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



MEMORANDUM FOR:

Raymond A. Simonse

Field Office Director Atlanta Field Office

FROM:

Acting Chief

Detention Standards Compliance Unit

SUBJECT:

Stewart Detention Center Annual Review

The annual review of the Stewart Detention Center conducted on May 13-15, 2008 in Lumpkin, Georgia has been received. A final rating of <u>Acceptable</u> has been assigned.

The CC-324A worksheets provided by the Reviewer-in-Charge (RIC) indicated the facility had a deficient finding in the Access to Medical Care Standard. On May 23, 2008, Raymond A. Simonse, Field Office Director, advised before that all the RIC Issues and Concerns were in the process of being corrected.

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

- 1) The Field Office Director, Detention and Removal Operations, shall notify the facility within five business days of receipt of this memorandum. Notification shall include copies of the Form CC-324A, Detention Facility Review Form, the CC-324A Worksheet, RIC Summary Memorandum, and a copy of this memorandum.
- 2) The Field Office Director is responsible for ensuring that the facility responds to all findings and a Plan of Action is submitted to the Review Authority (RA) within 30 days.

SUBJECT: Stewart Detention Center Annual Review Page 2

- 3) The RA will advise the Field Office Director once the Plan of Action is approved.
- 4) Once a Plan of Action is approved, the Field Office Director shall schedule a follow-up on the above noted deficiencies within 90 days.

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

Should your staff have any questions regarding this matter, please contact b6,b7c Detention and Deportation Officer, Detention Standards Compliance Unit at (202) 732 b6,b7c

cc: Official File
ICE: HQDRO: b6.b7c 2-2436:5/26/08
b2High

ICE Detention Standards Compliance Review

Stewart Detention Center

May 13 - 15,2008

REPORT DATE – May 21, 2008



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

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

U.S. Immigration and Customs Enforcement Detention Standards Compliance Unit 801 I Street NW Washington, DC 20536



6415 Calder, Suite B • Beaumont, Texas 77706 409.866.9920 • www.correctionalexperts.com

Making a Difference!

May 21, 2008

MEMORANDUM FOR:

Gary E. Mead, Acting Director

Office of Detention and Removal Operations

FROM:

Reviewer-In-Charge
Creative Corrections

b6,b7c
b6,b7c
b6,b7c

SUBJECT:

Stewart Detention Center Annual Detention Review

A review closeout was conducted on Thursday, May 15, with Warden and Warden and Assistant Field Office Director, Atlanta Sub-Office, during which all concerns and recommendations were discussed.

Type of Review:

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

Review Summary:

The Stewart Detention Center is not accredited by American Correctional Association (ACA), National Commission on Correctional Health Care (NCCHC), or the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). They are scheduled for their initial ACA review in October 2008.

Standards Compliance:

The following information summarizes the standards reviewed and the overall compliance for this review. The following statistical information outlined provides a direct comparison of the 2007 ADR and this ADR conducted for 2008.

October 2-4, 2007 1	<u>Review</u>	April 29- May 1, 2008	Review
Compliant	29	Compliant	36
Deficient	8	Deficient	0
At-Risk	1	At-Risk	0
Not-Applicable	0	Not-Applicable	2

RIC Issues and Concerns

Access to Medical Care

The facility should establish a tracking procedure to ensure that all detainees are scheduled for and receive a physical examination within 14 days of arrival.

Environmental and Health Safety

The Material Safety Data Sheets (MSDS) should be re-organized in the medical clinic to provide immediate access to all the MSDS's of hazardous substances used or stored in the medical clinic.

Key and Lock Control



Recommended Rating and Justification

It is the Reviewer-in-Charge (RIC) recommendation that the facility receive a rating of "Acceptable".

RIC Assurance Statement

All findings of this review have been documented on the Work Sheets and are supported by the written documentation contained in the review file.



DETENTION FACILITY INSPECTION FORM FACILITIES USED LONGER THAN 72 HOURS

A. Type of Facility Reviewed	•	÷			•		•	
☐ ICE Service Processing	Center	G.	Accreditation	Certifi	icates			·
ICE Contract Detention		List	all State or Na	tional A	ccreditat	ion[s] rec	eived:	
ICE Intergovernmental	Service Agreement							
			Check box if f	acility h	as no acc	reditation	[s]	
B. Current Inspection								
Type of Inspection			Problems / Co					
☐ Field Office ☐ HQ Inspecti	ion		Facility is und	ler Cour				ding
Date[s] of Facility Review	•		Court Order			lass Action		
May 13 - 15, 2008			Facility has Si Major Litigatio			ion Pendir ife/Safety		
C D for (March 1) A For (1)	to Design		Check if None		<u> </u>	ilc/ Ballety	155005	
C. Previous/Most Recent Facility Date[s] of Last Facility Review	ty Review	1 <u>[23</u>	CHECK II INDIC	<u></u>	···			
October 2 – 4, 2007		I.	Facility Histo	nrv				
Previous Rating		F	te Built	<u> </u>				
Superior Good Accepta	ble 🕅 Deficient 🗀 At-Risk	200						
Control Cook Citteepin	STO EST DESIGNATION	Dat	te Last Remode	eled or U	Jpgraded			
D. Name and Location of Facili	ity	200)7					
Name			te New Constru	iction /	Bed spac	e Added		
Stewart Detention Center		200						
Address (Street and Name)			ure Construction		1ed			
146 CCA Road			Yes 🛛 No I	Date:				
City, State and Zip Code		_						
Lumpkin, Georgia 31815		Cu	rrent Bed Spac	e	Future B	ed Space (# New E	eds only)
County		190	00		Number:	N/A Dat	e: N/A	
Stewart Name and Title of Chief Executive	Officer							
(Warden/OIC/Superintendent)	re Officer							
Warden b6,b7c			Total Facilit					
Telephone # (Include Area Code)	1		tal Facility Inta	<u>ke</u> for p	revious l	2 months		
(229) 838 b6,b7c	·		111	ora Con D		2 th .		
Field Office / Sub-Office (List Of	fice with oversight		<u>tal ICE</u> Man-da 2,831	iys ioi r	revious	2 monuis		-
responsibilities)	_	002	2,031		•			
Nashville, TN		K.	Classificatio	n Level	CICE SI	Cs and C	DFs On	lý)
Distance from Field Office				Ī	L-1		L-2	L-3
386		Ad	ult Male		895		464	301
E Constitut Commentions Benjam	Tanna	Ad	ult Female		0		0	0
E. Creative Corrections Review	Team							
b6,b7c RIC								
50,570		L.	Facility Cap	1				
b6 SME Medical	·			Ra	ıted	Operati	onal	Emergency
			ult Male	1,752	,	1,90		2,028
b6 SME Food Service			ult Female		0	1,90	0	0
		Au	Facility holds				nd olda	
b6,b7c SME Safety			Facility noits	Juven	nes One	iluers 10 a	inu olue	as Addits
6747.6		M.	Average Dai	ilv Poni	ulation			
b6,b7c SME Se	curity	77.20	reveruge Da		ICE		USMS	Other
E CDE/ICS A Information Only	,	Ad	ult Male		1,65		0	0
F. CDF/IGSA Information Only Contract Number	Date of Contract or IGSA	·				4		
DROIGSA-06-0003	June 30, 2006	Ad	ult Female	1	0		0	0
Basic Rates per Man-Day			w o: :					•
\$60.50	1		Facility Staf	ting Le	vel	C		
Other Charges: (If None, Indicate	N/A)	Se	curity:	o2High		Support:		
N/A				oznign				
Estimated Man-days per Year								
594,000			*					

SIGNIFICANT INCIDENT SUMMARY WORKSHEET

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

INCIDENTS	DESCRIPTION	Jan – Mar 2008	Apr – Jun 2007	Jul – Sep 2007	Oct - Dec 2007
Assaults	Types (Sexual ¹ , Physical, etc.)	1 alleged sexual 1 physical	1 alleged sexual 10 physical	6 physical	5 physical
	With Weapon	0	0	0	1
II.	Without Weapon	2	11 .	6	4
Assault:	Types (Sexual Physical, etc.)	2 physical	2 physical	0 physical	0 physical
Detainee on Staff	With Weapon	0 .	0	0	0
	Without Weapon	2	2	0	0
Number of Forced Moves, incl. Forced Cell Moves ²		I	0	0	0
Disturbances ³		0	0	0	0
Number of Times Chemical Agents Used		1	2	4	1
Number of Times Special Reaction Team Deployed/Used		. 1	0	0	0
# Times Four/Five Point	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
Restraints Applied/Used	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	0
Offender / Detaince Medical Referrals as a Result of Injuries Sustained.		0	0	2	1
Escapes	Attempted	0	0	0	0
	Actual	1	0	0	0
Grievances	# Received	21	0	0	0
	# Resolved in Favor of Offender/Detainee	1	0	0	0
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	F	0	0	0
	Number	1	0	0	0
Psychiatric / Medical Referrals	# Medical Cases Referred for Outside Care	6	. 2	1	2
	# Psychiatric Cases Referred for Outside Care	2	0	0	1

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

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

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

DHS/ICE DETENTION STANDARDS REVIEW SUMMARY REPORT

1. A	CCEPTABLE	2. DEFICIENT	3. AT-RISK	4. REPEAT FINDING	5. NOT APPLICABLE			
LEG		Standards				1.	2. 3.	4. 5.
1.	Access to	Legal Materials				\boxtimes		
2.		sentations on Legal R	ights	Ÿ		\boxtimes		
3.	Visitation		z.			\boxtimes		
4.	Telephone	Access				\boxtimes		
DET	AINEE SERV	/ICES			*			
5.	111. Co. 111	and Release				\boxtimes		
6.		ion System	,			\boxtimes		
7.	Correspon	dence and Other Mail		ë		\boxtimes		
8.	Detainee I					\boxtimes		
9.	Food Serv		¥		VE)	\boxtimes		
10.		Personal Property				\boxtimes		
11.		Grievance Procedures				\boxtimes		
12.		nd Exchange of Cloth	ing, Bedding, and To	wels		\boxtimes		
13.	Marriage I					\boxtimes		
14.		cal Emergency Escor	ed Trip	•	Ψ.			
15.	Recreation					\boxtimes		
16.	Religious				v v	\boxtimes		
17.		Work Program			-	\boxtimes		
HEA	LTH SERVI							
18.	Hunger St					\boxtimes		
19.	Medical C					\boxtimes		
20.		evention and Interven						
21.	Terminal 1	Illness, Advanced Dir	ectives and Death					
SEC	URITY AND	CONTROL			N.			
22.	Contraban	ıd			-	\boxtimes		
23.	Detention		*			\boxtimes		
24.	Disciplina	-				\boxtimes		
25.	Emergenc			÷				
26.		ental Health and Safet				\boxtimes		
27.		ms in Detention Facili	ties			\boxtimes		
28.		ock Control				\boxtimes		
29.	Population					\boxtimes		
30.	Post Orde					\boxtimes		
31.		nspections			let:	\boxtimes		
32.	•	anagement Units (Ad		•	41	\boxtimes		
33.		anagement Units (Di	sciplinary Segregatio	n)		\boxtimes		
34.	Tool Cont		24			\boxtimes		
35.		ation (Land managem	ent)		6	\boxtimes		
36.	Use of For					\boxtimes		
37.		tainee Communication)3)		\boxtimes		
38.	Detainee '	Fransfer (Added Sept	ember 2004)					

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

RIC REVIEW ASSURANCE STATEMENT

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

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

	REVIEWE	r-In-Charge	
Reviewer-In-Charge: (Print Name)		Signature b6,b7c	b6,b7c for
Title & Duty Location		D	
Reviewer in Charge			/
	TEAM	MEMBERS	
Print Name, Title, & Duty Location		Print Name, Title, & Duty Lo	ocation
b6 , SME - Medical		b6,b7c SME - Safe	ty
Print Name, Title, & Duty Location		Print Name, Title, & Duty L	ocation
b6 , SME - Food Service	-	b6,b7c	SME - Security
RECOMMENDED RATING: [☐ SUPERIOR ☐ GOOD ☑ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK		· ·

COMMENTS: The Stewart Detention Center (SDC) had one "Escape from Other Custody" since the last review. Detained b6.b7c was among 34 detainees taken to the El Salvadoran Consulate in Woodstock, Georgia, on February 20, 2008. ICE instructed SDC staff to have the detainees wear civilian clothes and the El Salvadoran Consulate required that the detainees be unrestrained while in the consulate. Groups of detainees were taken into the consulate lobby to wait for their interviews. The lobby is open to the public and there were 30 – 40 other immigrants in the lobby waiting to speak with El Salvadoran Officials. Detainee

b6.b7c was able to walk away from the consulate after his interview without being challenged. The SDC no longer provides transportation for consulate visits. The SDC contracted with Transcor to provide detainee transportation in March 2008. All proper security protocols regarding detainee transportation/escorts were followed during this review.

There was one detained death since the last review. A 51 year old detained was transferred to the SDC by another facility and arrived on December 31, 2007. Following his medical examination, he was taken to a local hospital for further evaluation of congestion and coughing. It was determined that he had lung cancer and he remained in the hospital for radiation therapy. He died of lung cancer in the local hospital on January 29, 2008. A review of this case found that all protocols, procedures, and notifications were followed.

The SDC does not authorize the use of Tasers in their facility.

HEADQUAR	RTERS EXECUTIVE REVIE	W		·
Review Authori	ity			
	clow constitutes review of this report are eport to respond to all findings and t		ew Authority. OIC/	CEO will have 30 days from
HQDRO EXECUT	TIVE REVIEW: (Please Print Name)	Signatui Date	b6,b7c	
Acting Chief		4/	26/08	
Final Rating:	Superior Good			
	Acceptable			
	Deficient			
	☐ At-Risk ☐ No Rating			
Comments:	The Review Authority concurs with deficiency identified in the Access			equired to address the

Condition of Confinement Review Worksheet

(This document must be attached to each Inspection Form)

This Form to be used for Inspections of Facilities used longer than 72 Hours



Detention Review Worksheet

Local Jail – IGSA
State Facility – IGSA
ICE Contract Detention Facility
Name
Stewart Detention Center
146 CCA Road
Lumpkin, Georgia 31815
County
Stewart
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)
Warden b6,b7c
Name and Title of Reviewer-In-Charge
b6,b7c
Date[s] of Review
May 13 – 15, 2008
Type of Review

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DETAINEE TRANSFER STANDARD	

NOTE: FOR EACH STANDARD RATED <u>BELOW</u> ACCEPTABLE, FACILITIES MUST ATTACH A PLAN OF ACTION FOR BRINGING OPERATIONS INTO COMPLIANCE. EACH FACILITY SHOULD EXAMINE THE ENTIRE WORKSHEET TO IDENTIFY AREAS OF IMPROVEMENT, <u>INCLUDING</u> THOSE STANDARDS WHERE AN OVERALL FINDING OF ACCEPTABLE WAS ACHIEVED.

