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

Headquarters Detention and Removal Operations

Headquarters and Field Operational Review Worksheet

☒   **Local Jail – IGSA**
☐   **State Facilitiy - IGSA**

Name   CHIPPEWA COUNTY SHERIFF'S DEPT
Address (Street and Name)   325 Court St.
City, State and Zip Code   SAULT SAINTE MARIE, MI`
County   CHIPPEWA
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)   (b)(6), (b)(7)c
Name and title of Reviewer-In-Charge   (b)(6), (b)(7)c
Date[s] of Review   04/25/2005
Type of Review   ☒ Headquarters   ☐ Operational   ☐ Special Assessment   ☐ Other

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Section I

Detainee Services Standards

ACCESS TO LEGAL MATERIALS

Policy Facilities holding INS 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	A	U	NA	Remarks
1. The facility provides a designated law library for detainee use.	☒	☐	☐	
2. The library contains a sufficient number of chairs, is well lit and is reasonably isolated from noisy areas.	☒	☐	☐	
3. The law library is adequately equipped with typewriter, computers or both and has sufficient supplies for daily use by the detainees.	☒	☐	☐	
4. 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 INS prior to inclusion.	☒	☐	☐	
6. 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.	☒	☐	☐	
7. There is a designated INS 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 The designee properly disposes outdated supplements and replaces damaged or missing material promptly.	☒	☐	☐	
8. 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.	☒	☐	☐	ONE HOUR PER DAY
9. Detainees may request material not currently in the law library. Each request is reviewed and where appropriate an acquisition request is initiate and timely pursued. Request for copies of court decisions are accommodate within 3 – 5 business days.	☒	☐	☐	
10. The facility permits detainees to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	☒	☐	☐	
11. The INS 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.	☒	☐	☐	
12. 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.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

Components	A	U	NA	Remarks
13. 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.	☒	☐	☐	
14. All denials of access to the law library fully documented.	☒	☐	☐	
15. INS Management is aware of each instance where detainees are denied access to the law library or law materials.	☒	☐	☐	THEY ARE NOTIFIED IMMEDIATELY
16. Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	☒	☐	☐	

ACCESS TO LEGAL MATERIALS – Rating

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

☒ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk

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

Auditor's Signature / Date

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

Components	Yes	No	NA	Remarks
1. In-processing includes an orientation session. At a minimum, orientation addresses: Unacceptable activities and behavior, and corresponding sanctions. How to contact his/her deportation officer. The availability of *pro bono* legal services, and how to pursue such services. Schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, etc and the detainee handbook .	☒	☐	☐	
2. Medical screenings are performed by a medical staff **or** persons who have received specialized training for the purpose of conducting an initial health screening.	☒	☐	☐	TB SCREEENINGS ARE DONE AT INTIAL BOOK-IN
3. The accompanying documentation is used to identify and classify each new arrival?	☒	☐	☐	
4. All new arrivals strip-searched in accordance with the "Detainee Search" standard. An officer of the same sex as the detainee conducts the search and the search is conducted in an area that affords as much privacy as possible.	☒	☐	☐	
5. The "Contraband" standard governs all personal property searches. IGSAs use or have a similar contraband standard. Staff prepare a complete inventory of each detainee's possessions. The detainee receives a copy.	☒	☐	☐	
6. Staff completes Form I-387 or similar form for CDFs and IGSAs for every lost or missing property claim. IGSA facilities forward all I-387 claims to INS.	☒	☐	☐	
7. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	☒	☐	☐	
8. The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. INS Detainees are not charged for these items.	☒	☐	☐	
9. All releases are coordinated with the INS office of jurisdiction.	☒	☐	☐	
10. Staff complete paperwork/forms for release as required.	☒	☐	☐	
11. INS Staff enter all information on detainees admitted, released, or transferred into the Deportable Alien Control System (DACS).	☒	☐	☐	

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

☒ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk

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

Auditor's Signature / Date

CLASSIFICATION SYSTEM

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

Components	Yes	No	NA	Remarks
1. The facility has a system for classifying INS detainees. In IGSAs, an Objective Classification System or similar is used.	☒	☐	☐	
2. The facility classification system includes: • Classifying detainees upon arrival. • Separating individuals who cannot be classified upon arrival from the general population. • The first-line supervisor or designated classification specialist reviewing every classification decision.	☒	☐	☐	DETAINEES ARE CLASSIFIED AT INTIAL BOOK-IN
3. The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	☒	☐	☐	
4. 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.	☒	☐	☐	
5. Housing assignments are based on classification-level.	☒	☐	☐	
6. A detainee's classification-level does not affect his/her recreation opportunities. Detainees recreate with persons of similar classification designations.	☒	☐	☐	
7. Detainee work assignments are based upon classification designations.	☒	☐	☐	
8. The classification process includes reassessment/reclassification. Reassessments are conducted between 45 and 60 days after arrival and subsequent reassessments are completed every 60 to 90 days?	☐	☐	☒	
9. 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.	☒	☐	☐	
10. Classification appeals are resolved within five business days and detainees are notified of the outcome within 10 business days.	☒	☐	☐	
11. Classification designations may be appealed to a higher authority such as the Officer in Charge or equivalent.	☒	☐	☐	
12. The Detainee Handbook or equivalent for IGSAs explains the classification levels, with the conditions and restrictions applicable to each.	☒	☐	☐	
13. The Detainee Handbook or equivalent for IGSAs specifies the procedures a detainee must follow to appeal his/her classification or request reclassification.	☒	☐	☐	THE DETAINEE HANDBOOK EXPLAINS THE RULES AND POLICIES OF THE JAIL

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

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

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
1. The rules for correspondence and other mail are posted in each housing or common area or providd to each detainee via a detainee handbook.	☒	☐	☐	
2. The facility provides key information in languages other than English; In the language(s) spoken by significant numbers of detainees. List any exceptions.	☒	☐	☐	
3. Incoming mail distributed to detainees on the day it is received by the facility and in no case more than 24 hours after it is received.	☒	☐	☐	
4. Outgoing mail routinely delivered to the postal service within one day of its entering the internal mail system (excluding weekends and holidays).	☒	☐	☐	
5. Staff records all priority, overnight, and certified mail delivered by the U.S.P.S. and all deliveries from commercial alternatives to the U.S.P.S.	☒	☐	☐	
6. Staff do not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized by the Officer-In-Charge or equivalent for prevailing security reasons.	☒	☐	☐	
7. Staff does not ever read incoming general correspondence without the OIC's prior approval.	☒	☐	☐	
8. Staff does not inspect incoming special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.	☒	☐	☐	
9. Staff are prohibited from reading or copying incoming special correspondence.	☒	☐	☐	
10. Staff are only authorized to inspect outgoing correspondence or other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity. Inspection of outgoing special correspondence is done in the presence of the detainee and for contraband only.	☒	☐	☐	
11. Correspondence to a politician or to the media is processed as special correspondence and is not read or copied.	☒	☐	☐	
12. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	☒	☐	☐	

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Components	Yes	No	NA	Remarks
13. The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	☒	☐	☐	
14. Staff maintains a written record of every item removed from detainee mail.	☒	☐	☐	
15. The OIC monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	☒	☐	☐	
16. The procedure for safeguarding cash removed from a detainee is effective. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.	☒	☐	☐	
17. Original Detainee identity documents (e.g., passports, birth certificates) are maintained A-files.	☒	☐	☐	
18. Staff provides the detainee an INS-certified copy of his/her identity document(s) upon request.	☒	☐	☐	
19. 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.	☒	☐	☐	
20. Every indigent detainee has the opportunity to mail, at government expense: Correspondence about a legal matter: At least three other letters per week: Packages deemed necessary by INS.	☒	☐	☐	
21. 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.	☒	☐	☐	
22. The facility provides writing paper, envelopes, and pencils at no cost to INS detainees.	☒	☐	☐	

CORRESPONDENCE AND OTHER MAIL - Rating

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

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

5/05/05

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Auditor's Signature / Date

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, INS, private organizations, etc. Every detainee will receive a copy of this handbook upon admission to the facility.

Components	Yes	No	NA	Remarks
1. The detainee handbook is written in English and translated into Spanish or into the next most-prevalent Language(s).	☒	☐	☐	
2. The handbook supplements the facility orientation video where one is provided.	☒	☐	☐	
3. All staff members receive a handbook and training regarding the handbook contents.	☒	☐	☐	
4. The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.	☒	☐	☐	
5. There an annual review of the handbook. By a designated committee or staff member.	☒	☐	☐	
6. The detainee handbook address the following issues: • Personal Items permitted to be retained • by the detainee. • Initial issue of clothes.	☒	☐	☐	
7. The detainee handbook states in clear language basic detainee responsibilities.	☒	☐	☐	
8. The handbook identifies: Initial issue of clothing and bedding and personal hygiene items.	☒	☐	☐	
9. The handbook states when a medical examination will be conducted.	☒	☐	☐	
10. The handbook describes the facility, housing units, dayrooms, In-dorm activities and special management units.	☒	☐	☐	
11. The handbook describes; Official count times and count procedures Meal times, feeding procedures, procedures for medical or religious diets, additional information, Smoking policy, Clothing exchange schedules and if authorized, clothes washing and drying procedures and expected personal hygiene practices.	☒	☐	☐	
12. The handbook describe times and procedures for obtaining disposable razors and allows that detainees attending court will be afforded the opportunity to shave first.	☒	☐	☐	
13. The handbook describes barber hours and hair cutting restrictions.	☒	☐	☐	
14. The handbook describes; the telephone policy, debit card procedures, direct and frees calls; Locations of telephones; Policy when telephone demand is high; Policy and procedures for emergency phone calls, and the Detainee Message System.	☒	☐	☐	
15. The handbook addresses religious programming.	☒	☐	☐	

