



U.S. Department of Homeland Security

Immigration and Customs Enforcement

Office of Professional Responsibility

Inspections and Detention Oversight

Washington, DC 20536-5501

Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations
Salt Lake City Field Office
Utah County Jail
Spanish Fork, Utah

May 8-10, 2012

~~FOR INTERNAL USE ONLY. This document may contain sensitive commercial, financial, law enforcement, management, and employee information. It has been written for the express use of the Department of Homeland Security to identify and correct management and operational deficiencies. In reference to OPR Directive 17006.1, issued 09/22/05; any disclosure, dissemination, or reproduction of this document, or any segments thereof, is prohibited without the approval of the Assistant Director, Office of Professional Responsibility.~~

**COMPLIANCE INSPECTION
UTAH COUNTY JAIL
SALT LAKE CITY FIELD OFFICE**

TABLE OF CONTENTS

EXECUTIVE SUMMARY1

INSPECTION PROCESS

 Report Organization.....5

 Inspection Team Members.....5

OPERATIONAL ENVIRONMENT

 Internal Relations6

 Detainee Relations6

ICE NATIONAL DETENTION STANDARDS

 Detention Standards Reviewed.....7

 Detention Files8

 Environmental Health and Safety10

 Special Management Unit (Administrative Segregation).....12

 Use of Force.....13

EXECUTIVE SUMMARY

The Office of Professional Responsibility (OPR), Office of Detention Oversight (ODO), conducted a Compliance Inspection (CI) of the Utah County Jail (UCJ), Spanish Fork, Utah, on May 8-10, 2012. UCJ, which opened on July 20, 1997, is owned and operated by the Utah County Sheriff's Office (UCSO). The facility serves as a regional jail for males and females arrested by area law enforcement jurisdictions. U.S. Immigration and Customs Enforcement (ICE) has placed male and female detainees of all classification levels (Level I – lowest threat; Level II – medium threat; Level III – highest threat) at UCJ for periods in excess of 72 hours under an Intergovernmental Service Agreement (IGSA). The average daily detainee population is 187. The average length of stay at UCJ is 27 days. UCJ has a total bed capacity of 1,212 with 250 beds available for ICE detainees. Additional detention space is available at the facility for ICE detainees upon request. At the time of the inspection, UCJ housed a total of 175 detainees: 169 male detainees (12 Level I; 112 Level II; 45 Level III), and six female detainees (three Level II; three Level III). Food service is provided in-house by UCJ staff. UCJ provides medical care in-house utilizing a contracted physician. In June 2010, UCJ received accreditation from the National Commission on Correctional Health Care (NCCHC).

The ICE Office of Enforcement and Removal Operations (ERO), Field Office Director, Salt Lake City, Utah (FOD/Salt Lake City) is responsible for ensuring facility compliance with ICE policies and the NDS. An Assistant Field Office Director (AFOD) located at FOD/Salt Lake City is assigned direct oversight responsibility of UCJ. ICE does not have any staff permanently assigned to the facility.

The total number of UCJ staff employed at the facility is (b)(7)e. The Deputy Chief is the highest ranking official at UCJ and is responsible for oversight of daily operations. In addition to the Deputy Chief, UCJ supervisory staff consists of (b)(7)e Lieutenants. The facility employs (b)(7)e Deputy Sheriffs. The remaining (b)(7)e UCJ staff is comprised of non-corrections staff, such as medical personnel, kitchen cooks, maintenance workers, and records clerks.

In February 2011, ODO conducted a Quality Assurance Review (QAR) of UCJ. ODO reviewed a total of 24 NDS and recorded 41 deficiencies.

In August 2011, the ERO Detention Standards Compliance Unit contractors, MGT of America, Inc., conducted an annual review of the ICE NDS. UCJ received an overall rating of "Acceptable" and was found to be in compliance with all 35 standards reviewed.

During this CI, ODO reviewed a total of 18 NDS. Fourteen standards were fully compliant, and 11 deficiencies were identified in the remaining four standards: Detention Files (4 deficiencies), Environmental Health and Safety (5), Special Management Unit – Administrative Segregation (1), and Use of Force (1).