SECTION I. LEGAL ACCESS STANDARDS

ACCESS TO LEGAL MATERIALS POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS. COMPONENTS REMARKS Y N NA. The facility provides a designated law library for detainee use. The Law Library is located in \boxtimes the administrative area of Unit The law library contains all materials listed in the "Access to Legal \Box Materials" Standard, Attachment A. The listing of materials is posted in 冈 the law library. The library contains a sufficient number of chairs, is well lit, and is The Law Library is well lit with X П reasonably isolated from noisy areas. several tables and chairs. The law library is adequately equipped with typewriters and/or The Law Library contains seven computers, and has sufficient supplies for daily use by the detainees. X \Box computers with printers and a copy machine. In addition to the physical law library, detainees have access to the Lexus X П П Nexus electronic law library. Where provided, the Lexus Nexus library is updated and is current. A review of the Lexis Nexis \boxtimes program found it to be current and in good working order. Outside persons and organizations are permitted to submit published legal No requests have been made to material for inclusion in the legal library. Outside published material is \boxtimes date. forwarded and reviewed by ICE prior to inclusion. There is a designated ICE or facility employee who inspects, updates, and The Law Librarian maintains a maintains/replaces legal materials and equipment on a routine basis. sign-in book which indicates X П \Box that an ICE representative makes regular visits to the Law Library. Detainees are offered a minimum 5 hours per week in the law library. Detainees are allowed to visit Detainees are not required to forego recreation time in lieu of library \boxtimes \Box П the Law Library for two hours at usage. Detainees facing a court deadline are given priority use of the law a time, three times per week. library. Detainees may request materials not currently in the law library. Each request is reviewed and, where appropriate, an acquisition request is \boxtimes \Box П timely initiated. Requests for copies of court decisions are accommodated within 3-5 business days. Detainees are permitted to assist other detainees, voluntarily and free of There is a bi-lingual detainee charge, in researching and preparing legal documents, consistent with assigned as the Law Library 図 П security. Clerk who assists other detainees. Illiterate or non-English-speaking detainees without legal representation П receive access to more than just English-language law books after \boxtimes П indicating their need for help. Detainees may retain a reasonable amount of personal legal material in 冈 П П the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request. Detainees housed in Administrative Detention and Disciplinary The Law Librarian makes Segregation units have the same law library access as the general rounds in the Special Housing population, barring security concerns. Detainees denied access to legal Units on Thursdays. Detainees X \Box materials are documented and reviewed routinely for lifting of sanctions. in Special Housing make written request for legal material as needed.

X

All denials of access to the law library fully documented.

ACCESS TO LEGAL MATERIALS				
POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.				
COMPONENTS	Y	N	NA-	REMARKS
Facility staff informs ICE Management when a detainee or group of detainees is denied access to the law library or law materials.	\boxtimes			There have been no denials to date.
Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.				
. Acceptable Deficient D	AT-RIS	K		REPEAT FINDING

The Law Library is well equipped and managed by a full time Law Librarian. Detainees are scheduled for the Law Library based on their written request. Detainees are not scheduled for the Law Library during their outside recreation period.

b6.b7c / May 15, 2008 AUDITOR'S SIGNATURE / **D**ATE

b6,b7c

for

GROUP LEGAL RIGHTS PRESENTATIONS POLICY: FACILITIES HOUSING ICE DETAINEES SHALL PERMIT AUTHORIZED PERSONS TO MAKE PRESENTATIONS TO GROUPS OF DETAINEES FOR THE PURPOSE OF INFORMING THEM OF U.S. IMMIGRATION LAW AND PROCEDURES, CONSISTENT WITH THE SECURITY AND ORDERLY OPERATION OF EACH FACILITY, ICE ENCOURAGES SUCH PRESENTATIONS, WHICH INSTRUCT DETAINEES ABOUT THE IMMIGRATION SYSTEM AND THEIR RIGHTS AND OPTIONS WITHIN IT. CHECK HERE IF NO GROUP PRESENTATIONS WERE CONDUCTED WITHIN THE PAST 12 MONTHS, MARK STANDARD AS ACCEPTABLE OVERALL AND CONTINUE ON WITH NEXT PORTION OF WORKSHEET. YES No NA **COMPONENTS** REMARKS. The Field Office is responsive to requests by attorneys and accredited \Box П representatives for group presentations. Upon receipt of concurrence by the Field Office Director, the facility or authorized ICE Field Office ensures timely and proper notification to П П attorneys or accredited representatives. The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the \Box \Box attorney or accredited representative. Posters announcing presentations appear in common areas at least 48 \Box \Box hours in advance and sign-up sheets are available and accessible. Documentation is submitted and maintained when any detainee is denied \Box П permission to attend a presentation and the reason(s) for the denial. When the number of detainees allowed to attend a presentation is limited, the facility provides a sufficient number of presentations so that all detainees signed up may attend. Detainees in segregation, unable to attend for security reasons, may \Box П П request separate sessions with presenters. Such requests are documented. Interpreters are admitted when necessary to assist attorneys and other legal representatives. Presenters are afforded a minimum of one hour to make the presentation П П П and to conduct a question-and-answer session. Staff permits presenters to distribute ICE-approved materials. Presenters are permitted to meet with small groups of detainees to discuss their cases after the group presentation. ICE or authorized detention staff П \Box П is present but do not monitor conversations with legal providers. Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee; and the reasons for suspension are documented. The Headquarters Office for Detention and П Removal, Field Operations and Detention management Division, is notified when a group or individual is suspended from making presentations. The facility plays ICE-approved videotaped presentations on legal rights П at regular opportunities, at the request of outside organizations. A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request ACCEPTABLE 1 DEFICIENT AT-RISK REPEAT FINDING REMARKS:

The Stewart Detention Center has not received any requests for group legal presentations to date. The facility does show the video "Know Your Rights" to the detainee population three times per week.

b6,b7c / / May 15, 2008 AUDITOR'S SIGNATURE / DATE

b6,b7c

p

VISITATIO	ON			
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LE	GAL REPRI	ESENTATIV	ES, SPECIA	AL INTEREST GROUPS, AND THE NEWS
COMPONENTS	Y	N	NA	REMARKS
There is a written visitation schedule and hours for general visitation.	⊠			Visitation is addressed on pages 16 and 17 of the detainee handbook.
The visitation hours tailored to the detainee population and the demand for visitation.	☒			Visiting hours are from 9:00AM to 4:00PM seven days per week.
The visitation schedule and rules are available to the public.	\boxtimes			A visiting booklet is available to the public in the lobby.
The hours for all categories of visitation are posted in the visitation waiting area.	\boxtimes			·
A written copy of the rules regulating visitation and the hours of visitation is available to visitors.	\boxtimes			A visiting booklet is available to the public in the lobby.
A general visitation log is maintained.	\boxtimes			All visitors sign in and complete a visitor's log which is kept on file.
The detainees are permitted to retain personal property items specified in the standard.	\boxtimes			
A visitor dress code is available to the public.	\boxtimes			
Visitors are searched and identified according to standard requirements.	\boxtimes			All visitors must clear a metal detector in the lobby.
The requirement on visitation by minors is complied with.				Children under the age of 16 are allowed to visit with an approved adult.
At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, within the first 30 days.			\boxtimes	Children under the age of 16 are allowed to visit with an approved adult.
After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.			×	Children under the age of 16 are allowed to visit with an approved adult.
Detainees in special housing are afforded visitation.	\boxtimes			
Legal visitation is available seven (7) days a week, including holidays.	\boxtimes			
On regular business days legal visitation hours are provide for a minimum of eight (8) hours per day, and a minimum of four hours per day on weekends and holidays.	×			
On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	\boxtimes			
Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	×			There are three non-contact attorney visiting rooms with pass through slots for the exchange of legal material.
There are written procedures governing detainee searches.	×			Detainees are pat searched before and after each visit.
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.			\boxtimes	Detainees are pat searched before and after each visit.

VISITATI	ON			
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LI MEDIA.	EGAL REPR	ESENTATIV	ÆS, SPECIA	L INTEREST GROUPS, AND THE NEWS
Prior to each visit, legal service providers and assistants are identified per the standard.	\boxtimes			Lobby Officers ensure that the attorney has a bar card.
The current list of <i>pro bono</i> legal organizations is posted in the detainee housing areas and other appropriate areas.	\boxtimes			Pro Bono legal organizations are posted in all units and have been installed into the telephone speed dialing program.
The decision to permit or deny a tour is not delegated below the level of Field Office Director.	\boxtimes			
Provisions for NGO visitation, as stated in the Detention Standards, are complied with.	×	- 🗆		No requests have been received to date.
Law enforcement officials who request to visit with a detainee are referred to the ICE Field Office for approval.	Ø			
Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the OIC or ICE Field Office.	×			No requests have been received to date.
Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	\boxtimes			
ACCEPTABLE DEFICIENT] AT-Ri	SK		REPEAT FINDING

The Stewart Detention Center provides non-contact visiting for the detainees. There are five visiting booths for social visits and three private consultation rooms for legal visits. Detainees can receive up to five visitors at a time including children. Detainees are allowed one hour of visiting per week with additional time if approved by the Chief of Security due to special circumstances.

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DETAINEE TELEPHONE ACCESS POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES. **COMPONENTS** REMARKS Telephones are available to Detainees are allowed access to telephones during established facility detainees during waking hours \boxtimes \Box П with the exception of count waking hours. time. Detainees' access to telephones Upon admittance, detainees are made aware of the facility's telephone П X is addressed in the detainee access policy. handbook on pages 11-14. Telephone rules are posted in all \boxtimes units in both English and Access rules are posted in housing units. Spanish. The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's \boxtimes П \Box population. The facility exceeds this Telephones are provided at a minimum ratio of one telephone per 25 П \boxtimes minimum ratio in all housing detainees in the facility population. units. Telephones are inspected regularly by facility staff to ensure that they All phones are checked on a \boxtimes are in good working order. monthly basis. The facility has a good working The facility administration promptly reports out-of-order telephones to \boxtimes П relationship with their provider, the facility's telephone service provider. Securus/Evercom. The facility administration monitors repair progress and takes appropriate measures to ensure that required repairs are begun and X \Box completed timely. Detainees are afforded a reasonable degree of privacy for legal phone 冈 П Unit Management staff assist A procedure exists to assist a detainee who is having trouble placing a \boxtimes П detainees who have trouble confidential call. placing a legal call. Pro bono legal calls and calls to The facility provides the detainees with the ability to make non-collect Consulate Offices are installed \boxtimes (special access) calls. into the speed dial program and are at no charge to the detainee. Pro bono legal calls and calls to Consulate Offices are installed П П \boxtimes Special Access calls are at no charge to the detainees. into the speed dial program and are at no charge to the detainee. The OIG phone number for reporting abuse is programmed into the \boxtimes detainee phone system and the phone number was checked by the inspector during the review. In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate arrangements to \Box \boxtimes provide required access within 24 hours of a request by a detainee. No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal \boxtimes Services List". Special arrangements are made to allow detainees to speak by telephone Handled by assigned ICE case \boxtimes with an immediate family member detained in another Facility.

DETAINEE TELEPHONE ACCESS					
POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.					
COMPONENTS	Y	N	NA	REMARKS	
Any telephone restrictions are documented.	\boxtimes			Phone restrictions are documented and approved by ICE.	
The facility has a system for taking and delivering emergency detainee telephone messages.	×			·	
Emergency phone call messages are immediately given to detainees.	\boxtimes				
Detainees are allowed to return emergency phone calls as soon as possible.	\boxtimes				
Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	\boxtimes			Portable phones are available to detainees in the special housing unit.	
Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	\boxtimes			Consulate numbers have been installed in the speed dialing program in all detainee phones.	
Detainees in disciplinary segregation are allowed phone calls for family emergencies.	\boxtimes				
Detainees in administrative detention and protective custody are afforded the same telephone privileges as those in general population.	\boxtimes				
When detainee phone calls are monitored, notification is posted by detainee telephones that phone calls made by the detainees may be monitored. Special Access calls are not monitored.	×			The phone numbers to detainee attorneys are removed from the monitoring program by staff in the Special Services Unit.	
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING					

The Stewart Detention Center has recently purchased two Text Telephones for the Hearing Impaired. Training has been provided for 17 staff which will give telephone access to all future detainees who are hearing impaired.

b6.b7c / May 15, 2008 AUDITOR'S SIGNATURE / DATE

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SECTION II. DETAINEE SERVICES STANDARDS

ADMISSION AND RELEASE POLICY: ALL DETAINEES WILL BE ADMITTED AND RELEASED IN A MANNER THAT ENSURES THEIR HEALTH, SAFETY, AND WELFARE. THE ADMISSIONS PROCEDURE WILL, AMONG OTHER THINGS INCLUDE: MEDICAL SCREENING; A FILE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WILL BE INVENTORIED, DOCUMENTED, AND SAFEGUARDED AS NECESSARY. COMPONENTS NA REMARKS In-processing includes an orientation of the facility. The orientation includes: Unacceptable activities and behavior, and corresponding The facility has a sanctions; How to contact ICE; The availability of pro bono legal comprehensive handbook which services, and how to pursue such services; schedule of programs, is printed in both English and \boxtimes services, daily activities, including visitation, telephone usage, mail Spanish. An orientation video is service, religious programs, count procedures, access to and use of the shown to the detainee law library and the general library; sick-call procedures, and the population on a daily basis. detainee handbook. Medical screenings are performed by medical staff or persons who have Performed by PHS staff in the received specialized training for the purpose of conducting an initial \boxtimes Receiving and Discharge Unit health screening. (R&D). Each new arrival is classified according to criminal history and threat The initial classification is done П levels. Criminal history is provided for each detainee by the ICE field 冈 П by intake officers utilizing documentation provided by ICE. office. All new arrivals are searched in accordance with the "Detainee Search" Detainees are pat searched by standard. An officer of the same sex as the detainee conducts the search intake officers upon arrival. Detainees are not strip searched and the search is conducted in an area that affords as much privacy as X П П unless there is reasonable possible. suspicion that the detainee is in possession of contraband, which is a threat to the facility. Detainees are stripped searched only when cause has been established \boxtimes and not as routine policy. Non-criminal detainees are not strip-searched but are patted down, unless reasonable suspicion is established. The "Contraband" standard governs all personal property searches. The facility uses CCA form 9-IGSAs/CDFs use or have a similar contraband standard. Staff prepares X 6A, Chain of Custody, and has a a complete inventory of each detainee's possessions. The detainee contraband log book in R&D. receives a copy. Staff completes Form I-387 or similar form for CDFs and IGSAs for Intake Officers complete I-387, every lost or missing property claim. Facilities forward all I-387 claims ICE Property Claim Form which \boxtimes to ICE. is forwarded to ICE and the Shift Supervisor. Detainees are issued appropriate and sufficient clothing and bedding for In addition to the normal issue, \boxtimes П П the climatic conditions. detainees are given jackets in cooler weather. The facility provides and replenishes personal hygiene items as needed. Hygiene items are issued to all \boxtimes Gender-specific items are available. ICE Detainees are not charged for П detainees in R&D. these items. All releases are properly coordinated with ICE using a Form I-203. All releases are coordinated by

REMARKS:

ICE detainees are not strip searched at the Stewart Detention Center unless there is reasonable suspicion that the detainee is in possession of contraband, which is a threat to the facility. In addition to reviewing ICE documentation, R&D staff conducts a face-toface interview with detainees to determine if there is any immediate security, medical, or mental health issues.

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local ICE staff.