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Components	Yes	No	NA	Remarks
16. The handbook states times and procedures for commissary or vending machine usage. (where available)	☒	☐	☐	
17. The handbook describes the detainee voluntary work program procedures and pay procedures.	☒	☐	☐	
18. The handbook describes the library location and hours of operation and law library procedures and schedules.	☒	☐	☐	
19. The handbook describes; attorney visitation hours; Location of the list of pro bono legal organizations; Group legal rights presentations schedule and sign up procedures.	☒	☐	☐	
20. The handbook describes the facility search procedures and contraband policy.	☒	☐	☐	
21. The handbook describes the facility visiting hours and schedule and visiting rules and regulations.	☒	☐	☐	
22. The handbook describes the correspondence policy and procedures.	☒	☐	☐	
23. The handbook describes the detainee disciplinary policy and procedures: Including: • Prohibited acts and severity scale sanctions. • Time limits in the Disciplinary Process. • Summary of Disciplinary Process.	☒	☐	☐	
24. The handbook describes the detainee grievance procedures including appeals.	☒	☐	☐	
25. The detainee handbook describes the sick call procedures for general population and segregation.	☒	☐	☐	
26. The handbook describes the facility recreation policy including: • Outdoor recreation hours. • Indoor recreation hours. • In dorm leisure activities. • Rules for television viewing.	☒	☐	☐	
27. The handbook describes the detainee dress code for daily living; Work assignments.	☒	☐	☐	
28. The handbook specifies the rights and responsibilities of all detainees.	☒	☐	☐	

DETAINEE HANDBOOK - Rating

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

☒ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk

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

05/05/05

FOOD SERVICE

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

Components	Yes	No	NA	Remarks
1. 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 FSA determines the responsibilities of the Food Service Staff.	☒	☐	☐	
2. The CS is on duty on days when the FSA is off duty and vice versa.	☒	☐	☐	
3. The FSA provides food service employees with training that specifically addresses detainee-related issues. • In INS Facilities this includes a review of the INS "Food Service" standard	☒	☐	☐	
4. Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device.	☒	☐	☐	
5. 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	☒	☐	☐	
6. Special procedures govern the handling of food items that pose a security threat.	☒	☐	☐	
7. Standard operating procedures include daily searches (shakedowns) of detainee work areas.	☒	☐	☐	
8. The FSA monitor staffs implementation of the facility's counting procedures. These procedures in written form and staff are trained in counting procedures.	☒	☐	☐	
9. The detainees assigned to the food service department look neat and clean. Their clothing and grooming comply with the "Food Service" standard.	☒	☐	☐	
10. The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	☒	☐	☐	
11. The CS instructs newly assigned detainee workers in the rules and procedures of the food service department.	☒	☐	☐	
12. During orientation and training session(s), the CS explains and demonstrates: • Safe work practices and methods. • Safety features of individual products/ pieces of equipment. • Training covers the safe handling of hazardous material[s] the detainee are likely to encounter in their work.	☒	☐	☐	
13. The CS documents all training in individual detainee detention files?	☒	☐	☐	

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Components	Yes	No	NA	Remarks
14. Detainees are paid in accordance with the "Voluntary Work Program" standard or prevailing IGSA standards.	☒	☐	☐	
15. 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.	☒	☐	☐	
16. A transparent "sneeze guard" protects both the serving line and salad bar line.	☒	☐	☐	
17. The facility has a standard 35-day menu cycle. IGSAs use a 35 day or similar system for rotating meals.	☒	☐	☐	
18. The FSA or facility considers the ethnic diversity of the facility's detainee population when developing menu cycles. (Provide examples)	☒	☐	☐	
19. A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	☒	☐	☐	
20. The CS has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	☒	☐	☐	
21. Does the CS have the authority to change menu items if necessary? • If yes, documenting each substitution, along with its justification • With copy to FSA	☒	☐	☐	
22. All staff and volunteers know and adhere to written "food preparation" procedures.	☒	☐	☐	
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	☒	☐	☐	
24. A common-fare menu available to detainees whose dietary requirements cannot be met on the main. • Changes to the planned common-fare menu can be made at the facility level. • Hot entrees are offered three times a week. • The common-fare menus satisfy nutritional recommended daily allowances (RDAs). • Staff routinely provides hot water for instant beverages and foods. • Common-fare meals are served with: • Disposable plates and utensils? • Reusable plates and utensils? • Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items.	☒	☐	☐	
25. A Supervisor at the command level must approve a detainee's removal from the Common-Fare Program. a. Under what circumstances?	☒	☐	☐	
26. The OIC, in conjunction with the Chaplain and/or local religious leaders, provide the FSA a schedule of the ceremonial meals for the following calendar year.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

Components	Yes	No	NA	Remarks
27. The common-fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. • Muslims fasting during Ramadan receive their meals after sundown? • Jews who observe Passover but do not participate in the Common-Fare Program receive the same Kosher-for- Passover meals as those who do participate. • Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent.	☒	☐	☐	
28. The food service program addresses medical diets.	☒	☐	☐	
29. Satellite-feeding programs follow guidelines for proper sanitation.	☒	☐	☐	
30. Hot and cold foods are maintained at the prescribed, "safe" temperature(s) after two hours.	☒	☐	☐	
31. All meals provided in nutritionally adequate portions.	☒	☐	☐	
32. Food is not used to punish or reward detainees based upon behavior.	☒	☐	☐	
33. The food service staff instructs detainee volunteers on: • Personal cleanliness and hygiene; • Sanitary techniques for preparing, storing, and serving food, and; • The sanitary operation, care, and maintenance of equipment.	☒	☐	☐	
34. Everyone working in the food service department complies with food safety and sanitation requirements. a. If not, explain non-compliance.	☒	☐	☐	
35. Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment. • who conducts the inspections?	☒	☐	☐	
36. Equipment is inspected for compliance with health and safety codes and regulations. • How often? • When was the most recent inspection? • Which agency conducted the inspection?	☒	☐	☐	
37. Reports of discrepancies are forwarded to the OIC or AOIC and corrective action is scheduled and completed.	☒	☐	☐	
38. Standard procedure includes checking and documenting temperatures of all dishwashing machines during each meal.	☒	☐	☐	
39. Staff documents the results of every refrigerator/ freezer temperature check.	☒	☐	☐	
40. The cleaning schedule for each food service area is conspicuously posted.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

Components	Yes	No	NA	Remarks
41. Do procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation?	☒	☐	☐	
42. Storage areas are locked.	☒	☐	☐	

FOOD SERVICE - Rating

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

☒ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk

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

05/05/05

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.

Components	Yes	No	NA	Remarks
1. Detainee funds and valuables are properly separated and stored away. Detainee funds and valuables are accessible to designated supervisor(s) only.	☒	☐	☐	
2. Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	☒	☐	☐	
3. 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 INS standard?	☒	☐	☐	
4. Staff forwards an arriving detainee's Medicine to the medical staff.	☒	☐	☐	
5. Staff searches arriving detainees and their personal property for contraband.	☒	☐	☐	
6. There is a written policy for returning forgotten property to detainees and staff follows procedures?	☒	☐	☐	
7. Property discrepancies are immediately reported to the CDEO or Chief of Security.	☒	☐	☐	
8. Staff follows written procedures when returning property to detainees.	☒	☐	☐	
9. CDF/IGSA facility procedures for handling detainee property claims are similar with the INS standard.	☒	☐	☐	
10. The facility attempts to notify an out-processed detainee that he/she left property in the facility. • By sending written notice to the detainee's last known address; • Via certified mail; • The notice state that the detainee has 30 days in which to claim the property, after which it will be considered abandoned.	☒	☐	☐	
11. The facility disposes of abandoned property in accordance with written procedures. • If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to INS.	☒	☐	☐	

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance.   For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

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

05/05/05

G-324a Detention Inspection Form Worksheet for IGSAs

GROUP LEGAL RIGHTS PRESENTATIONS

Policy: Facilities housing INS 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. INS encourages such presentations, which instruct detainees about the immigration system and their rights and options within it.

Components	Yes	No	NA	Remarks
1. The INS/OIC is responsive to requests by attorneys and accredited representatives for group presentations.	☒	☐	☐	
2. Upon receipt of concurrence by the District Director, the OIC ensures proper notification to attorneys or accredited representatives in a timely manner.	☒	☐	☐	
3. The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.	☒	☐	☐	
4. Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	☒	☐	☐	
5. Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.	☒	☐	☐	
6. 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.	☒	☐	☐	
7. Detainees in segregation and unable to attend for security reasons may request separate sessions with presenters. Such requests are documented.	☒	☐	☐	
8. Interpreters are admitted when necessary to assist attorneys and other legal representatives.	☒	☐	☐	
9. Presenters are afforded a minimum of one hour to make the presentation and to conduct a question-and-answer session.	☒	☐	☐	
10. Staff permits presenters to distribute INS-approved materials.	☒	☐	☐	
11. The facility permits presenters to meet with small groups of detainees to discuss their cases after the group presentation. INS Staff are present but do not monitor conversations with legal providers.	☒	☐	☐	
12. Group presenters who have had their privileges suspended are notified in writing by the OIC and the reasons for suspension are documented. The District Director is notified when a group or individual is suspended from making presentations.	☒	☐	☐	
13. The facility plays INS-approved videotaped presentations on legal rights, at regular opportunities at the request of outside organizations.	☒	☐	☐	
14. A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

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

05/05/05

DETAINEE GRIEVANCE PROCEDURES

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

Components	Yes	No	NA	Remarks
1. Written procedures provide for the informal resolution of oral grievances. • If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff.	☒	☐	☐	
2. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. • Detainees may seek help from other detainees or facility staff when preparing a grievance. • Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary.	☒	☐	☐	
3. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	☒	☐	☐	
4. There are no documented substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodges a complaint. • If yes, explain.	☒	☐	☐	
5. Procedures include maintaining a Detainee Grievance Log. • If not, an alternative acceptable record keeping system is maintained. • "Nuisance complains" are identified in the records. • For quality control purposes, staff documents nuisance complaints received but not filed.	☒	☐	☐	
6. Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to INS.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

Components	Yes	No	NA	Remarks
7. The grievance section of the handbook explains all steps in the grievance process – Including: • Informal and formal grievance procedures; • The appeals process and step-by-step procedures; • In CDFs/IGSA facilities: procedures for filing an appeal with INS. • Staff/detainee availability to help during the grievance process • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Justice.	☒	☐	☐	

DETAINEE GRIEVANCE PROCEDURES - Rating

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

☒ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk

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

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ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS

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

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

G-324a Detention Inspection Form Worksheet for IGSAs

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance.   For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

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

05/05/05

Auditor Signature / Date

Policy: All detainee marriage requests will receive case-by-case consideration from INS management.

