Reducing Harm By Limiting Interior Enforcement & Improving Due Process Protections in Removal Proceedings

The Biden administration has worked to end and replace the Trump administration’s cruelest interior enforcement policies by narrowing the guidelines for which individuals should be prioritized for arrest, detention, and deportation and limiting where ICE may take enforcement actions. ICE also implemented a “victim-centered” approach when dealing with non-citizen victims of crimes. However, detention numbers are rising and ICE continues to rely on racist and faulty databases to criminalize immigrants. LGBTQ individuals are at particular risk, and 97 times more likely to be sexually assaulted than other immigrants in detention. While the administration has not expanded the 287(g) program, they also have not ended it. This program incentivizes racial profiling and other unlawful police practices by entangling federal immigration enforcement with local law enforcement agencies. Until these policies are reversed, the immigration enforcement system will continue to prioritize deportation over decency, wreaking havoc on families and communities.

The administration should pursue meaningful and critical enhancements of due process, particularly regarding access to legal representation. Trump-appointed individuals remain in DOJ immigration leadership positions, and the rapid hiring of immigration judges is leading to an immigration judge bench that is disproportionately made up of OIL and ICE attorneys or other former prosecutors. While the immigration court backlog requires a substantial increase in resources, DOJ’s fixation on the rapid hiring of judges rather than the quality and diversity of the bench is a mistake that may have unintended consequences for decades to come. Greater attention to language access for BIPOC communities—particularly indigenous, Haitian, African, and other immigrant communities—is critically needed to ensure fairness and effectiveness in removal proceedings, and the Director of EOIR should establish a path forward consistent with the DOJ Language Access Plan.

Actions in Review

A ttempted a 100-Day Deportation Moratorium. The same day President Biden took office, his administration fulfilled a campaign promise by releasing a policy memo announcing a 100-day deportation moratorium on removals to review the policies and practices of ICE under the previous administration. The 100-day moratorium would have shielded up to 25,000 qualifying immigrants from removal as long as they...
entered the United States before November 1, 2020. Texas sued the administration and a U.S. District Court judge indefinitely banned the moratorium’s enforcement. Disappointingly, DOJ did not seek review of the decision.

Issuance of Final Enforcement Priorities Without a Reliance on Categorical Bars Due to Involvement in the Criminal System. Instead of fighting the moratorium injunction, DHS issued new interim enforcement priorities in February 2021. While not as expansive as the moratorium, the interim guidelines still protected millions of “low priority” individuals from being arrested, detained, or removed if implemented correctly by ICE agents. When DHS issued final enforcement guidelines in September 2021, we welcomed their emphasis on the exercise of prosecutorial discretion in enforcement, detention, and deportation decisions and the reduction of criminal convictions that would trigger automatic enforcement action.

Unfortunately, the final priorities memo continued to embrace a binary framework that identifies “bad” immigrants for enforcement action based on prior convictions, thereby perpetuating systemic racism built into the criminal system instead of focusing on individuals who should not be prioritized for enforcement action based on their equities. Each enforcement priority memo has been subject to litigation by several states, though the September guidance has not been enjoined.

While these enforcement priorities should be a reprieve for millions of individuals and family members who do not fall under the priorities, this is only true if ICE agents and officers exercise their discretion consistent with the final memo, which is already proving to be a significant problem across jurisdictions. Diligent oversight of implementation must be a priority for the administration to ensure that officers are acting consistent with the final memo and the Biden administration’s overall commitment to an immigration system that is rooted in safe and humane policies. DHS should regularly release public data on enforcement actions, including factors relied on to pursue action against an individual, as well as the location of action, nationality, and gender of the immigrant targeted, at a minimum. ICE should also institute a screening process for subjects of enforcement to identify survivors of crime, consistent with “victim centered approach.”

New Guidance for Enforcement Action in Protected Areas. The Biden administration issued a memorandum in October 2021 updating and improving civil immigration enforcement guidelines. DHS agents and officers will now be required to consider the type of location prior to enforcement, allowing undocumented immigrants greater access to critical services without fear of being arrested. The new expanded list of locations, now considered “protected areas,” includes hospitals, schools, places of worship, school bus stops, social services establishments (such as domestic violence shelters), and disaster and emergency services locations, among others. The memo requires that ICE agents and officers consider the proposed location of an enforcement action and ensure that detention occurs without denying or limiting individuals’ access to needed medical care, children’s access to their schools, access to food and shelter, access to places of worship, and more.

Worksite Enforcement Strategy to Protect Workers, Worksite Conditions, and the U.S. Labor Market. In October 2021, DHS directed ICE, CBP, and USCIS to develop and update policies to enhance enforcement of employment and labor standards and to protect the participation of vulnerable workers in labor standards investigations. DHS also ceased mass worksite operations and provided guidance to decide whether or how to enforce the law against an individual. Recognizing how ICE enforcement can undermine workers’ rights, DHS rightfully ended the destructive and cruel practice of mass worksite raids, while acknowledging the leadership of immigrant workers and the importance of providing protections from deportation to those who speak out against unscrupulous employers that threaten deportation and employ exploitative labor practices.

Restored Immigration Judges’ Ability to Administratively Close Cases. Attorney General Merrick Garland overruled Matter of Castro-Tum, which made it significantly harder for immigration judges to manage their own court docket by preventing them from administratively
closing cases, which ensures a well-functioning court system. Immigration judges’ ability to manage their own dockets is critical to the effective functioning of a court and due process. Nonetheless, immigration judges remain constrained by Matter of S-O-G- and F-D-B- and Matter of L-A-B-R-. DOJ should complete the necessary steps to fully restore docket management tools to immigration judges.

Recognizing the Union for Immigration Judges. Settling a case between the administration and immigration judges’ union (National Association of Immigration Judges, NAIJ), the DOJ consented to recognize the union as the exclusive representative for the nation’s immigration judges. Further, the settlement reversed a Trump-era decision to strip immigration judges of their collective bargaining rights. In 2018, the Trump administration moved to decertify the union and argued that immigration judges are ineligible to collectively bargain since they directly influence agency policy through their decisions. NAIJ has been a key voice in the fight for judicial independence and against case completion quotas.

Continued Deputization of Local Law Enforcement for Immigration Enforcement. 287(g) agreements and other policies that turn local law enforcement into ICE agents and/or incentivize or require focused cooperation between federal immigration enforcement and local law enforcement remain in effect across the United States. Although the Biden administration is not using Secure Communities in enforcement actions, pursuant to an executive order, it could be revived at any time by subsequent presidents.

The DHS secretary should direct ICE to terminate Secure Communities, similar to the Obama administration’s termination memo in November 2014. 287(g) agreements erode community trust in law enforcement and other local institutions of governance, lead to lower crime reporting, and have resulted in numerous instances of racial profiling and civil rights violations. Local officials harass people of color under the guise of checking immigration status and isolate communities by requiring them to withdraw from public events and spaces where law enforcement might be present. The Biden Administration should terminate 287(g) agreements, formally end the Secure Communities program, and end ICE’s detainer practice that requires local law enforcement to hold individuals for civil immigration enforcement purposes.

Increased Detention Rates and Use of Private Detention Centers. Though the number of detained individuals had decreased during the pandemic, the number has increased substantially in President Biden’s first year in office, returning to pre-2020 rates. This is particularly troubling during the continuing COVID-19 pandemic, as ICE has struggled to stop the spread of the virus in the crowded conditions of detention centers with over 35,000 positive cases since February 2020. The administration also continues to contract with private prisons for immigration detention, even as it is terminating private prison contracts in the criminal system. Immigration detention settings continue to be sites of abuse and neglect.

If the Biden administration wants to create a just and humane immigration system, it must phase out the use of detention in immigration enforcement, starting with ending contracts with private prison companies and county jails and instead allowing individuals to remain in their communities while navigating their immigration cases.

The administration should also ensure the Executive Order (No. 14006) issued by President Biden which banned the renewal of contracts by DOJ/Bureau of Prisons with private prisons also applies to DHS and ICE by making it explicit that DHS will not enter into new contracts for any facilities closed by DOJ/BOP. Ensure adequate protection, vaccinations, and necessary equipment to prevent the spread of COVID for people detained and staff working in facilities. Order DHS to publish a nation-wide policy to provide COVID-19 vaccination and booster for individuals they are unwilling to release despite their clear authority to do so.
Unavailability of Legal Representation for Immigrants in the Immigration Court System. In May 2021, President Biden issued a memorandum directing the Attorney General to "consider expanding DOJ's planning, development, and coordination of access-to-justice policy initiatives," and reviving the White House Legal Aid Interagency Roundtable. Attorney General Garland responded that DOJ would develop a plan to do so, but meaningful progress toward an appointed counsel program is not yet evident.

Over 40% of immigrants in removal proceedings do not have a lawyer, which undermines due process and leads to lengthy court cases because most don’t understand immigration law or practice. For unaccompanied children and vulnerable individuals who need support to meaningfully engage in the removal process, the unavailability of counsel can result in orders of deportation to countries where they are likely to be killed or seriously harmed. The American Immigration Council found that immigrants were five times more likely to obtain legal relief if they were represented by counsel—over ten times more likely if the person was detained—but over 40% of non-detained people go through proceedings with no counsel at all, a rate that increases to approximately 86% for those in detention.

Increasing Access to Accredited Representation Program. As Afghan evacuees and other vulnerable populations add to legal services demands in 2022 and beyond, increasing the capacity of nonprofit legal services organizations through the Recognition & Accreditation (R&A) program is critical to ensure that those populations have access to counsel and access to justice. The program is currently severely underfunded and under-resourced, bringing the credentialing of new legal representatives (and therefore building the field's capacity) to a virtual standstill. The program should be sufficiently funded and other immediate actions taken as can be found in the Catholic Legal Immigration Network’s policy brief.

Launched Access EOIR Initiative and Piloted a Government-Funded Program for Unaccompanied Minors. In September 2021, EOIR launched the "Access EOIR Initiative" to improve access to information and increase the level of legal representation for individuals appearing in removal proceedings, including government-funded representation for children in eight cities. This initiative is an important first step but does not cover the vast majority of people in removal proceedings and excludes unaccompanied children who are applying for asylum through USCIS or special juvenile status through USCIS and family court. While the Department of Health and Human Services (HHS) funds programs to match unaccompanied children with legal counsel, there is a significant gap between the services they require and the funding available. The FY 2023 appropriations bill should include no less than $300 million for legal services for unaccompanied children, $8 million for child advocates, and $250 million for post-release services.

Continued Employment of Problematic Trump-Era Personnel in the Immigration Court System. Despite some efforts at reform, the Biden administration’s attempts at improvement are inherently threatened by the presence of holdover personnel and policies from the prior administration—a period defined by politicized and unqualified hiring practices, particularly of immigration judges, and the subsequent mismanagement of our country’s internal enforcement system and immigration courts. Concerns about Trump’s politicization of immigration courts were great enough during the prior administration to prompt a GAO investigation, but the current DOJ continues to rely on Trump-era hires and hiring practices that bias the system in favor of the prosecution. To ensure fairness and impartiality of our immigration court system, the Biden administration must make immediate and fundamental changes, including the removal of problematic and abusive personnel from positions of power in the DOJ and Executive Office for Immigration Review (EOIR).
A host of intersecting factors—including targeted gang violence, sexual- and gender-based violence, corruption, poverty, natural disasters, and other dangers—led to a record high number of individuals, families, and unaccompanied children seeking humanitarian protection at the southern U.S.-Mexico border. Many arrived from northern Central America and Haiti, with growing numbers of Venezuelans, Cubans, and Nicaraguans. The COVID-19 pandemic and the destruction caused by Hurricanes Iota and Eta intensified these perils, prompting even more individuals to make the devastating decision to leave their families in order to secure safety abroad and send remittances home. Much more can be done to protect asylum seekers in the region and restore and strengthen the U.S. asylum system.

The Biden administration made progress towards ending cruel and racist Trump policies that targeted children and families as a deterrence method by stopping the use of family detention. Still, dozens of harmful policies remain in effect, including the use of Title 42, the Migrant Protection Protocols (MPP), and emergency intake facilities for unaccompanied minors.

Continued Use of Title 42 to Block Asylum Seekers. While the administration attempted to terminate MPP twice, Title 42 remains in effect and access to asylum is still largely unavailable at the border, just as it was under the Trump administration. The Biden administration must stop weaponizing the COVID-19 pandemic to turn away asylum seekers under Title 42, which is inconsistent with broader border-crossing policies, in violation of U.S and international law, and widely condemned by public health experts. This policy has also disproportionately impacted Haitians fleeing deteriorating conditions in Haiti and served as a major catalyst to the Haitian refugee crisis.
Last October, the Centers for Disease Control and Prevention (CDC) ordered a resumption of travel for "nonessential" travelers who are fully vaccinated against COVID-19 to enter the U.S. from Mexico and Canada via land and ferry ports of entry, but continued Title 42 expulsions. Public health experts oppose Title 42 expulsions and have outlined steps that the United States must take to safely process asylum seekers.

Since President Biden took office in January 2021, the administration has turned away over one million migrants and asylum seekers pursuant to Title 42, although most unaccompanied children have been spared. It is important to note, however, that many of these children are unaccompanied due to Title 42 and MPP, as their parents are either stranded under dangerous conditions in Mexico or deported—another driver of family separation. After being expelled, many of these migrants reported suffering kidnappings, rape, human trafficking and violent armed assault in Mexico. As a first step, the administration should immediately end the use of Title 42 for families.