REPEAT FINDING

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Staff completes paperwork/forms for release as required. **ACCEPTABLE**

CLASSIFICATION SYSTEM

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

DETAINEES IN OTHER CATEGORIES				
COMPONENTS	Y	N	NA.	REMARKS
The facility has a system for classifying detainees. In CDFs and IGSAs, an Objective Classification System or similar is used.	×			The Stewart Detention Center utilizes CCA policy 18-1, Internal Classification Assessment System (ICAS).
 The facility classification system includes: Classifying detainees upon arrival; Separating from the general population those individuals who cannot be classified upon arrival; and The first-line supervisor or designated classification specialist reviewing every classification decision. 	⊠			Initial classification is made utilizing documentation provided by ICE. In addition, intake officers complete an Intake Screening Questionnaire by interviewing the detainee. This assists the facility in determining any initial custody concerns and special needs required to make an appropriate housing assignment.
The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	Ø			
Staff uses only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/unconfirmed reports may be filed but are not used to score detainees classifications.	×			
Housing assignments are based on classification-level.	⊠			Detainees are initially housed based on a classification level assigned by ICE (1, 2, or 3). Level 1's are not housed with level 3's. The facility classifies the detainees by CCA policy (ICAS) within 72 hours of arrival.
A detainee's classification-level does not affect his/her recreation opportunities. Detainees recreate with persons of similar classification designations.	.⊠			
Detainee work assignments are based upon classification designations.				High security detainees are not assigned to work with low security detainees. The majority of the work assignments off the housing unit i.e. Food Service, are performed by low security detainees.
The classification process includes reassessment/reclassification. At IGSA's, detainees may request reassessment 60 days after arrival.				Classification reassessment is conducted when new or additional information is received that will affect scoring factors. Detainees may appeal their classification within 10 days of their classification.
Procedures exist for a detainee to appeal their classification assignment. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.				Classification appeals are reviewed by the Classification Supervisor.

CLASSIFICATION SYSTEM						
POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM						
DETAINEES IN OTHER CATEGORIES	T		I STA			
COMPONENTS	<u>Y</u>	N.	NA	REMARKS		
Classification appeals are resolved within five business days and detainees are notified of the outcome within 10 business days.	\boxtimes					
Classification designations may be appealed to a higher authority, such as the Warden or equivalent.				Decisions by the Classification Supervisor may be appealed to the Assistant Warden who is the final review authority.		
The Detainee Handbook or equivalent for IGSAs explains the classification levels, with the conditions and restrictions applicable to each.	×			The classification system is explained on pages 5 and 6 of the detainee handbook.		
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The Stewart Detention Center is converting to the new CCA classification system (policy 18-1) which takes effect on May 30, 2008. The facility is currently using the new ICAS classification module and all detainees are classified within three days of arrival. This classification overrides the initial classification done in R&D during intake.

b6,b7c / May 15, 2008 AUDITOR'S SIGNATURE / DATE

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CORRESPONDENCE ANI	OTHER	MAIL			
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.					
COMPONENTS	YES	No	NA	REMARKS	
The rules for correspondence and other mail are posted in each housing or common area, or provided to each detainee via a detainee handbook.				The rules for correspondence are noted on pages 19 and 20 of the detainee handbook. They are also posted on the detainee bulletin boards.	
The facility provides key information in languages other than English; In the language(s) spoken by significant numbers of detainees. List any exceptions.				The detainee handbook and correspondence procedures are printed in both English and Spanish.	
Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	×			Incoming mail is picked up at the Lumpkin, GA post office at 9:30AM Monday through Friday. The mail is delivered to the detainees by Unit Staff after lunch the same day.	
Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	\boxtimes			Outgoing mail is collected at 8:00AM Monday through Friday and taken to the Lumpkin, GA post office at 9:30AM the same day.	
Staff does not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized in writing by the Warden or equivalent for prevailing security reasons.	×			The Warden has authorized the opening of incoming general correspondence for the inspection of contraband.	
Staff does not read incoming general correspondence without the Warden's prior written approval.	\boxtimes				
Staff does not inspect incoming special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.	×			Mail room staff notifies unit staff that a detainee has special correspondence. Unit staff accompanies the detainee to the mail room where it is opened in his presence.	
Staff is prohibited from reading or copying incoming special correspondence.	\boxtimes				
Staff is only authorized to inspect outgoing correspondence or other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity.	Ø			Outgoing correspondence is sealed by the detainee.	
Correspondence to a politician or to the media is processed as special correspondence and is not read or copied.	×				
The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.				Mail Room staff complete CCA form 16-1A, Correspondence/Package/ Contraband Denial, in triplicate. The detainee and sender receive a copy. The third copy is filed in the mail room.	
The official authorizing censorship or rejection of outgoing mail provides the detained with signed written notice.	\boxtimes			,	

CORRESPONDENCE ANI	OTHER	MAIL		
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RE LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUID	ON OF THE F	ACILITY.	OTHER M	AIL WILL BE PERMITTED, SUBJECT TO
Staff maintains a written record of every item removed from detainee mail.	\boxtimes			CCA form 9-6C, Confiscation and Disposition of Contraband is used for this purpose.
The Warden or equivalent monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	☒			CCA form 9-6A, Chain of Custody Form is used for this purpose. A review of the records found them to be accurate and up to date.
The procedure for safeguarding cash removed from a detainee protects the detainee from loss of funds and theft. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.				The Stewart Detention Center does not deposit funds received into detainee's accounts. All funds are sent to an off-site lock box. Detainee Money Deposits is addressed on pages 8 and 9 of the detainee handbook.
Original identity documents (e.g., passports, birth certificates) are immediately removed and forwarded to ICE staff for placement in A-files.				Original identity documents are logged into the Offender Management System (OMS) and turned over to local ICE staff.
Staff provides the detainee a copy of his/her identity document(s) upon request.	×			The detainee receives a receipt from the mail room advising him that an identity document has been received. The document is turned over to local ICE Officials who will verify that it is true and correct. Once verified, a copy is forwarded to the detainee.
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.	⊠			
Every indigent detainee has the opportunity to mail, at government expense, reasonable correspondence about a legal matter, in three one ounce letters per week and packages deemed necessary by ICE.	\boxtimes			Indigent detainees are allowed to mail out three personal and five legal letters per week.
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.	×			Stamps are sold through the commissary and there is no limit to outgoing correspondence.
The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	⊠	. 🗆		Indigent detainees receive writing materials from unit staff. The commissary offers writing materials for sale to non-indigent detainees.
□ ACCEPTABLE □ DEFICIENT □	AT-RISI	K		REPEAT FINDING
REMARKS:				
Detainee correspondence is processed in a timely and organized manner legal mail and rejected correspondence. Indigent detainees are provided this standard.				

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b6,b7c May 15, 2008

AUDITOR'S SIGNATURE / DATE

DETAINEE HANDBOOK POLICY: EVERY OIC WILL DEVELOP A SITE-SPECIFIC DETAINED HANDBOOK TO SERVE AS AN OVERVIEW OF, AND GUIDE TO, THE DETENTION POLICIES, RULES, AND PROCEDURES IN EFFECT AT THE FACILITY. THE HANDBOOK WILL ALSO DESCRIBE THE SERVICES, PROGRAMS, AND OPPORTUNITIES AVAILABLE THROUGH VARIOUS SOURCES, INCLUDING THE FACILITY, ICE, PRIVATE ORGANIZATIONS, ETC. EVERY DETAINEE WILL RECEIVE A COPY OF THIS HANDBOOK UPON ADMISSION TO THE FACILITY. COMPONENTS Y REMARKS The detainee handbook is written in English and translated into Spanish, The Detainee Orientation or into the next most-prevalent Language(s). Handbook, dated Feb. 2007, was X \Box \Box revised in March 2008 and is currently awaiting printing and distribution. The handbook is supplemented by the facility orientation video, where X П An orientation video is used. one is provided. All staff members receive a handbook and training regarding the During initial orientation, newly handbook contents. hired staff receives training X concerning the handbook. In addition, each new employee receives a copy of the handbook. The handbook is revised as necessary and there are procedures in place \boxtimes for immediately communicating any revisions to staff and detainees. There an annual review of the handbook by a designated committee or Ø \Box staff member. The detainee handbook addresses the following issues: Personal Items permitted to be retained by the detainee; and X П \Box Initial issue of clothes, bedding and personal hygiene items. The detainee handbook states in clear language the basic detainee Basic detainee responsibilities are X responsibilities. stated on pages 3 and 4. The handbook clearly outlines the methods for classification of П \boxtimes \Box detainees, explains each level, and explains the classification appeals The handbook states when a medical examination will be conducted. X The handbook describes the facility, housing units, dayrooms, in-dorm X \Box activities, and special housing units. The handbook describes official count times and count procedures; meal times and feeding procedures; procedures for medical or religious diets; smoking policy; clothing exchange schedules; and, if authorized, clothes \boxtimes П washing and drying procedures, and expected personal hygiene practices. The handbook describe times and procedures for obtaining disposable X razors, and allows that detainees attending court will be afforded the opportunity to shave first. The handbook describes barber hours and hair cutting restrictions. X The handbook describes the telephone policy: debit card procedures: 冈 direct and free calls; locations of telephones; policy when telephone П demand is high; and policy and procedures for emergency phone calls. The handbook addresses religious programming. The handbook states times and procedures for commissary or vending X \Box machine usage, where available. The handbook describes the detainee voluntary work program. The voluntary work program is \boxtimes \Box addressed in page 15. The handbook describes the library location and hours of operation, and

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The handbook describes the facility contraband policy.

The handbook describes attorney and regular visitation hours, policies,

law library procedures and schedules.

and procedures.

DETAINEE HAN	DBOOK				
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 H	ANDBOOK	WILL ALS	O DESCR	BE THE SERVICES, PROGRAMS, AND	
OPPORTUNITIES AVAILABLE THROUGH VARIOUS SOURCES, INCLUDING THE FACILITY, ICE, PRIVATE ORGANIZATIONS, ETC. EVERY DETAINEE					
WILL RECEIVE A COPY OF THIS HANDBOOK UPON ADMISSION TO THE FACIL	ITY.				
COMPONENTS	Y	N	NA	REMARKS	
The handbook describes the facility visiting hours and schedule, and	\boxtimes	П		,	
visiting rules and regulations.	· 1	ليما 			
The handbook describes the correspondence policy and procedures.	\boxtimes				
The handbook describes the detainee disciplinary policy and procedures,					
including:		_		•	
 Prohibited acts and severity scale sanctions; 	\boxtimes	Ш			
Time limits in the Disciplinary Process; and					
Summary of the Disciplinary Process.					
The grievance section of the handbook explains all steps in the					
grievance process – Including:				·	
 Informal (if used) and formal grievance procedures; 				·	
 The appeals process; 					
• In CDF facilities: procedures for filing an appeal of a	·			The handbook encourages	
grievance with ICE.	\boxtimes			detainees to resolve grievances	
 Staff/detainee availability to help during the grievance process. 				informally.	
 Guarantee against staff retaliation for filing/pursuing a 					
grievance.					
 How to file a complaint about officer misconduct with the 					
Department of Homeland Security.					
The detainee handbook describes the medical sick call procedures for	\boxtimes				
general population and segregation.	K-7	L_J			
The handbook describes the facility recreation policy including:					
 Outdoor recreation hours. 	\boxtimes				
Indoor recreation hours.					
The handbook describes the detainee dress code for daily living; and	\boxtimes	П.	П		
work assignments.			<u> </u>		
The handbook specifies the rights and responsibilities of all detainees.	\boxtimes	<u> </u>			

The Stewart Detention Center detainee handbook is well written and comprehensive. Each detainee receives a copy of the handbook upon admission to the facility and the handbook is translated into Spanish.

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FOOD SERVICE POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS. COMPONENTS Y NA REMARKS The food service program is under the direct supervision of a Food Service at the Stewart professionally trained and certified food service administrator. Detention Center is provided Responsibilities of cooks and cook foremen are in writing. The Food under contract with Canteen Corporation. The Food Service Service Administrator (FSA) determines the responsibilities of the Food Director has been Serv-Safe Service Staff. П X П certified. The Food Service Director determines the responsibilities of the staff, which are outlined in their post orders. The Cook Supervisor is on duty on days when the FSA is off duty and The Food Service Department's vice versa. administrative staff is scheduled \boxtimes П to provide managerial oversight seven days per week. The FSA provides food service employees with training that specifically Food Service staff was provided addresses detainee-related issues. with training on the ICE Food \boxtimes П \Box Service Standards on November In ICE Facilities this includes a review of the ICE "Food Service" standard 13, 2007. Knife cabinets close with an approved locking device, and the on-duty There are no knives utilized in \Box X cook foreman maintains control of the key that locks the device. the food service department. All knives not in a secure cutting room are physically secured to the There are no knives utilized in workstation and staff directly supervises detainees using knives at these \Box П X the food service department. workstations. Staff monitors the condition of knives and dining utensils. When necessary, special procedures govern the handling of food items Nutmeg was observed stored in that pose a security threat. the dry goods storage area without being secured and without any special handling procedures such as documenting issuance and inventory. X \Box Note: This was corrected during the review process. The nutmeg was properly stored and inventory procedures were put in place. Operating procedures include daily searches (shakedowns) of detainee Post Order #7, "Food Service work areas. Officer," requires correctional officers assigned to Food Service, to conduct security \boxtimes П checks of the food service department on an irregular schedule, but at least once every 30 minutes.