Components	Yes	No	NA	Remarks
1. The OIC/INS considers detainee marriage requests on a case-by-case basis.	☐	☐	☒	
2. The ADD reviews every marriage request rejected by an OIC or IGSA. Rejections are documented.	☐	☐	☒	
3. It is standard practice to require a written request for permission to marry.	☐	☐	☒	
4. The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	☐	☐	☒	
5. The OIC provides a written copy of his/her decision to the detainee and his/her legal representative.	☐	☐	☒	
6. When permission is denied, the OIC states the basis for his/her decision.	☒	☐	☐	
7. The OIC provides the detainee with a place and time to make wedding arrangements.	☒	☐	☐	
8. The detainee handbook (or equivalent) explains the marriage request process?	☐	☐	☒	

MARRIAGE REQUESTS

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

☒ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk

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

05/05/05

Auditor's Signature / Date

NON-MEDICAL EMERGENCY ESCORTED TRIPS

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

Components	Yes	No	NA	Remarks
1. The OIC considers and approves, on a case-by-case basis, trips to immediate family member's: • Funeral • Deathbed	☒	☐	☐	
2. The facility recognizes mother, father, brother, sister, spouse, child, stepparent, and foster parent as "immediate family".	☒	☐	☐	
3. The IGSA facility notifies INS of all detainee requests for non-medical escorts.	☒	☐	☐	
4. The District Director is the approving official for non-medical escorted trips.	☒	☐	☐	
5. 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?	☒	☐	☐	
6. Detainees who require overnight housing placed in approved IGSA facilities.	☒	☐	☐	
7. Each escort includes at least two officers. • The detainee under constant, direct visual supervision of escorting staff.	☒	☐	☐	
8. The Chief Detention Enforcement Officer responsible for training escort officers to follow written procedures.	☒	☐	☐	
9. 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.	☒	☐	☐	
10. Escorting officers have the discretion to: a. Increase or decrease minimum restraints in accordance with written instruction, procedures and classification level of the detainee.	☒	☐	☐	
11. Escort officer training includes INS Firearms Policy, Section 20.012?	☒	☐	☐	
12. Escort officers do not accept gifts/gratuities from a detainee, detainee's relative or friend for any reason.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

Components	Yes	No	NA	Remarks
13. Escort officers ensure that detainees: • Conduct themselves in a manner that does not bring discredit to the INS. • Do not violate federal, state, or local laws. • Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants. • Do not arrange to visit family or friends unless approved before the trip. • Make no unauthorized phone calls. • Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return to the facility.	☒	☐	☐	
14. Standard procedure requires the immediate return to the facility of any detainee who violates trip rules.	☒	☐	☐	

NON MEDICAL EMERGENCY ESCORT - Rating

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

☒ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk

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

05/05/05

RECREATION

Policy: It is INS policy to provide access to recreational programs and activities to all INS detainees, to the extent possible, under conditions of security and supervision that protect their safety and welfare.

Components	Yes	No	NA	Remarks
1. Does the facility provide: • An indoor recreation program? • An outdoor recreation program?	☒	☐	☐	
2. The recreational specialist tailors the program activities and offerings to the particular detainee population.	☐	☐	☒	
3. Regular maintenance keeps recreational facilities and equipment in good condition.	☒	☐	☐	
4. The recreational specialist supervises detainee recreation workers.	☒	☐	☐	
5. The recreational specialist oversees recreation programs for Special Management Unit and special-needs detainees.	☒	☐	☐	
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	☒	☐	☐	
7. Outside activities are restricted to limited-contact sports.	☒	☐	☐	
8. Each detainee has the opportunity to participate in daily recreation.	☒	☐	☐	
9. Detainees have access to recreation activities outside the housing units for at least one hour daily, 5 days a week.	☒	☐	☐	
10. Staff checks all items for damage and condition when equipment is returned.	☒	☐	☐	
11. Staff conducts searches of recreation areas before and after use.	☒	☐	☐	
12. All recreation areas under constant staff supervision.	☒	☐	☐	
13. Supervising staff is equipped with radios.	☒	☐	☐	
14. The facility provides detainees in the SMU at least one hour of recreation time daily.	☒	☐	☐	
15. Detainees in disciplinary segregation receive a written explanation when a panel revokes his/her recreation privileges.	☒	☐	☐	
16. Does the OIC review the panel's decision before it becomes effective. If yes, in every case?	☒	☐	☐	
17. Detainees in administrative segregation receive a written explanation for denied recreational privileges.	☒	☐	☐	
18. Volunteer groups present special programs or religious activities.	☒	☐	☐	
19. Volunteers are required to sign a waiver of liability before entering a secure portion of the facility where detainees are present.	☒	☐	☐	
20. Visitors, relatives or friends are not allowed to serve as volunteers.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

Components	Yes	No	NA	Remarks
21. If the facility has no outside recreation, are detainees considered for transfer after six months? • If yes, written procedures ensure timely review of all eligible detainees.	☐	☐	☐	
22. Case officers make written transfer recommendations about every six-month detainee to the OIC.	☐	☐	☐	
23. The OIC documents all detainee-transfer decisions, whether yes or no.	☐	☐	☐	
24. The detainee's written decision for or against an offered transfer documented in his/her A-file.	☐	☐	☐	
25. Staff notifies the detainee's legal representative of his/her decision to accept/decline a transfer.	☐	☐	☐	
26. If no recreation is available, the INS District routinely review transfer eligibility for all detainees after 60 days.	☐	☐	☐	
27. 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.	☐	☐	☐	
28. The detainee's legal representative is notified of the detainee's/OIC's decision.	☐	☐	☐	

RECREATION - Rating

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

☒ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk

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

05/05/05

Auditor's Signature / Date

RELIGIOUS PRACTICES

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

Components	Yes	No	NA	Remarks
1. Detainees are allowed to engage in religious services.	☒	☐	☐	
2. Space is available for detainees to conduct religious services.	☒	☐	☐	
3. The facility allows detainees to observe the major "holy days" of their religious faith. a. List any exceptions.	☒	☐	☐	
4. The facility accommodates recognized holy-day observances by: • Providing special meals, consistent with dietary restrictions. • Honoring fasting requirements. • Facilitating religious services. • Allowing activity restrictions.	☒	☐	☐	
5. Each detainee is allowed religious items in his/her immediate possession.	☒	☐	☐	
6. Volunteer's credentials are checked and verified before letting him/her participate in detainee programs.	☒	☐	☐	
7. Members of faiths not represented by clergy conduct may request to present their own services within security allowances.	☒	☐	☐	
8. Detainees in the Special Management Unit to participate in religious practices unless otherwise documented for the safety and security of the facility.	☒	☐	☐	

RELIGIOUS PRACTICES

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

☒ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk

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

_____ 05/05/05
_____
Auditor's Signature / Date

DETAINEE TELEPHONE ACCESS

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

Components	Yes	No	NA	Remarks
1. Detainees allowed access to telephones during established facility waking hours.	☒	☐	☐	
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	☒	☐	☐	
3. Notification of this policy is in the detainee handbook.	☒	☐	☐	
4. The telephone access rules are posted in each housing area.	☒	☐	☐	
5. The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	☒	☐	☐	
6. Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	☒	☐	☐	
7. Telephones are inspected regularly (daily in SPCs/CDFs), by designated facility staff, to ensure that they are in good working order.	☒	☐	☐	
8. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	☒	☐	☐	
9. The facility administration monitors repair progress and take appropriate measures to ensure that the required repairs are begun and completed timely.	☒	☐	☐	
10. Detainees are afforded a *reasonable degree of privacy* for legal phone calls.	☒	☐	☐	
11. A procedure exists to assist a detainee who is having trouble placing a confidential call.	☒	☐	☐	
12. The facility provides the detainees with the ability to make non-collect (special access) calls.	☒	☐	☐	
13. Special Access calls are at no charge to the detainees.	☒	☐	☐	
14. In facilities unable to fully meet this requirement initially because of limitations of its telephone service, the INS makes alternate arrangements to provide required access within 24 hours of a request by a detainee.	☒	☐	☐	
15. No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".	☒	☐	☐	
16. Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility?	☒	☐	☐	
17. Use of general access phones is ordinarily not restricted.	☒	☐	☐	
18. Any restrictions are documented and fall within one of the categories in paragraph VIII section G?	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

Components	Yes	No	NA	Remarks
19. The facility has a system for taking and delivering detainee telephone messages.	☒	☐	☐	
20. Emergency phone call messages are immediately given to detainees.	☒	☐	☐	
21. Detainees are allowed to return emergency phone calls as soon as possible.	☒	☐	☐	
22. Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	☒	☐	☐	
23. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	☒	☐	☐	
24. Detainees in disciplinary segregation allowed phone calls for family emergencies.	☒	☐	☐	
25. Detainees in administrative segregation and protective custody afforded the same telephoning privileges as those in general population.	☒	☐	☐	
26. 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.	☒	☐	☐	

DETAINEE TELEPHONE ACCESS - Rating

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

☒ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk

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

05/05/05

Auditor's Signature / Date

VISITATION

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

Components	Yes	No	NA	Remarks
1. There is a written visitation schedule and hours for general visitation.	☒	☐	☐	
2. The visitation hours tailored to the detainee population and the demand for visitation.	☒	☐	☐	
3. The visitation schedule and rules are available to the public.	☒	☐	☐	
4. The hours for all categories of visitation are posted in the visitation waiting area.	☒	☐	☐	
5. A written copy of the rules regulating visitation and the hours of visitation is available to visitors.	☒	☐	☐	
6. A general visitation log is maintained.	☒	☐	☐	
7. The detainees are permitted to retain personal property item specified in the standard.	☒	☐	☐	
8. A visitor dress code is available to the public.	☒	☐	☐	
9. Visitors are searched and identified according to standard requirements.	☒	☐	☐	No contact visitation
11. The requirement on visitation by minors is complied with.	☒	☐	☐	
12. At facilities where there is no provision for visits by minors, the INS arranges for visits by children and stepchildren, on request, within the first 30 days.	☒	☐	☐	
13. After that time, on request, INS considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.	☒	☐	☐	
14. Detainees in special housing afforded visitation.	☒	☐	☐	
15. Legal visitation is available seven (7) days a week, including holidays?	☒	☐	☐	
16. 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.	☒	☐	☐	
17. On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	☒	☐	☐	
18. The call ahead inquiry policy is available to legal service providers.	☒	☐	☐	
19. Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	☒	☐	☐	
20. There are written procedures governing detainee searches. The procedure is also listed in the detainee handbook or equivalent.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