Attempts to Terminate the Migration Protection Protocols ("Remain in Mexico"). In a case brought by Texas and Missouri, both southern states asked the District Court of Texas to permanently enjoin a June 2021 DHS memo that ended the Migrant Protection Protocols (MPP). In his August 2021 ruling, Trump-appointed U.S. District Judge Matthew Kacsmaryk ordered DHS to enforce and implement the policy. The Biden administration filed an emergency request for a stay, which Judge Kacsmaryk denied. The administration then appealed to the U.S. Supreme Court, where it was again denied. As DHS worked in "good faith" to comply with the district court's order, a second termination memo was issued by DHS citing the inherent problems with MPP that no amount of resources can sufficiently fix. In December 2021, DHS restarted MPP at the southern border under court orders after finalizing an agreement with the Mexican government. Though not required by the court order, the renewed MPP program covers an even wider number of people and is now applied to all Western Hemisphere nationals (excluding Mexicans), though with more individual exemptions.

MPP reimplementation has started in El Paso, San Diego, Laredo, and Brownsville and will continue to be rolled out to other ports. The ports of entries where MPP will be implemented are San Diego, Calexico, Nogales, El Paso, Eagle Pass, Laredo, and Brownsville. The Department of State will be providing transportation to/from ports of entry and shelters.

In addition, Mexico has demanded a number of humanitarian improvements as conditions for accepting enrollees, including guarantees that asylum seekers will have access to legal counsel and that their humanitarian claims will be processed within 180 days. El Paso was the first port of entry to implement MPP 2.0, and in its first week of implementation alone, human rights investigators reported cases of vulnerable individuals expressing fear of return to Mexico.

It is also clear that service providers in Mexico are unequipped to receive those subjected to the program. In the midst of MPP 2.0's implementation, the Fifth Circuit Court of Appeals issued a decision on December 13, 2021, upholding a lower court injunction that ordered the Biden administration to reinstate the Migrant Protection Protocols. This decision once again rejected President Biden's attempt to end the program. Of the 267 people initially enrolled in MPP in December 2021, DHS reports that roughly 60% of initial MPP enrollments were individuals from Nicaragua, followed by 22% from Venezuela and 12% from Cuba. In the December 2021 cohort, 91% of individuals in MPP indicated a fear of return to Mexico in their initial screening and were given a non-refoulement interview (NRI) by USCIS. Less than 5% of those individuals were accompanied by an attorney during their NRI interviews. Of the individuals accompanied by attorneys, 36% had a positive fear determination, compared to 10% of those without an attorney.
Doubled the Number of Refugees to be Resettled in FY2022. In October 2021, President Biden committed to resettling 125,000 refugees in FY 2022, an important pledge that returned the United States to its leadership position on refugee resettlement among nations—if the U.S. succeeds in reaching this commitment. This is also double the number of refugees pledged by the administration in FY 2021, although fewer than 12,000 refugees were ultimately resettled due to a slow start and complications in rebuilding the refugee resettlement program.

Ensure Safe Treatment of Unaccompanied Minors. The Department of Health and Human Services (HHS) shelter system received a record 122,000 unaccompanied children from the U.S.-Mexico border in 2021—roughly double the previous record. Of these, 1,300 were Afghan children evacuated after the U.S. military withdrawal from Afghanistan. After significant effort, the Biden administration was able to ramp up transfer times to minimize a child’s time in CBP custody.

In January 2022, the number of migrant children in custody fell below 10,000 for the first time since March 2021. However, the government relied and continues to rely heavily on “emergency intake sites” (EIS), which have lower standards of care for children. One such facility was in Fort Bliss, Texas, where NGOs advocated to reduce the number of migrant children from thousands to zero. As of December 2021, about 600 children remained housed at the Fort Bliss EIS, though the administration has considered expanding such facilities, even doubling capacity in the case of the largest site at Fort Bliss.

Texas Gov. Abbott, Florida Gov. DeSantis, and other state leaders also continue to institute policies that expose children to unnecessary danger. Given the cyclical nature of child migration and to prevent the reliance of inappropriate unlicensed placements in the future, the administration should work to reform its reception system for children, expand its home- and community-based placements, and ensure children’s safe and prompt release to family.

Strengthened Asylum Protections for Victims of Gender-Based and Gang Violence. Attorney General Garland vacated Matter of A-B- and Matter of L-F-A-; two decisions issued by former Attorney General Sessions during the Trump administration that upended decades of asylum law. These decisions almost entirely barred survivors of domestic and other sexual and gender-based violence, persecuted families, and victims of gang violence from gaining asylum protection in the U.S. On July 14, 2021, the Department of Justice finally granted asylum to Ms. A.B., the woman behind Matter of A-B- who had fought for her protection for years. Although these vacatur were positive steps, regulations addressing asylum claims based on gender and gang violence, as well as other aspects of the refugee definition, are needed to ensure protection aligned with international standards.

Ending the Practice of Holding Undocumented Migrant Families in Detention Centers. The United States currently has zero migrant families in ICE detention facilities and has agreed to end the practice of holding undocumented migrant families in detention centers. The administration is turning to alternatives to detention—though practices include the use of ankle bracelets, which are not recommended as a preferred humane alternative. The Dilley facility in Texas, which was the last and largest facility used for family detention, is now projected to be used for single adults. This step by the Biden administration resulted in the fulfillment of a campaign promise by then-presidential candidate Joe Biden to release families from Immigration and Customs Enforcement (ICE) detention centers. However, it is important for the administration to cement its position with official policy that permanently closes family detention centers and prevents these facilities from being converted into adult detention centers in the future. The administration should also focus on community-based alternatives to detention rather than rely on ankle bracelets and GPS monitoring, which can be burdensome and stigmatizing.

Withdrew the Previous Administration’s Attempt to Terminate the Flores Agreement. The Biden administration will discard Trump-era
regulations that would terminate the long-standing Flores Settlement Agreement. This agreement has been governing the care of children in U.S. immigration custody since 1997 through minimum custody standards for government shelters and detention sites. The agreement also allows non-profit lawyers to inspect facilities housing unaccompanied children to ensure they are providing adequate care and services. The administration should now work to codify the Flores Settlement Agreement by raising standards for children’s care and ensuring independent oversight of government actions.

Continued Use of “Rocket Dockets” that Rush Asylum Cases. Among actions to consider for 2022, the Biden administration should end the use of dedicated dockets ("rocket dockets") that quickly shuffle families and individuals through removal proceedings without due process and rush asylum seekers through court proceedings. Both the Obama and Trump administrations ran a similar rocket docket for families, and immigration court officials later admitted that the docket "coincided with some of the lowest levels of case completion productivity in [the court’s] history and, thus, did not produce significant results."

Rescinded Policy That Placed Burdens on Asylum Petitioners. In December 2021, USCIS rescinded a November 2020 policy memorandum requiring interviews for all refugees and asylum seekers petitioning for family members by filing Form I-730, Refugee/Asylee Relative Petition. Effective immediately, USCIS will return to its prior long-standing practice of making case-by-case determinations on whether to interview Form I-730 petitioners. The Trump-era policy memorandum directing the phased expansion of in-person interviews for I-730 petitioners imposed significant burdens on refugee and asylee populations. In addition, the rescinded policy also decreased adjudicative efficiency by requiring petitioner interviews in addition to routine beneficiary interviews in cases without any identified deficiencies in the petition or supporting documentation.

Body-Worn Cameras in New Pilot Program. In December 2021, ICE announced a pilot program in select cities where ICE law enforcement officers will begin to wear body-worn cameras for pre-planned operations. The deployment of body-worn cameras in these select cities will occur in phases, beginning with Homeland Security Investigations (HSI) special agents and followed by Enforcement and Removal Operations (ERO) officers. The HSI pilot locations are Houston, New York City, and Newark. According to DHS’ press release, the use of body-worn cameras is expected to enhance ICE operations, including at-large arrests and searches incident to arrest, execution of search warrants, and questioning of individuals encountered in the field. Footage can be used for non-investigative purposes, including training and assessing officer performance. The administration must commit to expanding accountability measures for all enforcement activities in 2022.

In August 2021, DHS announced that CBP has begun outfitting Office of Field Operations officers and Border Patrol agents with body-worn cameras. In 2022, the Biden Administration should engage with privacy experts and directly impacted communities to ensure that the policies and implementation of the body worn camera program build trust, protect privacy and other civil rights and ensure accountability.

Reinstatement and Expansion of the Central American Minors (CAM) Program. After restarting the CAM Program that was terminated by President Trump, the Biden administration expanded the program to include parents and legal guardians awaiting adjudication of their asylum and U visa applications if filed before May 15, 2021, among other measures. CAM reopened cases for parents from Honduras, El Salvador, and Guatemala whose applications were interrupted during the Trump administration, and the program has now started accepting new applications. In 2022, the Biden administration should expedite the processing of new applications, as the process to date has been slow.
ended the illegal Trump “Metering” Policy. The Biden administration formally announced the end of the Trump-era “metering” policy at the U.S.-Mexico border. This action follows the District of California’s decision in Al Otro Lado v. Mayorkas in September 2021, where Judge Cynthia Bashant struck down the U.S. government’s cruel turn-back policy that systematically denied asylum seekers access to the asylum process at ports of entry. “Metering” at the border began in 2016 as a reaction to an increase in the number of Haitian asylum seekers approaching the San Ysidro/San Diego port of entry seeking asylum. CBP officers in San Ysidro coordinated with the Mexican government to prohibit Haitian asylum seekers from entering the port of entry, and CBP eventually expanded metering to other populations. Notably, the border closure and expulsions under the ongoing Title 42 policies have made the end of metering moot under the current circumstances.

New CBP Policy for Pregnant, Postpartum, Nursing Individuals and Infants in Custody. As it specifically relates to people who are pregnant, postpartum, or nursing, the November 2021 CBP guidance falls significantly short of the changes needed to avoid the harms that pregnant people and infants face in border detention. It should instead prohibit the detention of people who are pregnant, postpartum, or nursing, as well as infants, children, and their caregivers.

Redirected Funds from Ineffective Border Wall Construction. On his first day in office, President Biden issued a Proclamation to terminate the redirection of funds for border wall construction. In October 2021, DHS also issued a memo claiming its intent to cancel the remaining border barrier contracts located within the U.S. Border Patrol’s Laredo Sector and all border barrier contracts located in the Rio Grande Valley Sector. In December 2021, DHS announced plans to use Congressional funds for border security “to address life, safety, environmental, and remediation requirements for border barrier projects previously undertaken by the Department of Defense (DOD).” Previously, in April 2021, DHS announced plans to repair and remediate some problems caused by the previous administration’s border wall construction efforts. Yet, some projects presented as “remediation” are, in effect, the same as the previous administration’s wall construction, such as filling the border wall “gaps” in Arizona and most notably the levee-wall construction in the Rio Grande Valley. Texas Gov. Abbott launched a state border wall construction plan using state funds, and the states of Texas and Missouri are seeking a federal court order to resume border wall construction at the southern border. The administration must firmly halt and reject all wall construction efforts, entrust land management agencies to take the lead in environmental mitigation efforts, and rescind all previously issued border wall waivers to restore the equal legal protection of public health, environmental and tribal-sovereignty laws to the borderlands.

Continued Efforts to Protect and Receive At-Risk Afghan Nationals. Since the withdrawal of the United States from Afghanistan, conditions in the country have deteriorated into a humanitarian crisis. Among urgent actions needed, the administration must fulfill its promise to provide safe pathways to the United States for Afghan people at high risk of violence or death under the current country conditions, including those affiliated with the U.S. government and their family members, religious minorities, human rights activists, journalists, women and girls, LGBTQ+ individuals, and others.
reports that nearly 6 million Afghans have been forcibly displaced from their homes—3.5 million are displaced within Afghanistan, and 2.6 million are refugees living in other countries. At the direction of President Biden, DHS created Operation Allies Welcome to coordinate support and resettlement for roughly 75,000 Afghans, including screening evacuees and working through applications for humanitarian parole and Special Immigrant Visas (SIVs). Despite these efforts, thousands of at-risk Afghans remain in limbo, and even those already in the United States grapple with uncertainty of their future legal status, including unaccompanied minors. Advocates continue to push for the use of a variety of humanitarian pathways and safety nets to protect Afghan nationals, such as robust screening for eligibility for humanitarian parole, SIVs, refugee status, and asylum; the creation of an Afghan-specific parole program; and a TPS designation for Afghanistan.

Treatment of Unaccompanied Children. The Department of Health and Human Services (HHS) shelter system received a record 122,000 unaccompanied children from the U.S.-Mexico border in 2021—roughly double the previous record. Of these, 1,300 were Afghan children evacuated after the U.S. military withdrawal from Afghanistan and housed for extended periods on U.S. military bases before being reunited with family in the United States. An over-reliance on “emergency intake sites” and military bases for these children unfortunately resulted in a lack of critical care and overly long stays at unlicensed and inadequate facilities. Despite the multiple instances since 2014 of record numbers of children arriving in need of assistance at the southern border, we have not yet seen plans for long-term reform of border reception and shelter systems to surge resources and accommodate such numbers. To prevent services from being overwhelmed in the future, to the detriment of the children in custody, the administration should work to reform the reception system itself to prepare for such times—especially after the decimation of our reception system under the previous administration.