FOOD SERVICE						
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.						
COMPONENTS	Y	N	NA	REMARKS		
The FSA monitors staff implementation of the facility's population counts procedures. Staff is trained in count procedures.				The contract food service staff does not conduct the counts in the food service department. Correctional officers handle the count duties. On May 13, 2008, the 3 p.m. food service count was observed with no deficiencies noted.		
The detainees assigned to the food service department look neat and clean. Their clothing and grooming comply with the "Food Service" standard.	·			All detainee volunteers working in the Food Service Department were dressed in "food service whites." Personal hygiene complies with basic food service standards.		
The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	\boxtimes			-		
The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	×			Training for the detainees on the rules and procedures of the food service department is documented on the 11-1E Inmate/Resident Pre-Assignment Training Record.		
During orientation and training session(s), the CS explains and demonstrates: • Safe work practices and methods; • Safety features of individual products/pieces of equipment; and • Training covers the safe handling of hazardous material[s] the detainees are likely to encounter in their work.	×			The Pre-Assignment Orientation Program provides training on the use of hazardous chemicals, safe work practices, use of safety devices, and equipment training to detainees assigned to food service. The training is documented on the 11-1E Inmate/Resident Pre- Assignment Training Record.		
The Cook Supervisor documents all training in individual detainee detention files.				Inmate training records are documented in individual files in the Food Service Director's office.		
Detainees at CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSAs are subject to local and state rules and regulations regarding detainee pay.	\boxtimes			,		
Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.	⊠			At least two hot meals are served daily. No more than 14 hours elapse between the dinner meal, which is served at 4:15 pm, and the breakfast meal which is served at 5:00 am.		
For cafeteria style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	×					
The facility has a standard 35-day menu cycle. IGSAs use a 35 day or similar system for rotating meals.	\boxtimes					

FOOD SERVICE					
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUT THE HIGHEST SANITARY STANDARDS.	TRITIOUS A	ND APPETI	ZING MEAL	S, PREPARED IN ACCORDANCE WITH	
COMPONENTS	Y	N	NA	REMARKS	
The FSA or facility considers the ethnic diversity of the facility's detainee population when developing menu cycles (Provide examples).	×			Items such as Chili Mac, Enchilada Casserole, Tortillas, Spanish Rice, Pinto Beans, etc are programmed into the master cycle menu in consideration of the facility's ethnic diversity.	
A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	\boxtimes				
The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	×			Computerized recipes are utilized for all prepared menu items.	
 The Cook Foreman has the authority to change menu items if necessary. If yes, documenting each substitution, along with its justification With copy to FSA 				Menu substitutions are documented on the 11-1B Menu Substitution Log and forwarded to the Warden for review and signature each month. A copy of the completed 11-1B is maintained in the Food Service Department.	
All staff and volunteers know and adhere to written "food preparation" procedures.	\boxtimes				
Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	×				
A common-fare menu available to detainees whose dietary requirements cannot be met on the main line. Changes to the planned common-fare menu can be made at the facility level; Hot entrees are offered three times a week; The common-fare menus satisfy nutritional recommended daily allowances (RDAs); Staff routinely provide hot water for instant beverages and foods; Common-fare meals are served with: Disposable plates and utensils. Reusable plates and utensils. Reusable plates and utensils. Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items. A supervisor at the command level must approve a detainee's removal from the Common-Fare Program.				The Common Fare menu is not available to detainees whose religious dietary requirements cannot be met on the mainline. The current religious diet menu consists of only a one cycle menu in lieu of the two cycle menus required by ICE Standards. Additionally, menus were not available for the ten recognized federal holidays. Note: The additional cycle menu and the meals for the ten federal holidays were developed during the review. The Common Fare menu is not utilized to accommodate detainees whose religious	
				detainees whose religious dietary requirements cannot be met on the mainline; however, command level staff is required to approve a detainee's removal from the religious diet program currently being utilized.	
The Warden, in conjunction with the chaplain and/or local religious leaders, provides the FSA a schedule of the ceremonial meals for the following calendar year.	Ø			The Food Service Director has been provided a ten year	

FOOD SERVICE					
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUT THE HIGHEST SANITARY STANDARDS.	RITIOUS A	ND APPETI	ZING MEAI	S, PREPARED IN ACCORDANCE WITH	
COMPONENTS	Y	N	NA	REMARKS	
 The common-fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. Muslims fasting during Ramadan receive their meals after sundown. Jews who observe Passover but do not participate in the Common-Fare Program receive the same Kosher-for-Passover meals as those who do participate. Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. 		⊠		The Common Fare menu is not utilized to accommodate detainees abstaining from particular foods or fasting for religious purposes during the major religious observances of their faiths. The facility does, however, provide detainees special dietary accommodations through the use of special food purchases.	
The food service program addresses medical diets.	\boxtimes			Medical diets are provided upon written orders of the facility's medical staff.	
Satellite-feeding programs follow guidelines for proper sanitation.	\boxtimes				
Hot and cold foods are maintained at the prescribed, "safe" temperature(s) while being served.			·	Hot and cold foods were maintained within the prescribed temperature ranges, and the meals were served within the two hour time frame.	
All meals are provided in nutritionally adequate portions.	\boxtimes				
Food is not used to punish or reward detainees based upon behavior.	\boxtimes				
 The food service staff instructs detainee volunteers on: Personal cleanliness and hygiene; Sanitary techniques for preparing, storing, and serving food; and The sanitary operation, care, and maintenance of equipment. 	×				
Everyone working in the food service department complies with food safety and sanitation requirements.	\boxtimes				
Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment. • Who conducts the inspections?	×			The Cook Supervisors conduct daily sanitation inspections. The Food Service Director conducts weekly fire and safety inspections and a monthly inspection is performed by the Food Service Director, Q&A Manager, Safety Manager, and Maintenance Supervisor.	
Equipment is inspected for compliance with health and safety codes and regulations. • When was the most recent inspection? • Which agency conducted the inspection?	⊠			The Food Service Department was inspected by the Georgia Department of Health on July 27, 2007.	
Reports of discrepancies are forwarded to the Warden or designated department head, and corrective action is scheduled and completed.	×				
Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal.	×			Dish machine temperatures are documented after each meal.	
Staff documents the results of every refrigerator/freezer temperature check.	×			Staff documents all daily refrigerator and freezer checks.	

FOOD SERV	/ICE			
POLICY: EVERY PACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NU	TRITIOUS A	AND APPET	IZING MEA	LS, PREPARED IN ACCORDANCE WITH
THE HIGHEST SANITARY STANDARDS.				
COMPONENTS	Y	N	NA	REMARKS
The cleaning schedule for each food service area is conspicuously posted.	\boxtimes			
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	\boxtimes			
Storage areas are locked when not in use.	\boxtimes			
ACCEPTABLE DEFICIENT	☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK			REPEAT FINDING

Nutmeg was observed stored in the dry goods storage area without being secured and without any special handling procedures.

Note: This was corrected during the review process.

The Common Fare menu is not available to detainees whose religious dietary requirements cannot be met on the mainline. The current religious diet menu consists of only a one cycle menu in lieu of the two cycle menus required by ICE Standards. Also, menus were not available for the ten recognized federal holidays.

Note: The additional cycle menu and the meals for the ten federal holidays were developed during the review.

The Common Fare menu is not utilized to accommodate detainees abstaining from particular foods or fasting for religious purposes during the major religious observances of their faiths.

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FUNDS AND PERSONAL PROPERTY					
POLICY: ALL FACILITIES WILL IMPLEMENT PROCEDURES TO CONTROL AND SAFEGUARD DETAINES' PERSONAL PROPERTY. PROCEDURES WILL PROVIDE FOR THE SECURE STORAGE OF FUNDS, VALUABLES, BAGGAGE AND OTHER PERSONAL PROPERTY; THE DOCUMENTATION AND RECEIPTING OF SURRENDERED PROPERTY; AND THE INITIAL AND REGULARLY SCHEDULED INVENTORYING OF ALL FUNDS, VALUABLES, AND OTHER PROPERTY.					
STANDARD NA: (IGSA ONLY) CHECK THIS BOX IF ALL ICE DETAINEE FUNDS, VALUABLES AND PROPERTY ARE HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.					
COMPONENTS	YES	No	NA	REMARKS	
Detainee funds and valuables are properly separated, stored, and are accessible only by designated supervisor(s).	×			Funds and valuables are separated and stored in secure areas accessible only by the facility's Property Officers.	
Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	×		• 🔲		
Staff itemizes the baggage and personal property of arriving detainees (including funds and valuables). For IGSAs and CDFs, using a personal property inventory form that meets the ICE standard?	×				
Staff forwards an arriving detainee's medication to the medical staff.				The Property Officer or designee will confiscate any medication that the inmate/resident has in their possession upon admission. The Property Officer or designee will record the medication received on the 14-6A and will ensure all medication is forwarded to the Health Services Department.	
Audits of baggage and non-valuable property occur each quarter and audits are logged and verified.		×		Stewart Detention Center Policy 14.6 requires that quarterly inventories of detainee baggage and other non-valuable property be conducted. There is no documentation that quarterly audits of property have been conducted.	
Two officers are present during the processing of detainee funds and valuables during in-processing to the facility. Both officers verify funds and valuables.	×				
Staff searches arriving detainees and their personal property for contraband.	×			·	
Staff procedures follow written policy for returning forgotten property to detainees.	⊠				
Property discrepancies are immediately reported to the CDEO or Chief of Security.					
Staff follows written procedures when returning property to detainees.		<u> </u>	<u> </u>		
CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.					

FUNDS AND PERSONAL PROPERTY				
POLICY: ALL FACILITIES WILL IMPLEMENT PROCEDURES TO CONTROL AND SAFEGUARD DETAINEES' PERSONAL PROPERTY. PROCEDURES WILL PROVIDE FOR THE SECURE STORAGE OF FUNDS, VALUABLES, BAGGAGE AND OTHER PERSONAL PROPERTY; THE DOCUMENTATION AND RECEIPTING OF SURRENDERED PROPERTY; AND THE INITIAL AND REGULARLY SCHEDULED INVENTORYING OF ALL FUNDS, VALUABLES, AND OTHER PROPERTY.				
STANDARD NA: (IGSA ONLY) CHECK THIS BOX IF ALL ICE DETAINEE FUNDS, VALUABLES AND PROPERTY ARE HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.				
The facility attempts to notify an out-processed detainee that he/she left property in the facility: • By sending written notice to the detainee's last known address; • Via certified mail; and • The notice state that the detainee has 30 days in which to claim the property, after which it will be considered abandoned.				The ICE COTR assigned to SDC stated that the contractual agreement between ICE and the Stewart Detention Center classifies forgotten property as abandoned property. Therefore, forgotten property is forwarded to ICE for disposition.
The facility disposes of abandoned property in accordance with written procedures. • If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE.	×			
ACCEPTABLE □ DEFICIENT □	AT-RISI	K		REPEAT FINDING
REMARKS				

There is no documentation that quarterly inventories of baggage and other non-valuable property has been conducted.

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DETAINEE GRIEVANCE PROCEDURES

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

OF A GRIEVANCE WILL NOT BE TOLERATED.	X2	NY NY	NT A	
COMPONENTS	<u>Y</u>	. N	NA	REMARKS
Written procedures provide for the informal resolution of oral grievances (Not mandatory). • If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff.	\boxtimes			Informal and formal grievance procedures are addressed in Policy 14-5 (Inmate/Resident Grievance Procedures), dated Oct. 1, 2006.
Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. • Detainees may seek help from other detainees or facility staff when preparing a grievance. • Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary.	⊠			
Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	×			Staff receives training during initial orientation.
There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodged a complaint: • If yes, explain.		×		No documented or substantiated cases were observed.
Procedures include maintaining a Detainee Grievance Log. If not, an alternative acceptable record keeping system is maintained. "Nuisance complaints" are identified in the records. For quality control purposes, staff document nuisance complaints received but not filed.	⊠			
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	×			
ACCEPTABLE DEFICIENT] AT-RI	sk		REPEAT FINDING

REMARKS:

The Stewart Detention Center complies with ICE requirements concerning detainee grievance procedures. No deficiencies were found during the audit.

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ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS					
POLICY: ICE REQUIRES THAT ALL FACILITIES HOUSING ICE DETAINEES PROVIDE CLEAN CLOTHING, BEDDING, LINENS AND TOWELS TO EVERY ICE DETAINEE UPON ARRIVAL. FURTHER, FACILITIES SHALL PROVIDE ICE DETAINEES WITH REGULAR EXCHANGES OF CLOTHING, LINENS, AND TOWELS FOR AS LONG AS THEY REMAIN IN DETENTION.					
COMPONENTS	YES	No	NA	REMARKS	
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.				The Detainee Orientation Handbook, dated Feb. 2007, establishes policy and procedure for the regular issuance and exchange of clothing, bedding, linens and towels.	
 All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive: One uniform shirt and one pair of uniform pants, or one jumpsuit; One pair of socks; One pair of underwear (Daily change); and One pair of facility-issued footwear. 	×			New detainees receive three uniforms, three pairs of socks, three pairs of underwear, and one pair of shoes.	
Additional clothing is available for changing weather conditions, or as seasonally appropriate.	\boxtimes				
New detainees are issued clean bedding, linens, and towels. They receive					
at a minimum: One mattress; One blanket; Two sheets; One pillowcase; One towel; and Additional blankets are issued based on local weather conditions.					
Detainees assigned to special work areas are clothed in accordance with the requirements of the job.					
Detainees are provided clean clothing, linen and towels. Socks and undergarments - exchanged daily. Outer garments - twice weekly. Sheets - weekly. Towels - weekly. Pillowcases - weekly.	⊠				
Food service detainee volunteer workers are permitted to exchange outer garments daily.	×			Food service volunteer workers are required to exchange outer garments daily.	
Volunteer detainee workers are permitted to exchange outer garments more frequently.	Ø				
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING					

The Stewart Detention Center complies with this standard. Upon admission to the facility, detainees receive adequate amounts of clean clothing, bedding, linens, and towels. In addition, regular exchanges in compliance with ICE requirements are provided.

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MARRIAGE REQUESTS POLICY: ALL DETAINEE MARRIAGE REQUESTS WILL RECEIVE CASE-BY-CASE CONSIDERATION FROM ICE MANAGEMENT.					
COMPONENTS	Y	N	NA	REMARKS	
The Field Office considers detainee marriage requests on a case-by-case basis.	⊠			CCA Corporate and Facility Policy 14-7, Inmate/Resident Marriages require that "In accordance with National Detention Standards Marriage Requests, the request for permission to marry must be submitted to the facility administrator. When a detainee submits a marriage request, ICE shall be notified and consulted regarding approval or denial."	
The Field Office Director reviews every marriage request rejected by a Warden/OIC or IGSA. Rejections are documented.	\boxtimes				
It is standard practice to require a written request for permission to marry.				CCA Corporate and Facility Policy 14-7.5 "Inmate/Resident Marriages - Procedures," requires that "The inmate/resident and the intended spouse must submit, either jointly or separately, a written request to marry to the Warden/Administrator."	
The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	×			CCA Corporate and Facility Policy 14-7.5 "Inmate/Resident Marriages - Procedures," requires "The inmate/resident and the intended spouse must submit, either jointly or separately, a written request to marry to the Warden/Administrator."	
The Warden/OIC provides a written copy of his/her decision to the detainee and his/her legal representative.	×				
When permission is denied, the Warden/OIC states the basis for his/her decision.				CCA Corporate and Facility Policy 14-7, Inmate/Resident Marriages requires "If the Warden denies the marriage request, the specific reason will be articulated on Form 14-7A and a copy distributed to the inmate/resident."	
The Warden/OIC provides the detainee with a place and time to make wedding arrangements.	×		۵	CCA Corporate and Facility Policy 14-7, Inmate/Resident Marriages requires marriages be held within the facility.	
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING					
REMARKS: Stewart Detention Center policy and practice ensures that all marriage requests receive a case-by-case consideration from ICE.					