Components	Yes	No	NA	Remarks
21. 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.	☒	☐	☐	
22. Prior to each visit, legal service providers and assistants are identified per the standard.	☒	☐	☐	
24. The current list of *pro bono* legal organizations is posted in the detainee housing areas and other appropriate areas.	☒	☐	☐	
25. The decision to permit or deny a tour is not delegated below the level of District Director?	☒	☐	☐	
26. Provisions for NGO visitation as stated in the Detention Standards are complied with.	☒	☐	☐	
27. Law enforcement officials, requesting to visit with a detainee, are referred to the OIC for approval.	☒	☐	☐	
28. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the OIC.	☒	☐	☐	
29. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	☒	☐	☐	

VISITATION - Rating

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:
☒ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk

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

05/05/05

Auditor's Signature / Date

VOLUNTARY WORK PROGRAM

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

Components	Yes	No	NA	Remarks
1. Does the facility have a voluntary work program? If yes, do detainees participate?	☐	☐	☒	
2. Detainee housekeeping meets neatness and cleanliness standards.	☒	☐	☐	
3. Detainees have the opportunity to participate in special details, however, are never allowed to work outside the secure perimeter.	☒	☐	☐	
4. Written procedures govern selection of detainees for the Voluntary Work Program. • The same procedures apply for replacement workers as for "new" workers. • Staff follows written procedures.	☒	☐	☐	
5. Where possible, physically and mentally challenged detainees participate in the program.	☐	☐	☒	
6. The facility complies with work-hour requirements for detainees, not exceeding: • Eight hours a day. • Forty hours a week.	☒	☐	☐	
7. Detainee volunteers generally work according to fixed schedule.	☒	☐	☐	
8. If a detainee is removed from a work detail, staff places the written justification for the action in the detainee's detention file.	☒	☐	☐	
9. Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	☐	☐	☒	
10. The voluntary work program meets: • OSHA standards • NFPA standards • ACA standards • EOSH standards	☐	☐	☒	
11. Medical staff screens and formally certifies detainee food service volunteers. • Before the assignment begins • As a matter of written procedure	☐	☐	☒	
12. Detainees receive safety equipment/ training sufficient for the assignment	☐	☐	☒	
13. Proper procedure is followed when an INS detainee is injured on the job.	☐	☐	☒	

G-324a Detention Inspection Form Worksheet for IGSAs

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:
☒ **Acceptable** ☐ **Deficient** ☐ **Repeat Deficiency** ☐ **At-Risk**

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

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Auditor's Signature / Date

Section II

Health Services Standards

G-324a Detention Inspection Form Worksheet for IGSAs

HUNGER STRIKES

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

Components	Yes	No	NA	Remarks
1. When a detainee has refused food for 72 hours, it is standard practice for staff to refer him/her to the medical department.	☒	☐	☐	
2. CDFs and IGSAs immediately report a hunger strike to the INS.	☒	☐	☐	
3. The facility has established procedures to ensure staff respond immediately to a hunger strike.	☒	☐	☐	
4. Policy and procedure require that staff isolate a hunger-striking detainee from other detainees. a. If yes, in an observation room?	☒	☐	☐	
5. Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	☒	☐	☐	
6. Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	☒	☐	☐	
7. The OIC of the facility obtains a hunger striker's consent before medical treatment.	☒	☐	☐	
8. A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.	☒	☐	☐	
9. During a hunger strike, staff documents and provides the hunger-striking detainee three meals a day.	☒	☐	☐	
10. Staff maintains the hunger striker's supply of drinking water/other beverages.	☒	☐	☐	
11. During a hunger strike, staff removes all food items from the hunger striker's living area.	☒	☐	☐	
12. 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.	☒	☐	☐	
13. The medical staff has written procedures for treating hunger strikers.	☒	☐	☐	
14. Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.	☒	☐	☐	
15. 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.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

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

05/05/05

Auditor's Signature /Date

ACCESS TO MEDICAL CARE

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

Components	Yes	No	NA	Remarks
1. IGSA facilities operate a health care facility in compliance with State and Local laws and guidelines.	☒	☐	☐	
2. The facility's in-processing procedures of arriving detainees include medical screening.	☒	☐	☐	
3. All detainees have access to and receive medical care.	☒	☐	☐	
4. For IGSAs, the district has access to a Managed Health Care Coordinator.	☒	☐	☐	
5. The medical staff large enough to provide examine and treat the facility's detainee population.	☒	☐	☐	
6. The facility has sufficient space and equipment to afford each detainee privacy when receiving health care.	☒	☐	☐	
7. The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	☒	☐	☐	
8. The medical facility entrance includes a holding/waiting room.	☒	☐	☐	
9. The medical facility's holding/waiting room under the direct supervision of custodial staff.	☒	☐	☐	
10. Detainees in the holding/waiting room have access to a toilet and a drinking fountain.	☒	☐	☐	
11. Medical records are kept apart from other files. They are: • Secured in a locked area within the medical unit. • With physical access restricted to authorized medical staff. • Procedurally, no copies made and placed in detainee files.	☒	☐	☐	
12. Pharmaceuticals are stored in a secure area.	☒	☐	☐	
13. Medical screening includes a Tuberculosis (TB) test. • Every arriving detainee receives a TB test. • During the admission process. • Detainee's TB-screening does not occur more than one business day after his/her arrival at the facility. • Detainees not screened are housed separate from the general population.	☒	☐	☐	
14. All detainees receive a mental-health screening upon arrival. It is conducted: • By a health care provider or specially trained officer; • Before a detainee's assignment to a housing unit.	☒	☐	☐	
15. The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

Components	Yes	No	NA	Remarks
16. The health care provider physically examines/assesses arriving detainees within 14 days of admission.	☒	☐	☐	
17. Detainees in the Special Management Unit have access to health care services.	☒	☐	☐	
18. Staff provides detainees with health- services request slips daily, upon request. • Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population. • Service-request slips are delivered in a timely fashion to the health care provider.	☒	☐	☐	
19. 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.	☒	☐	☐	
20. The plan includes an on-call provider.	☒	☐	☐	
21. The plan includes a list of telephone numbers for local ambulances and hospital services.	☒	☐	☐	
22. The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.	☒	☐	☐	
23. Detention staff is trained to respond to health-related emergencies within a 4-minute response time.	☒	☐	☐	
24. In IGSAs, if staff is used to distribute medication, a health care provider properly trains these officers.	☒	☐	☐	
25. The medical unit keeps written records of medication that is distributed.	☒	☐	☐	
26. The I-819 (or IGSA equivalent) is used to notify the OIC/Facility of a detainee that has special medical needs.	☒	☐	☐	
27. A signed and dated consent form is obtained from a detainee before medical treatment is administered.	☒	☐	☐	
28. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	☒	☐	☐	
29. The facility health care/IGSA provider is given advance notice prior to the release, transfer, or removal of a detainee.	☒	☐	☐	
30. Detainee's medical records or a copy thereof, are available and transferred with the detainee.	☒	☐	☐	
31. Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL".	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

SUICIDE PREVENTION AND INTERVENTION

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

	Components	Yes	No	NA	Remarks
1.	Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.	☒	☐	☐	
2.	Training prepares staff to: • Recognize potentially suicidal behavior; • Refer potentially suicidal detainees, following facility procedures; • Understand and apply suicide-prevention techniques.	☒	☐	☐	
3.	A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process? • Screening does not occur later than one working day after the detainee's arrival.	☒	☐	☐	
4.	Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.	☒	☐	☐	
5.	The facility has a designated isolation room for evaluation and treatment.	☒	☐	☐	
6.	The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	☒	☐	☐	
7.	Medical staff has approved the room for this purpose.	☒	☐	☐	
8.	Staff observes a suicide-watch detainee at least once every 15 minute.	☒	☐	☐	

SUICIDE PREVENTION AND INTERVENTION - Rating

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

☒ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk

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

05/05/05

Auditor's Signature //Date

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

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

Components	Yes	No	NA	Remarks
1. Detainees, who are chronically or terminally ill, are transferred to an appropriate offsite medical facility.	☒	☐	☐	
2. The facility or appropriate INS office promptly notifies the next of kin of the detainee's: medical condition. • The detainee's location. • The limitations placed on visiting.	☒	☐	☐	
3. For IGSAs There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives. • The guidelines include instructions for detainees who wish to have a living will other than the generic form the DIHS provides or who wish to appoint another to make advance decisions for him or her.	☒	☐	☐	
4. The guidelines provide the detainee the opportunity to have a private attorney prepare the documents.	☒	☐	☐	
5. There is a policy addressing "Do Not Resuscitate Orders"?	☒	☐	☐	
6. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation?	☒	☐	☐	
7. The facility notifies the DIHS Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSAs, this notification is made through the local INS representative.	☒	☐	☐	
8. The facility has written procedures to address the issues of organ donation by detainees.	☒	☐	☐	
9. The facility has written procedures to notify INS officials, deceased family members and consulates, when a detainee dies while in Service.	☒	☐	☐	
10. The facility has a policy and procedure to address the death of a detainee while in transport.	☒	☐	☐	
11. At all INS locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	☒	☐	☐	
12. In the event that neither family nor consulate claims the remains, the DD schedules an indigent's burial, consistent with local procedures. • If the detainee's is a U.S. military veteran is the Department of Veterans Affairs notified.	☒	☐	☐	
13. An original or certified copy of a detainee's death certificate is placed in the subject's a-file.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

