul>				
<ul> <li>Recreation privileges.</li> <li>Other-than-legal reading material.</li> </ul>	$\boxtimes$			
<ul> <li>Religious material.</li> </ul>	<u>к</u> Ч			
<ul> <li>The same correspondence privileges as other</li> </ul>				
detainees.				
Personal legal material.				
When phone access is limited by number or type of calls,				
limits do not apply to the following:				
<ul> <li>Calls about the detainee's immigration case or</li> </ul>				
other legal matters.	$\boxtimes$			
Calls to consular/embassy officials.				5
<ul> <li>Calls during family emergencies (as determined by the OIC(Mardon)</li> </ul>				
by the OIC/Warden).	└			
A health care professional visits every detainee in disciplinary segregation every day, Monday through				
Friday.	l		_	
The shift supervisor visit each segregated	$\boxtimes$			
detainee daily	ł			
Weekends and holidays.				
SMU detainees are allowed visitors, in accordance with	$\boxtimes$			
the "Visitation" standard.				
SMU detainees receive legal visits, as provided in the				
"Visitation" standard.	$\boxtimes$			
<ul> <li>Legal service providers notified of security</li> </ul>	<b>K</b> -3			
Concerns arising before a visit.		<u> </u>		
Visits from clergy are allowed.				
The clergy member given the option of visiting/not visiting the segregated detainee.				
<ul> <li>Violent/uncooperative detainees denied access</li> </ul>	$\boxtimes$			
<ul> <li>Violenzulicooperative detainees denied access to religious services when safety and security</li> </ul>				
would otherwise be affected.				
SMU detainees have law library access.	1	<u> </u>	1	SMU detainees use the
<ul> <li>Violent/uncooperative detainees retain access</li> </ul>				law library during the
to the law library unless adjudicated a security				evening shift.
threat in writing.				
<ul> <li>Legal material brought to individuals in the</li> </ul>				
SMU on a case-by-case basis.	1			
<ul> <li>Staff document every incident of denied</li> </ul>		1		
access to the law library.		1		

#### SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)

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

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

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)					
Acceptable	Deficient	🗌 At-Risk	🗌 Repeat Finding		

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

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The SMU was very clean and orderly. The officers assigned were very knowledgable in regards to policy and their post orders.





### TOOL CONTROL

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

Components	Y	N	NA	Remarks
There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	$\boxtimes$			
Department heads are responsible for implementing this standard in their departments.	$\boxtimes$			
<ul> <li>Tool inventories are required for:</li> <li>Maintenance Department</li> <li>Medial Department</li> <li>Food Service Department</li> <li>Electronics Shop</li> <li>Recreation Department</li> <li>Armory</li> </ul>				See notes below.
<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>ICE facilities use AMIS bar code labels when required.</li> </ul>				
<ul> <li>The facility has a tool classification system. Tools are classified according to:</li> <li>Restricted (dangerous/hazardous)</li> <li>Non Restricted (non-hazardous).</li> </ul>		$\boxtimes$		All tools are considered restricted and no detainees are allowed to handle tools.
Department heads are responsible for implementing tool-control procedures.				
The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable.				
<ul> <li>The facility has an approved tool storage system.</li> <li>The system ensures that all stored tools are accountable.</li> <li>Commonly used tools (tools that can be mounted) are stored in such a way that missing tool are readily notice.</li> </ul>				
Each facility has procedures for the issuance of tools to staff and detainees.	$\boxtimes$			
<ul> <li>The facility has policies and procedures to address the issue of lost tools. The policy and procedures include:</li> <li>Verbal and written notification.</li> <li>Procedures for detainee access.</li> <li>Necessary documentation/review for all incidents of lost tools.</li> </ul>				
Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	$\boxtimes$			
All private or contract repairs and maintenance workers under contract to the ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility.				

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TOOL CONTROL						
Acceptable	Deficient	At-Risk	Repeat Finding			

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

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All areas must have inventories that reflect the proper amount of tools that are presently on hand.

There were multiple metal cutting grinder wheels on one hook. The officer was asked how many were inventoried, he stated 3. There were 8 blades on the hook.

Several multi tool sets were missing parts and not properly accounted for, however, upon re-inspection the second day, it was already being corrected. The facility needs to be reminded that proper tool accountability needs to always be a top priority.

There are water hoses, approximately 25 feet long which could be used in an escape, in all housing units that are currently not marked nor being inventoried. Neither the housing unit officers nor the tool room officer are accounting for these items.