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NON-MEDICAL EMERGENCY ESCORTED TRIPS				
POLICY: THE IMMIGRATION AND CUSTOMS ENFORCEMENT (ICE) MAY PROVIDE DETAINEES WITH STAFF-ESCORTED TRIPS INTO THE COMMUNITY FOR THE PURPOSE OF VISITING CRITICALLY ILL MEMBERS OF THE DETAINEE'S IMMEDIATE FAMILY, OR FOR ATTENDING FUNERALS.				
STANDARD N/A: CHECK THIS BOX IF ALL ICE NON-MEDICAL EME FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.	RGENCY I	ESCORTE	D TRIPS	ARE HANDLED ONLY BY THE ICE
COMPONENTS	YES	No	NA	REMARKS
The Field Office Director considers and approves, on a case-by-case basis, trips to an immediate family member's: • Funeral; or • Deathbed				
The facility recognizes mother, father, brother, sister, spouse, child, step- parent, and foster parent as "immediate family".				
The IGSA facility notifies ICE of all detainee requests for non-medical escorts.				
The detainee's Deportation Officer reviews the file before forwarding a detainee's request, with recommendation, to the approving official. Each recommendation addresses the individual's suitability for travel; e.g., the kind of supervision required.				
Each escort includes at least two officers.				
Escorting officers report unexpected situations to the originating facility as a matter of procedure, and the ranking supervisor on duty has the authority to issue instructions for completion of the trip.				
Escorting officers have the discretion to increase or decrease minimum restraints in accordance with written procedures and classification level of the detainee.				
Escort officers are precluded from accepting gifts/gratuities from a detainee, or detainee's relative or friend for any reason.				
 Escort officers ensure that detainees: Conduct themselves in a manner that does not bring discredit to the ICE; Do not violate federal, state, or local laws; Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants; Make no unauthorized phone calls; and Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return. 				
Standard procedure requires the immediate return to the facility of any detainee who violates trip rules.				
ACCEPTABLE □ DEFICIENT □	AT-RISI	<		REPEAT FINDING
REMARKS: Non-Medical emergency escorted trips are handled only by the ICE Field Office or Sub-office in control of the detainee's case.				
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RECREATION POLICY: IT IS ICE POLICY TO PROVIDE ACCESS TO RECREATIONAL PROGRAMS AND ACTIVITIES TO ALL ICE DETAINES, TO THE EXTENT POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTECT THEIR SAFETY AND WELFARE. COMPONENTS REMARKS The facility has a recreation program and facility. The Stewart Detention Center has a recreation program which is provided through the use of 冈 six outdoor recreation yards, one gymnasium, and indoor recreation within each housing unit. A recreational specialist (for facilities with more than 350 detainees) tailors Ø \Box the program activities and offerings to the detainee population. Regular maintenance keeps recreational facilities and equipment in good \boxtimes П П condition. The recreational specialist or trained equivalent supervises detainee The Recreation Department has \boxtimes П \Box recreation workers. four detainees assigned to work in the recreation department. The recreational specialist or trainee equivalent oversees recreation \boxtimes programs for special housing units (SHU) and special-needs detainees. Dayrooms offer sedentary activities, e.g., board games, cards, television. Day rooms offer sedentary \boxtimes activities such as board games. Soccer, basketball, handball, Outside activities are restricted to limited-contact sports. \boxtimes \Box walking, and cardiovascular exercise. X Each detainee has the opportunity to participate in daily recreation. Detainees have access to recreation activities outside the housing units for Detainees have access to at least one hour daily, 5 days a week. recreation activities outside the \boxtimes \Box housing units for one hour a day, seven days a week. Staff checks all items for damage and condition when equipment is \boxtimes \Box П returned. Staff conducts searches of recreation areas before and after use. All recreation areas are searched \boxtimes \Box \Box prior to opening and after use. X All recreation areas under constant staff supervision. Supervising staff is equipped with radios. All staff supervising the \boxtimes recreation activities is equipped with radios. The facility provides detainees in the SHU at least one hour of outdoor 冈 \Box recreation time daily, five times per week. Detainees in disciplinary/administrative segregation receive a written The Recreation Specialist stated explanation when a panel revokes his/her recreation privileges. that the revocation of recreation M П privileges has not been used as a disciplinary sanction. Special programs or religious activities are available to detainees. Detainees are periodically X П shown movies in their housing units. Volunteers are required to sign a waiver of liability before entering a secure Volunteers are not utilized in the portion of the facility where detainees are present. \boxtimes Stewart Detention Center's Recreation Department. Visitors, relatives or friends are not allowed to serve as volunteers. Volunteers are not utilized in the \boxtimes Stewart Detention Center's

Recreation Department.

RECREATION						
POLICY: IT IS ICE POLICY TO PROVIDE ACCESS TO RECREATIONAL PROGRAMS AND ACTIVITIES TO ALL ICE DETAINEES, TO THE EXTENT						
POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTECT THEIR SAFETY AND WELFARE.						
If outdoor recreation is offered, check this box. No further information is required when outdoor recreation is offered.						
If the facility has no outside recreation, are detainees considered for transfer after six months? • If yes, written procedures ensure timely review of all eligible.	1. —					
detainees. Case officers make written transfer recommendations about every six month detainee to the OIC.						
The OIC documents all detainee-transfer decisions, whether yes or no.						
The detainee's written decision for or against an offered transfe documented in his/her A-file.						
Staff notifies the detainee's legal representative of his/her decision t accept/decline a transfer.) _			·		
If no recreation is available, the ICE Districts routinely review transfe eligibility for all detainees after 60 days.	r 🔲					
The A-file of every detainee who is held more than 60 days without access to recreation contains either a transfer-waiver signed by the detainee, or the OIC's written determination of the detainee's ineligibility for transfer.	•					
The detainee's legal representative is notified of the detainee's/OIC decision.	s D					
□ ACCEPTABLE □ DEFICIENT □	AT-RIS	AT-RISK REPEAT FINDING				

The Stewart Detention Center provides ICE detainees with access to recreational programs and activities, under conditions of security and supervision that protect their safety and welfare.

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RELIGIOUS PRACTICES								
POLICY: FACILITIES WILL PROVIDE ICE DETAINEES OF ALL FAITHS WITH REASONABLE AND EQUITABLE OPPORTUNITIES TO PARTICIPATE IN THE PRACTICES OF THEIR FAITH, LIMITED ONLY BY THE CONSTRAINTS OF SAFETY, SECURITY, THE ORDERLY OPERATIONS OF THE FACILITY AND BUDGETARY CONSIDERATIONS.								
COMPONENTS Y N NA REMARKS								
Detainees are allowed to engage in religious services.								
Space is available for detainees to conduct religious services.	×			Large group services are typically held in the detainee dining room. Smaller services are also held in the multipurpose rooms in housing units 5 and 6.				
The facility allows detainees to observe the major "holy days" of their religious faith. • List any exceptions.	⊠¹							
The facility accommodates recognized holy-day observances by: Providing special meals, consistent with dietary restrictions; Honoring fasting requirements; Facilitating religious services; and Allowing activity restrictions.	×							
Each detainee is allowed religious items in his/her immediate possession.	\boxtimes							
Volunteer's credentials are checked and verified before allowing participation in detainee programs.				Background investigations are conducted on all volunteers prior to allowing participation in detainee programs.				
Members of faiths not represented by clergy may conduct their own services within security allowances.	\boxtimes							
Detainees in the Special Management Unit are allowed to participate in religious practices unless otherwise documented for the safety and security of the facility.	×			The staff Chaplain makes pastoral rounds through the Special Management Unit on a daily basis.				
ACCEPTABLE □ DEFICIENT □	AT-Risi	K	[]	REPEAT FINDING				

Detainees of different religious beliefs are provided reasonable and equitable opportunities to participate in the practices of their respective faiths. These opportunities exist for all equally, regardless of the number of practitioners of a given religion or the type of religion practiced. Opportunities are constrained only by concerns about safety, security, the orderly operation of the facility.

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VOLUNTARY WORK	PROGRA	AM .		•
POLICY: IN EVERY FACILITY OFFERING A VOLUNTARY WORK PROGRAM, ICI MONEY BY PARTICIPATING. WHILE NOT LEGALLY REQUIRED, ICE AFFORDS I ADMINISTRATION (OSHA) PROTECTIONS.				
CHECK HERE IF ICE DETAINEES ARE NOT AUTHORIZED TO WORK AT AND MOVE TO NEXT SECTION.	THE IGS	A FACIL	ITY. MAI	RK NA ON FORM G-324A, PAGE 3
COMPONENTS	Y	N	NA	Remarks
Does the facility have a voluntary work program? • Do ICE detainees participate?	×			The facility has a volunteer work program in which ICE detainees participate. The program is governed by Stewart Detention Center Policy 19.100, Resident Work Programs.
Detainee housekeeping meets neatness and cleanliness standards.	\boxtimes			Sanitation throughout the facility is maintained at high standards.
Detainees have the opportunity to participate in special details, however, are never allowed to work outside the secure perimeter.	\boxtimes			
Written procedures govern selection of detainees for the Voluntary Work Program.	×			The program is governed by Stewart Detention Center Policy 19.100, Resident Work Programs.
Where possible, physically and mentally challenged detainees participate in the program.				Stewart Detention Center Policy 19.100, Resident Work Programs, requires that "Disabled inmates/residents will be equally considered for positions that they are physically capable of filling. All efforts will be made to create a position that disabled inmates/residents can work".
The facility complies with work-hour requirements for detainees, not exceeding: • Eight hours a day and Forty hours a week.	×			
Detainee volunteers generally work according to fixed schedule.				
If a detainee is removed from a work detail, staff places the written justification for the action in the detainee's detention file.	×			
Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	Ø			Detainee responsibilities are outlined in the Pre-Assignment Training that all Volunteer Work Program initiates attend.
The voluntary work program meets: OSHA, NFPA, ACA standards	\boxtimes			

VOLUNTARY WORK	PROGRA	AM .				
POLICY: IN EVERY FACILITY OFFERING A VOLUNTARY WORK PROGRAM, ICE DETAINEES WILL HAVE THE OPPORTUNITY TO WORK AND EARN MONEY BY PARTICIPATING. WHILE NOT LEGALLY REQUIRED, ICE AFFORDS DETAINEE WORKERS BASIC OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA) PROTECTIONS. CHECK HERE IF ICE DETAINEES ARE NOT AUTHORIZED TO WORK AT THE IGSA FACILITY. MARK NA ON FORM G-324A, PAGE 3 AND MOVE TO NEXT SECTION.						
Medical staff screen and formally certify detainee food service volunteers. Before the assignment begins; and As a matter of written procedure	×			Detainee food service volunteers are housed together in Unit 6, A & B pods. The detainees are medically cleared prior to being assigned to the Food Service Department. Detainees housed in those areas who have not yet received the results of their medical clearance have their cells labeled with a "not yet medically cleared" designation to ensure they are not allowed to be released to work in food service.		
Detainees receive safety equipment/ training sufficient for the assignment.	×			Safety training is included in the Pre-Assignment Training course.		
Proper procedure is followed when an ICE detainee is injured on the job.	×			In the event that a detainee is injured on the job, the ICE COTR is notified via the COTR Report.		
ACCEPTABLE DEFICIENT	AT-RISI	K		REPEAT FINDING		

Stewart Detention Center policies and practice provides detainees the opportunity to work and earn money, and while not legally required to do so, affords working detainees basic Occupational Safety and Health Administration (OSHA) protections.

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SECTION III. HEALTH SERVICES STANDARDS

HUNGER STRIKES							
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.							
COMPONENTS	Y	N	NA	REMARKS			
When a detainee has refused food for 72 hours, it is standard practice for staff to refer him/her to the medical department.	×			The facility immediately refers all hunger-striking detainees to the medical department.			
CDFs and IGSAs immediately report a hunger strike to the ICE.	\boxtimes			ICE is on-site and is quickly notified of any change in status of a detainee.			
The facility has established procedures to ensure staff respond immediately to a hunger strike.				SOP 8.14, Hunger Strike/Force Feeding, outlines the procedures for immediate response.			
Policy and procedure require that staff isolate a hunger-striking detainee from other detainees. • If yes, in an observation room?				Initially, policy requires that the detainee be isolated in a single occupancy observation cell. If intake and output are required the detainee will be moved to Health Services observation.			
Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	\boxtimes			See above.			
Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	\boxtimes			Weight and vital signs are taken every day.			
The OIC of the facility obtains a hunger striker's consent before medical treatment.	⊠			Consent is required from every hunger-striking detainee for all invasive medical treatment. Non-invasive treatment is covered under the consent form signed while in intake screening.			
A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.	×			Completion of Form DIHS 820, Refusal of Treatment is required for rejection of medical evaluation and treatment.			
During a hunger strike, staff document and provide the hunger-striking detainee three meals a day.	\boxtimes						
Staff maintains the hunger striker's supply of drinking water/other beverages.	\boxtimes						
During a hunger strike, staff removes all food items from the hunger striker's living area.	×			All commissary items are removed.			
Staff is directed to record the hunger striker's fluid intake and food consumption; Does staff always use Hunger Strike Monitoring Form I-839 or similar IGSA form.	×			The facility uses DIHS form 839.			
The medical staff has written procedures for treating hunger strikers.	⊠			The medical staff procedures are outlined in the LOP 872, Hunger Strike Protocol.			
Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.	×						

HUNGER STR	IKES		
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELL SUSTAIN THEIR LIVES.		-	 CAINEES, FACILITIES WILL STRIVE TO
Staff has received training in identification of hunger strikes. Medical staff receives early training in hunger-strike evaluation and treatment. Staff remains current in evaluation and treatment techniques.			Hunger Strike training is included in pre-employment training and the medical department has training on the medical-specific aspects of hunger strikes. Verification of training was done by reviewing Employment Education Training Records.
☐ ACCEPTABLE ☐ DEFICIENT ☐	AT-RISI	K	REPEAT FINDING

There has not been a hunger strike by a detainee in the past year, but the SOP, LOP, and staff training have prepared the staff to respond appropriately when one does occur. A new staff member in the Segregation Unit was able to explain in detail the expected response to a detainee hunger strike.

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ACCESS TO MEDICAL CARE					
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/WELL-BEING OF ICE DETAINEES.			ORTHY H	BALTH PROGRAM FOR THE GENERAL	
Components	Y	N	NA	REMARKS	
<u>Facilities</u> operate a health care facility in compliance with state and local laws and guidelines.	\boxtimes				
The facility's in-processing procedures for arriving detainees include medical screening.	\boxtimes			DIHS form 795 is used to medically screen all detainees as they are in-processed.	
All detainees have access to and receive medical care.			а	Sick call request slips are available in all housing units in English and Spanish. The Detainee Handbook has information on how to access medical care. All detainees sign consent for medical care form during intake screening.	
The facility has access to a PHS/DIHS Managed Health Care Coordinator.	×			The medical staff includes DIHS PHS medical personnel who communicate frequently with the Health Care Coordinator.	
The medical staff is large enough to provide, examine, and treat the facility's detainee population.				Gains in staffing over the past six months have been significant. Only a few clinical positions remain open. There is currently sufficient staff for the current detainee population.	
The facility has sufficient space and equipment to afford detainee privacy when receiving health care.	⊠			There are four exam rooms in medical and an emergency treatment room that can double as a fifth exam room. Privacy is afforded when appropriate.	
The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	\boxtimes				
The medical facility entrance includes a holding/waiting room.					
The medical facility's holding/waiting room is under the direct supervision of custodial staff.	⊠			There are always two officers assigned in the waiting area. One may have to leave periodically to be of service in the clinic.	
Detainees in the holding/waiting room have access to a drinking fountain.				The fountain is in the main hall outside the waiting area. Detainees may be escorted out to use it.	
Medical records are kept apart from other files. They are: • Secured in a locked area within the medical unit; • With physical access restricted to authorized medical staff; and • Procedurally, no copies made and placed in detainee files.				The medical records area is in a room inside another locked room. There is always a medical records tech on-duty 24 hours a day. No medical record copies leave the unit without detainee consent.	