This report details all deficiencies and refers to specific, relevant sections of the ICE NDS. OPR will provide ERO a copy of the report to assist in developing corrective actions to resolve the 11 identified deficiencies. At the conclusion of the inspection on May 10, 2012, ODO conducted a

closeout briefing with UCJ and ERO management to discuss deficiencies requiring immediate attention in the areas of Environmental Health and Safety, Special Management Unit – Administrative Segregation, and Use of Force. Overall, ODO found the majority of the 11 deficiencies to be administrative in nature.

There were no deficiencies under the Detainee Grievance Procedures NDS. Detainees at UCJ filed 23 grievances between May 2011 and March 2012. UCJ maintains a grievance log to document and track grievances filed by detainees. UCJ is in the process of transitioning to an electronic grievance tracking system. ODO reviewed all grievances in detail. Of the 23 grievances reviewed, 17 (74%) were complaints related to issues such as detainees being excluded from the voluntary work program, the length of visitation time, etc., three (14%) pertained to religious services, one (4%) pertained to medical care, one (4%) pertained to recreation, and one (4%) pertained to funds and personal property. ODO reviewed five randomly selected grievances (22%) for timeliness and confirmed responses were provided to detainees within 72 hours in accordance with the NDS.

There were five deficiencies identified under the Environmental Health and Safety NDS. UCJ management has a system for storing, issuing, and maintaining inventories of hazardous materials. Hazardous substances are stored in a fire resistant storage cabinet in the maintenance area. However, ODO found two aerosol cans labeled “Extremely Flammable” and three small propane cylinders on an open shelf in the tool room. These items were not included on the inventory and were not stored in the fire resistant cabinet. The deficiencies were corrected onsite by adding the items to the inventory and placing them in the appropriate storage cabinet.

UCJ maintains a master index of chemicals and their locations, and a master listing of Material Safety Data Sheets (MSDS). ODO verified the index is reviewed semi-annually as required; however, a copy of the index has not been supplied to the local fire department and did not include a listing of emergency phone numbers. Meeting these NDS requirements supports the safety and well-being of detainees, visitors, and staff. Informing the local fire department of all chemicals stored at UCJ facilitates emergency response in the case of an emergency involving flammables, chemical poisoning, or accidental contamination.

Four deficiencies were identified under the Detention Files NDS. ODO reviewed 20 randomly selected active detention files, and 15 randomly selected inactive detention files. None of the 20 randomly selected active files contained a Form I-385 (Alien Booking Record) or a classification worksheet. The NDS requires these forms to be included in detention files to facilitate the proper classification of detainees. This is a repeat deficiency from the February 2011 ODO inspection. None of the 15 randomly selected inactive detention files contained a properly executed Form I-203 (Order to Detain or Release Alien), because the box ordering release had not been checked. ERO management stated that this deficiency would be addressed and corrected immediately, and properly completed forms will be provided to UCJ prior to the release of detainees from UCJ custody. This NDS requirement promotes safety and security by ensuring that only eligible and vetted detainees are released.

No deficiencies were identified under the Food Service NDS. Food Service is provided by UCJ employees with support from UCJ inmates. No detainees work in food service. Documentation of pre-employment health screenings was available for all food service employees and inmate workers. ODO observed the staff is actively involved in the preparation and service of meals to ensure that food items are correctly prepared, served at the appropriate temperatures, and properly presented. ODO verified religious and medically prescribed meals are provided and properly documented. The kitchen is well equipped and maintained in a high state of cleanliness.

There were no deficiencies identified under the Medical Care NDS. Medical services at the UCJ are provided by the Utah County Sheriff's Office. UCJ is accredited by the NCCHC. ODO toured the medical clinic, reviewed policies and procedures, examined medical records, verified medical staff credentials, inspected staff clinical files, and interviewed the Health Services Administrator (HSA), Nursing Supervisor, Mental Health Coordinator, the dentist, (b)(7) nurses, and other staff. ODO reviewed 30 detainee medical records and confirmed that intake screening, tuberculosis testing, medications, treatment for special and chronic needs, and follow up care are administered in accordance with the standard. Consent for treatment was obtained in all cases reviewed. Detainees access medical care by completing written medical requests available in English and Spanish and submitting them to an RN when medication is dispensed, which occurs twice daily. ODO verified medical requests are triaged, and detainees are seen for sick call in a timely manner.