The Victims Engagement and Services Line. ICE replaced the Trump-era Victims of Immigration Crime Engagement (VOICE) Office with the Victims Engagement and Services Line (VESL). The VESL is designed to be more inclusive and serves as an all-encompassing access point for all victims, regardless of immigration status or the immigration status of the perpetrator. The hotline provides victims the ability to report incidents of sexual or physical assault, abuse, mistreatment, or human trafficking in ICE detention. Further, the VESL provides push notifications about a detainee’s or inmate’s custody status, case outcome, and other basic information to stakeholders. Resources such as assistance for victims of human trafficking and U and T visa information are also available through the hotline, as well as information for law enforcement agencies seeking information about certification processes.
For decades, U.S. migration policy has often been driven by an approach that prioritizes temporary political or reactive solutions over investing in measures that tackle systemic challenges. This has left refugees, migrants, and their families unable to access protection or family reunification in the United States. After appointing Vice President Kamala Harris to lead on the root causes of migration, the White House issued a regional plan to address the immediate needs of people in the Northern Triangle region (El Salvador, Guatemala, and Honduras) and begin to tackle the medium- to long-term underlying issues that are forcing children, adults, and families from their homes, including targeted violence, political instability, poverty, sexual and gender-based violence, and the growing impact of climate change.

The administration should take additional steps to bolster regional responsibility sharing, better protect refugees and migrants, and ensure governments in the Northern Triangle region are able to provide safe and humane migration pathways.

Regional Responsibility Sharing. The Department of State’s Bureau of Population, Refugees, and Migration (PRM) announced in October 2021 that it is providing more than $20 million to help meet the urgent humanitarian needs of nearly 700,000 refugees and migrants in Central America and Mexico. This additional funding brings the total U.S. contribution to Central America and Mexico for FY 2021 to more than $331 million. PRM is funded through the Migration and Refugee Assistance account (MRA) and the Emergency Refugee and Migration Assistance account (ERMA), two appropriations that are separate from the State Department’s operating budget.
Leaders Agreement between the U.S., Mexico, and Canada to Increase Migration Coordination and Humanitarian Response. On November 18, 2021, President Biden hosted Canada’s Prime Minister Justin Trudeau and Mexico’s President Andrés Manuel López Obrador at the White House for the first North American Leaders’ Summit (NALS) since 2016. In recognizing the need for a coordinated regional response, the leaders of each country pledged to strengthen asylum systems and refugee resettlement programs to provide international protection for those fleeing persecution. In his FY 2022 Presidential Determination on Refugee Admissions, President Biden allocated up to 10,000 refugees to be resettled from the Western Hemisphere, which does not come close to meeting the needs of people in danger. During the NALS Summit, each leader made a commitment to increase the number of refugees resettled in 2022.

Collaborative Migration Management Strategy. Soon after Vice President Harris was appointed to lead on the root causes of regional migration, the White House issued the July 2021 Collaborative Migration Management Strategy. By integrating various U.S. government tools, such as sanctions and public diplomacy, the Strategy aims to carry out actions with coordinated efforts from civil society, U.S. Congress, and other institutions to improve human rights and security. On November 4, 2021, USAID announced a five-year $300 million initiative to empower local organizations in El Salvador, Guatemala, and Honduras. By the end of 2021, State Department and USAID programming had reached millions of citizens in all three countries. In 2022, USAID should use co-creation tools to engage grassroots civic and faith-based organizations up-front in developing priorities, strategies, and programming rather than seeing these organizations as implementers of USAID ideas and programs.

Anti-Corruption Task Force. The Vice President is also leading the Biden administration’s strategy to address the root causes of migration from Guatemala, Honduras, and El Salvador. Her trip to the region in June 2021 and frank conversations with the Presidents of Mexico and Guatemala led to important new initiatives, including a new anti-corruption task force and a smuggling and trafficking task force; $40 million to launch the Young Women’s Empowerment Initiative; an additional $48 million in U.S. government resources for affordable housing and small businesses; and agreements on enforcement, economic dialogue, and security dialogue.

Strategic Framework for Addressing Climate Migration. DHS made an important contribution to climate change policy when it issued its Strategic Framework for Addressing Climate Migration in October 2021. The Framework confirms that tens of millions of people are likely to be displaced over the next two to three decades due to the effects of rising global temperatures (many experts expect hundreds of millions to be displaced). Although the new Framework is an important step, it does not offer specific avenues of migration for individuals and families who need to move urgently due to climate-related disasters, or communities that want to stay home and are adopting adaptation and mitigation strategies, but will ultimately need to move due to slow-onset conditions (e.g., rising sea levels that will eventually lead to their homes being underwater). The U.S. needs to support proactive, long-term strategies to ensure that those who are forced to move are able to do so safely, by choice, and with dignity.

Rebuilding and Enhancing Programs to Resettle Refugees and Planning for the Impact of Climate Change. President Biden’s February 2021 executive order directs applicable governmental agencies to fortify programs to resettle refugees, in addition to examining the impact of climate change on migration. It directs the Secretary of State, Secretary of Defense, Secretary of Homeland Security, Administrator of the United States Agency for International Development, and Director of National Intelligence to assess and prepare a report on climate change and its impact on forced migration. In response to the EO, Refugees International and its Task Force partners published a July 2021 report on climate-related migration with specific recommendations. The administration should act upon these
recommendations in 2022 with concrete policy changes and funding, moving beyond the task force and planning stage.

Development and Livelihood Programming that Supports Thriving Communities. In December 2021, the administration announced Sembrando Oportunidades, a collaborative development program led by the United States and Mexico to address the root causes of migration from the Northern Triangle region. Set to begin in Honduras, the program aims to provide youth with skills and experience that will prepare them for long-term employment opportunities. In 2022, the Biden administration should build upon its 2021 efforts by directing significant funds toward livelihood and development programming for the Northern Triangle's region's young people in Central America and strengthening the integration and inclusion of refugees and migrants living in the United States and across the region.

Call to Action: Private Sector Investments in Central America. In December 2021, Vice President Harris announced new private sector investments from businesses such as PepsiCo, PriceSmart, Nespresso, Cargill, Microsoft, Mastercard, Grupo Mariposa, Partnership for Central America, and others totaling more than $1.2 billion. These commitments were in response to the Vice President's May 2021 Call to Action for businesses and social enterprises to make new, significant commitments to sustainably address the root causes of migration by promoting economic opportunity and investing in the Northern Triangle region.

Establishing Migration as a Regional Priority. As a follow up to the December 2021 North American Leaders' Summit, the United States should advocate for migration and the protection of migrant refugee rights to be the priority issue at the June 2022 Ninth Summit of the Americas in Los Angeles. The administration should also advocate for the November 2022 United Nations Climate Change Conference (UNFCCC COP27) in Egypt to focus on climate-related migration throughout the agenda.

Américas Migration Accord. The administration is reportedly considering a potential regional compact spanning countries in Central and South America, according to CNN, to “promote coordination on stemming the flow of migration and work to stabilize the region.” Any compacts, accords, agreements or regional arrangements should uphold refugee law, the right to seek asylum and respect for human rights, and should take a whole-of-government approach built around a set of agreed-upon principles for regional responsibility sharing. Such an effort should include meaningful and early consultation with UN agencies, refugee and migrants, humanitarian and civil society organizations. This framework could provide a means of coordinating the disparate activities of individual governments, various UN agencies, multilateral development banks, and major civil society and philanthropic actors. An accord or set of principles for responsibility sharing and upholding human rights could be announced or agreed to at the Summit of the Americas (or a subsequent convening) and include a set of commitments made by each government in support of safe and orderly migration, access to asylum and other protection, local integration, refugee and migrant rights, and refugee resettlement.

Central Americorps. A “Central Americorps” program in each country, modeled after the highly successful AmeriCorps program in the United States, could bring economic and livelihood opportunities for up to 60,000 young people currently excluded from the economy and with very little opportunity to build a future. The community-based work of these young people could initially support COVID-19 response/recovery efforts and help rebuild communities destroyed by hurricanes, among other acute needs.

In the immediate term, this type of investment could create a measurable reduction in migration for directly-engaged young people who are given a tangible incentive to stay. It would also have secondary positive impacts by pushing additional dollars into local economies and providing needed skills training for future employment in businesses in the region with medium- and long-term benefits.
March 6, 2023

Rebecca Sheff
ACLU of New Mexico
P.O. Box 566
Albuquerque, NM 87103
rsheff@aclu-nm.org

RE: Innovation Law Lab v. ICE
ICE FOIA Case Number 2022-ICLI-00045
Eighth Interim Response

Dear Ms. Sheff:

This is the Eighth interim response to your client’s Freedom of Information Act (FOIA) request to U.S. Immigration and Customs Enforcement (ICE) dated June 13, 2022. Your FOIA request sought various categories of records related to Torrance County Detention Facility (“TCDF”).

ICE has considered your request under the FOIA, 5 U.S.C. § 552, and processed 1,997 pages of potentially responsive documents that were located by ICE Office of the Principal Legal Advisor (OPLA), Office of the Directors and Office Acquisitions. ICE determined that 39 pages are non-responsive, and 14 pages were found to be duplicative, 1,001 pages are being released in full and 945 pages are being released in part. These 1,946 pages have been Bates numbered 2022-ICLI-00045 6210 through 2022-ICLI-00045 8157. ICE has applied FOIA Exemptions (b)(5) (b)(6), (b)(7)(C), and (b)(7)(E) to portions of these pages as described below.

**FOIA Exemption 5** protects inter-agency or intra-agency memorandums or letters which not be available by law to a party other than an agency in litigation with the agency. The deliberative process privilege protects the integrity of the deliberative or decision-making processes within the agency by exempting from mandatory disclosure opinions, conclusions, and recommendations included within inter-agency or intra-agency memoranda or letters. The release of this internal information would discourage the expression of candid opinions and inhibit the free and frank exchange of information among agency personnel. The attorney work-product privilege protects documents and other memoranda prepared by an attorney in contemplation of litigation. The attorney-client privilege protects confidential communications between an attorney and his client relating to a legal matter for which the client has sought professional advice. It applies to facts divulged by a client to his attorney, and encompasses any opinions given by an attorney to his client based upon, and thus reflecting, those facts, as well as communications between attorneys that reflect client-supplied information. The attorney-client privilege is not limited to the context of litigation.
ICE has applied FOIA Exemptions 6 and 7(C) to protect from disclosure the names, e-mail addresses, and phone numbers of ICE and DHS employees contained within the documents, as well as the names, and other personally identifiable information of other individuals contained within the records.

**FOIA Exemption 6** exempts from disclosure information in personnel or medical files and similar files the release of which would cause a clearly unwarranted invasion of personal privacy. This requires a balancing of the public’s right to disclosure against the individual’s right to privacy. The privacy interests of the individuals in the records you have requested outweigh any minimal public interest in disclosure of the information. Any private interest you may have in that information does not factor into the aforementioned balancing test.

**FOIA Exemption 7(C)** protects records or information compiled for law enforcement purposes when production of such could reasonably be expected to constitute an unwarranted invasion of personal privacy. This exemption takes particular note of the strong interests of individuals, whether they are suspects, witnesses, or investigators, in not being unwarrantably associated with alleged criminal activity. That interest extends to persons who are not only the subjects of the investigation, but those who may have their privacy invaded by having their identities and information about them revealed in connection with an investigation. Based upon the traditional recognition of strong privacy interests in law enforcement records, categorical withholding of information that identifies third parties in law enforcement records is ordinarily appropriate.

ICE has applied FOIA Exemption 7(E) to protect from disclosure internal agency case numbers and other law enforcement sensitive information contained within the documents.

**FOIA Exemption 7(E)** protects records compiled for law enforcement purposes, the release of which would disclose techniques and/or procedures for law enforcement investigations or prosecutions or would disclose guidelines for law enforcement investigations or prosecutions if such disclosure could reasonably be expected to risk circumvention of the law. ICE has determined that disclosure of certain law enforcement sensitive information contained within the responsive records could reasonably be expected to risk circumvention of the law. Additionally, the techniques and procedures at issue are not well known to the public.

If you have any questions about this letter, please contact Assistant United States Attorney Manny Lucero at manny.lucero@usdoj.gov.

Sincerely,

Meronica D. Stoney
(A) Deputy FOIA Officer

Enclosure(s): 1,946 pages

cc: AUSA Manny Lucero
June 1, 2023

Rebecca Sheff
ACLU of New Mexico
P.O. Box 566
Albuquerque, NM 87103
rsheff@aclu-nm.org

RE:  Innovation Law Lab v. ICE
ICE FOIA Case Number 2022-ICLI-00045
Eleventh Interim Response

Dear Ms. Sheff:

This is the eleventh interim response to your client’s Freedom of Information Act (FOIA) request to U.S. Immigration and Customs Enforcement (ICE) dated June 13, 2022. Your FOIA request sought various categories of records related to Torrance County Detention Facility (“TCDF”).

ICE has considered your request under the FOIA, 5 U.S.C. § 552, and processed 1500 pages of potentially responsive documents that were located by ICE Office of the Principal Legal Advisor (OPLA), Office of the Directors and Office Acquisitions. ICE determined that 4 pages are non-responsive, 298 pages are duplicates, 5 pages are being sent for submitter’s notice, 12 pages are being sent to another agency for consultation, 752 pages are being released in full and 429 pages are being released in part. These 1181 pages have been Bates numbered 2022-ICLI-00045 10963 through 2022-ICLI-00045 12143. ICE has applied FOIA Exemptions (b)(5) (b)(6), (b)(7)(C), and (b)(7)(E) to portions of these pages as described below.