ACCESS TO MEDICAL CARE						
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.						
Pharmaceuticals are stored in a secure area.				Narcotics are stored in a metal cabinet on an inside wall of the Pharmacy. All medications are stored in the Pharmacy except for those on the medication cart, and the night stock box. The night stock box meds are inventoried by the pharmacy staff everyday.		
 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; and Detainees not screened are housed separate from the general population. 	\boxtimes			TB skin testing is not done at this facility. All detainees undergo a digital chest X-Ray that is electronically transmitted for off-site reading. The report is returned within a matter of hours.		
All detainees receive a mental-health screening upon arrival. It is conducted: By a health care provider or specially trained officer; and Before a detainee's assignment to a housing unit.	Ø			Mental health screening is done by medical staff during intake screening in the In-processing area.		
The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.	×			DIHS form 795, Intake Screening, has a section indicating the disposition of the detainee. Those needing medical or mental health follow- up are referred to the appropriate provider.		
The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.		×		A review of 23 computerized detainee medical records for the month of April 2008, found that six did not have physicals within 14 days of Booking.		
Detainees in the Special Management Unit have access to health care services.	\boxtimes			Nurses make rounds of the cells everyday. Sick call request slips are available from the unit officers.		
 Staff provides detainees with health services (sick call) request slips daily, upon request. Request slips are available in languages other than English, including every language spoken by a sizeable number of the facility's detainee population. Service-request slips are delivered in a timely fashion to the health care provider. 	⊠			Sick call request slips are picked up everyday and logged in a binder. The slips are in English and Spanish.		
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.	×			There is medical staff on-site 24 hours a day.		
The plan includes an on-call provider.	Ø			A PA/ARNP is on-call after regular working hours.		
The plan includes a list of telephone numbers for local ambulance and hospital services.				The numbers are available in the medical records area and in the Main Control Room.		

ACCESS TO MEDICAL CARE							
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.							
The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.	\boxtimes						
Detention staff is trained to respond to health-related emergencies within a 4-minute response time.	☒			This is now a part of the facility's LOP 822, Emergency Services.			
Where staff is used to distribute medication, a health care provider properly trains these officers.			\boxtimes	Only licensed medical staff administers medications.			
The medical unit keeps written records of medication that is distributed.	\boxtimes			Medications are recorded on a Medication Administration Record (MAR).			
The Form I-819 (or IGSA equivalent) is used to notify the Warden/Facility of a detainee that has special medical needs.	×			Form DIHS 819 is used.			
A signed and dated consent form is obtained from a detainee before medical treatment is administered.	×			DIHS form 793, Medical Consent Form, is signed by all detainees during intake screening.			
Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	Ø			DIHS form 003, Authorization for Release of Confidential Health Information, is used.			
The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	\boxtimes			·			
Detainee's medical records or a copy thereof, are available and transferred with the detainee.	×			USM form 533, Transfer Summary, is completed and placed in a packet containing multiple summaries of all out- going detainees. Medications also accompany them.			
Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL".	×			The Transfer Summaries are placed in a confidential-labeled envelope.			
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING							

Repeat Finding from the October 2007 review: A review of 23 computerized detainee medical records for the month of April 2008, found that six did not have physicals within 14 days of booking. The reason for the missing physicals appears to be a clerical error in scheduling the physical appointments for the following month instead of the current month; for example, a detainee was booked on 4/10/08 and the physical was supposed to be scheduled by 4/22/08 (10-12 days is the target period to be sure they don't go over 14 days). The clerk made a mistake and scheduled the detainee for 5/22/08 instead. This mistake was made repeatedly and may extend to detainees whose files were not reviewed.

Gains in staffing over the past 6 months have been significant. Only a few clinical positions remain open. There is currently sufficient staff for the current detainee population. There is a Physician on-site, 6 Mid-Level Providers, 12 RNs + 2 part-time, 13 LPNs, 3 Medical Records Techs + 1 part-time and 3 Mental Health Providers. There is also a Pharmacist and Tech, a Dentist with Assistant, and administrative personnel.

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SUICIDE PREVENTION AND INTERVENTION							
POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.							
COMPONENTS	Y	N	NA	REMARKS			
Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.	⊠			Suicide prevention training is provided during employee orientation. The program is very comprehensive and includes a video, a power point presentation, and handouts.			
Training prepares staff to: Recognize potentially suicidal behavior; Refer potentially suicidal detainees, following facility procedures; and Understand and apply suicide-prevention techniques.	×						
A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process. • Screening does not occur later than one working day after the detainee's arrival.	⊠			Intake screening occurs on day of arrival in the Intake area. It is performed by RNs, LPNs, or Medical Assistants. Suicide/mental health screening is part of the process.			
Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.	×			CCA policy 9-19, Suicide Prevention/Risk Reduction, covers procedures for referral of potentially suicidal detainees to medical.			
The facility has a designated isolation room for evaluation and treatment.	×			The two suicide watch cells are located in the Segregation Unit.			
The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	Ø						
Medical staff has approved the room for this purpose.	\boxtimes						
Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes.	⊠			Documentation of 15-minute checks is required by policy. A review of the Medical Observation 1-on-1 logbook verified compliance.			
□ ACCEPTABLE □ DEFICIENT □	AT-RISI	κ		REPEAT FINDING			
REMARKS:							

Training and procedures are comprehensive.

A card is issued to each employee to attach to their ID badge - "Warning Signs for Preventing Suicide". Cells for suicide watch have been identified in the Segregation Unit for reasons of greater security and safety.

Since November 2007, there have been 13 suicide watches. The majority were deemed non-sincere attempts to expedite their cases. One was a psychotic detainee received as a transfer from another facility as suicidal. He was kept on watch and medically treated until deported.

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TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH						
POLICY ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLICIES AND INJURY, MEDICAL ADVANCED DIRECTIVES, AND DETAINEE DEATH, TO INC PROVIDED TO ICE OFFICIALS, FAMILY MEMBERS AND OTHER INTERESTED PAINJURED OR DEATH OF A DETAINEE OCCURS. IN ADDITION, THE POLICY WILL OCCURS WHILE IN TRANSIT.	CLUDE TH	E PROCE ÆEVENT	DURES TO OF A DETA	ENSURE PROPER NOTIFICATION IS INEE BECOMING TERMINALLY ILL OR		
CHECK THIS BOX IF THE FACILITY DOES NOT ACCEPT ICE DETAINEE THE APPROPRIATE BOX FOR THIS PORTION OF THE WORKSHEET. ALW RELATED NOTIFICATIONS.						
COMPONENTS	Y	N	NA	REMARKS		
Detainees who are chronically or terminally ill are transferred to an appropriate offsite medical facility.	Ø			Any detainee who is discovered upon intake, or after intake, to be severely ill is transferred to the local hospital for evaluation and possible relocation by ICE.		
The facility or appropriate ICE office promptly notifies the next of kin of the detainee's medical condition, to include: • The detainee's location; and • The limitations placed on visiting.	Ø			ICE handles all communication with next-of-kin.		
There are guidelines addressing the State Advanced Directive Form for Implementing Living Wills and Advanced Directives. • The guidelines include instructions for detainees who wish to have a living will other than the generic form the DIHS provides or who wishes to appoint another to make advance decisions for him or her.	Ø			There is a LOP 199, Terminal Illness/Organ Donation, that covers advanced directives		
The guidelines provide the detainee the opportunity to have a private attorney prepare the documents.	\boxtimes					
There is a policy addressing "Do Not Resuscitate Orders"	\boxtimes			LOP 199, see above.		
Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation?	\boxtimes					
The facility notifies the DIHS Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSAs, this notification is made through the local ICE representative.	\boxtimes			DIHS medical notifies the Medical Director and ICE is notified quickly because they are on-site.		
The facility has written procedures to address the issues of organ donation by detainees.	Ø			This procedure is addressed in LOP199.		
The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.	Ø			Facility LOP 834, Procedures Following the Death of a Detainee, covers notification of ICE. ICE then contacts the family and consulate.		
The facility has a policy and procedure to address the death of a detainee while in transport.	⊠			There isn't a specific policy, but the CCA policy 9-18, Transportation Procedures, covers procedures for medical emergencies which would also cover a death in transit.		
At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	Ø					

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TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH						
POLICY ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLICIES AND PROCEDURES ADDRESSING THE ISSUES OF TERMINAL ILLNESS OR INJURY, MEDICAL ADVANCED DIRECTIVES, AND DETAINEE DEATH, TO INCLUDE THE PROCEDURES TO ENSURE PROPER NOTIFICATION IS PROVIDED TO ICE OFFICIALS, FAMILY MEMBERS AND OTHER INTERESTED PARTIES IN THE EVENT OF A DETAINEE BECOMING TERMINALLY ILL OR INJURED OR DEATH OF A DETAINEE OCCURS. IN ADDITION, THE POLICY WILL COVER PROCEDURES TO BE TAKEN IF THE DEATH OF A DETAINEE OCCURS WHILE IN TRANSIT.						
CHECK THIS BOX IF THE FACILITY DOES NOT ACCEPT ICE DETAINEES WHO ARE SEVERELY OR TERMINALLY ILL. INDICATE NA IN THE APPROPRIATE BOX FOR THIS PORTION OF THE WORKSHEET. ALWAYS COMPLETE ALL REFERENCES TO DETAINEE DEATH AND RELATED NOTIFICATIONS.						
COMPONENTS	Y	N	NA	REMARKS		
In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. • If the detainee's is a U.S. military veteran, is the Department of Veterans Affairs notified?	⊠			The local ICE supervisor would contact the Field Office to make arrangements.		
An original or certified copy of a detainee's death certificate is placed in the subject's a-file.	×			ICE obtains a copy of the death certificate for the A-file.		
The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as: • Performance of an autopsy; • Who will perform the autopsy; • Obtaining state approved death certificates; and • Local transportation of the body.	×		Ö	ICE assumes responsibility for disposition of the body and arranging or allowing any autopsy.		
ICE staff follows established procedures to properly close the case of a deceased detainee.	Ø					
□ ACCEPTABLE □ DEFICIENT □	AT-RIS	K		REPEAT FINDING		
REMARKS:			D:			
With ICE being present on-site, the facility is able to notify them quickly post-death arrangements.	or a dear	n, and IC	E IS able	to act quickly to take over the		

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SECTION IV. SECURITY AND CONTROL

CONTRABA	ND				
POLICY: ALL DETENTION FACILITIES WILL ENSURE THE PROPER HANDLE CONTRABAND DESTRUCTION IS REQUIRED.	NG AND DIS	SPOSAL C	OF ALL CO	ONTRABAND. DOCUMENTATION OF	
COMPONENTS	Y	N	NA	REMARKS	
The facility follows a written procedure for handling illegal contraband. Staff inventory, hold, and report it when necessary to the proper authority for action/possible seizure.	Ø			Stewart Detention Center Policy 9-6, effective date October 1, 2006, Contraband Control, establishes procedures for handling illegal contraband.	
Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	\boxtimes				
Staff returns property not needed as evidence to the proper authority. Written procedures cover the return of such property.	⊠			Confiscation and Disposition of Contraband, Form 9-6C is utilized for the purpose of documentation regarding final disposition of contraband.	
Altered property is destroyed following documentation and using established procedures.	×				
Before confiscating religious items, the OIC or designated investigator contacts a religious authority.	· 🛛				
Staff follows written procedures when destroying hard contraband that is illegal.		×		Policy does not provide written procedures for staff to follow when destroying hard contraband that is illegal.	
Hard contraband that is illegal (under criminal statutes) may be retained and used for official use, e.g. training purposes. If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use.			×	The facility does not retain contraband that is illegal for official use, e.g., training.	
□ ACCEPTABLE □ DEFICIENT □	AT-RISE	۲		REPEAT FINDING	
REMARKS:					
Policy does not provide written procedures for staff to follow when destroying hard contraband that is illegal.					
The facility does not retain controlled that is illegal for official use a					

The facility does not retain contraband that is illegal for official use, e.g., training.

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DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETENTION FILE WILL CONTAIN CO	PIES AND), IN SOME CASES, THE ORIGINAL OF					
POLICY: EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY ICE DETAINEE BOOKED INTO THE FACILITY, EXCLUDING ONLY DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETENTION FILE WILL CONTAIN COPIES AND, IN SOME CASES, THE ORIGINAL OF SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE FACILITY: CLASSIFICATION SHEET, MEDICAL QUESTIONNAIRE, PROPERTY INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC.							
COMPONENTS Y N	NA	REMARKS					
A detention file is created for every new arrival whose stay will exceed 24 hours.		Detention files are created for all detainees in R&D during intake.					
The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.		The detention files maintain original documentation for each detainee.					
The detainee's detention file also contains documents generated during the detainee's custody. • Special requests • Any G-589s and/or I-77s closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same							
The detention files are located and maintained in a secure area. If not, the cabinets are lockable and distribution of the keys is limited to supervisors.		The Records Clerk maintains all files in locked cabinets in the file room.					
The detention file remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent, and other documentation.		The Record Clerk verifies the accuracy of the discharge file by cross checking the A number with the detainee data in the Offender Management System (OMS).					
The officer closing the detention file makes a notation that the file is complete and ready to be archived.		The Record Clerk maintains a log book with notations that the file is ready to be archived.					
Staff makes copies and sends documents from the file when properly requested by supervisory personnel at the receiving facility or office.		The Records Clerk provides ICE with copies of the R&D checklist, property inventory form, and trust fund receipt.					
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.		There is limited staff access to the records office.					
ACCEPTABLE DEFICIENT AT-RISK	<u></u>	REPEAT FINDING					

Detainee files are maintained in a secure area with a high level of accountability. The Records Clerk maintains detailed notes on the status and disposition of all detainee files.

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DISCIPLINARY POLICY POLICY: ALL FACILITIES HOUSING ICE DETAINEES ARE AUTHORIZED TO IMPOSE DISCIPLINE ON DETAINEES WHOSE BEHAVIOR IS NOT IN COMPLIANCE WITH FACILITY RULES AND REGULATIONS. $\bar{\mathbf{Y}}$ COMPONENTS N NA REMARKS The facility has adopted the INS The facility has a written disciplinary system using progressive levels of reviews and appeals. Detention Standard, \boxtimes \Box Disciplinary Policy, dated September 20, 2000, to regulate their disciplinary system. The facility rules state that disciplinary action shall not be capricious or \boxtimes \Box Written rules prohibit staff from imposing or permitting the following sanctions: corporal punishment deviations from normal food service clothing deprivation Ø bedding deprivation denial of personal hygiene items loss of correspondence privileges deprivation of physical exercise The rules of conduct, sanctions, and procedures for violations are defined X \Box in writing and communicated to all detainees verbally and in writing. The following items are conspicuously posted in Spanish and English, and other dominate languages used in the facility: Rights and Responsibilities X Prohibited Acts Disciplinary Severity Scale Sanctions When minor rule violations or prohibited acts occur, informal resolutions Shift supervisors are permitted to informally resolve minor rule are encouraged. \boxtimes violations. Incident reports and Notice of Charges are promptly forwarded to the \boxtimes designated supervisor. Incident reports are investigated within 24 hours of the incident. The \boxtimes \Box Unit Disciplinary Committee (UDC) or equivalent does not convene before an investigation ends. An intermediate disciplinary process is used to adjudicate minor A three member Unit Disciplinary Committee (UDC), infractions. including the unit manager, case X manager, and correctional counselor, is used to adjudicate minor infractions. A disciplinary panel (or equivalent in IGSAs) adjudicates infractions. The panel: Two hearings were conducted Conducts hearings on all charges and allegations referred by the by the Institution Disciplinary Panel which was not referred by \boxtimes Considers written reports, statements, physical evidence, and the UDC. Policy changes were immediately implemented to oral testimony; Hears pleadings by detainees and staff representatives; prevent recurrence of this Bases its findings on the preponderance of evidence; and situation. Imposes only authorized sanctions A staff representative is available if requested for a detainee facing a \boxtimes disciplinary hearing.