Physician trained RNs conduct physical examinations (PE) at UCJ. ODO verified the physician reviewed the PE in each of the 30 cases reviewed, and all 30 detainees received a PE the same day as intake, which is well within the 14-day timeframe required by the NDS. This expedites the identification of medical issues requiring attention. ODO cites this as a best practice.

Medical follow up for detainees with chronic care needs occurs every three months; however, appointments are scheduled sooner if medically indicated. The UCJ system for tracking chronic care cases uses an electronic medical record system developed by medical staff. The system helps ensure follow up appointments are scheduled and completed, which supports timely access to care. ODO cites the use of an electronic medical record system as a best practice.

UCJ operates an SMU for male detainees and one for female detainees. Both SMUs are well ventilated, adequately lit, appropriately heated, and maintained in a sanitary condition. All cells are equipped with a sink, toilet, and single concrete bed with a mattress. Written procedures are in place to temporarily segregate detainees for administrative reasons. Detainees are assigned to administrative segregation while awaiting a disciplinary hearing on serious rules violations. SMU is not used for detainees with mental health issues. Detainees with significant mental health issues are not held at UCJ.

One deficiency was identified under the Special Management Unit – Administrative Segregation NDS. There were no male or female detainees in administrative segregation during the CI. However, a review of the detention files of four male detainees recently placed in administrative segregation confirmed that not one of the four detainees had received a segregation order.

Failure to issue segregation orders violates the NDS as well as established written procedures at UCJ. This is a repeat deficiency from the February 2011 ODO inspection. Issuing and providing detainees with a copy of a segregation order informs the detainee of the reason for placement in segregation and ensures due process.

No deficiencies were identified under the Staff-Detainee Communication NDS. ICE Immigration Enforcement Agents (IEA) and Supervisory Detention and Deportation Officers (SDDO) conduct weekly announced and unannounced visits to housing units to address detainee concerns and inquiries as required by the Model Protocol on Staff-Detainee Communication. IEAs from the Provo, Utah sub-office perform the scheduled weekly detainee liaison visits at the UCJ. These visits are documented in an ICE dedicated logbook located in each housing unit.

There were no deficiencies identified under the Suicide Prevention and Intervention NDS. ODO reviewed facility policy, the suicide prevention training curriculum, and (b)(7)(d) medical and (b)(7)(d) non-medical staff training records. ODO inspected cells used for suicide watch, and interviewed medical staff and the training manager. ODO verified that no detainees were placed on suicide watch during the 12 months preceding the CI. Local policy is current and exceeds NDS requirements. UCJ Staff conducts monitoring checks every 15 minutes that are electronically documented utilizing a computerized wand system. This wand system ensures detainee safety and officer accountability. UCJ acknowledges staff members who identify and take appropriate action when signs of suicidal ideation are observed. Staff are recognized via cash awards or certificates of appreciation in order to support heightened awareness and proactively prevent detainee suicides. ODO cites this as a best practice.

There was one deficiency identified under the Use of Force NDS. By definition, an immediate use of force situation is created when a detainee's behavior constitutes a serious and immediate threat to self, staff, another detainee, property, or the security and orderly operation of the facility. A calculated use of force incident is warranted when no immediate threat is posed, and there is sufficient time to potentially diffuse the situation without resorting to force. UCJ management stated there had been no reports of calculated or immediate use of force incidents involving detainees since the February 2011 ODO Inspection; however, while ODO was reviewing the files of detainees previously placed in administrative segregation, an incident report dated April 28, 2012, documented an immediate use of force used to stop a fight between two detainees when one detainee refused to obey an order to cease. Officers put the aggressive detainee on the floor and applied restraints. Incident reports and medical evaluations of the detainees were completed, but there was no After-Action Review as required by the NDS and facility policy. This deficiency was corrected onsite. An After-Action Review of the incident that occurred on April 28, 2012, was conducted and documented. UCJ management provided a copy of the After-Action Review to ERO and ODO. UCJ has a comprehensive policy governing the Use of Force. Law enforcement staff receives training in Use of Force techniques during the initial 11-week Utah Law Enforcement Training Academy. Post academy, staff completes eight hours of Use of Force training annually, and 40 hours of refresher training every two years.