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#### TRANSPORTATION (Land Transportation)

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

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

Components	Yes	No	NA	Remarks	
Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.					
Every transporting officer required to drive a commercial size bus has a valid Commercial Driver's License (CDL) issued by the state of employment.					
Supervisors maintain records for each vehicle operator.	$\boxtimes$				
Officers use a checklist during every vehicle inspection.					
<ul> <li>Officers report deficiencies affecting operability.</li> <li>Deficiencies are corrected before the vehicle goes back into service.</li> </ul>					
<ul> <li>Transporting officers:</li> <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>					
<ul> <li>Two officers with valid CDLs required in any bus transporting detainees.</li> <li>When buses travel in tandem with detainees, there two qualified officers per vehicle.</li> <li>An unaccompanied driver transport an empty vehicle.</li> </ul>					
Before the start of each detail, the vehicle is thoroughly searched.	$\boxtimes$				
Positive identification of all detainees being transported is confirmed.	$\boxtimes$				
All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.	$\boxtimes$				
The facility ensures that the number of detainees transported does not exceed the vehicles manufacturers occupancy level.					
Protective vests are provided to all transporting officers.	$\square$				
<ul> <li>The vehicle crew conducts a visual count once all passengers are on board and seated.</li> <li>Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop.</li> </ul>					

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#### TRANSPORTATION (Land Transportation)

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

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

Components	Yes	No	NA	Remarks
Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	$\boxtimes$			
<ul> <li>Officers ensure that no one contacts the detainees.</li> <li>One officer remains in the vehicle at all times when detainees are present.</li> </ul>	$\boxtimes$			
<ul> <li>Meals are provided during long distance transfers.</li> <li>The meals meet the minimum dietary standards, as identified by dieticians utilized by the Service.</li> </ul>	$\boxtimes$			
<ul> <li>The vehicle crew inspects all Food Service pickups before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.).</li> <li>Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative.</li> <li>Basins, latrines, and drinking-water containers/dispensers are cleaned and sanitized on a fixed schedule.</li> </ul>				
<ul> <li>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>				
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.				
<ul> <li>The following contingencies are included in the written procedures for vehicle crews:</li> <li>Attack</li> <li>Escape</li> <li>Hostage-taking</li> <li>Detainee sickness</li> <li>Detainee death</li> <li>Vehicle fire</li> <li>Riot</li> <li>Traffic accident</li> <li>Mechanical problems</li> <li>Natural disasters</li> <li>Severe weather</li> <li>Passenger list is not exclusively men or women or minors</li> </ul>				

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🛛 Acceptable	Deficient	At-Risk	Repeat Finding

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

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### USE OF FORCE

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

Components		No	NA	Remarks
Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.				
When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, officers must try to resolve the situation without resorting to force.				
Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	$\boxtimes$			
<ul> <li>The facility subscribes to the prescribed Confrontation Avoidance Procedures.</li> <li>Ranking detention official, health professional, and others confer before every calculated use of force.</li> </ul>				
<ul> <li>When a detainee must be forcibly moved and/or restrained and there is time for a calculated use of force, staff use the Use-of-Force Team Technique.</li> <li>Under staff supervision.</li> </ul>				
Staff members are trained in the performance of the Use-of-Force Team Technique.	$\boxtimes$			
All use-of-force incidents are documented and reviewed.	$\square$			
<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>				
Mecication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.				
Use-of-Force Team follow written procedures that attempt to prevent injury and exposure to communicable disease(s).				



#### USE OF FORCE

**Policy:** The U.S. Department of Homeland Security authorizes the use of force only as a last alternative after all other reasonable efforts to resolve a situation have failed. Only that amount of force necessary 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>Standard procedures associated with using four-point restraints include: <ul> <li>Soft restraints (e.g., vinyl)</li> <li>Dressing the detainee appropriately for the temperature.</li> <li>A bed, mattress, and blanket/sheet.</li> <li>Checking the detainee at least every 15 minutes.</li> <li>Logging each check.</li> <li>Turning the bed-restrained detainee often enough to prevent soreness or stiffness.</li> <li>Medical evaluation of the restrained detainee twice per eight-hour shift.</li> <li>When qualified medical staff is not immediately available, staff position the detainee "face-up".</li> </ul> </li> </ul>				
<ul> <li>The shift supervisor monitors the detainee's position/condition every two hours.</li> <li>He/she allow the detainee to use the rest room at these times under safeguards.</li> </ul>				
All detainee checks are logged.	$\square$			
In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	$\boxtimes$			
<ul> <li>When the OIC authorizes use of non-lethal weapons:</li> <li>Medical staff is consulted before staff use pepper spray/non-lethal weapons.</li> <li>Medical staff review the detainee's medical file before use of a non-lethal weapon is authorized.</li> </ul>				
Special precautions are taken when restraining pregnant detainees. <ul> <li>Medical personnel are consulted</li> </ul>				
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.				
It standard practice to review any use of force and the non-routine application of restraints.	$\boxtimes$			<u>                                      </u>
<ul> <li>All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees.</li> <li>Specialized training is given Officers are certified in all devices they use.</li> </ul>				
The officers are thoroughly trained in the use of soft and hard restraints.				
In SPCs is the Use of Force form is used. In other facilities (IGSAs / CDFs) this form or its equivalent is used.				