DISCIPLINARY I	POLICY			
POLICY: ALL FACILITIES HOUSING ICE DETAINERS ARE AUTHORIZED TO	IMPOSE DI	SCIPLINE	ON DETA	INEES WHOSE BEHAVIOR IS NOT IN
COMPLIANCE WITH FACILITY RULES AND REGULATIONS.				
COMPONENTS	Y	N	NA	REMARKS
The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	\boxtimes			
The duration of punishment set by the OIC, as recommended by the disciplinary panel, does not exceed established sanctions. The maximum time in disciplinary segregation is limited to 60 days for a single offense.	\boxtimes			
Written procedures govern the handling of confidential-informant information. Standards include criteria for recognizing "substantial evidence"	\boxtimes			
All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	\boxtimes			
ACCEPTABLE DEFICIENT	AT-RISI	K		REPEAT FINDING

The Stewart Detention Center staff imposes discipline on detainees whose behavior is not in compliance with facility rules and regulations.

Two hearings were conducted by the Institution Disciplinary Panel which was not referred by the UDC. Policy changes were immediately implemented to prevent recurrence of this situation.

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EMERGENCY (CONTINGENCY) PLANS POLICY ALL FACILITIES HOLDING ICE DETAINES 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 NA REMARKS Y N Policy precludes detainees or Policy precludes detainees or detainee groups from exercising control or detainee groups from exercising authority over other detainees. Ø \Box control or authority over other detainees. Detainees are protected from: Stewart Detention Center Personal abuse procedures protect detainees Corporal punishment from personal abuse; corporal Personal injury 冈 punishment; personal injury; Disease disease; property damage; and harassment from other Property damage detainees. Harassment from other detainees Staff is trained to identify signs of detainee unrest. Staff receives training to \boxtimes П What type of training and how often? П identify signs of detainee unrest in pre-service training. Unit activity logs are utilized to Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Officer In Charge (OIC) disseminate information from X shift to shift and from staff to There is a designated person or persons responsible for emergency plans Chief of Security is responsible and their implementation. Sufficient time is allotted to the person or group X П П for emergency plans and their for development and implementation of the plans. implementation. The plans address the following issues: Confidentiality Contingency plans are \boxtimes considered confidential and Accountability (copies and storage locations) Annual review procedures and schedule numbered for accountability. Revisions Contingency plans include a comprehensive general section with \boxtimes procedures applicable to most emergency situations. The facility has cooperative contingency plans with applicable: Local law enforcement agencies \boxtimes \Box State agencies Federal agencies All staff receives copies of Hostage Situation Management policy and \boxtimes \Box Staff is trained to disregard instructions from hostages, regardless of rank. Stewart Detention Center staff Within 24 hours after release, hostages are screened for medical and receives comprehensive X psychological effects. training regarding hostage situations. Emergency plans include emergency medical treatment for staff and Ø П detainees during and after an incident. Food service maintains at least 3 days' worth of emergency meals for staff \boxtimes and detainees. Written plans identify locations of shut-off valves and switches for all Emergency plans identify locations of shut-off valves and utilities (water, gas, electric). switches and valves for all \boxtimes utilities. The plans include pictures of those which could be difficult to locate.

EMERGENCY (CONTINGENCY) PLANS						
POLICY ALL FACILITIES HOLDING ICE DETAINEES WILL RESPOND TO EMERGENCIES WITH A PREDETERMINED STANDARDIZED PLAN TO MINIMIZE THE HARMING OF HUMAN LIFE AND THE DESTRUCTION OF PROPERTY. IT IS RECOMMENDED THAT SPCS AND CDFS ENTER INTO AGREEMENT, VIA MEMORANDUM OF UNDERSTANDING (MOU), WITH FEDERAL, LOCAL AND STATE AGENCIES TO ASSIST IN TIMES OF EMERGENCY.						
COMPONENTS	Y	N	NA	REMARKS		
Written procedures cover: Work/Food Strike Disturbances Escapes Bomb Threats Adverse Weather Internal Searches Facility Evacuation Detainee Transportation System Plan Internal Hostages Civil Disturbances				Written procedures regarding Civil Disturbances and Internal Searches have been implemented in addition to the other required plans.		
ACCEPTABLE DEFICIENT	AT-RISK		□R	REPEAT FINDING		

Stewart Detention Center Emergency (contingency) plans will allow staff to respond to emergencies with a predetermined standardized plan to minimize the harming of human life and the destruction of property.

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for

ENVIRONMENTAL HEALTH AND SAFETY

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

COMPONENTS	Y	N	NA	REMARKS
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.				Hazardous chemicals are stored in accordance with NFPA and OSHA requirements. Incompatible chemicals are stored in separate locations. Products, sold to detainees through the commissary, do not contain hazardous levels of toxic, flammable, or caustic substances.
Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	\boxtimes			·
The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. • The files list all storage areas, and include a plant diagram and legend. • The MSDSs and other information in the files are available to personnel managing the facility's safety program.	Ø			
All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: • Wear personal protective equipment; and • Report hazards and spills to the designated official.	Ø			
The MSDSs are readily accessible to staff and detainees in work areas.		×		MSDSs were not readily available for two chemical products in the medical clinic. The MSDS for one of the chemicals was found approximately two hours after the initial request. The other MSDS was reportedly not available because it had been recently purchased.
Hazardous materials are always issued under proper supervision. • Quantities are limited; and • Staff always supervises detainees using these substances.	×			·
All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	☒			
Lighting fixtures and electrical equipment installed in storage rooms and other hazardous areas meet National Electrical Code requirements.	Ø			
The facility has sufficient ventilation, and provides and ensures clean air exchanges throughout all buildings.	Ø			
Vents, return vents, and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility.	☒			
Living units are maintained at appropriate temperatures in accordance with industry standards. (68 to 74 degrees in the winter and 72 to 78 degrees in the summer.)	Ø			
Shower and sink water temperatures do not exceed the industry standard of 120 degrees.	\boxtimes			

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 REMARKS COMPONENTS NA All toxic and caustic materials are stored in their original containers in a X П П secure area. Excess flammables, combustibles, and toxic liquids are disposed of \Box 冈 П properly and in accordance with MSDSs. Staff directly supervise and account for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, e.g., No products containing methyl shoe dye. All such products are clearly labeled. "Accountability" \Box П M alcohol were observed during includes issuing such products to detainees in the smallest workable the audit. quantities. Every employee and detainee using flammable, toxic, or caustic materials \boxtimes receives advance training in their use, storage, and disposal. The facility complies with the most current edition of applicable codes. \boxtimes standards, and regulations of the National Fire Protection Association and П the Occupational Safety and Health Administration (OSHA). Ø A technically qualified officer conducts the fire and safety inspections. The Safety Office (or officer) maintains files of inspection reports. Note: the Safety Manager is an OSHA General Industry Outreach Trainer. As such, he is 冈 П П qualified to conduct 10- and 30hour general industry outreach training to staff. The plan has been approved by The facility has an approved fire prevention, control, and evacuation plan. X the local Fire Marshall. The plan requires: Monthly fire inspections; Fire protection equipment strategically located throughout the facility; \boxtimes П \Box Public posting of emergency plans with accessible building/room floor plans; Exit signs and directional arrows; and An area-specific exit diagram conspicuously posted in the diagrammed area. Fire drills are conducted and documented monthly. П \Box \boxtimes A sanitation program covers barbering operations. \boxtimes П The barber shop has the facilities and equipment necessary to meet \boxtimes П П sanitation requirements. 冈 The sanitation standards are conspicuously posted in the barbershop. Written procedures regulate the handling and disposal of used needles The handling and disposal of and other sharp objects. used needles and other sharp 冈 П П objects is addressed in policy number 8-10, dated May 1,

X

П

and a designated individual checks this inventory weekly.

All items representing potential safety or security risks are inventoried

2008.

ENVIRONMENTAL HEAL'	TH AND S	SAFETY		
POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AN APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION SAFE-HANDLING PROCEDURES	D LABELIN	G OF HAZ	ARDOUS	MATERIALS IN ACCORDANCE WITH
COMPONENTS	Y	N	NA	REMARKS
Standard cleaning practices include: • Using specified equipment; cleansers; disinfectants and detergents. • An established schedule of cleaning and follow-up inspections. •				
The facility follows standard cleaning procedures.	\boxtimes			
Spill kits are readily available.	☒			
A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	\boxtimes			·
Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	\boxtimes			
Do the methods for handling/disposing of refuse meet all regulatory requirements?				The Stewart Detention Center fails to ensure compliance with EPA 40 CFR 273 concerning the proper disposal of spent fluorescent bulbs. The bulbs should be tested for toxicity (TCLP test) and disposed of accordingly. In addition, staff who handle and store used bulbs have not received training required by the EPA.
 A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. At least monthly. The pest-control program includes preventative spraying for indigenous insects. 	⊠			Pest inspection and spraying services are provided monthly by Terminix.
Drinking water and wastewater is routinely tested according to a fixed schedule.	×			Drinking water is tested by the local municipality.
Emergency power generators are tested at least every two weeks. Other emergency systems and equipment receive testing at least quarterly. Testing is followed-up with timely corrective actions (repairs and replacements).	⊠			
ACCEPTABLE ☐ DEFICIENT ☐	AT-RISI	K		REPEAT FINDING

MSDSs are not readily available to staff and detainees in the medical clinic.

The Stewart Detention Center fails to ensure compliance with EPA 40 CFR 273 concerning the proper disposal of spent fluorescent bulbs. The bulbs should be tested for toxicity (TCLP test) and disposed of accordingly. In addition, staff who handle and store used bulbs have not received training required by the EPA.

h6,b7c / May 15, 2008 Auditor's Signature / Date b6,b7c

HOLD ROOMS IN DETENTION FACILITIES						
POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS,						
MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSIN						
COMPONENTS	<u>Y</u>	N	NA	REMARKS		
The hold rooms are situated within the secure perimeter.				The hold rooms are situated within the secure perimeter.		
The hold rooms are well ventilated, well lighted, and all activating switches are located outside the room.	\boxtimes					
The hold rooms contain sufficient seating for the number of detainees held.	× ×			There was sufficient seating for the number of detainees observed in holding cells during this review.		
Bunks, cots, beds, or other related make-shift sleeping apparatus are precluded from use inside hold rooms.	\boxtimes					
The walls and ceilings of the hold rooms are tamper and escape proof.	X X					
Individuals are not held in hold rooms for more than 12 hours.	\boxtimes					
Male and females are segregated from each other.			\boxtimes	There are no female detainees housed at this facility.		
Detainees under the age of 18 are not held with adult detainees.				Detainees under the age of 18 are not housed at this facility. If identified during admission as being under age they are immediately placed in the Special Management Unit until transferred.		
Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	×					
In older facilities, officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.	×			·		
All detainees are given a pat down search for weapons or contraband before being placed in the room.	\boxtimes					
Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring.). • Hold rooms are irregularly monitored every 15 minutes. • Unusual behavior or complaints are noted.	×			Holding cells are monitored every 15 minutes. A written record of monitoring is completed.		
When the last detainee has been removed from the hold room, it is given a thorough inspection.	\boxtimes					
There is a written evacuation plan that includes a designated officer to remove detainees from hold rooms in case of fire and/or building evacuation.	×					
An appropriate emergency service is called immediately upon a determination that a medical emergency may exist.	×			Emergency Response Teams are on duty at all times.		
ACCEPTABLE DEFICIENT] AT-RI	sk		REPEAT FINDING		
REMARKS:						

Hold rooms at the Stewart Detention Center are used only for temporary detention of detainees awaiting removal, transfer, EOIR hearings, medical treatment, intra-facility movement, or other processing into or out of the facility.

There are no female detainees housed at the Stewart Detention Center.

b6,b7c / May 15, 2008

AUDITOR'S SIGNATURE / DATE

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KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)

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

COMPONENTS	Y	N	NA	Remarks
The security officer[s], or equivalent in IGSAs, has attended an approved locksmith training program.				The staff member assigned responsibility for key and lock control policy implementation has not attended an approved locksmith training program. Training presented by Southern Steel has been scheduled for July 22-25, 2008.
The security officer, or equivalent in IGSAs, has responsibly for all administrative duties and responsibilities relating to keys, locks etc.	×			·
The security officer, or equivalent in IGSAs, provides training to employees in key control.				The Lieutenant previously assigned to this position provides staff training regarding key and lock control. Staff currently assigned will assume this responsibility upon completion of approved training.
The security officer, or equivalent in IGSAs, maintains inventories of all keys, locks and locking devices.	×	口		
The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	Ø			
Facility policies and procedures address the issue of compromised keys and locks.	×			
The security officer, or equivalent in IGSAs, develops policy and procedures to ensure safe combinations integrity.				Staff assigned responsibility for key and lock control indicate they were not involved in the development of procedures regarding safe combination integrity.
Only dead bolt or dead lock functions are used in detainee accessible areas.	×			
Only authorized locks (as specified in the Detention Standard) are used in detainee accessible areas.				No unauthorized locks were observed in use in detainee accessible areas.
Grand master keying systems are prohibited.		\boxtimes		b2High
All worn or discarded keys and locks are cut up and properly disposed of.				
Padlocks and/or chains are prohibited from use on cell doors.				
The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to: Occupational Safety and Environmental Health Manual, Ch. 3; National Fire Protection Association Life Safety Code 101.	×			
The operational keyboard is sufficient to accommodate all the facility key rings, including keys in use, and is located in a secure area.	\boxtimes			

KEY AND LOCK CONTROL						
(SECURITY, ACCOUNTABILITY	AND M	AINTEN	ANCE)			
POLICY IT IS THE POLICY OF THE ICE SERVICE TO MAINTAIN AN EFFICIENT SYSTEM FOR THE USE, ACCOUNTABILITY AND MAINTENANCE OF ALL KEYS AND LOCKS.						
COMPONENTS	Y	N	NA	REMARKS		
Procedures are in place to ensure that key rings are: Identifiable; The numbers of keys are cited; and Keys cannot be removed.	×					
Emergency keys are available for all areas of the facility.	\boxtimes					
The facilities use a key accountability system.	\boxtimes					
Authorization is necessary to issue any restricted key.	×			Shift supervisor authorization must be utilized for issue of any restricted key.		
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.	×			b2High		
The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	\boxtimes					
 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. 				b2High		
ACCEPTABLE DEFICIENT	AT-RIS	К		REPEAT FINDING		
REMARKS: The staff member assigned responsibility for key and lock control policy implementation has not attended an approved locksmith training program. Training presented by Southern Steel has been scheduled for July 22-25, 2008. Staff assigned responsibility for key and lock control indicate they were not involved in the development of procedures regarding safe combination integrity.						
b2High						
b2High						
AUDITOR'S SIGNATURE / DATE b6,b7c b6,b7c b6,b7c						