Components	Yes	No	NA	Remarks
14. The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as • Performance of an autopsy. • Who will perform the autopsy. • Obtaining State approved death certificates. • Local transportation of the body.	☒	☐	☐	
15. INS staff follow established procedures to properly close the case of a deceased detainee.	☒	☐	☐	

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

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

05/05/05
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Auditor's Signature/ Date

Section III

Security and Control

CONTRABAND

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

	Components	Yes	No	NA	Remarks
1.	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.	☒	☐	☐	
2.	Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	☒	☐	☐	
3.	Staff returns property not needed as evidence to the proper authority. Written procedures cover the return of such property.	☒	☐	☐	
4.	Altered property is destroyed following documentation and using established procedures.	☒	☐	☐	PROPERTY DESTROYED IS LOGGED
5.	Before confiscating religious items, the OIC or designated investigator contacts a religious authority.	☒	☐	☐	
6.	Staff follows written procedures when destroying hard contraband that is illegal.	☒	☐	☐	
7.	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.	☒	☐	☐	
8.	Upon admittance, detainees receive notice of items they can and cannot possess.	☒	☐	☐	AT INTIAL BOOK-IN

CONTRABAND

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

☒ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk

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

██████████████ 05/05/2005

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Auditor's Signature / Date

DETENTION FILES

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

Components	Yes	No	NA	Remarks
1. A detention file is created for every new arrival whose stay will exceed 24 hours.	☒	☐	☐	
2. The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	☒	☐	☐	
3. The detainee's detention file also contains documents generated during the detainee's custody. • Special requests • Any G-589s and/or I-77s closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same	☒	☐	☐	
4. The Chief Detention Enforcement Officer (CDEO) or equivalent directs certain documents be added to an alien's detention file.	☒	☐	☐	
5. 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.	☒	☐	☐	
6. 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.	☒	☐	☐	
7. The officer closing the detention file makes a notation that the file is complete and ready to be archived.	☒	☐	☐	
8. Staff makes copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.	☒	☐	☐	
9. 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.	☒	☐	☐	SUPERVISORS ONLY
10. Field offices controlling detention in IGSA facilities create and maintain detention files on all detainees admitted to IGSA facilities. These files contain the forms and documents set forth for SPC/CDF detention files to the extent that the field office creates them or the IGSA forwards them.	☒	☐	☐	

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

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

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Auditor's Signature / Date

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

Components	Yes	No	NA	Remarks
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	☒	☐	☐	
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	☒	☐	☐	
3. 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	☒	☐	☐	
4. The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	☒	☐	☐	THE RULES ARE IN THE DETAINEE HANDBOOK
5. The following conspicuously posted in Spanish and English or other dominate languages used in the facility: • Rights and Responsibilities • Prohibited Acts • Disciplinary Severity Scale • Sanctions • If so, where posted	☒	☐	☐	
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	☒	☐	☐	
7. If informal resolutions are not appropriate, incident reports and Notice of Charges are promptly forwarded to the INS/CDF supervisor.	☒	☐	☐	
8. Incident reports are investigated within 24 hours of the incident report. The Unit Disciplinary Committee (UDC) or equivalent does not convene before investigations have ended.	☒	☐	☐	
9. An intermediate disciplinary process is used to adjudicate minor infractions.	☒	☐	☐	
10. A disciplinary panel (or equivalent in IGSAs) adjudicates infractions. The panel: • Conducts hearings on all charges and allegations referred by the UDC • Considers written reports, statements, physical evidence, and oral testimony • Hears pleadings by detainee and staff representative • Bases its findings on the preponderance of evidence • Imposes only authorized sanctions	☒	☐	☐	
11. A staff representative is available, if requested for a detainee facing a disciplinary hearing	☒	☐	☐	

Components	Yes	No	NA	Remarks
12. The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons for are documented.	☒	☐	☐	
13. The duration of punishment set by the OIC/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.	☒	☐	☐	
14. Written procedures govern the handling of confidential-informant information. Standards include criteria for recognizing "substantial evidence"	☒	☐	☐	
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	☒	☐	☐	

DISCIPLINARY POLICY

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

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

05/05/2005

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Auditor's Signature / Date

EMERGENCY (CONTINGENCY) PLANS

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

Components	Yes	No	NA	Remarks
1. No Detainee or detainee groups exercise control or authority over other detainees.	☒	☐	☐	
2. Detainees are protected from: • Personal abuse • Corporal punishment • Personal injury • Disease • Property damage • Harassment from other detainees	☒	☐	☐	
3. Staff are trained to identify signs of detainee unrest. • What type of training and how often?	☒	☐	☐	ANNUALLY
4. Does staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Officer In Charge (OIC)? • From the OIC to line staff?	☒	☐	☐	
5. 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.	☒	☐	☐	
6. The plans address the following issues: • Confidentiality • Accountability (copies and storage locations) • Annual review procedures and schedule • Revisions	☒	☐	☐	
7. Contingency plans include a comprehensive general section with procedures applicable to most emergency situations.	☒	☐	☐	
8. The facility has cooperative contingency plans with applicable: • Local law enforcement agencies • State agencies • Federal agencies	☒	☐	☐	
9. All staff receive copies of Hostage Situation Management policy and procedures.	☒	☐	☐	
10. Staff is trained to disregard instructions from hostages, regardless of rank. Within 24 hours after release hostages are screened for medical and psychological effects.	☒	☐	☐	ANNUAL TRAINING IS GIVEN TO THE STAFF
11. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	☒	☐	☐	
12. The food service maintain at least 3-days' worth of emergency meals for staff and detainees.	☒	☐	☐	
13. Written plans locate shut-off valves and switches for all utilities (water, gas, electric).	☒	☐	☐	

Components	Yes	No	NA	Remarks

14. Written procedures cover:
   • Work/Food Strike
   • Disturbances
   • Escapes
   • Bomb Threats
   • Adverse Weather
   • Internal Searches
   • Facility Evacuation
   • Detainee Transportation System Plan
   • Internal Hostages
   • Civil Disturbances
	☒	☐	☐	

EMERGENCY (CONTINGENCY) PLANS

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

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

███████████ 05/05/2005

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Auditor's Signature / Date

ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Yes	No	NA	Remarks
1. The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	☒	☐	☐	
2. Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	☐	☐	☐	
3. The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. • The files list all storage areas, and include a plant diagram and legend. • The MSDSs and other information in the files are available to personnel managing the facility's safety program.	☐	☒	☐	INSPECTIONS ARE DONE QUATERLY.
4. All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: • Wear personal protective • Equipment. • Report hazards and spills to the • designated official.	☒	☐	☐	
5. The MSDSs are readily accessible to staff and detainees in the work areas.	☒	☐	☐	
6. Hazardous materials are always issued under proper supervision. • quantities are limited. • Staff always supervises detainees using these substances.	☒	☐	☐	
7. "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	☒	☐	☐	
8. Lighting fixtures and electrical equipment are installed in storage rooms and other hazardous areas meet National Electrical Code requirements.	☒	☐	☐	
9. All toxic and caustic materials stored in their original containers in a secure area.	☒	☐	☐	
10. Excess flammables, combustibles, and toxic liquids are disposed of properly and in accordance with MSDSs.	☒	☐	☐	
11. 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.	☐	☐	☐	
12. Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.	☐	☐	☒	

G-324a Detention Inspection Form Worksheet for IGSAs

Components	Yes	No	NA	Remarks
14. 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).	☒	☐	☐	
15. A technically qualified officer conducts the fire and safety inspections.	☒	☐	☐	
16. The Safety Office (or officer) maintains files of inspection reports? Including corrective actions taken.	☒	☐	☐	
17. The facility has an approved fire prevention, control, and evacuation plan.	☒	☐	☐	
18. The plan requires: • Monthly fire inspections. • Fire protection equipment strategically located throughout the facility. • Public posting of emergency plan with accessible building/room floor plans. • Exit signs and directional arrows. • An area-specific exit diagram conspicuously posted in the diagrammed area.	☒	☐	☐	
19. Fire drills are conducted and documented monthly.	☒	☐	☐	
20. A sanitation program covers barbering operations.	☐	☐	☒	
21. The barbershop has the facilities and equipment necessary to meet sanitation requirements.	☐	☐	☒	
22. The sanitation standards are conspicuously posted in the barbershop.	☐	☐	☒	
23. Written procedures regulate the handling and disposal of used needles and other sharp objects.	☒	☐	☐	
24. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	☒	☐	☐	
25. Standard cleaning practices include: • Using specified equipment; cleansers; disinfectants and detergents. • An established schedule of cleaning and follow-up inspections.	☒	☐	☐	
26. The facility follows standard cleaning procedures.	☒	☐	☐	
27. Spill kits are readily available.	☒	☐	☐	
28. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	☒	☐	☐	
29. Staff are trained to prevent contact with blood and other body fluids and written procedures are followed.	☒	☐	☐	ANNUAL TRAINING
30. Do the methods for handling/disposing of refuse meet all regulatory requirements.	☒	☐	☐	
31. A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. • At least monthly. • The pest-control program includes preventive spraying for indigenous insects.	☒	☐	☐	
32. Drinking water and wastewater is routinely tested according to a fixed schedule.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

Components	Yes	No	NA	Remarks
33. Emergency power generators is tested at least every two weeks. • Other emergency systems and equipment receive testing at least quarterly. • Testing is followed-up with timely corrective actions (repairs and replacements).	☒	☐	☐	