	USE	OFFORCE	
🛛 Acceptable	Deficient	🗌 At-Risk	Repeat Finding

7/14/05

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No recorded calculated uses of force in the last several years.	. The use of force forms for immediate
use of force was reviewed and complete.	

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#### STAFF DETAINEE COMMUNICATIONS

**Policy**: Procedures must be in place to allow for formal and informal contact between key facility staff and ICE staff and ICE detainee and to permit detainees to make written requests to ICE staff and receive an answer in an acceptable time frame.

Y	N	NA	Remarks
	$\boxtimes$		
	$\boxtimes$		No evidence provided
$\boxtimes$			
	$\boxtimes$		
$\boxtimes$			English and Spanish
	$\boxtimes$		
	$\boxtimes$		No evidence provided

Staff Detainee Communications					
Acceptable	🛛 Deficient	At-Risk	Repeat Finding		

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

The facility could not provide logs, detainee request form copies or other proof to clearly demonstrate that the facility is in compliance with this standard.

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#### DETAINEE TRANSFER STANDARD

**Policy**: ICE will make all necessary notifications when a detainee is transferred. If a detainee is being transferred via the Justice Prisoner Alien Transportation System (JPATS), ICE will adhere to JPATS protocols. In deciding whether to transfer a detainee, ICE will take into consideration whether the detainee is represented before the immigration court. In such cases, the Field Office Director will consider the detainee's stage within the removal process, whether the detainee's attorney is located within reasonable driving distance of the facility, and where the immigration court proceedings are taking place.

Components	Y.	N	NA	Remarks
<ul> <li>When a detainee is represented by legal counsel or a legal representative, and a G-28 has been filed, the representative of record is notified by the detainee's Deportation Officer.</li> <li>The notification is recorded in the detainee's file</li> <li>When the A File is not available, notification is noted within DACS</li> </ul>				
Notification includes the reason for the transfer and the location of the new facility,				
The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.				
The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.				
<ul> <li>Facility policy mandates that:</li> <li>Times and transfer plans are never discussed with the detainee prior to transfer.</li> <li>The detainee is not notified of the transfer until immediately prior to departing the facility.</li> <li>The detainee is not permitted to make any phone calls or have contact with any detainee in the general population.</li> </ul>				
The detainee is provided with a completed Detainee Transfer Notification Form.	$\boxtimes$			
<ul> <li>Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.</li> </ul>	$\boxtimes$			
<ul> <li>For medical transfers:</li> <li>The Detainee Immigration Health Service (or IGSA)(DIHS) Medical Director or designee approves the transfer.</li> <li>Medical transfers are coordinated through the local ICE office.</li> <li>A medical transfer summary is completed and accompanies the detainee.</li> </ul>				
Detainees in ICE facilities having DIHS staff and medical care are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number and the envelope is marked Medical Confidential.				
For medical transfers, transporting officers receive instructions regarding medical issues.	$\boxtimes$			
Detainee's funds and valuables and property are returned and transferred with the detainee to his/her new location.				
Transfer and documentary procedures outlined in Section C and D are followed.				
Meals are provided when transfers occur during normally schedule meal times.				

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#### DETAINEE TRANSFER STANDARD

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Components	Y	N	NA	Remarks
An A File or work folder accompanies the detainee when transferred to a different field office or sub-office.	$\boxtimes$			
A Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.	$\boxtimes$			Only when case are transferred, not when detainee is a room and board.

	Detainee	Fransfer Standard	
🛛 Acceptable	Deficient	🗌 At-Risk	Repeat Finding

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

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Office of Detention and Removal Operations

U.S. Department of Homeland Security 801 I Street, NW Washington, DC 20531



U.S. Immigration and Customs Enforcement

MEMORANDUM FOR:

Nora Antunez Field Office Director San Diego Field Office

FROM:

Deputy Assistant Director

Detention Management Division

SUBJECT:

El Centro Service Processing Center Plan of Action

The El Centro Service Processing Center Plan of Action dated April 10, 2006, has been received. The Plan was developed in response to a Review conducted by Headquarters on July 12–14, 2005.

The Review Authority (RA) has evaluated the document and concurs with the Plan of Action, as written, and this review is closed. The Field Office must now initiate the following actions in accordance with the Detention Management Control Program (DMCP):

- The Field Office Director, Detention and Removal Operations, shall notify the facility <u>within</u> five business days of receipt of this memorandum. Notification shall include a copy of this memorandum.
- 2) The Field Office Director is responsible for ensuring that the facility complies with its proposed Plan of Action. A certified Detention Reviewer shall be assigned to follow-up on the deficiencies identified in the G324A, *Detention Facility Review Form* and the Reviewer-In-Charge (RIC) Summary Memorandum within 90 days.
- 3) The Field Office shall schedule the next annual review before July 12, 2006.

Should you or your staff have any questions regarding this matter, please contact b6, b7C Deputy Assistant Director, Detention Management Division at (202) 732-b6,b7C

cc: Official File

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