POPULATION	COUNTS			
POLICY: ALL DETENTION FACILITIES SHALL ENSURE AROUND-THE-CLOCK CONDUCT AT LEAST ONE FORMAL COUNT OF THE DETAINEE POPULATION CONDUCTED AS NECESSARY.				
COMPONENTS	Y	N.	NA 5	REMARKS
Staff conduct a formal count at least once each shift.	☒			Formal counts are conducted at 1:00 a.m.; 4:00 a.m.; 7:00 a.m.; 1:00 p.m.; 3:00 p.m.; 7:00 p.m.; and 11:00 p.m.
Activities cease or are strictly controlled while a formal count is being conducted.	×			Stewart Detention Center Policy 9-13, Count Principles and Procedures regulate count procedures. Detainees on out count status from living units are properly counted by security staff.
Certain operations cease during formal counts.	\boxtimes			
All movement ceases for the duration of a formal count.	\boxtimes			
Formal counts in all units take place simultaneously.	\boxtimes			
Detainee participation in counts is prohibited.	\boxtimes			
A face-to-photo count follows each unsuccessful recount.	×			No unsuccessful recount was observed during this review. Photo/roster counts are conducted twice daily.
Officers positively identify each detainee before counting him/her as present.	×			Staff was observed utilizing detainee identification cards to ensure accurate accountability.
Written procedures cover informal and emergency counts. • They are followed during informal counts and emergencies.	\boxtimes			
The control officer (or other designated position) maintains an out - count record of all detainees temporarily leaving the facility.	\boxtimes			These out-counts are maintained by the shift supervisors rather than the control room officer.
This training is documented in each officer's training folder.	\boxtimes			
ACCEPTABLE DEFICIENT] AT-RI	SK		REPEAT FINDING
REMARKS: The Stewart Detention Center Staff ensure around-the-clock accountable the detainee population per shift, with additional formal and informal control of the detained population per shift, with additional formal and informal control of the detained population per shift.				
b6,b7c / May 15, 2008	P			

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

AUDITOR'S SIGNATURE / DATE

POST ORDE	RS			
POLICY: ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR CARRYIN				
ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST ANNUALLY				
COMPONENTS	Y	N	NA.	REMARKS
Every fixed post has a set of post orders.	☒		. 🗆	Post orders are maintained on each post observed during the review.
Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	\boxtimes			Stewart Detention Center Policy 9-10 establishes procedures regarding post orders.
One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.				Chief of Security and staff are responsible for keeping post-orders current and making recommended revisions to the Warden.
The IGSA maintains a complete set (central file) of post orders.				Master hard copies as well as computer files are maintained. Staff can access post orders on the facility computer shared drive "F".
The central file is accessible to all staff.	\boxtimes			
The OIC or Contract / IGSA equivalent initiates/authorizes all post-order changes.	×			Warden authorizes all post order changes.
The OIC or Contract / IGSA equivalent has signed and dated the last page of every section.	×			Front page rather than last.
A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.	×			2008 updates are written and awaiting CCA approval.
Procedures keep post orders and logbooks secure from detainees at all times.	×			
Every armed-post officer qualifies with the post weapon(s) before assuming post duty.	\boxtimes			·
Armed-post post orders provide instructions for escape attempts.	×	. 🗆		Although armed, staff may not utilize weapons (deadly force) to prevent an escape unless an immediate threat exists.
The post orders for housing units track the event schedule.	\boxtimes			
Housing-unit post officers record all detainee activity in a log. The post order includes instructions on maintaining the logbook.	Ø			
ACCEPTABLE DEFICIENT	AT-RIS	К		REPEAT FINDING
REMARKS: Stewart Detention Center provides officers all necessary guidance for car	rrying out	their duti	es. This	guidance includes the post orders
established for every post, which are reviewed at least annually, and give				
May 15, 2008 AUDITOR'S SIGNATURE / DATE	Pan			

SECURITY INSPECTIONS					
POLICY: POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHERE SPECIAL SECURITY PROCEDURES MUST BE FOLLOWED, WILL BE					
RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNDING					
COMPONENTS	YES	No	NA	REMARKS	
The facility has a comprehensive security inspection policy. The policy specifies: • Posts to be inspected;				Stewart Detention Center Policy	
 Required inspection forms; Frequency of inspections; Guidelines for checking security features; and Procedures for reporting weak spots, inconsistencies, and other 	\boxtimes			9-7 regulates and establishes procedures regarding security inspections.	
areas needing improvement Every officer is required to conduct a security check of his/her assigned	\boxtimes				
area. The results are documented.				T 11'4' - 4 ' C-	
Documentation of security inspections is kept on file.	\boxtimes			In addition to inspection forms various logs are utilized to document security inspections.	
Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	⊠			Policy establishes procedures to ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	
The front-entrance officer checks the ID of everyone entering or exiting the facility.	Ø				
All visits are officially recorded in a visitor logbook or electronically recorded.	×				
The facility has a secure visitor pass system.	\boxtimes				
Every Control Center officer receives specialized training.					
The Control Center is staffed around the clock.					
Policy restricts staff access to the Control Center.	☒			Staff access to the Control Center is strictly controlled.	
Detainees are restricted from access to the Control Center.					
Communications are centralized in the Control Center.					
Officers monitor all vehicular traffic entering and leaving the facility.				b2High	
The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: The driver's name; Company represented; Vehicle contents; Delivery date and time; Date and time out; Vehicle license number; and Name of employee responsible for the vehicle during the visit	×			b2High	
Officers thoroughly search each vehicle entering and leaving the facility.					
The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	\boxtimes				
Tools being taken into the secure area of the facility are inventoried before entering and prior to departure.	×			Stewart Detention Center Policy 9-8 provides for tool inventories and control procedures.	
The SMU entrance has a sally port.					

SECURITY INSPE	CTIONS						
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			
Written procedures govern searches of detainee housing units and personal areas.	⊠			Stewart Detention Center Policy 9-5, Searches of Inmate/Residents and Various Locations, provides written procedures which govern searches of detainee housing units and personal areas.			
Housing area searches occur at irregular times.	\boxtimes						
Every search of the SMU and other housing units is documented.	\boxtimes			Cell searches are documented on daily activity sheets.			
Storage and supply rooms, walls, light and plumbing fixtures, accesses, and drains, etc., undergo frequent, irregular searches. These searches are documented.	\boxtimes						
Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	☒						
Daily procedures include: Perimeter alarm system tests; Physical checks of the perimeter fence; and Documenting the results.	×			·			
Visitation areas receive frequent, irregular inspections.	\boxtimes						
ACCEPTABLE DEFICIENT	AT-RIS	K		REPEAT FINDING			
Drivanyo				,			

Post assignments in the Stewart Detention Center's high-risk areas, where special security procedures must be followed, are restricted to experienced personnel with a thorough grounding in the facility operations.

/ May 15, 2008 AUDITOR'S SIGNATURE / DATE

SPECIAL MANAGEMENT UNIT (SMU) ADMINISTRATIVE SEGREGATION

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

[DISCH ENVARY BEGREGATION] STANDARD):				
COMPONENTS	Y	N	NA	Remarks
The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. • Detainees are placed in the SMU (administrative) in accordance with written criteria.	⊠			Stewart Detention Center Policy, 10-100, Organization and Administration of Segregation Areas, defines requirements for the operation of security and disciplinary segregation units.
In exigent circumstances, staff may place a detainee in the SMU (administrative) before a written order has been approved. • A copy of the order given to the detainee within 24 hours.				
 The OIC (or equivalent) regularly reviews the status of detainees in administrative detention. A supervisory officer conducts a review within 72 hours of the detainee's placement in the SMU (administrative). 	×			
A supervisory officer conducts another review after the detainee has spent seven days in administrative segregation, and: • Every week thereafter for the first month; and • Every 30 days after the first month. • Does each review include an interview with the detainee? • Is a written record made of the decision and the justification?	⊠			Reviews are conducted on the Segregation Confinement Record/Review; form 10-100A. Reviews do include interviews with the detainee.
The detainee is given a copy of the decision and justification for each review. • The detainee is given an opportunity to appeal the reviewer's decision to someone else in the facility.	×			
The OIC (or equivalent) routinely notifies the Field Office Director (or staff officer in charge of IGSAs) any time a detainee's stay in administrative detention exceeds 30 days. • Upon notification that the detainee's administrative segregation has exceeded 60 days, the FD forwards written notice to HQ Field Operations Branch Chief for DRO.	⊠.			
 The OIC or equivalent) reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU. A written record is made of the decision and the justification. The detainee receives a copy of this record. 	Ø			
The detainee is given the right to appeal to the OIC (or equivalent) the conclusions and recommendations of any review conducted after the detainee have remained in administrative segregation for seven consecutive days.				
Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	\boxtimes			
The SMU is: Well ventilated; Adequately lighted; Appropriately heated; and Maintained in a sanitary condition.	⊠			Unit 7 is utilized as the SMU and is well ventilated; adequately lighted; appropriately heated; and maintained in a sanitary condition.

SPECIAL MANAGEMENT UNIT (SMU) ADMINISTRATIVE SEGREGATION

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

COMPONENTS	Y	N	NA .	REMARKS
All cells are equipped with beds.	\boxtimes			
Every bed is securely fastened to the floor or wall.	<u> </u>		<u> </u>	
 The number of detainees in any cell does not exceed the occupancy limit. When occupancy exceeds recommended capacity, do basic living standards decline? Do criteria for objectively assessing living standards exist? If yes, are the criteria included in the written procedures? 	\boxtimes			Occupancy has not exceeded recommended capacity. There are 120 beds in this unit, only 15 were in use.
The segregated detainees have the same opportunities to exchange/launder clothing, bedding, and linen as detainees in the general population.	\boxtimes	Q		
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?	⊠			Detainees are issued disposable utensils with each meal and are required to return them at the conclusion of each meal. Food restriction is not used as a punishment.
 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. 	🖾			
 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; and Personal legal material. 				Barbering services are provided every other week; detainees are provided five hours of recreation weekly; there is a library cart with non-legal reading material; the Chaplain provides religious material; the same correspondence privileges as detainees in the general population are provided; personal legal material is allowed; and telephone access is similar to that of the general population.
A health care professional visits every detainee at least three times a week. The shift supervisor visits each detainee daily. Weekends and holidays.	×			
Procedures comply with the "Visitation" standard. • The detainee retains visiting privileges; and • The visiting room is available during normal visiting hours.				Unless restricted as a disciplinary sanction by the Institution Discipline Panel.
Visits from clergy are allowed.				
 Detainees have the same law-library access as the general population. Are they required to use the law library ∑Separately, or ∑As a group? Are legal materials brought to them? 				The facility Law Librarian tours the Special Management Units every Thursday to attend to the needs of those detainees.

SPECIAL MANAGEMENT UNIT (SMU) ADMINISTRATIVE SEGREGATION

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

COMPONENTS	Y	N	NA	Remarks
The SMU maintains a permanent log of detainee-related activity, e.g., meals served, recreation, visitors etc.				Individual activity logs (SAR) are maintained on each detainee in SMU.
 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). 	\boxtimes			
Staff record whether the detainee ate, showered, exercised, and took any applicable medication during every shift. • Staff logs record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc; • The medical officer/health care professional signs each individual's record during each visit; and • The housing officer initials the record when all detainee services are completed or at the end of the shift.	⊠		. 🗆	
A new record is created for each week the detainee is in Administrative Segregation. • The weekly records are retained in the SMU until the detainee's return to the general population.				SAR implemented every Sunday on the third shift.
ACCEPTABLE DEFICIENT] AT-Ri	SK		REPEAT FINDING

REMARKS:

The Special Management Unit required at the Stewart Detention Center isolates certain detainees from the general population. The Special Management Unit consists of two sections. One, Administrative Segregation, houses detainees isolated for their own protection; pre-hearing detention; and those pending investigation. The second section houses detainees being disciplined for wrongdoing.

b6,b7c / May 15, 2008 AUDITOR'S SIGNATURE / DATE



U.S. Department of Homeland Security 180 Spring Street, SW Atlanta, Georgia 30303



June 27, 2008

MEMORANDUM FOR:

James Hayes

Acting Director

FROM:

Acting Field Office Director

Atlanta

SUBJECT:

Response and Plan of Action for the Stewart Detention Center

Annual Detention Review

In response to the Annual Detention Review (ADR) of the Stewart Detention Center, Lumpkin, Georgia, conducted May 13 – 15, 2008, by Creative Corrections, in which the facility was found complaint with 36 National Detention Standards¹ (NDS), the below plan of action is submitted to address Reviewer-in-Charge (RIC) Issues and Concerns.

Access to Medical Care

<u>Finding</u>: The facility should establish a tracking procedure to ensure that all detainees are scheduled for and receive a physical examination within 14 days of arrival.

Response: United States Public Health (PHS), Division of Immigration Health Services (DIHS) has established 5 medical teams with team leaders to ensure all detainees are scheduled for and receive physicals within 14 days of arrival. A back-log list will be placed in a designated binder and posted for all teams to coordinate completion of physical examinations within the 14 day period. This system is being monitored by the onsite Nakamoto representative for compliance.

Environmental and Health Safety

<u>Finding</u>: The Material Safety Data Sheets (MSDS) should be re-organized in the medical clinic to provide immediate access to all the MSDS of hazardous substances used or stored in the medical clinic.

www.ice.gov

¹2 NDS not applicable

Response and Plan of Action for the Stewart Detention Center Annual Detention Review Page 2 of 2

<u>Response</u>: PHS/DIHS has reviewed and reorganized the MSDS system in the medical clinic. The MSDS are being monitored on a weekly basis by the facility Safety Manager, as well as the onsite Nakamoto representative to ensure compliance.

Key and Lock Control

<u>Finding</u>: The facility should ensure that all staff securely fastens their key rings to a belt with metal clips or other approved devices as required by Stewart Detention Center Policy 9-3, Key Control.

<u>Response</u>: The NDS does not require key rings to be securely fastened to a metal belt clip; to avoid ambiguities in future reviews this local requirement will be removed from the "At this Facility" section of the CCA Key Control Policy 9-3, implemented at Stewart Detention Center.

U.S. Department of Homeland Security 801 I Street, NW Washington, DC 20536



MEMORANDUM FOR:

b6.b7c

Acting Field Office Director

Atlanta Field Office

FROM:

b6,b7c

b6,b7c

Acting Chief

Detention Standards Compliance Unit

SUBJECT:

Stewart Detention Center Plan of Action

The Stewart Detention Center Plan of Action dated June 27, 2008, has been received. The plan was developed in response to a review conducted by Creative Corrections on May 13-15, 2008.

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

- The Field Office Director, Detention and Removal Operations, shall notify the facility within
 five business days of receipt of this memorandum. Notification shall include a copy of this
 memorandum.
- 2) The Field Office Director shall ensure that the facility complies with its proposed Plan of Action and that a follow-up review is conducted of the deficiencies identified in the CC324, *Detention Facility Review Form* and the RIC Summary Memorandum within 90 days.
- 3) The next annual review will be scheduled on or before May 15, 2009.

Should you or your staff have any questions regarding this matter, please contact b6.b7c r, Detention and Deportation Officer, Detention Standards Compliance Unit at (202) 732-66.b7c.

cc: Official File ICE:HQDRO b6,b7c

:2-2436:7/2/2008

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