ENVIRONMENTAL HEALTH AND SAFETY

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

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

05/05/2005

Auditor's Signature / Date

HOLD ROOMS IN DETENTION FACILITIES

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

Components	Yes	No	NA	Remarks
1. The hold room is situated in a location within the secure perimeter.	☒	☐	☐	
2. The hold rooms well ventilated, well lighted and all activating switches located outside the room.	☒	☐	☐	
3. The hold rooms contain sufficient seating for the number of detainees held.	☒	☐	☐	
4. No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside holdrooms.	☒	☐	☐	
5. The walls of the hold rooms escape proof. • The hold room ceilings are escape and tamper resistant.	☒	☐	☐	
6. Individuals are not held in hold rooms for more than 12 hours.	☒	☐	☐	ONLY USED FOR INTIAL BOOK-IN
7. Male and females are segregated from each other at all times.	☒	☐	☐	
8. Every effort is made to ensure that detained detainees under the age of 18 are not held with adult detainees.	☐	☐	☒	JUVENILES ARE NOT BROUGHT TO THE FACILITY
9. Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	☒	☐	☐	
10. In older facilities officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.	☒	☐	☐	
11. All detainees are given a patdown search for weapons or contraband before being placed in the room.	☒	☐	☐	
12. Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring.). • Hold rooms are irregularly monitored every 15 minutes. • Unusual behavior or complaints are noted.	☒	☐	☐	
13. When the last detainee has been removed from the hold room, it is given a thorough inspection. • Cleaning. • Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair.	☒	☐	☐	
14. There is a written evacuation plan? • There is a designated officer to remove detainees from the holdrooms in case of fire and/or building evacuation.	☒	☐	☐	
15. An appropriate emergency service is called immediately upon a determination that a medical emergency may exist.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

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

███████████████████ 05/05/2005

Auditor's Signature / Date

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

Components	Yes	No	NA	Remarks
1. The security officer[s], or equivalent in IGSAs, has attended an approved locksmith training program.	☐	☐	☒	FACILITY HAS A CONTRACTED LOCKSMITH
2. The security officer, or equivalent in IGSAs, has responsibly for all administrative duties and responsibilities relating to keys, locks etc.	☒	☐	☐	
3. The security officer, or equivalent in IGSAs, provides training to employees in key control.	☒	☐	☐	
4. The security officer, or equivalent in IGSAs, maintains inventories of all keys, locks and locking devices.	☒	☐	☐	
5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	☒	☐	☐	
6. Facility policies and procedures address the issue of compromised keys and locks.	☒	☐	☐	
7. The security officer, or equivalent in IGSAs, develops policy and procedures to ensure safe combinations integrity.	☒	☐	☐	
8. Only dead bolt or dead lock functions are used in detainee accessible areas.	☒	☐	☐	
9. Non-authorized locks (as specified in the Detention Standard) are not used in detainee accessible areas.	☒	☐	☐	
10. The facility does not use grand master keying systems.	☒	☐	☐	
11. All worn or discarded keys and locks cut up and properly disposed of .	☒	☐	☐	
12. Padlocks and/or chains are not used on cell doors.	☐	☐	☐	
13. The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to • Occupational Safety and Environmental Health Manual, Chapter 3 • National Fire Protection Association Life Safety Code 101.	☒	☐	☐	
14. The operational keyboard sufficient to accommodate all the facility key rings including keys in use is located in a secure area.	☒	☐	☐	THEY ARE KEPT IN THE CONTROL ROOM
15. Procedures in place to ensure that key rings are: • Identifiable • Numbers of keys on the ring are cited? • Keys cannot be removed from issued key rings	☒	☐	☐	
16. Emergency keys are available for all areas of the facility.	☒	☐	☐	
17. The facilities use a key accountability system.	☒	☐	☐	
18. Authorization is necessary to issue any restricted key.	☒	☐	☐	

Components	Yes	No	NA	Remarks

19. Individual gun lockers are provided.
  • They are located in an area that permits constant officer observation.
  • In an area that does not allow detainee or public access.
	☒	☐	☐	

20. The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	☒	☐	☐	

21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys.
  • Issued keys are returned immediately in the event an employee inadvertently carries a key ring home.
  • When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified.
  • Detainees are not permitted to handle keys assigned to staff.
	☒	☐	☐	ANNUAL TRAINING

KEY AND LOCK CONTROL - Rating

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

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

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Auditor's Signature / Date

POPULATION COUNTS - Rating

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

Components	Yes	No	NA	Remarks
1. Staff conducts a formal count at least once each shift.	☒	☐	☐	AT THE BEGINNING AND END OF SHIFTS
2. Activities cease or are strictly controlled while a formal count is being conducted.	☒	☐	☐	
3. Do certain operations continue during formal counts?	☐	☒	☐	
4. Is a certain amount of movement tolerated during a formal count?	☒	☐	☐	
5. Formal counts in all units take place simultaneously.	☒	☐	☐	
6. Officers do not allow detainee participation in the count.	☒	☐	☐	
7. A face-to-photo count follows each unsuccessful recount.	☒	☐	☐	
8. Officers positively identify each detainee before counting him/her as present.	☒	☐	☐	
9. Written procedures cover informal and emergency counts. • They followed during informal counts. • During emergencies.	☒	☐	☐	
10. The control officer (or other designated position) maintains an out -count record of all detainees temporarily leaving the facility.	☒	☐	☐	
11. This training is documented in each officer's training folder.	☒	☐	☐	

Population Counts

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

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

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Auditor's Signature / Date

Policy: INS provides officers all necessary guidance for carrying out their duties. This guidance includes the post orders established for every post, which are reviewed at least annually, and given to each officer upon assignment to that post.

Components	Yes	No	NA	Remarks
1. Every Fixed post has a set of post orders.	☒	☐	☐	
2. Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	☒	☐	☐	
3. One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.	☒	☐	☐	
4. The IGSA maintains a complete set (central file) of post orders.	☒	☐	☐	
5. The central file accessible to all staff.	☒	☐	☐	
6. The OIC or Contract / IGSA equivalent initiate/authorizes all post-order changes.	☒	☐	☐	
7. The OIC or Contract / IGSA equivalent has signed and dated the last page of every section.	☒	☐	☐	
8. A review/updating/reissuing of post orders occurs regularly. At a minimum, Annually.	☒	☐	☐	
9. Procedures keep post orders and logbooks secure from detainees at all times.	☒	☐	☐	
10. Every armed-post officer qualifies with the post weapon(s) before assuming post duty.	☒	☐	☐	
11. Armed-post post orders provide instructions for escape attempts.	☒	☐	☐	
12. The post orders for housing units track the event schedule.	☒	☐	☐	
13. Housing-unit post officers record all detainee activity in a log. The post order include instructions on maintaining the logbook.	☒	☐	☐	

POST ORDERS - Rating

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

☒ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk

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

██████████████████ 05/05/2005

Auditor's Signature / Date

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
1. The facility has a comprehensive security inspection policy. The policy specifies: • Posts to be inspected • Required inspection forms • Frequency of inspections • Guidelines for checking security features • Procedures for reporting weak spots, inconsistencies, and other areas needing improvement	☒	☐	☐	
2. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	☒	☐	☐	
3. Documentation of security inspections is kept on file.	☒	☐	☐	
4. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	☒	☐	☐	
5. The front-entrance officer checks the ID of everyone entering or exiting the facility.	☒	☐	☐	
6. All visits officially recorded in a visitor logbook or electronically recorded.	☒	☐	☐	
7. The facility has a secure visitor pass system.	☒	☐	☐	
8. Every Control Center officer receives specialized training.	☒	☐	☐	
9. The Control Center is staffed around the clock.	☒	☐	☐	
10. Policy restricts staff access to the Control Center.	☒	☐	☐	
11. Detainees do not have access to the Control Center.	☒	☐	☐	AT NO TIME
12. Communications are centralized in the Control Center.	☒	☐	☐	
13. Officers monitor all vehicular traffic entering and leaving the facility.	☒	☐	☐	
14. The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: • The driver's name • Company represented • Vehicle contents • Delivery date and time • Date and time out • Vehicle license number • Name of employee responsible for the vehicle during the facility visit	☒	☐	☐	
15. Officers thoroughly search each vehicle entering and leaving the facility.	☒	☐	☐	
16. The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	☒	☐	☐	
17. Tools being taken into the secure area of the facility are inventoried before entering and prior to departure.	☒	☐	☐	
18. The SMU entrance has a sallyport.	☒	☐	☐	
19. Written procedures govern searches of detainee housing units and personal areas.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

Components	Yes	No	NA	Remarks
20. Housing area searches occur at irregular times.	☒	☐	☐	
21. Every search of the SMU and other housing units documented.	☒	☐	☐	
22. Storage and supply rooms; walls, light and plumbing fixtures, accesses, and drains, etc. undergo frequent, irregular searches. These searches are documented.	☒	☐	☐	
23. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	☒	☐	☐	
24. Daily procedures include: • Perimeter alarm system tests. • Physical checks of the perimeter fence. • Documenting the results.	☒	☐	☐	
25. Visitation areas receive frequent, irregular inspections.	☒	☐	☐	

SECURITY INSPECTIONS - Rating

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

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

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

Auditor's Signature / Date

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

Components	Yes	No	NA	Remarks
1. The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. • Detainees are placed in the SMU (administrative) in accordance with written criteria.	☒	☐	☐	
2. In exigent circumstances, staff may place a detainee in the SMU (administrative) before a written order has been approved. • A copy of the order given to the detainee within 24 hours.	☒	☐	☐	
3. The OIC (or equivalent) regularly reviews the status of detainees in administrative detention? • A supervisory officer conducts a review within 72 hours of the detainee's placement in the SMU (administrative).	☒	☐	☐	
4. A supervisory officer conducts another review after the detainee has spent seven days in administrative segregation. • Every week thereafter for the first month. • Every 30 days after the first month. • Does each review include an interview with the detainee. • Is a written record made of the decision and the justification.	☒	☐	☐	
5. The detainee is given a copy of the decision and justification for each review. • If not, why not? • The detainee is given an opportunity to appeal the reviewer's decision to someone else in the facility.	☒	☐	☐	
6. The OIC (or equivalent) routinely notifies the Assistant District Director (or staff officer in charge of IGSAs), Detention and Deportation (ADDD), any time a detainee's stay in administrative detention exceeds 30 days. • Upon notification that the detainee's administrative segregation has exceeded 60 days, the ADDD forwards written notice to the Assistant Regional Director for DRO.	☒	☐	☐	
7. The OIC or equivalent) reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU. • A written record is made of the decision and the justification. • The detainee receives a copy of this record.	☒	☐	☐	