**FOIA Exemption 5** protects inter-agency or intra-agency memorandums or letters which not be available by law to a party other than an agency in litigation with the agency. The deliberative process privilege protects the integrity of the deliberative or decision-making processes within the agency by exempting from mandatory disclosure opinions, conclusions, and recommendations included within inter-agency or intra-agency memoranda or letters. The release of this internal information would discourage the expression of candid opinions and inhibit the free and frank exchange of information among agency personnel. The attorney work-product privilege protects documents and other memoranda prepared by an attorney in contemplation of litigation. The attorney-client privilege protects confidential communications between an attorney and his client relating to a legal matter for which the client has sought professional advice. It applies to facts divulged by a client to his attorney, and encompasses any opinions given by an attorney to his client based upon, and thus reflecting, those facts, as well as communications between attorneys that reflect client-supplied information. The attorney-client privilege is not limited to the context of litigation.
ICE has applied FOIA Exemptions 6 and 7(C) to protect from disclosure the names, e-mail addresses, and phone numbers of ICE and DHS employees contained within the documents, as well as the names, and other personally identifiable information of other individuals contained within the records.

**FOIA Exemption 6** exempts from disclosure information in personnel or medical files and similar files the release of which would cause a clearly unwarranted invasion of personal privacy. This requires a balancing of the public’s right to disclosure against the individual’s right to privacy. The privacy interests of the individuals in the records you have requested outweigh any minimal public interest in disclosure of the information. Any private interest you may have in that information does not factor into the aforementioned balancing test.

**FOIA Exemption 7(C)** protects records or information compiled for law enforcement purposes when production of such could reasonably be expected to constitute an unwarranted invasion of personal privacy. This exemption takes particular note of the strong interests of individuals, whether they are suspects, witnesses, or investigators, in not being unwarrantably associated with alleged criminal activity. That interest extends to persons who are not only the subjects of the investigation, but those who may have their privacy invaded by having their identities and information about them revealed in connection with an investigation. Based upon the traditional recognition of strong privacy interests in law enforcement records, categorical withholding of information that identifies third parties in law enforcement records is ordinarily appropriate.

ICE has applied FOIA Exemption 7(E) to protect from disclosure internal agency case numbers and other law enforcement sensitive information contained within the documents.

**FOIA Exemption 7(E)** protects records compiled for law enforcement purposes, the release of which would disclose techniques and/or procedures for law enforcement investigations or prosecutions or would disclose guidelines for law enforcement investigations or prosecutions if such disclosure could reasonably be expected to risk circumvention of the law. ICE has determined that disclosure of certain law enforcement sensitive information contained within the responsive records could reasonably be expected to risk circumvention of the law. Additionally, the techniques and procedures at issue are not well known to the public.

If you have any questions about this letter, please contact Assistant United States Attorney Manny Lucero at manny.lucero@usdoj.gov.

Sincerely,

Rolando Velasco  
(A) Supervisory Paralegal Specialist

Enclosure(s): 1,181 pages

c: AUSA Manny Lucero
July 29, 2022

Rebecca Sheff  
ACLU of New Mexico  
P.O. Box 566  
Albuquerque, NM 87103  

RE:  ACLU of New Mexico v. DHS Case 22-cv-00443  
ICE FOIA Case Number 2022-ICLI-00045  

Ms. Sheff:

This letter is ICE’s first supplemental response to your Freedom of Information Act (FOIA) request to U.S. Immigration and Customs Enforcement (ICE), dated June 15, 2022. You are requesting the following records pertaining to Torrance County Detention Center:

1. Any and all reports, summaries, memoranda, notes, correspondence, and other records regarding the DHS Office of Inspector General (“OIG”) inspection of the Torrance County Detention Facility (“TCDF”) that took place from February 1, 2022 through February 3, 2022, including but not limited to: all records regarding the exit briefing that was conducted on or about February 3, 2022 by the DHS OIG inspection team with TCDF and ICE personnel; and any formal response issued by CoreCivic regarding the inspection.

2. Any and all correspondence from March 16, 2022 through the date of processing of this request that discusses, describes, references, or otherwise pertains to the March 16, 2022 DHS OIG alert regarding TCDF (# OIG-22-31):

   a. Between and within ICE Enforcement and Removal Operations, ICE Office of Professional Responsibility’s Office of Detention Oversight, ICE Office of Acquisition Management, ICE Office of the Principal Legal Advisor, ICE Chief of Staff, and the DHS Office of Inspector Gene

   b. Between any components of ICE and The Nakamoto Gro

   c. Between any components of ICE and Torrance County employees, administrators, and/or county commissioners; an

   d. Between any components of ICE and CoreCivic employees and/or agents
3. Any and all records regarding the ICE leadership walk-through that took place at TCDF on February 28, 2022.

4. Any and all records from July 29, 2021 through the date of processing of this request regarding the following at TCDF:

   a. Inoperable and/or malfunctioning sinks, toilets, showers, and faucets in housing units, including but not limited to a lack of hot or cold wat
   
   b. The use of “out of order” tags on cells in housing units.
   
   c. Cell doors failing to unlock automatically or open remotely in housing units.
   
   d. Inoperable and/or malfunctioning call buttons in cells in housing units.
   
   e. The use of plastic bags and/or other items to cover faucets in housing units.
   
   f. Any and all testing of tap water including for hardness.
   
   g. Any and all testing by a state laboratory of samples of drinking and/or wastewater, and any related testing and safety certification(s)
   
   h. The use of coolers containing ice and/or water in housing units, including but not limited to the frequency with which such coolers are cleaned and refilled.
   
   i. All commissary purchases of water and other beverages; and
   
   j. Maintenance issues in the kitchen, including but not limited to inoperable and/or malfunctioning heat, leaky faucets, damage to the floor, and paint on the floor causing individuals to slip and fall.

5. Any and all work orders at TCDF for facility maintenance and/or repairs that were drafted, submitted, pending, and/or completed between July 29, 2021 and the date of processing of this request, including but not limited to work orders regarding plumbing issues, faucets, sinks, showers, toilets, vent systems, heating, cooling, and mold.

6. Any and all contract discrepancy reports, warnings, corrective action plans, appeals, financial penalties (including deductions and withholdings), white papers, evaluations, tracking tools, contract modifications, and quality assurance surveillance plans, as well as all related correspondence, meeting notes, attachments, and supporting documentation, regarding TCDF from December 1, 2020 through the date of processing of this request, including but not limited to the March 1, 2022 contract discrepancy report and March 1, 2022 contract modification.
7. Any and all invoices and supporting documentation for TCDF, as well as invoice payments and documentation of deductions and withholdings for TCDF, from February 1, 2022 through the date of processing of this request.

8. Any and all policies, directives, rules, interpretations, post orders, instructions, procedures, and guidance that were created, received, modified, amended, and/or supplemented from February 1, 2022 through the date of processing of this request regarding the operation and/or management of TCDF.

9. Any and all reports, summaries, memoranda, notes, correspondence, and other records regarding the ICE OPR Office of Detention Oversight (“ODO”) inspection of TCDF that took place from November 16, 2021 through November 18, 2021, including but not limited to all records regarding:
   a. Any and all correspondence, meeting notes, and other records regarding the need for, timing of, scope of, and scheduling of this inspection.
   b. Any and all documents reviewed pre-inspection by the inspection team.
   c. Any and all checklists, interview forms, and other forms and tools used during the inspection.
   d. The closeout briefing(s) that were conducted by ODO inspectors with TCDF and local ICE ERO officials regarding preliminary findings.
   e. Any and all summaries shared with ICE ERO management officials.
   f. Any and all waivers requested and/or granted regarding any detention standards and/or components thereof.
   g. Any and all subsequent corrective action plans developed by ICE ERO and/or CoreCivic; and
   h. Any and all documentation regarding the implementation of such corrective action plans.

10. Any and all reports, summaries, memoranda, notes, correspondence, and other records regarding the Nakamoto Group inspections of TCDF that took place in November 2021 and from March 29, 2022 through March 31, 2022, including but not limited to:
   a. Any and all correspondence, meeting notes, and other records regarding the need for, timing of, and scheduling of each of these inspections.
   b. Any and all documents reviewed pre-inspection by the inspection team(s)
c. Any and all checklists, interview forms, and other forms and tools used during the inspections.

d. The cover letter, G-324 and G-324A Inspection Form(s), and any and all supporting documentation for each of these inspections.

e. Any and all records regarding the out-brief(s) conducted by the Nakamoto inspection team(s) with ICE officials and TCDF staff at the time of each of these inspections.

f. Any and all waivers requested and/or granted regarding any detention standards and/or components thereof.

g. Any and all subsequent corrective action plans developed by ICE ERO and/or CoreCivic; and

h. Any and all documentation regarding the implementation of such corrective action plans.

11. Any and all records regarding all other audits and inspections, whether routine or otherwise, whether announced or unannounced, whether by federal, state, or local entities, that occurred at TCDF from February 4, 2022 through the date of processing of this request, including but not limited to any such audits or inspections regarding the U.S. Marshals Service population and/or the Torrance County population at TCD.

12. Any and all records regarding the transfer of individuals in ICE custody to TCDF, as well as any and all records regarding the transfer of individuals in ICE custody from TCDF to other detention facilities, subsequent to the March 16, 2022 DHS OIG alert regarding TCDF (# OIG-22-31), including but not limited to records regarding any deliberations on such transfers and/or conditions to be fulfilled prior to such transfers. Please note that this item is not a request for the names of any such individuals transferred or other personally identifiable information regarding such individuals.

13. Any and all records regarding the potential, anticipated, or actual transfer of female individuals in ICE custody to TCDF.

14. Any and all reports, summaries, memoranda, notes, correspondence, and other records regarding Representative Melanie Stansbury’s visit to TCDF on March 21, 2022, including but not limited to:

   a. Logs and other records comprehensively identifying all housing units occupied by individuals in ICE custody as of 7:00 A.M. on the date of Representative Melanie Stansbury’s visit.

   b. Logs and other records comprehensively identifying all housing units visited by Representative Melanie Stansbury during her visit; and
c. Any and all records regarding any actual or attempted movement on that date of individuals in ICE custody from their housing units to the gymnasium or any outdoor yard area whether for routine recreation activities or otherwise.

15. Any and all policies, directives, rules, interpretations, post orders, instructions, procedures, and guidance that were in effect for CoreCivic personnel at TCDF from February 1, 2022 through the date of processing of this request or were created, received, modified, amended, and/or supplemented from February 1, 2022 through the date of processing of this request, regarding preparations for and/or conduct during inspections, audits, and oversight visits, including but not limited to general housekeeping, cleaning and maintenance, accompaniment of inspectors, auditors, and visitors by CoreCivic personnel, and whether and how inspectors, auditors, and visitors are to communicate with detainees and inmates.

16. Any and all records regarding TCDF staffing from February 1, 2022 through the date of processing of this request, including:
   a. Staffing reports, charts, matrixes, plans, and proposals.
   b. Disaggregated records regarding staffing of security/correctional positions, medical and mental health positions, maintenance positions, and other positions.
   c. Designation of any posts or positions as essential.
   d. Records regarding temporary duty assignment (TDY) staffing.
   e. Records regarding overtime shifts.
   f. Records regarding the number of hours per week that CoreCivic Chief Medical Officer Keith Ivens has provided direct medical services at TCDF and/or served as medical director or physician at TCDF, including but not limited to “call” or other after-hours availability.
   g. Records regarding vacant positions and the duration of any such vacancies.
   h. Records regarding the number of new hires, the number of employees in pre-service training, and the number of employees awaiting ICE clearance; and
   i. Records regarding the number of employees whose employment ended, including those who quit, were fired, were let go, and/or failed to complete any probationary period.

17. Any and all policies, directives, rules, orders, and instructions that were in effect at TCDF as of February 1, 2022 regarding the following, as well as any modifications of and supplements to any such records through the date of processing of this requests:
a. Mandatory overtime for CoreCivic personnel.

b. Temporary duty assignment (TDY) staffing.

c. Environmental health and safety, including but not limited to preventative maintenance, regular inspections, surveys of environmental health conditions, availability of safe potable water, and general housekeeping.

d. The processing of work orders for facility maintenance and/or repairs.

e. Commissary; and

f. Compliance with the *Fraihat* court order and ICE’s Pandemic Response Requirements.

18. The TCDF detainee handbook that was in effect as of February 1, 2022, as well as any modifications, updates, supplements, or other versions of such handbook from that date through the date of processing of this request.

ICE has considered your request under the FOIA, 5 U.S.C. § 552. A search of the ICE Office of the Chief of Staff located records that were responsive to your request. For this production ICE reviewed 654 pages of potentially responsive records. ICE has determined that 249 pages will be released in full, 31 pages will be withheld in full and, the remaining 374 pages will be withheld in part pursuant to FOIA Exemptions (b)(5), (b)(6), (b)(7)(C) and (7)(E). Therefore, the 221 pages of records attached have been marked 2022-ICLI-00045 001 to 2022-ICLI-00045 654.

**FOIA Exemption 5** protects from disclosure those inter- or intra-agency documents that are normally privileged in the civil discovery context. The three most frequently invoked privileges are the deliberative process privilege, the attorney work-product privilege, and the attorney-client privilege. The deliberative process privilege protects the integrity of the deliberative or decision-making processes within the agency by exempting from mandatory disclosure opinions, conclusions, and recommendations included within inter-agency or intra-agency memoranda or letters. The release of this internal information would discourage the expression of candid opinions and inhibit the free and frank exchange of information among agency personnel. The attorney work-product privilege protects documents and other memoranda prepared by an attorney in contemplation of litigation. The attorney-client privilege protects confidential communications between an attorney and his client relating to a legal matter for which the client has sought professional advice. It applies to facts divulged by a client to his attorney, and encompasses any opinions given by an attorney to his client based upon, and thus reflecting, those facts, as well as communications between attorneys that reflect client-supplied information. The attorney-client privilege is not limited to the context of litigation.
FOIA Exemption (b)(6) exempts from disclosure personnel or medical files and similar files the release of which would cause a clearly unwarranted invasion of personal privacy. This requires a balancing of the public’s right to disclosure against the individual’s right to privacy. The privacy interests of the individuals in the records you have requested outweigh any minimal public interest in disclosure of the information. Any private interest you may have in that information does not factor into the aforementioned balancing test.