INSPECTION PROCESS

ODO primarily focuses on areas of noncompliance with the ICE NDS or the ICE Performance Based National Detention Standards (PBNDS), as applicable. The NDS apply to UCJ. The NDS apply to UCJ. In addition, ODO may focus its inspection based on detention management information provided by the ERO Headquarters (HQ) and ERO field offices, and on issues of high priority or interest to ICE executive management. Inspection objectives are to evaluate the welfare, safety, and living conditions of detainees, and to determine compliance with applicable laws, policies, regulations, and procedures.

ODO reviewed the processes employed at UCJ to determine compliance with current policies and detention standards. Prior to and during the inspection, ODO collected and analyzed relevant allegations and detainee information from multiple ICE databases, including the Joint Integrity Case Management System (JICMS), the ENFORCE Alien Booking Module (EABM), and the ENFORCE Alien Removal Module (EARM). ODO also gathered facility facts and inspection-related information from ERO HQ staff to best prepare for the site visit at UCJ.

REPORT ORGANIZATION

This report documents inspection results, serves as an official record, and is intended to provide ICE and detention facility management with a comprehensive evaluation of compliance with policies and detention standards. It summarizes those NDS that ODO found deficient in at least one aspect of the standard. ODO reports convey information to best enable prompt corrective actions and to assist in the on-going process of incorporating best practices in nationwide detention facility operations.

OPR classifies program issues into one of two categories: deficiencies and areas of concern. OPR defines a deficiency as a violation of written policy that can be specifically linked to the NDS, ICE policy, or operational procedure. OPR defines an area of concern as something that may lead to or risk a violation of the NDS, ICE policy, or operational procedure. When possible, the report includes contextual and quantitative information relevant to the cited standard. Deficiencies are highlighted in bold throughout the report and are encoded sequentially according to a detention standard designator.

Comments and questions regarding the report findings should be forwarded to the Deputy Division Director, OPR, ODO.

INSPECTION TEAM MEMBERS



Special Agent (Team Leader)	ODO, Phoenix
Detention and Deportation Officer	ODO, Phoenix
Special Agent	ODO, Phoenix
Contract Inspector	Creative Corrections
Contract Inspector	Creative Corrections
Contract Inspector	Creative Corrections

OPERATIONAL ENVIRONMENT

INTERNAL RELATIONS

ODO interviewed supervisory ICE and UCJ staff, including the UCJ Deputy Chief, a Lieutenant, and the ERO AFOD. ODO also interviewed an SDDO and a Corrections Officer. UCJ staff stated that ERO personnel conduct weekly visits to detainee housing units at the facility. UCJ management stated the county is under budgetary constraints. At the time of the inspection, there were (b)(7)e vacant deputy positions. During interviews, ICE and UCJ personnel stated the working relationship between the two agencies is positive, and morale is high.

ICE management stated they have the necessary resources to carry out their duties and responsibilities, but the permanent assignment of a Detention Service Manager (DSM) would greatly enhance the efficiency of ERO by providing additional guidance and oversight of operations at UCJ.

DETAINEE RELATIONS

ODO interviewed four male and four female detainees to assess the overall detention conditions at UCJ. The detainees stated they are treated with dignity and respect, and they receive daily recreation, send and receive mail, use the telephones, and have access to grievance forms. All detainees have seen Immigration Enforcement Agents and Deportation Officers visit the housing units on a regular basis, and all knew how to contact ICE ERO. None of the male detainees complained about medical, but three of the four (75%) female detainees complained that medical responses to their sick call requests had taken too long. ODO confirmed that all three females had been seen by medical staff within two days of submitting their sick call requests, which is in compliance with the NDS.

ICE NATIONAL DETENTION STANDARDS

ODO reviewed a total of 18 NDS and found UCJ fully compliant with the following 14 standards:

- Access to Legal Material
- Admission and Release
- Detainee Grievance Procedures
- Detainee Handbook
- Disciplinary Policy
- Food Service
- Funds and Personal Property
- Medical Care
- Special Management Unit (Disciplinary Segregation)
- Staff-Detainee Communication
- Suicide Prevention and Intervention
- Telephone Access
- Terminal Illness, Advance Directives, and Death
- Tool Control

As these 14 standards were compliant at the time of the review, a synopsis for these areas was not prepared for this report.

ODO found deficiencies in the following four standards:

- Detention Files
- Environmental Health and Safety
- Special Management Unit (Administrative Segregation)
- Use of Force

ODO findings for each of these standards are presented in the remainder of this report.