Components	Yes	No	NA	Remarks
8. 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.	☒	☐	☐	
9. Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	☒	☐	☐	
10. The SMU well ventilated. • Adequately lighted. • Appropriately heated. • Maintained in a sanitary condition.	☒	☐	☐	
11. All cells are equipped with beds. • Every bed securely fastened to the floor or wall.	☒	☐	☐	
12. The number of detainees in any cell does not exceed the occupancy limit. • Does the OIC approve excess occupancy on a case-by-case basis? • When occupancy exceeds recommended capacity, do basic living standards decline? • Do criteria for objectively assessing living standards exist? • If yes, are the criteria included in the written procedures?	☒	☐	☐	
13. The segregated detainees do not have fewer opportunities to exchange/launder clothing, bedding, and linen than detainees in the general population.	☒	☐	☐	THE DETAINEE HAS THE SAME PRIVILEDGES.
14. Detainees receive three nutritious meals per day. • From the general population's menu of the day. • Do detainees eat only with disposable utensils. • Is food ever used as punishment.	☒	☐	☐	
15. Each detainee maintains a normal level of personal hygiene in the SMU. • The detainees have the opportunity to shower and shave at least three times a week. • If not, explain.	☒	☐	☐	
16. The detainees are provided: • Barbering services. • Recreation privileges in accordance with the "Detainee Recreation" standard. • Non-legal reading material. • Religious material. • The same correspondence privileges as detainees in the general population. • Telephone access similar to that of the general population. • Personal legal material.	☒	☐	☐	
17. A health care professional visits every detainee at least three times a week. • The shift supervisor visits each detainee daily. • Weekends and holidays.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

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

SPECIAL MANAGEMENT UNIT (SMU) - Rating
Administrative Segregation

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

☒ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk

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

████████████ 05/05/2005

Auditor's Signature / Date

SPECIAL MANAGEMENT UNIT				
(Disciplinary Segregation)				

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

Components	Yes	No	NA	Remarks
1. Officers placing detainees in disciplinary segregation follow written procedures.	☒	☐	☐	
2. The sanctions for violations committed during one incident do not exceed 60 days.	☒	☐	☐	
3. A completed Disciplinary Segregation Order accompanies the detainee into the SMU? • The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation.	☒	☐	☐	
4. Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at set intervals. • Who conducts the review? • What is reviewed? • How is the review documented? • Does the reviewer interview the detainee? • Can the reviewing officer recommend an early release from the SMU? • If yes, under what circumstances? • After each formal review, does the detainee receive a written copy of the decision and reason(s) for it?	☒	☐	☐	
5. The conditions of confinement in the SMU are proportional to the amount of control necessary to protect detainees and staff.	☒	☐	☐	
6. Detainees in disciplinary segregation have fewer privileges than those housed in administrative segregation.	☒	☐	☐	THE DETAINEE HAS THE SAME PRIVILEDGES.
7. Living conditions in disciplinary SMUs modified to reinforce acceptable behavior. • If yes, does staff prepare written documentation for this action. • Does the OIC sign to indicate approval.	☒	☐	☐	
8. Every detainee in disciplinary segregation receive the same humane treatment, regardless of offense.	☒	☐	☐	
9. The quarters used for segregation are: • Well-ventilated. • Adequately lighted. • Appropriately heated. • Maintained in a sanitary condition.	☒	☐	☐	
10. All cells are equipped with beds. • The beds securely fastened to the floor or wall of the cell.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

Components	Yes	No	NA	Remarks
11. The number of detainees confined to each cell or room do not exceed the number for which the space was designate. • Does the OIC approve excess occupancy on a temporary basis.	☒	☐	☐	
12. Is a dry cell part of the disciplinary SMU?	☒	☐	☐	
13. When a detainee is segregated without clothing, mattress, blanket, or pillow, a justification is made and the decision is reviewed each shift. Items are returned as soon as it is safe.	☒	☐	☐	
13. Detainees in the SMU have the same opportunities to exchange clothing, bedding, etc., as other detainees.	☒	☐	☐	
14. Detainees in the SMU receive three nutritious meals/days. • Selected from the Food Service's menu of the day. • Food is not used as punishment.	☒	☐	☐	
15. Detainees are allowed to maintain a normal level of personal hygiene, including the opportunity to shower and shave at least three times/week.	☒	☐	☐	
16. The detainees receive, unless documented as a threat to security: • Barbering services. • Recreation privileges. • Other-than-legal reading material. • Religious material. • The same correspondence privileges as other detainees. • Personal legal material.	☒	☐	☐	
17. When phone access is limited by number or type of calls, limits do not apply apply to the following: • Calls about the detainee's immigration case or other legal matters. • Calls to consular/embassy officials. • Calls during family emergencies (as determined by the OIC/Warden).	☒	☐	☐	
18. A health care professional visits every detainee in disciplinary segregation every day, Monday through Friday. • The shift supervisor visit each segregated detainee daily • Weekends and holidays.	☒	☐	☐	
19. SMU detainees are allowed visitors, in accordance with the "Visitation" standard.	☒	☐	☐	
20. SMU detainees receive legal visits, as provided in the "Visitation" standard. • Legal service providers notified of security concerns arising before a visit.	☒	☐	☐	
21. Visits from clergy are allowed. • The clergy member given the option of visiting/not visiting the segregated detainee. • Violent/uncooperative detainees denied access to religious services when safety and security would otherwise be affected.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

Components	Yes	No	NA	Remarks
22. SMU detainees have law library access. • Violent/uncooperative detainees retain access to the law library unless adjudicated a security threat in writing. • Legal material brought to individuals in the SMU on a case-by-case basi. • Staff document every incident of denied access to the law library.	☒	☐	☐	
23. All detainee-related activities are documented, e.g., meals served, recreation activities, visitors, etc.	☒	☐	☐	
24. Is the SPC's, the Special Management Housing Unit Record (I-888) is prepared as soon as the detainee is placed in the SMU. • All I-888s filled out by the end of each shift • The CDF/IGSA facility use Form • I-888 (or equivalent local form).	☒	☐	☐	
25. SMU staff records whether the detainee ate, showered, exercised, took medication, etc. • Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc. • The health care official sign individual records after each visit. • The housing officer initials the record when all detainee services are completed or at the end of the shift. • A new record is created weekly for each detainee in the SMU. • The SMU retains these records until the detainee leaves the SMU.	☒	☐	☐	

SPECIAL MANAGEMENT UNIT - Rating
(Disciplinary Segregation)

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

☒ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk

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

██████████████ 05/05/2005

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Auditor's Signature / Date

TOOL CONTROL

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

Components	Yes	No	NA	Remarks
1. There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	☒	☐	☐	
2. Department heads are responsible for implementing this standard in their departments.	☒	☐	☐	
3. Tool inventories are required for: • Maintenance Department • Medial Department • Food Service Department • Electronics Shop • Recreation Department • Armory	☒	☐	☐	
4. The facility has a facility policy for the regular inventory of all tools. • The policy sets minimum time lines for physical inventory and all necessary documentation. • INS facilities use AMIS bar code labels when required.	☒	☐	☐	
5. The facility has a tool classification system. Tools are classified according to: • Restricted (dangerous/hazardous) • Non Restricted (non-hazardous).	☒	☐	☐	
6. Department heads are responsible for implementing tool-control procedures.	☒	☐	☐	
7. The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable.	☒	☐	☐	
8. The facility has an approved tool storage system. • The system ensures that all stored tools are accountable. • Commonly used tools (tools that can be mounted) are stored in such a way that missing tool are readily notice.	☒	☐	☐	
9. Each facility has procedures for the issuance of tools to staff and detainees.	☒	☐	☐	
10. The facility has policies and procedures to address the issue of lost tools. The policy and procedures include: • Verbal and written notification. • Procedures for detainee access. • Necessary documentation/review for all incidents of lost tools.	☒	☐	☐	
11. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

Components	Yes	No	NA	Remarks
12. All private or contract repairs and maintenance workers under contract to the INS, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility.	☒	☐	☐	

TOOL CONTROL - Rating

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

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

███████████████ 05/05/2005

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

Auditor's Signature / Date

TRANSPORTATION
(Land Transportation)

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

Components	Yes	No	NA	Remarks
1. Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	☒	☐	☐	
2. Every transporting officer required to drive a commercial size bus has a valid Commercial Driver's License (CDL) issued by the state of employment.	☐	☐	☒	THE FACILITY HAS NO BUSES
3. Supervisors maintain records for each vehicle operator.	☒	☐	☐	
4. Officers use a checklist during every vehicle inspection. • Officers report deficiencies affecting operability. • Deficiencies are corrected before the vehicle goes back into service.	☒	☐	☐	
5. Transporting officers: • Limit driving time to 10 hours in any 15 hour period. • Drive only after eight consecutive off-duty hours. • Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours. • Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days. • During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a safe area–exceeding the 10-hour limit.	☒	☐	☐	
6. Two officers with valid CDLs required in any bus transporting detainees. • When buses travel in tandem with detainees, there two qualified officers per vehicle. • An unaccompanied driver transport an empty vehicle.	☐	☐	☒	
7. Before the start of each detail, the vehicle is thoroughly searched.	☒	☐	☐	
8. Positive identification of all detainees being transported is confirmed.	☒	☐	☐	
9. All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.	☒	☐	☐	
10. The facility ensures that the number of detainees transported does not exceed the vehicles manufacturers occupancy level.	☒	☐	☐	
11. Protective vests are provided to all transporting officers.	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