FOIA Exemption (b)(7)(C) protects records or information compiled for law enforcement purposes that could reasonably be expected to constitute an unwarranted invasion of personal privacy. This exemption takes particular note of the strong interests of individuals, whether they are suspects, witnesses, or investigators, in not being unwarrantably associated with alleged criminal activity. That interest extends to persons who are not only the subjects of the investigation, but those who may have their privacy invaded by having their identities and information about them revealed in connection with an investigation. Based upon the traditional recognition of strong privacy interest in law enforcement records, categorical withholding of information that identifies third parties in law enforcement records is ordinarily appropriate. As such, I have determined that the privacy interest in the identities of individuals in the records you have requested clearly outweigh any minimal public interest in disclosure of the information. Please note that any private interest you may have in that information does not factor into this determination.

FOIA Exemption 7(E) protects records compiled for law enforcement purposes, the release of which would disclose techniques and/or procedures for law enforcement investigations or prosecutions or would disclose guidelines for law enforcement investigations or prosecutions if such disclosure could reasonably be expected to risk circumvention of the law. I have determined that disclosure of certain law enforcement sensitive information contained within the responsive records could reasonably be expected to risk circumvention of the law. Additionally, the techniques and procedures at issue are not well known to the public.

If you have any questions about this letter, please contact Assistant U.S. Attorney Manny Lucero at Manny.Lucero@usdoj.gov.

Sincerely,

Lynnea Schurkamp
ICE FOIA Deputy

Enclosure(s): 654 page(s)
### STANDARD 4.1. FOOD SERVICE (Key: T)

This detention standard ensures that detainees are provided a nutritionally balanced diet that is prepared and presented in a sanitary and hygienic food service operation.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>19. Food service staff and detainee workers involved in cooking shall ensure that potentially hazardous foods are cooked at the required safe temperatures, as listed in the Detention Standard on Food service.</td>
<td></td>
<td>Temperatures of menu items are taken and recorded on the production log a minimum of three times during each meal preparation and serving. Samples of production logs were reviewed during the inspection.</td>
</tr>
<tr>
<td>20. Facilities are required to provide detainees requesting a religious diet a reasonable and equitable opportunity to observe their religious dietary practice by offering a Common Fare Menu. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.</td>
<td></td>
<td>Detainees are provided the opportunity to observe religious dietary practices. A common fare/religious diet menu is available. Religious diet requests are submitted to the chaplain for approval.</td>
</tr>
<tr>
<td>21. (SPCs/CDFs) Once a religious diet has been approved, the FSA shall issue, in duplicate, a special-diet identification card.</td>
<td>N/A</td>
<td>In this IGSA facility, a special identification card to indicate the detainee's special diet is not issued.</td>
</tr>
<tr>
<td>22. The common fare menu shall be based on a 14 day cycle. The menus must be certified as exceeding minimum daily nutritional requirements. Hot entrees shall be offered daily.</td>
<td></td>
<td>The common fare menu is based on a 35-day rotating menu. The common fare menu has been certified by a dietitian. Hot entrees are offered daily.</td>
</tr>
<tr>
<td>23. The chaplain, in consultation with local religious leaders if necessary, shall develop the ceremonial meal schedule for the following calendar year and provide it to the facility administrator.</td>
<td></td>
<td>The facility recognizes major religious ceremonial observances and accommodates detainees abstaining from foods or fasting for religious purposes at those prescribed times of the year.</td>
</tr>
<tr>
<td>24. The Common Fare Program shall accommodate detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year, such as Ramadan, Passover, and Lent.</td>
<td></td>
<td>Medical diets are provided to detainees, as prescribed by medical personnel.</td>
</tr>
<tr>
<td>25. Detainees with certain conditions – chronic or temporary; medical, dental, and/or psychological – shall be prescribed special diets as appropriate.</td>
<td></td>
<td>Meets Standard</td>
</tr>
<tr>
<td>26. The sanitary standards, including proper temperature maintenance, are required in the food service department also apply to satellite meals, from preparation to actual delivery.</td>
<td></td>
<td>Meets Standard</td>
</tr>
</tbody>
</table>
### STANDARD 4.1. FOOD SERVICE (Key: T)

This detention standard ensures that detainees are provided a nutritionally balanced diet that is prepared and presented in a sanitary and hygienic food service operation.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>27. Food for satellite meals must be prepared and held at the proper temperatures until served. Satellite tray meals must be delivered and served within two hours of food being plated.</td>
<td>Meets Standard</td>
<td>Sanitary requirements are maintained in the food service program. Hot and cold foods are maintained at appropriate temperatures. During the cooking, serving and traying process, food temperatures are taken and recorded a minimum of three times. The documentation on production logs was reviewed during the inspection. Satellite meals are delivered and served within two hours of food being trayed.</td>
</tr>
<tr>
<td>28. In segregation units, food rations shall not be reduced or changed or otherwise used as a disciplinary tool.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>29. Sack meals shall be provided for detainees being transported from the facility, and detainees arriving or departing between scheduled meal hours, and detainees in the SMU, as provided in the standard. Sack meals shall be of the same nutritional quality as other meals prepared by the food service.</td>
<td>Meets Standard</td>
<td>Sack meals are provided in accordance with the requirements listed in this standard.</td>
</tr>
<tr>
<td>30. The food service staff instruct detainee volunteers on:</td>
<td>Meets Standard</td>
<td>Non-ICE detainee workers are provided training, which addresses the elements of this component. This training is documented and was reviewed during the inspection.</td>
</tr>
<tr>
<td>- Personal cleanliness and hygiene;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Sanitary techniques for preparing, storing, and serving food, and;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- The sanitary operation, care, and maintenance of equipment.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31. All food service personnel, including staff and detainees, shall receive a pre-employment medical examination. The Cook Foreman or detention staff assigned to food service shall inspect all detainee food service workers on a daily basis at the start of each work period. Detainees who exhibit signs of illness, skin disease, diarrhea (admitted or suspected), or infected cuts or boils shall be removed from the work assignment and immediately referred to Health Services for determination of duty fitness.</td>
<td>Meets Standard</td>
<td>All food service personnel receive pre-employment physicals and clearance before working. Non-ICE detainee workers are cleared by medical personnel to work in the kitchen before being assigned to the job. The workers are monitored daily for duty fitness; the results are documented. A detainee exhibiting signs of illness or other health concerns would be referred to medical personnel.</td>
</tr>
</tbody>
</table>
# STANDARD 4.1. FOOD SERVICE (Key: T)

This detention standard ensures that detainees are provided a nutritionally balanced diet that is prepared and presented in a sanitary and hygienic food service operation.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>32. The food service department complies with food safety and sanitation requirements as prescribed by the governing health inspection authority, applicable laws and contract provisions.</td>
<td>Meets Standard</td>
<td>The New Mexico Environmental Health Food Program conducts annual reviews of the food service operation. The most recent review was conducted on 7/15/2020, via video. No concerns were noted on the document.</td>
</tr>
<tr>
<td>33. All facilities shall meet environmental standards for safety and sanitation.</td>
<td>Meets Standard</td>
<td>The New Mexico Environmental Health Food Program conducts annual reviews of the food service operation. The most recent review was conducted on 7/15/2020, via video due to COVID-19 conditions. No concerns were noted on the document.</td>
</tr>
<tr>
<td>34. The FSA shall develop a schedule for the routine cleaning of equipment consistent with the information obtained from manufacturers or local distributors, the National Sanitation Foundation International (NSF) standards or equivalent standards of other agencies about the operation, cleaning, and care of equipment.</td>
<td>Meets Standard</td>
<td>Interviews with the FSM indicated the routine cleaning of equipment is completed according to an established schedule. The cleaning schedule is consistent with industry standards.</td>
</tr>
<tr>
<td>35. Spray or immersion dishwashers or devices – including automatic dispensers for detergents, wetting agents, and liquid sanitizer – shall be maintained in good repair. Utensils and equipment placed in the machine must be exposed to all cycles.</td>
<td>Meets Standard</td>
<td>The dishwashing machine and other equipment was not personally observed during this remote inspection. Interviews with the FSM and a review of documents indicated the equipment is maintained in good repair and that utensils and equipment placed in the machine are exposed to all cycles.</td>
</tr>
<tr>
<td>36. Adequate, sanitary, properly equipped, and conveniently located toilet facilities shall be provided for all food service staff and detainee workers.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>37. The FSA is responsible for pest control in the food service department. Air curtains or comparable devices shall be used on outside doors where food is prepared, stored, or served to protect against insects and other rodents.</td>
<td>Meets Standard</td>
<td>A licensed pest control contractor provides monthly exterminating services, including preventative spraying for indigenous pests. Photos of functioning air curtains on the outside doors of the food service department were provided.</td>
</tr>
</tbody>
</table>
**STANDARD 4.1. FOOD SERVICE** (Key: T)

This detention standard ensures that detainees are provided a nutritionally balanced diet that is prepared and presented in a sanitary and hygienic food service operation.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>38. The facility shall implement written procedures requiring administrative, medical, and/or dietary personnel to conduct the weekly inspections of all food service areas, including dining, storage, equipment, and food-preparation areas.</td>
<td>Meets Standard</td>
<td>Weekly inspections of all food service areas are conducted and documented by the FSD, safety manager (SM), assistant warden (AW), and maintenance supervisor. Documentation was reviewed during this remote inspection.</td>
</tr>
<tr>
<td>39. PRIORITY: Staff shall check refrigerator and water temperatures daily and record the results. The FSA or designee will verify and document requirements of food and equipment temperatures. The FSA or CS shall inspect food service areas at least weekly. An independent, external inspector shall conduct annual inspections to ensure that the food service facilities and equipment meet governmental health and safety codes.</td>
<td>Meets Standard</td>
<td>Freezer, refrigerator, and water temperatures are checked and recorded three times each day. The documentation is maintained and was reviewed during the inspection. The FSD, or designee, conducts and documents daily inspections of the food service area. The New Mexico Environmental Health Food Program conducts annual reviews of the food service operation. The most recent review was conducted on 7/15/2020, via video due to COVID-19 conditions. No concerns were noted on the document.</td>
</tr>
<tr>
<td>40. The FSA shall develop a cleaning schedule for each food service area and post it for easy reference.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>41. Each FSA shall establish procedures for storing, receiving, and inventorizing food.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>42. Store all products at least six inches from the floor and sufficiently far from walls to facilitate pest-control measures.</td>
<td>Meets Standard</td>
<td>Pictures of the food storage area indicated products are stored appropriately.</td>
</tr>
<tr>
<td>43. Perishables shall be stored at 35-40 F degrees to prevent spoilage and other bacterial action, and maintain frozen foods at or below zero degrees.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>44. Inventory levels are established, monitored and periodically adjusted to correct excesses or shortages.</td>
<td>Meets Standard</td>
<td></td>
</tr>
</tbody>
</table>

**STANDARD 4.1. FOOD SERVICE – Reviewer Summary**

(Use following format for dates: mm/dd/yyyy)
### STANDARD 4.1. FOOD SERVICE – Reviewer Summary

**Overall Remarks:** *(Record significant facts, observations, other sources used, etc.)* (5000 Character Max)

The food service department is providing detainees with nutritious and appetizing meals prepared following industry standards. Interviews with detainees revealed an overall acceptance of the meals with minimal concerns expressed. Preparation, plating and service of the meals was not observed.

The menus have been nutritionally analyzed, certified, and approved by a registered dietitian. The FSD considers the ethnic diversity of the facility’s population when developing cycle menus. Non-ICE detainee workers are provided the same meals as the population and may not prepare special food. The use of tobacco is prohibited. The number of detainees assigned to the food service area is based on need and approved by the FSD in conjunction with the OIC.

Food service employees receive pre-employment physicals before being assigned to the job. Non-ICE detainee workers are cleared by the medical department before working in food service and are monitored at the beginning of their shift for duty fitness. The results are documented. A detainee exhibiting any signs of a health concern is removed from the area and referred to the medical department. The FSD ensures that all menu items are fit for consumption, sanitary guidelines are observed, and food temperatures are maintained within industry standards. Food is prepared with minimal manual contact. Taste tests are made with clean or disposable utensils. Servers use spoons, ladles, scoops, and other approved utensils when handling/serving food items and do not serve food with their hands.

Pictures of the food service area indicate it is clean and well lit. Telephonic interviews with the FSD, SM, and AW indicated the kitchenware and food contact surfaces are washed, rinsed, and sanitized after each use, and after any interruption of operation; garbage and trash are collected and removed as required; the refuse containers had sufficient capacity for the volume.

The manufacturer’s information about the operation, cleaning, and care of the equipment is maintained by the FSD. The information was used to develop the cleaning and sanitation procedures of the equipment. All equipment was installed following the manufacturer’s recommendations and approved engineering practices. A sink with three labeled compartments, all with hot and cold water, is utilized for manually washing, rinsing, and sanitizing pots, pans, utensils, and equipment. Each compartment can accommodate items to be cleaned and industry standards are followed. The dishwashing machine includes automatic dispensers and is maintained in good working order, maintaining appropriate temperatures and water pressure. Plates, cups, utensils, and equipment placed in the machine are exposed to all cycles.