DETENTION FILES (DF)

ODO reviewed the Detention Files standard at UCJ to determine if files are created containing all significant information on detainees housed at the facility for over 24 hours, in accordance with the ICE NDS. ODO reviewed detention files, logbooks, policies and procedures, toured the admissions and release area, and interviewed staff.

As part of the intake process, staff creates a detention file when a detainee is admitted to the facility. ODO randomly selected 20 active and 15 inactive detention files for review to determine if required documentation was present.

All of the 20 active detention files reviewed contained original photographs, personal property inventory sheets, and receipts for property and baggage. None of the 20 active files reviewed contained Form I-385 (Alien Booking Record) or a classification work sheet, which are required by the NDS to be in every detention file (**Deficiency DF-1**). A Form I-385 contains a picture of the detainee, fingerprints, the alien registration number, and in and out booking dates. A Detainee Classification System-Primary Assessment Form is used to evaluate criminal history. ICE requires the use of a classification form as a guide for placing detainees into housing units with detainees of the same or compatible classification levels. This is a repeat deficiency from the February 2011 ODO inspection.

All 15 inactive detention files reviewed contained a Form I-203 (Order to Detain or Release), but the box for release was not properly checked, and the date and time that an official authorized the release were not indicated on the forms. Officers must mark the designated release box and note the date and time of release, then sign the bottom of the I-203. All 15 inactive files were missing the original I-385 (**Deficiency DF-2**). ODO determined ERO failed to provide UCJ with a Form I-203 authorizing a detainee's release for each of the 15 inactive files reviewed. ICE ERO stated this issue would be corrected immediately, and a properly executed I-203 will be provided to UCJ prior to the release of every detainee in the future.

UCJ does not permit the removal of detention files from the processing area. All contents of the detention files are scanned and are accessible from the UCJ server. The NDS requires facilities to have a logbook to document when detention files are checked in and out from the processing area (**Deficiency DF-3**). Although detention files have been digitized, the original files continue to be maintained at UCJ. The NDS requires a tracking system for those hard files. A log enables facility management to track the original detention files if they get lost or misplaced. This is a repeat deficiency from the February 2011 ODO inspection.

ERO does not create and maintain detention files at the ERO Field Office, because detention files are created and filed at UCJ (**Deficiency DF-4**). The AFOD stated that this will not be addressed due to lack of resources, and a request for a waiver for this requirement has been submitted to ERO HQ and is awaiting approval.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY DF-1

In accordance with the ICE NDS, Detention Files, section (III)(B)(1)(a)(b), the FOD must ensure the detainee detention file will contain either originals or copies of forms and other documents generated during the admissions process. If necessary, the detention file may include copies of material contained in the detainee's A-file.

The file will, at a minimum, contain the following:

- a. I-385, Alien Booking Record; one or more original photograph(s) attached;
- b. Classification Work Sheet.

DEFICIENCY DF-2

In accordance with the ICE NDS, Detention Files, section (III)(E)(2)(3), the FOD must ensure staff will insert into the released detainee's detention file copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 and other documentation, and the officer closing the detention file will make a notation (on the acknowledgement form, if applicable) that the file is complete and ready for archiving.

DEFICIENCY DF-3

In accordance with the ICE NDS, Detention Files, section (III)(F)(2)(a-e), the FOD must ensure that at a minimum, a logbook entry recording the file's removal from the cabinet will include:

- a. The detainee's name and A-number;
- b. Date and time removed;
- c. Reason for removal;
- c. Signature of person removing the file, including title and department;
- d. Date and time returned; and
- e. Signature of person returning the file.

DEFICIENCY DF-4

In accordance with the ICE NDS, Detention Files, section (IV), the FOD must ensure the field office with IGSA-facility jurisdiction shall create and maintain detention files on all detainees admitted to IGSA facilities. These files shall contain the same material (forms and other documents) as SPC/CDF [Service Processing Center/Contract Detention Facility] detention files, to the extent possible, given that they are created by the field office. For example, if the field office takes and holds detainee property, the detention file shall contain the G-589's [sic] and I-77's [sic]. The file shall also contain copies of all I-203's [sic] and the G-385 related to the alien. The IGSA shall forward all documents relating to the individuals [sic] detention to the INS field office of jurisdiction for inclusion into the detention file.