Components	Yes	No	NA	Remarks
12. The vehicle crew conducts a visual count once all passengers are on board and seated. • Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop.	☒	☐	☐	
13. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	☒	☐	☐	
14. Officers ensure that no one contacts the detainees. • One officer remains in the vehicle at all times when detainees are present.	☒	☐	☐	
15. Meals are provided during long distance transfers. • The meals meet the minimum dietary standards, as identified by dieticians utilized by the Service.	☒	☐	☐	
16. The vehicle crew inspects all Food Service pickups before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). • Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative. • Basins, latrines, and drinking-water containers/dispensers are cleaned and sanitized on a fixed schedule.	☒	☐	☐	
17. INS Vehicles have: • Two-way radios. • Cellular telephones. • Equipment boxes stocked in accordance with the Use of Force Standard.	☒	☐	☐	
18. The vehicles are clean and sanitary at all times.	☒	☐	☐	
19. Personal property of a detainee transferring to another facility: • Is inventoried. • Is inspected. • Accompanies the detainee.	☒	☐	☐	BEFORE EVERY TRANSPORT DETAIL.
20. The following contingencies are included in the written procedures for vehicle crews: • Attack • Escape • Hostage-taking • Detainee sickness • Detainee death • Vehicle fire • Riot • Traffic accident • Mechanical problems • Natural disasters • Severe weather • Passenger list is not exclusively men or women or minors	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

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

05/05/2005

Auditor's Signature / Date

G-324a Detention Inspection Form Worksheet for IGSAs

USE OF FORCE

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

Components	Yes	No	NA	Remarks
1. Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	☒	☐	☐	
2. 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.	☒	☐	☐	
3. Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	☒	☐	☐	
4. The facility subscribes to the prescribed Confrontation Avoidance Procedures. • Ranking detention official, health professional, and others confer before every calculated use of force.	☒	☐	☐	
5. When a detainee must be forcibly moved and/or restrained and there is time for a calculated use of force, staff use the Use-of-Force Team Technique. • Under staff supervision.	☒	☐	☐	
6. Staff members are trained in the performance of the Use-of-Force Team Technique.	☒	☐	☐	
7. All use-of-force incidents are documented and reviewed.	☒	☐	☐	
8. Staff: • Does not use force as punishment. • Attempts to gain the detainee's voluntary cooperation before resorting to force • Uses only as much force as necessary to control the detainee. • Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical.	☒	☐	☐	
9. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	☒	☐	☐	
10. Use-of-Force Team follow written procedures that attempt to prevent injury and exposure to communicable disease(s).	☒	☐	☐	

G-324a Detention Inspection Form Worksheet for IGSAs

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

G-324a Detention Inspection Form Worksheet for IGSAs

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

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

---

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

██████████████ 05/05/2005

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

Auditor's Signature / Date

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

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

DOJ Core Standards - Rating
IGSA's Only

When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.

Standard Rating:

☒ Acceptable ☐ Deficient ☐ Repeat Deficiency ☐ At-Risk

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

05/05/05

Auditor's Signature / Date

Office of ~~ntion~~ and Removal Operations
U.S. De~~partm~~ent of Homeland Security
425 I Street, NW
Washington, DC 20536

**U.S. Immigration
and Customs
Enforcement**

5/5/2005

MEMORANDUM FOR:	John P. Torres Director (Acting) Office Of Detention and Removal
FROM:	Deportation Officer D&R Detroit, Mi. 482
SUBJECT:	Annual Detention Review

The Detroit Field Office, Office of Detention and Removal conducted a detention review of the Chippewa County Correctional Facility on 4/27/2005. This review was conducted by ▮▮▮▮▮▮▮▮ ▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮. This facility is used for detainees requiring housing over 72 hours.

Type of Review:
This review is a scheduled Operational Review to determine general compliance with established Immigration and Customs Enforcement (ICE) National Detention Standards.

Review Summary:
It is the Reviewer in Charge recommendation that the facility receive a rating of "ACCEPTABLE".

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

Compliant	-	36
Deficient	-	0
At-Risk	-	0
Non-Applicable	-	23

Standards Summary Findings:
    ACCEPTABLE

RIC Observations:
NONE

RIC Issues and Concerns
NONE

Recommended Rating and Justification:
It is the Reviewer in Charge recommendation that the facility receive a rating of "ACCEPTABLE".

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

A. Type of Facility Reviewed

☐	**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
4/27/2005

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
10 /02/2003

Previous Rating
☐ Superior ☐ Good ☒ Acceptable ☐ Deficient ☐ At-Risk

D. Name and Location of Facility

Name
CHIPPEWA CO CORRECDTIONAL FACILITY

Address (Street and Name)
325 COURT ST

City, State and Zip Code
SAULT STE MARIE, MI 49783

County
CHIPPEWA

Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)
▮▮▮▮▮▮

Telephone # (Include Area Code)
▮▮▮▮▮

Field Office / Sub-Office (List Office with oversight responsibilities)
Detroit, MI

Distance from Field Office
336 mile

E. ICE Information

Name of Inspector (Last Name, Title and Duty Station)
▮▮▮ / D.O. / Detroit District Office

Name of Team Member / Title / Duty Location
▮▮▮▮ / IEA. / USBP Detroit Office, MI

Name of Team Member / Title / Duty Location
/   /

Name of Team Member / Title / Duty Location
/   /

F. CDF/IGSA Information Only

Contract Number	Date of Contract or IGSA
ACB-3-H-0006	2/21/2003

Basic Rates per Man-Day
56.69

Other Charges: (If None, Indicate N/A)
;   ;   ;

Estimated Man-days Per Year
365

G. Accreditation Certificates

List all State or National Accreditation[s] received:

☐ Check box if facility has no accreditation[s]

H. Problems / Complaints (Copies must be attached)

The Facility is under Court Order or Class Action Finding
☐ Court Order   ☐ Class Action Order

The Facility has Significant Litigation Pending
☐ Major Litigation   ☐ Life/Safety Issues

☒ Check if None.

I. Facility History

Date Built
1951

Date Last Remodeled or Upgraded
2000

Date New Construction / Bedspace Added

Future Construction Planned
☐ Yes ☒ No   Date:

Current Bedspace	Future Bedspace (# New Beds only)
117	Number: Date:

J. Total Facility Population

Total Facility Intake for previous 12 months
2,200

Total ICE Mandays for Previous 12 months

K. Classification Level (ICE SPCs and CDFs Only)

	L-1	L-2	L-3
Adult Male			
Adult Female			0

L. Facility Capacity

	Rated	Operational	Emergency
Adult Male	117		
Adult Female			

☐ Facility holds Juveniles Offenders 16 and older as Adults

M. Average Daily Population

	ICE	USMS	Other
Adult Male	26	0	35
Adult Female	6	0	3

(See attached E-..1)

N. Facility Staffing Level

Security:	Support:
▮▮▮▮▮	

DHS/ICE Detention Standards Review Summary Report

1. Acceptable   2. Deficient   3. At Risk   4. Repeat Finding | 5. Not Applicable

Legal Access Standards	1.	2.	3.	4.	5.
1. Access to Legal Materials	☒	☐	☐	☐	
2. Group Presentations on Legal Rights	☒	☐	☐	☐	
3. Visitation	☒	☐	☐	☐	
4. Telephone Access	☒	☐	☐	☐	

Detainee Services	1.	2.	3.	4.	5.
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	☐	☐	☐	☐	☒

Health Services	1.	2.	3.	4.	5.
18. Hunger Strikes	☒	☐	☐	☐	
19. Medical Care	☒	☐	☐	☐	
20. Suicide Prevention and Intervention	☒	☐	☐	☐	
21. Terminal Illness, Advanced Directives and Death	☒	☐	☐	☐	

Security and Control	1.	2.	3.	4.	5.
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.

Significant Incident Summary Worksheet

For ICE to complete its review of your facility, the following information must be completed prior to the scheduled review dates. The information on this form should contain data for the past twelve months in the boxes provided. The information on this form is used in conjunction with the ICE Detention Standards in assessing your Detention Operations against the needs of the ICE and its detained population. This form should be filled out by the facility prior to the start of any inspection. 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: Offenders on Offenders[1]	Types (Sexual[2], Physical, etc.)	0	0	0	0
	With Weapon	0	0	0	0
	Without Weapon	5	7	7	6
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	0	0	0	0
	With Weapon	1	2	6	1
	Without Weapon	10	13	22	8
Number of Forced Moves, incl. Forced Cell moves[3]		0	0	0	0
Disturbances[4]		11	1	7	2
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 Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	O	O	O	O
	Type (C=Chair, B=Bed, BB=Board, O=Other)	C1	C1	C6	C6
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	0	0	0
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	0	0	0	0
	# Resolved in favor of Offender/Detainee	0	0	0	0
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	S1	I1	0	0
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	16	12	16	18
	# Psychiatric Cases referred for Outside Care	0	0	0	2

[1] Any attempted physical contact or physical contact that involves two or more offenders
[2] Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting
[3] Routine transportation of detainees/offenders is not considered "forced"
[4] 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.

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.

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

Reviewer-In-Charge: (Print Name)	
(b)(6), (b)(7)c	
Title & Duty Location	
DEPORTATION OFFICER, DETROIT, MI	5/05/2005

Team Members	
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
(b)(6), (b)(7)c , IEA, USBP Detroit, MI	
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location

Recommended Rating:

☐ **Superior**
☐ **Good**
☒ **Acceptable**
☐ **Deficient**
☐ **At-Risk**

Comments:

HEADQUARTERS EXECUTIVE REVIEW

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

HQDRO EXECUTIVE REVIEW: (Please Print Name)	Signature (b)(6), (b)(7)c
(b)(6), (b)(7)c	
Acting Director	Date 4/12/06

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

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

U.S. Immigration and Customs Enforcement

MEMORANDUM FOR:	Robin Baker Field Office Director Detroit Field Office
FROM:	(b)(6) Acting Director
SUBJECT:	Chippewa County Correctional Facility Annual Review

The annual review of the Chippewa County Correctional Facility conducted on April 27, 2005, in Sault Ste Marie, Michigan has been received. A final rating of **Acceptable** has been assigned. No further action is required and this review is closed.

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

1) The Field Office Director, Detention and Removal Operations, shall notify the facility **within** five business days of receipt of this memorandum. Notification shall include copies of the Form G-324A, *Detention Facility Review Form*, the G-324A Worksheet, RIC Summary Memorandum, and a copy of this memorandum.

2) The Field Office Director shall schedule the next annual review on or before April 27, 2006.

Should you or your staff have any questions regarding this matter, please contact (b)(6), (b)(7)c Deputy Assistant Director, Detention Management Division at (202) 732-(b)(2)Low

cc: Official File
(b)(2)Low, (b)(6), (b)(7)c