A fixed fire suppression system is installed in the hoods over the grills. An external qualified company inspects each system as required. Documentation of the inspection was provided and reviewed. The fire suppression system is equipped with an audible alarm and is connected to the control center’s annunciator panel. Hoods are cleaned as required and gas grills are equipped with automatic shutoffs.

The lavatory has hot and cold water, a trash receptacle, soap, and towels, and was clean and maintained in good repair. Preparation, serving, and storage areas were clean and neat, with no evidence of pest infestation. Only those chemicals and hazardous materials required for sanitary maintenance of the food service area, equipment, and utensils are used and stored in the food service department. These materials are securely stored away from food and have individual perpetual inventories.

Evaluation of this standard was based on a review of documentation and interviews with the FSD, SM, AW, and maintenance supervisor.

<table>
<thead>
<tr>
<th>Overall Rating: Meets Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reviewer Name (Printed): [D] [S], [D] [I], [C]</td>
</tr>
</tbody>
</table>

Reviewer Signature (for printed form submission):
<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. All staff receive initial and annual training on recognizing the signs of a hunger striker and on the procedures for referral for medical assessment. Medical staff receive training in hunger-strike evaluation and treatment and remain up-to-date on these techniques.</td>
<td>Meets Standard</td>
<td>Per policy and review of training documentation, all staff receives initial and annual training on hunger strikes. Medical staff receives additional training and remains up to date in hunger strike treatment.</td>
</tr>
<tr>
<td>2. Procedures for identifying and referring to medical staff a detainee suspected or announced to be on a hunger strike shall include obtaining from qualified medical personnel an assessment of whether the detainee’s action is reasoned and deliberate or the manifestation of a mental illness.</td>
<td>Meets Standard</td>
<td>Per policy and as documented in medical records, a hunger-striking detainee is referred to mental health staff for assessment.</td>
</tr>
<tr>
<td>3. <strong>PRIORITY</strong>: Facility immediately reports via the chain of command a hunger strike to ICE/ERO.</td>
<td>Meets Standard</td>
<td>Per policy and the acting HSA, hunger strikers are immediately reported to ICE.</td>
</tr>
<tr>
<td>4. <strong>PRIORITY</strong>: Staff shall consider any detainee observed to have not eaten for 72 hours to be on a hunger strike, and shall refer him or her to the clinical medical authority for evaluation and management.</td>
<td>Meets Standard</td>
<td>Per policy and as documented in medical records, any detainee observed to have not eaten for 72 hours, or who self-declares a hunger strike, is referred to medical personnel for evaluation.</td>
</tr>
<tr>
<td>5. During the initial evaluation of a detainee on a hunger strike, medical staff shall:</td>
<td>Meets Standard</td>
<td>Initially, medical personnel perform a physical assessment, including all the bulleted items. Weight and vital signs are then measured and recorded every 24 hours. Per review, all examination results are documented on the Hunger Strike Monitoring form in the medical record.</td>
</tr>
<tr>
<td>• Measure and record height and weight;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Measure and record vital signs;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Perform urinalysis;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Conduct psychological/psychiatric evaluation;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Examine general physical condition; and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• If clinically indicated, proceed with other necessary studies.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medical staff record the weight and vital signs and repeat other procedures as medically indicated of a hunger-striking detainee at least once every 24 hours. Medical staff shall record all examination results in the detainee’s medical file.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment. If the detainee will not cooperate by signing, staff shall note this on the &quot;Refusal of Treatment&quot; form. Any detainee refusing medical treatment will be monitored by medical staff to evaluate whether the hunger strike poses a risk to the detainee’s life or permanent health.</td>
<td>Meets Standard</td>
<td>The detainee is required to sign a refusal form when refusing medical treatment. Two staff members document any detainee's refusal to sign and continue to monitor the detainee.</td>
</tr>
</tbody>
</table>
## STANDARD 4.2. HUNGER STRIKES (Key: U)
This detention standard protects detainees’ health and well-being by monitoring, counseling and providing appropriate treatment to any detainee who is on a hunger strike.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. After the hunger strike, medical staff shall provide appropriate medical and mental health follow-up care. Only the clinical medical authority may order a detainee’s release from hunger strike treatment and shall document that order in the detainee’s medical record. A notation will be made in the detention file when the detainee has ended the hunger strike.</td>
<td>Meets Standard</td>
<td>Per policy and the acting HSA, when the detainee has ended the hunger strike, a notation is made in the medical record and the detention file. The physician orders the detainee’s release from hunger strike treatment in the medical record. Follow-up care is provided to the detainee after the hunger strike.</td>
</tr>
<tr>
<td>8. After consultation with the clinical medical authority, the facility administrator may require staff to measure and record food and water intake and output until terminated by the clinical medical authority. An IHSC Hunger Strike Form or equivalent must be used.</td>
<td>Meets Standard</td>
<td>Staff may be required to measure and record intake and output on the IHSC equivalent form.</td>
</tr>
<tr>
<td>9. Unless otherwise directed by the medical authority, staff physically deliver three meals per day to the detainee’s room, regardless of the detainee’s response to a verbally offered meal and document those meal offers.</td>
<td>Meets Standard</td>
<td>Policy requires staff to deliver three meals per day to the detainee and to document meals offered.</td>
</tr>
<tr>
<td>10. Provide an adequate supply of drinking water or other beverages.</td>
<td>Meets Standard</td>
<td>An adequate supply of drinking water and other fluids is provided.</td>
</tr>
<tr>
<td>11. Remove from the detainee’s room all food items not authorized by the clinical medical authority.</td>
<td>Meets Standard</td>
<td>All unauthorized food items are removed from the detainee’s room. The detainee may not purchase commissary/vending machine food.</td>
</tr>
<tr>
<td>12. Before involuntary medical treatment is administered, staff shall make reasonable efforts to educate and encourage him or her to accept treatment voluntarily. Involuntary medical treatment shall be administered in accordance with established guidelines and applicable laws and only after the clinical medical authority determines the detainee’s life or health is at risk.</td>
<td>Meets Standard</td>
<td>Per policy, medical personnel make an effort to educate and encourage the hunger striker to accept treatment. Involuntary treatment is administered only after it has been determined that the detainee’s health/life is at risk and in accordance with applicable laws.</td>
</tr>
</tbody>
</table>

### STANDARD 4.2. HUNGER STRIKES – Reviewer Summary
(Use following format for dates: mm/dd/yyyy)

**Overall Remarks:** *(Record significant facts, observations, other sources used, etc.)* (5000 Character Max)

During initial referral, medical personnel document the reasons for placing a detainee in a single occupancy, medical observation room. This decision is reviewed every 72 hours. Medical personnel monitor detainees in a single occupancy, medical observation room as medically indicated, and mental health needs are considered. Medical personnel make the decision about appropriate housing placement when food and liquid intake/output is measured.
### STANDARD 4.2. HUNGER STRIKES – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

During the initial medical evaluation and management, medical staff monitors the health of a detainee on a hunger strike. If a detainee engaging in a hunger strike has been previously diagnosed with a mental health condition or is incapable of giving informed consent due to age or illness, appropriate medical/administrative action is taken in the best interest of the detainee. Only qualified medical personnel modify or augment standard treatment protocols. If medically necessary, detainees are transferred to a community hospital or a detention facility appropriately equipped for treatment. Records are kept of all interactions with the striking detainee, the provision of food, attempted and successfully administered medical treatment, and communications between the physician, the OIC, and ICE.

Detainees refusing to accept treatment are counseled by medical staff regarding the medical risks associated with refusal of treatment. When clinical assessment and laboratory results indicate the detainee’s weakening condition threatens the life or long-term health of the detainee, a physician recommends involuntary treatment. The facility administrator notifies ICE if a detainee is refusing treatment, and the health services administrator notifies the respective FOD in writing of any proposed plan to involuntarily feed the detainee. Any involuntary medical treatment is approved by ICE. The FOD, in consultation with the physician, contacts the respective ICE Office of Chief Counsel and the U.S. Attorney’s Office and discusses any impending involuntary medical treatment and makes recommendations regarding pursuing a court order. Medical personnel continue clinical and laboratory monitoring as necessary until the detainee’s life or health is out of danger and continue medical and mental health follow-up as necessary.

To provide access to programs and services, the facility provides communication assistance to LEP detainees and deaf or hard of hearing detainees. This may be achieved via bilingual staff, translation services, or other means for LEP detainees, or in the form of auxiliary aids for detainees with disabilities, including but not limited to those aids listed in the standard.

During the inspection period, four detainees declared hunger strikes lasting from three to nine days. None required outside hospitalization.

Policy and procedures outline guidelines for the management of hunger-striking detainees. This inspection was conducted remotely. Evaluation of the standard was based on a review of policy, procedures, training documents, and medical records; and telephone interviews with the acting HSA, training coordinator, and quality assurance manager.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):**