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

ODO reviewed the Environmental Health and Safety standard at UCJ to determine if the facility maintains high standards of cleanliness and sanitation, safe work practices, and control of hazardous materials and substances, in accordance with the ICE NDS. ODO toured the facility, interviewed staff, and reviewed policies and documentation of inspections, hazardous chemical management, and fire drills.

The facility has a system for storing, issuing, and maintaining inventories of hazardous materials. Hazardous substances are stored in a fire resistant storage cabinet in the maintenance area. While inspecting the area, ODO found two aerosol cans labeled “Extremely Flammable” and three small propane cylinders on an open shelf in the tool room. These items were not included on the inventory (**Deficiency EH&S-1**), and were not stored in the fire resistant storage cabinet (**Deficiency EH&S-2**). UCJ management added the items to the inventory, and they were placed in the appropriate storage cabinet prior to completion of the CI.

UCJ maintains a master index of chemicals and their locations, and a master listing of Material Safety Data Sheets (MSDS). ODO verified the index was reviewed semi-annually as required by the NDS; however, a copy of the index had not been supplied to the local fire department, and there was no listing of emergency phone numbers (**Deficiency EH&S-3**).

Monthly fire drills were conducted on each shift, and documentation is on file. Reports for water and pest control services are current and readily available. ODO verified the emergency power generator is tested weekly for a period of 40 minutes and documented, but testing of the generator by an external generator service company has not occurred for more than two years (**Deficiency EH&S-4**). UCJ management stated the cost of testing by an external company is prohibitive.

Barbering services are provided by a contractor who visits the facility once a week. Detainees pay \$9.00 for a haircut. Indigent detainees are provided service at no charge. Detainees with less than \$1 on their account for 14 consecutive days are declared indigent. Barbering takes place in housing unit dayrooms. Sanitation regulations are not posted (**Deficiency EH&S-5**). This deficiency was cited during the February 2011 Quality Assurance Review. ODO was unable to confirm adherence to sanitation regulations in practice, because the contract barber was not on site during the review.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY EH&S-1

In accordance with ICE NDS, Environmental Health and Safety, section (III)(A), the FOD must ensure every area will maintain a running inventory of the hazardous (flammable, toxic, or caustic) substances used and stored in that area.

DEFICIENCY EH&S-2

In accordance with ICE NDS, Environmental Health and Safety, section (III)(F)(1), the FOD must ensure any liquid or aerosol labeled “Flammable” or “Combustible” must be stored and used as prescribed on the label, in accordance with the Federal Hazardous Substances Labeling Act, to protect both life and property.

DEFICIENCY EH&S-3

In accordance with ICE NDS, Environmental Health and Safety, section (III)(C), the FOD must ensure the Maintenance Supervisor or designate will compile a master index of all hazardous substances in the facility, including locations, along with a master file of MSDSs. He/she will maintain this information in the safety office (or equivalent), with a copy to the local fire department. Documentation of the semi-annual reviews will be maintained in the MSDS master file.

The master index will also include a comprehensive, up-to-date, list of emergency phone numbers (fire department, poison control center, etc.).

DEFICIENCY EH&S-4

In accordance with the ICE NDS, Environmental Health and Safety, section (III)(O), the FOD must ensure the emergency power generator will also receive quarterly testing and servicing from an external generator-service company.

DEFICIENCY EH&S-5

In accordance with ICE NDS, Environmental Health and Safety, section (III)(P)(1)(4), the FOD must ensure the [barbering] operation will be located in a separate room not used for any other purpose.

Each barbershop will have detailed hair care sanitation regulations posted in a conspicuous location for the use of all hair care personnel and detainees.

SPECIAL MANAGEMENT UNIT (SMU)

Administrative Segregation (AS)

ODO reviewed the Special Management Unit – Administrative Segregation standard at UCJ to determine if the facility has procedures in place to temporarily segregate detainees for administrative reasons, in accordance with the ICE NDS. ODO toured each SMU, interviewed staff, and reviewed policies, logbooks, and detainee files.

UCJ operates one SMU for male detainees and one for female detainees. They are separate. Both are well ventilated, adequately lit, appropriately heated, and maintained in a sanitary condition. All cells are equipped with a sink, a toilet, and a single concrete bed with a mattress.