**Completion Date:** 10/1/2020

**Reviewer Signature (for printed form submission):**
### STANDARD 4.3. MEDICAL CARE (Key: v)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
</table>
| 1. Every facility shall directly or contractually provide its detainee population:  
  - Initial medical, mental health, and dental screening,  
  - Medically necessary and appropriate medical, dental and mental health care and pharmaceutical services  
  - Comprehensive, routine and preventive health care, as medically indicated  
  - Emergency care, Specialty health care,  
  - Timely responses, Mental health care,  
  - Hospitalization as needed within the local community, and  
  - Staff or professional language services necessary for detainees with limited English proficiency during any medical or mental health appointment, sick call, treatment, or consultation | Meets Standard | This facility directly provides initial screening and medically necessary health care, pharmaceutical services, as well as comprehensive routine and preventive health care, emergency and specialty care, mental health care and hospitalization promptly. Language/interpreter services are provided. |
| 2. A designated health services administrator (HSA) or equivalent in non-IHSC staffed detention facilities shall have overall responsibility for health care services pursuant to a written agreement, contract, or job description. The HSA is a physician or health care professional and shall be identified to detainees. When the HSA is other than a physician, final clinical judgment shall rest with the facility’s designated clinical medical authority. In no event should clinical decisions be made by non-clinicians. | Meets Standard | The designated health services administrator (HSA) is an RN who is known to the detainees and has overall responsibility for health care, under a written agreement. Currently, there is an acting HSA in position. Final clinical judgment rests with the clinical medical authority, a physician. Clinical decisions are not made by non-clinicians. |
| 3. **PRIORITY:** All facilities shall provide a medical staff and sufficient support personnel to meet these Standards. A staffing plan, which is reviewed at least annually, identifies the positions needed to perform the required services. | Meets Standard | Staffing, to support these services, includes one acting HSA, one MD, one part-time dentist, and full-time dental assistant, three mid-level providers, one nurse manager, thirteen RNs, five LPNs, two licensed mental health providers, three medical records technicians, two medical translators, and one administrative assistant. A psychiatrist provides 32 hours of services via tele-psych. The plan is reviewed annually. |
### STANDARD 4.3. MEDICAL CARE (Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. <strong>PRIORITY:</strong> All health care staff must be verifiably licensed, certified, credentialed, and/or registered in compliance with applicable state and federal requirements. Health care personnel only perform duties for which they are credentialed by training, licensure, certification, job descriptions, and/or written standing or direct orders by personnel authorized by law to give such orders.</td>
<td>Meets Standard</td>
<td>Per review of credential files, all health care personnel are licensed and credentialed as appropriate and perform duties according to their training and licensure, and/or according to a physician's order.</td>
</tr>
<tr>
<td>5. The facility administrator, in collaboration with the clinical medical authority and HSA, negotiates and maintains arrangements with nearby medical facilities or health care providers to provide required health care not available within the facility, as well as identifying custodial officers to transport and remain with detainees for the duration of any off-site treatment or hospital admission.</td>
<td>Meets Standard</td>
<td>Hospital and specialty care that cannot be provided on-site by the health services unit (HSU) is arranged with community providers, such as the University of New Mexico Hospital. Correction officers have been identified to accompany detainees off-site.</td>
</tr>
</tbody>
</table>
| 6. **PRIORITY:** Each facility shall have written plans that address the management of infectious and communicable diseases, including prevention, education, identification, surveillance, immunization (when applicable), treatment, follow-up, isolation (when indicated), and reporting to local, state, and federal agencies. Plans shall include:  
• Coordination with public health authorities;  
• Ongoing education for staff and detainees;  
• Control, treatment and prevention strategies;  
• Protection of individual confidentiality;  
• Media relations;  
• Procedures for the identification, surveillance, immunization, follow-up and isolation of patients;  
• Manage infectious diseases and report them to local and/or state health departments in accordance with established guidelines and applicable laws; and  
• Management of bio-hazardous waste and decontamination of medical and dental equipment that complies with applicable laws and Detention Standard on Environmental Health and Safety. | Meets Standard | Per policy and procedure, and as reviewed, the written infectious disease plan includes all the requirements of this component. |
## STANDARD 4.3. MEDICAL CARE (Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. <strong>PRIORITY:</strong> All new arrivals shall receive TB screening within 12 hours of intake and using methods in accordance with CDC guidelines.</td>
<td>Meets Standard</td>
<td>All new arrivals who are transferred without a recent current TB test receive TB testing on admission, during the intake process, as documented in ICE detainee medical records. Detainee interviews validated this practice.</td>
</tr>
<tr>
<td>8. Detainees with symptoms suggestive of TB, or with suspected or confirmed active TB disease based on clinical and/or laboratory findings, shall be placed in a functional airborne infection isolation room with negative pressure ventilation and promptly evaluated for TB disease. Patients with suspected active TB shall remain in airborne infection isolation until determined by a qualified provider to be noncontagious in accordance with CDC guidelines.</td>
<td>Meets Standard</td>
<td>Detainees with suspected or confirmed active TB disease would be housed and remain in a functional negative pressure isolation room in the health services unit (HSU) as required.</td>
</tr>
</tbody>
</table>
| 9. For all confirmed and suspected active tuberculosis cases, designated medical staff shall report:  
  - All cases to local and/or state health departments within one working day of meeting reporting criteria and in accordance with established guidelines and applicable laws  
  - All cases to the ICE HQ Epidemiology Unit within one working day.  
  - Any movement of TB patients, including hospitalizations, facility transfers, releases, or removals/deportations to the local and/or state health department and the ICE HQ Epidemiology Unit | Meets Standard | Per policy and procedure, all confirmed and suspected/active TB cases and any movement of TB patients are reported to local and state health departments and the IHSC Public Health, Safety, and Preparedness Unit. |
| 10. **PRIORITY:** Designated medical staff shall notify the ICE Epidemiology Unit of any varicella (e.g. herpes zoster [shingles], chicken pox) cases among ICE detainees and of any ICE detainees exposed to active varicella without a history of prior varicella or varicella immunization. | Meets Standard | Per policy and procedure, the RN reports any significant communicable diseases to the IHSC Public Health, Safety, and Preparedness Unit. |
| 11. Facilities must develop a plan to ensure the highest degree of confidentiality regarding HIV status and medical condition. | Meets Standard | It was noted that medical condition and HIV confidentiality is addressed in facility plans. |
| 12. When current symptoms are suggestive of HIV infection, clinical evaluation shall determine the medical need for isolation. | Meets Standard | Per policy, detainees with HIV infection are isolated when clinically indicated. |
| 13. Each facility shall establish a plan to address exposure to blood-borne pathogens, including reporting. | Meets Standard | The blood-borne pathogen exposure control plan includes reporting requirements. |
### STANDARD 4.3. MEDICAL CARE (Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>14. The facility shall provide each detainee, upon admittance, a copy of</td>
<td>Meets Standard</td>
<td>Per policy and the acting HSA, on admission, detainees are provided with the National Detainee Handbook and a local handbook (in English and Spanish) which explain access to health care, sick call, and the medical grievance process. Detainee interviews validated this practice.</td>
</tr>
<tr>
<td>the detainee handbook and local supplement, in which procedures for access</td>
<td></td>
<td></td>
</tr>
<tr>
<td>to health care services are explained; access to health care services,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>sick call and a medical grievance process shall be included in the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>orientation curriculum for newly admitted detainees.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Detainees shall not be used for interpretation services during any</td>
<td>Meets Standard</td>
<td>Per policy, detainees are not routinely used for translation services. Translators are on the medical staff. The Language Line is used as necessary.</td>
</tr>
<tr>
<td>medical or mental health service. Interpretation and translation services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>by other detainees shall only be provided in an emergency medical</td>
<td></td>
<td></td>
</tr>
<tr>
<td>situation.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Facilities shall post signs in medical intake areas in the major</td>
<td>Meets Standard</td>
<td>Per the acting HSA and as documented in photos, a language identification guide, which explains what language assistance is available, is posted in the intake area and the HSU.</td>
</tr>
<tr>
<td>languages spoken by the detainee population listing what language</td>
<td></td>
<td></td>
</tr>
<tr>
<td>assistance is available during any medical or mental health treatment,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>diagnostic test, or evaluation.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17. <strong>PRIORITY:</strong> Medical, dental, and mental health interviews,</td>
<td>Meets Standard</td>
<td>As documented in photos and as observed in the unit diagram, health care can be provided with respect for detainee privacy.</td>
</tr>
<tr>
<td>examinations, and procedures shall be conducted in settings that respect</td>
<td></td>
<td></td>
</tr>
<tr>
<td>detainees’ privacy.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. A holding/waiting area shall be located in the medical facility that</td>
<td>Meets Standard</td>
<td>Per unit diagram and as documented in post orders, there is a waiting area that is under the direct supervision of detention staff. A toilet and drinking water are accessible from the waiting area.</td>
</tr>
<tr>
<td>is under the direct supervision of custodial officers. A detainee toilet</td>
<td></td>
<td></td>
</tr>
<tr>
<td>and drinking fountain shall be accessible from the holding/waiting area.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Medical records shall be kept separate from detainee detention</td>
<td>Meets Standard</td>
<td>Medical records are electronic, user ID, and password protected. They are kept separate from detention files.</td>
</tr>
<tr>
<td>records and stored in a securely locked area within the medical unit.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### STANDARD 4.3. MEDICAL CARE  
(Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
</table>
| 20. If there is a specific area, separate from other housing areas, where detainees are admitted for health observation and care under the supervision and direction of health care personnel, consideration shall be given to the detainee’s age, gender, medical requirements and custody classification, and the following minimum standards shall be met:  
  - Physician at the facility or on call 24 hours per day;  
  - Qualified health care personnel on duty 24 hours per day when patients are present;  
  - All patients within sight or sound of a staff member;  
  - Medical housing record that is a separate and distinct section of the complete medical record; and  
  - Compliance with all established guidelines and applicable laws.  
Facilities are expected to provide detainees in medical housing access to other services such as telephone, legal access and materials consistent with their medical condition. | N/A       | There is no infirmary/medical housing. However, per the acting HSA and per the unit diagram, there is one negative pressure, isolation room and three observation rooms. |
<p>| 21. Prior to placing a mentally ill detainee in medical housing, a determination shall be made by a medical or mental health professional that placement in medical housing is medically necessary. | N/A       | There is no infirmary/medical housing. |
| 22. <strong>PRIORITY:</strong> Each facility shall have and comply with written policy and procedures for the management of pharmaceuticals that include procurement, inventory, prescription, dispensing, and secure storage and disposal of all prescription and nonprescription medicines. | Meets Standard | There are written policies and procedures for the management of pharmaceuticals, which include all the requirements of the component. A photo review of the pharmacy demonstrated secure storage. |
| 23. The facility administrator and HSA shall jointly approve any non-prescription medications that are available to detainees outside of health services and they shall jointly review the list annually at a minimum. | N/A       | Per the acting HSA, non-prescription medications are not available outside of health services. |</p>
<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>24. PRIORITY:</strong> Initial medical, dental, and mental health screening shall be done within 12 hours of arrival by a health care provider or a detention officer specially trained to perform this function. The screening shall inquire into the following: • Any past history of serious infectious or communicable illness, and any treatment or symptoms; • Current illness and health problems, including communicable diseases; • Pain assessment; • Current and past medication; • Allergies; • Past surgical procedures; • Symptoms of active TB or previous TB treatment; • Dental problems; • Use of alcohol and other drugs; • Possibility of pregnancy; • Other relevant health problems identified by the CMA responsible for screening inquiry; • Observation of behavior, including state of consciousness, mental status, appearance, conduct, tremor, sweating; • History of suicide attempts or current suicidal/homicidal ideation or intent; • Observation of body deformities and other physical abnormalities; • A transgender detainee’s gender self-identification and history of transition-related care, when a detainee self-identifies as transgender; • Past hospitalizations; • Chronic illness (including, but not limited to, hypertension and diabetes); • Dietary needs; and • Any history of physical or sexual victimization and when the incident occurred.</td>
<td>Meets Standard</td>
<td>Initial medical, dental and mental health screening is performed by nursing staff upon a detainee’s admission, as part of the intake process and within twelve hours. As confirmed per medical record reviews, the screening addresses all the bulleted items listed in this component including history of physical and mental illness and suicide risk in the past. Detainee interviews validated the screening.</td>
</tr>
<tr>
<td><strong>25.</strong> If screening is performed by a detention officer, the facility shall maintain documentation of the officer’s special training, and the officer shall have available for reference the training syllabus, to include education on patient confidentiality of disclosed information.</td>
<td>N/A</td>
<td>Only medical personnel perform the screenings.</td>
</tr>
</tbody>
</table>
### STANDARD 4.3. MEDICAL CARE (Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>26. PRIORITY:</strong> Any detainee indicating a known acute or emergent medical condition or demonstrating a clinically significant finding as a result of initial screening shall be evaluated by a qualified, licensed health care provider as quickly as possible, but in no later than two working days.</td>
<td>Meets Standard</td>
<td>Medical personnel perform the screenings and are thus able to immediately identify and evaluate a detainee with an acute or emergent medical condition.</td>
</tr>
<tr>
<td><strong>27. PRIORITY:</strong> If at any time during the screening process there is an indication of need, or request for, mental health services, the HSA must be notified within 24 hours. The clinical medical authority, HSA, or other qualified licensed health care provider shall ensure a full mental health evaluation if indicated. If a detainee discloses a history of sexual victimization or abuse during a medical or mental health intake screening, whether it occurred in an institutional setting or in the community, a referral to a qualified, licensed healthcare provider shall be made immediately.</td>
<td>Meets Standard</td>
<td>The HSA is notified of any detainee with a need for mental health services within 24 hours, and a referral is made. If a detainee discloses a history of sexual victimization or abuse during an intake screening, a referral is made as appropriate.</td>
</tr>
<tr>
<td><strong>28.</strong> All facilities shall have policies and procedures to ensure the initial health screening and assessment is documented.</td>
<td>Meets Standard</td>
<td>Policy and procedure require documentation of initial health screenings and assessments. Medical records reflect this practice.</td>
</tr>
<tr>
<td><strong>29. PRIORITY:</strong> Upon completion of the in-processing health screening form, the detention officer shall immediately notify medical staff when one or more positive responses are documented. Medical staff will then assess the priority for treatment (for example, Urgent, Today, or Routine).</td>
<td>Meets Standard</td>
<td>Only medical personnel perform in-processing health screenings. Thus, medical personnel can immediately assess the priority for treatment.</td>
</tr>
<tr>
<td><strong>30. PRIORITY:</strong> Limited-English proficient detainees and detainees who are deaf or hard of hearing will be provided interpretation or translation services or other assistance as needed for medical care activities. Language assistance may be provided by another staff member competent in the language or by a professional service, such as a telephone translation service.</td>
<td>Meets Standard</td>
<td>Interpreter or other assistive device services are available for detainees with deficits in speech or hearing or language barriers. A language line or staff translator is used. Per photo, a TDD device is available in the HSU.</td>
</tr>
<tr>
<td><strong>31.</strong> The clinical medical authority shall establish guidelines for evaluation and treatment of new arrivals who require detoxification.</td>
<td>Meets Standard</td>
<td>Per policy and procedure, the physician has established guidelines for the evaluation and treatment of detainees requiring detoxification.</td>
</tr>
</tbody>
</table>
### STANDARD 4.3. MEDICAL CARE  (Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>32. <strong>PRIORITY:</strong> Each facility’s health care provider shall conduct a comprehensive health assessment, including a physical examination and mental health screening, on each detainee within 14 days of the detainee’s arrival unless more immediate attention is required due to an acute or identifiable chronic condition. If such documentation exists of such a health assessment within the previous 90 days, the facility health care provider upon review may determine that a new appraisal is not required. Physical examinations shall be performed by a physician, physician assistant, nurse practitioner, RN (with documented training provided by physician) or other healthcare provider permitted by law.</td>
<td>Meets Standard</td>
<td>Per medical record review, detainees consistently receive timely comprehensive health assessments. The physical examinations are performed by the MD and the mid-level provider.</td>
</tr>
<tr>
<td>33. A detainee’s request to see a health care provider of a particular gender is accommodated, whenever possible. Otherwise, detainees are provided same sex chaperones if requested.</td>
<td>Meets Standard</td>
<td>A detainee request for a health care provider of a specific gender is accommodated, if possible, especially when the medical encounter involves an examination of sensitive body parts. Chaperones of the same gender are provided.</td>
</tr>
<tr>
<td>34. <strong>PRIORITY:</strong> Where a detainee has a serious medical or mental health condition or otherwise requires special or close medical care, medical staff complete a Medical/Psychiatric Alert form (IHSC-834) or equivalent, and file the form in the detainee’s medical record. Where medical staff furthermore determine the condition to be serious enough to require medical clearance of the detainee prior to transfer or removal, medical staff also place a medical hold on the detainee using the Medical/Psychiatric Alert form (IHSC-834) or equivalent, which serves to prevent ICE from transferring or removing the detainee without the prior clearance of medical staff at the facility. The facility administrator receives notice of all medical/psychiatric alerts or holds, and notifies ICE/ERO of any medical alerts or holds placed on a detainee that is to be transferred.</td>
<td>Meets Standard</td>
<td>Per policy and procedure, the local Medical/Psychiatric Alert form is documented in medical and detention records. The OIC receives notice of all alerts and holds, and ICE is notified when such a hold may impact the transfer of a detainee.</td>
</tr>
</tbody>
</table>
### STANDARD 4.3. MEDICAL CARE (Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