There are written procedures in place to temporarily segregate detainees for administrative reasons. UCJ management stated the primary reason for assignment to administrative segregation is to await a disciplinary hearing for a serious rules violation. Facility staff and the ICE supervisor stated the SMU is not used for detainees with mental health issues. Detainees with significant mental health issues are not held at UCJ. There were no detainees in administrative segregation during the review.

ODO reviewed the files of four detainees previously placed in administrative segregation. None contained administrative segregation orders (**Deficiency SMU-1**). Failure to issue segregation orders violates the NDS as well as UCJ established written procedures. This is a repeat deficiency from the February 2011 ODO inspection. A hearing notice is issued to all detainees charged with rules violations. The notice states the detainee will see the Disciplinary Hearing Officer, but does not order or address placement in the SMU. The notice does not apply to detainees who may be assigned to the SMU for other reasons. Providing detainees with a copy of the segregation order informs them of the reason for the assignment and ensures due process.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY SMU-1

In accordance with the ICE NDS, Special Management Unit - Administrative Segregation, section (III)(B), the FOD must ensure a written order shall be completed and approved by a supervisory officer before a detainee is placed in administrative segregation, except when exigent circumstances make this impracticable. In such cases, an order shall be prepared as soon as possible. A copy of the order shall be given to the detainee within 24 hours, unless delivery would jeopardize the safety, security, or orderly operation of the facility.

USE OF FORCE (UOF)

ODO reviewed the Use of Force standard at UCJ to determine if necessary Use of Force is utilized only after all reasonable efforts have been exhausted to gain control of a subject, while protecting and ensuring the safety of detainees, staff and others, preventing serious property damage, and ensuring the security and orderly operation of the facility, in accordance with the ICE NDS. ODO toured the facility, inspected equipment, and reviewed the local policies, training records, and other pertinent documentation.

UCJ has a comprehensive policy governing the Use of Force. Staff receives training in use of force techniques during the initial 11-week Utah Law Enforcement Training Academy. Post academy, staff completes eight hours of use of force training annually and 40 hours of refresher training every two years. UCJ management does not use four-point restraints, but uses a restraint chair and a restraint stretcher to move combative detainees. UCJ management stated that a restraint chair or stretcher has never been used on a detainee.

ODO confirmed there had been no reports of calculated or immediate use of force incidents involving detainees since the February 2011 ODO inspection. By definition, an immediate use of force situation is created when a detainee's behavior constitutes a serious and immediate threat to self, staff, another detainee, property, or the security and orderly operation of the facility. A calculated use of force incident is warranted when no immediate threat is posed, and there is sufficient time to potentially diffuse the situation without resorting to force. UCJ management stated there had been no reports of calculated or immediate use of force incidents involving detainees since the February 2011 ODO Inspection; however, while ODO was reviewing the files of detainees previously placed in administrative segregation, an incident report dated April 28, 2012, documented an immediate use of force used to stop a fight between two detainees when one detainee refused to obey an order to cease. Officers put the aggressive detainee on the floor and applied restraints. Incident reports and medical evaluations of the detainees were completed, but there was no After-Action Review as required by the NDS and facility policy (**Deficiency UOF-1**). This deficiency was corrected onsite. An After-Action Review of the incident that occurred on April 28, 2012, was conducted and documented. UCJ management provided a copy of the After-Action Review to ERO and ODO. UCJ has a comprehensive policy governing the Use of Force. Law enforcement staff receives training in Use of Force techniques during the initial 11-week Utah Law Enforcement Training Academy. Post academy, staff completes eight hours of Use of Force training annually, and 40 hours of refresher training every two years.

STANDARD/POLICY REQUIREMENTS FOR DEFICIENT FINDINGS

DEFICIENCY UOF-1

In accordance with the ICE NDS, Use of Force, section (III)(K), the FOD must ensure written procedures shall govern the use-of-force incident review, whether calculated or immediate, and the application of restraints. The review is to assess the reasonableness of the actions taken (force proportional to the detainee's actions), etc. IGSA will pattern their incident review process after INS. INS shall review and approve all After Action Review procedures.

The After-Action Review Team shall complete and submit its After-Action Review Report to the OIC within two working days of the detainee's release from restraints. The OIC shall review and sign the report, acknowledging its finding that the use of force was appropriate/inappropriate.