<table>
<thead>
<tr>
<th>Components</th>
</tr>
</thead>
<tbody>
<tr>
<td>35. <strong>PRIORITY:</strong> The facility performs mental health intake screening, as well as mental health evaluations based on screening results, the comprehensive health assessment, medical documentation, or subsequent observations, that include prior history of mental health treatment, medications, drug use, suicidal tendencies, and abuse, observations of current physical and intellectual condition, and recommendations for any appropriate medical or custodial treatment. Detainees are appropriately referred to a mental health provider for diagnosis, treatment, and/or intervention, and transferred to licensed mental health facilities where detainee mental health needs exceed the capabilities of the facility.</td>
</tr>
<tr>
<td>Rating</td>
</tr>
<tr>
<td>Remarks</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Components</th>
</tr>
</thead>
<tbody>
<tr>
<td>36. <strong>PRIORITY:</strong> Any detainee referred for mental health treatment shall receive a comprehensive evaluation by a licensed mental health provider as clinically necessary no later than 72 hours after the referral, or sooner if necessary. The provider shall develop an overall treatment/management plan that may include transfer to a mental health facility if the detainee’s mental illness or developmental disability needs exceed the treatment capability of the facility.</td>
</tr>
<tr>
<td>Rating</td>
</tr>
<tr>
<td>Remarks</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Components</th>
</tr>
</thead>
<tbody>
<tr>
<td>37. Any detainee prescribed psychiatric medications must be regularly evaluated by a duly-licensed and appropriate medical professional, at least once a month, to ensure proper treatment and dosage.</td>
</tr>
<tr>
<td>Rating</td>
</tr>
<tr>
<td>Remarks</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Components</th>
</tr>
</thead>
<tbody>
<tr>
<td>38. The facility has a mental health staffing component on call to respond to the needs of the detainee population 24 hours a day, seven days a week.</td>
</tr>
<tr>
<td>Rating</td>
</tr>
<tr>
<td>Remarks</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Components</th>
</tr>
</thead>
<tbody>
<tr>
<td>39. The clinical medical authority may place in medical isolation a detainee who is at high risk for violent behavior because of a mental health condition. The clinical medical authority must provide for reassessment on a daily basis the need for continued medical isolation for the health and safety of the detainee.</td>
</tr>
<tr>
<td>Rating</td>
</tr>
<tr>
<td>Remarks</td>
</tr>
</tbody>
</table>
### STANDARD 4.3. MEDICAL CARE (Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
</table>
| **40. PRIORITY:** The facility shall have written procedures for restraints for medical or mental health purposes that specify:  
  - The conditions under which restraints may be applied;  
  - The types of restraints to be used;  
  - The proper use, application, and monitoring of restraints;  
  - Requirements for documentation, including efforts to use less restrictive alternatives; and  
  - After-incident review.  | Meets Standard | Written policy and procedure address the use of therapeutic restraints which include all the bulleted points. Per the acting HSA, therapeutic restraints are not used at this facility. |
| **41. PRIORITY:** Involuntary administration of psychotropic medications to detainees shall comply with established guidelines and applicable laws and only pursuant to the specific, written and detailed authorization of a physician. Absent declared medical emergency, before psychotropic medication is involuntarily administered, it is required that the HSA contact ERO Management, who shall contact respective DHS/ICE Chief Counsel. The authorizing physician shall:  
  - Review the medical record of the detainee and conduct a medical examination;  
  - Specify the reasons for and duration of therapy and whether the detainee has been asked if he or she would consent to such medication;  
  - Specify the medication to be administered, the dosage, and the possible side effects of the medication;  
  - Document that less restrictive intervention options have been exercised without success;  
  - Detail how the medication is to be administered;  
  - Monitor the detainee for adverse reactions and side effects; and  
  - Prepare treatment plans for less restrictive alternatives as soon as possible.  | Meets Standard | Written policy and procedure address the involuntary administration of psychotropic medications; the requirements of the component would be followed. Per the acting HSA, the involuntary administration of psychotropic medications has not been performed here. |
| **42.** A detainee that is in ICE custody for over a year continuously shall receive health examinations on an annual basis. Detainees shall have access to age and gender appropriate exams annually, including rescreening for tuberculosis.  | Meets Standard | Per policy, detainees in ICE custody for over a year would receive annual health examinations and TB testing. Per the acting HSA, no ICE detainees have been housed in the facility for over one year. |
## STANDARD 4.3. MEDICAL CARE (Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>43. An initial dental screening exam shall be performed within 14 days of the detainee’s arrival.</td>
<td>Meets Standard</td>
<td>Per medical record review, an initial dental screening is performed upon a detainee’s arrival. A dental screening exam is performed with the physical examination. Routine and emergent dental treatment is provided by a licensed dentist onsite.</td>
</tr>
<tr>
<td>- Emergency dental treatment shall be provided for immediate relief of pain, trauma and acute oral infection.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Routine dental treatment may be provided to detainees in ICE custody for whom dental treatment is inaccessible for prolonged periods because of detention for over six (6) months. Dental exams and treatment are provided only by licensed dental personnel.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>44. PRIORITY: Each facility shall have a sick call procedure that allows detainees the unrestricted opportunity to freely request health care services (including mental health and dental services) provided by a physician or other qualified medical staff in a clinical setting.</td>
<td>Meets Standard</td>
<td>Per policy and the acting HSA, the sick call procedure allows detainees to freely request health care and addresses all the requirements listed in this component. All detainees have access to sick call and use either a paper request slip printed in English and Spanish or a tablet with the same available languages. Detainees in the SMU have the same access as those in the general population. Detainee interviews validated the sick call process.</td>
</tr>
<tr>
<td>- This procedure shall include:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Clearly written policies and procedures;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Sick call process will be communicated in writing and verbally to detainees during their orientation;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Regularly scheduled “sick call” times will be established and communicated to detainees;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- All facilities must have an established procedure in place to ensure that all sick call requests are received and triaged by appropriate medical personnel within 24 hours after the detainee submits the request. In an urgent situation, the housing unit officer shall notify medical personnel immediately.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>All detainees, including those in Special Management Units, regardless of classification, shall have access to sick call.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>45. If the procedure uses a written request slip, they shall be provided in English and the most common languages spoken by the detainee population of that facility. Limited-English proficient detainees and detainees who are deaf or hard of hearing will be provided interpretation/translation services as needed or other assistance as needed to complete a request slip.</td>
<td>Meets Standard</td>
<td>Paper sick call request slips are available in English and Spanish. LEP, hard of hearing, and deaf detainees are assisted as needed.</td>
</tr>
</tbody>
</table>
### STANDARD 4.3. MEDICAL CARE  (Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>46. Medical personnel shall review the request slips and determine when the detainee will be seen based on acuity of the problem. All facilities shall maintain a permanent record of all sick call requests.</td>
<td>Meets Standard</td>
<td>Per policy and the acting HSA, sick call requests are reviewed by nursing staff, and the detainees are seen based on acuity of the need. Sick call requests are documented in the applicable medical records. Paper request slips are scanned into the EMR.</td>
</tr>
</tbody>
</table>

47. **PRIORITY:** Each facility shall have a written emergency services plan for the delivery of 24-hour emergency health care.

A plan shall be prepared in consultation with the facility’s clinical medical authority or the HSA. The plan will include the following:

- An on-call physician, dentist, and mental health professional, or designee, that are available 24 hours per day;
- A list of telephone numbers for local ambulances and hospital services available to all staff;
- An automatic external defibrillator (AED) will be maintained for use at each facility and accessible to staff;
- All detention and medical staff shall receive cardio pulmonary resuscitation (CPR, AED), and emergency first aid training annually;
- Security procedures that ensure the immediate transfer of detainees for emergency medical care.

| | Meets Standard | The written emergency services plan for the delivery of 24-hour emergency health care, prepared in consultation with the HSA, includes all the bulleted items of the component. |
### STANDARD 4.3. MEDICAL CARE (Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
</table>
| **48. PRIORITY:** Training is provided to all detention and health care personnel at least annually by a responsible medical authority in cooperation with the facility administrator, and includes:  
  - Responding to health-related situations within four (4) minutes;  
  - Recognizing of signs of potential health emergencies and the required responses;  
  - Administering first aid, AED and cardiopulmonary resuscitation (CPR);  
  - Obtaining emergency medical assistance through the facility plan and its required procedures;  
  - Recognizing signs and symptoms of mental illness and suicide risk;  
  - The facility’s established plan and procedures for providing emergency medical care including, when required, the safe and secure transfer of detainees for appropriate hospital or other medical services, including by ambulance when indicated. |        | Meets Standard  
Per review of training logs and curriculum, and a telephone interview with the training coordinator, annual training encompasses all bulleted items.                                                                                                                                                                                                                     |
| **49.** The designated health authority and facility administrator shall determine the contents, number, location(s), use protocols, and procedures for monthly inspections of first aid kits.                                                                                                                                  | N/A    | Per the acting HSA, first aid kits are not used in the facility as medical staffing is provided 24 hours per day, seven days per week and medical staff respond to all medical emergencies with an emergency bag.                                                                                                                                                                                                         |
| **50.** Distribution of medication (including over the counter) shall be in accordance with specific instructions and procedures established by the HSA in consultation with the CMA. Written records of all medication given to or refused by detainees shall be maintained. Detainees may not deliver or administer medications to other detainees.                                                   |        | Meets Standard  
Medications are distributed according to an authorized provider order. Per medical record review, electronic medication administration records are used. Detainees are not permitted to deliver or administer medications.                                                                                                           |
## STANDARD 4.3. MEDICAL CARE  (Key: V)
This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>51. If prescribed medication must be delivered at a specific time when medical staff is not on duty, it may only be distributed by detention officers who have received proper training by the HSA or designee, where it is permitted by state law to do so. The facility shall maintain documentation of the training given any officer required to distribute medication, and the officer shall have available for reference the training syllabus or other guide or protocol provided by the health authority.</td>
<td>N/A</td>
<td>Only medical staff distributes medications.</td>
</tr>
<tr>
<td>52. Qualified health care personnel shall provide detainees health education and wellness information.</td>
<td>Meets Standard</td>
<td>Per medical record review and as shown in a photo of the HSU, health and wellness education are provided to detainees.</td>
</tr>
<tr>
<td>53. The clinical medical authority for each facility must have a plan to notify ICE in writing of any detainee with special needs. The written notification must become part of the detainee’s health record file.</td>
<td>Meets Standard</td>
<td>ICE is notified of any detainee with special needs via an ICE disability form. This notification becomes part of the detainee’s medical record.</td>
</tr>
<tr>
<td>54. Consistent with the IHSC Detainee Covered Services Package, detainees are provided medical prosthetic devices or other impairment aids, such as eyeglasses, hearing aids, or wheelchairs, except when such provisions would impact the security or safety of the facility.</td>
<td>Meets Standard</td>
<td>Per policy, detainees are provided medical prosthetic devices such as eyeglasses or hearing aids, as needed.</td>
</tr>
<tr>
<td>55. PRIORITY: When a detainee requires close medical supervision, including chronic and convalescent care, a written treatment plan that includes access to health care and other personnel regarding care and supervision, shall be developed and approved by the appropriate qualified licensed health care provider, in consultation with the patient, with periodic review.</td>
<td>Meets Standard</td>
<td>Per policy and as documented in medical records, detainees requiring close medical supervision, including chronic and convalescent care, are provided a written treatment plan, developed and approved by the provider, in consultation with the patient, with periodic review.</td>
</tr>
<tr>
<td>56. Transgender detainees who were already receiving hormone therapy when taken into ICE custody shall have continued access. All transgender detainees shall have access to mental health care, and other transgender-related health care and medication based on medical need. Treatment shall follow accepted guidelines regarding medically necessary transition-related care.</td>
<td>Meets Standard</td>
<td>Per policy, the care of transgender detainees encompasses the requirements of the component. There were currently no known transgender detainees housed at the facility.</td>
</tr>
</tbody>
</table>
**STANDARD 4.3. MEDICAL CARE** (Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>57. The facility HSA must ensure that a plan is developed that provides for continuity of medical care in the event of a change in detention placement or status. Upon transfer to another facility, the medical provider shall ensure that the detainee’s full medical record and at least 7 day (or, in the case of TB medications, 15 day; and HIV/AIDS medications, 30 day) supply of medication shall accompany the detainee. Upon release from ICE custody, the detainee shall receive up to a 30 day supply of medication as ordered by the prescribing authority and a copy of his complete medical record.</td>
<td>Meets Standard</td>
<td>Per policy, upon a change in detention placement or status, the detainee is provided with a medical summary and the appropriate amount of medications. Per the standard, a full copy of the medical record is not furnished, unless requested.</td>
</tr>
<tr>
<td>58. <strong>PRIORITY:</strong> Documented informed consent, consistent with standards of the jurisdiction, is obtained from a detainee before medical treatment is administered. If a detainee refuses consent to treatment, medical staff explain the medical risks if treatment is declined and document their efforts in the detainee's medical record.</td>
<td>Meets Standard</td>
<td>Per detainee medical record review, consent is obtained on admission. A separate informed consent is obtained for any additional medical procedure or use of psychotropic medication. Detainee refusal to consent requires the provision of medical risk information by medical staff and documentation in the medical record.</td>
</tr>
<tr>
<td>59. If a detainee refuses treatment and the clinical medical authority or designee determines that the treatment is necessary, ICE/ERO shall be consulted in determining whether involuntary treatment shall be pursued. Involuntary treatment is a decision made only by medical staff under strict legal restrictions. Prior to any contemplated action involving non-emergent involuntary medical treatment, DHS / ICE respective Chief Counsel will be consulted.</td>
<td>Meets Standard</td>
<td>Per policy and the acting HSA, ICE is notified if a detainee refuses the necessary medical treatment. There has been no involuntary treatment administered during the inspection period.</td>
</tr>
</tbody>
</table>
| 60. **PRIORITY:** The HSA shall maintain a complete health record on each detainee that is:  
  - Organized uniformly in accordance with appropriate accrediting body standards;  
  - Available to all practitioners and used by them for health care documentation;  
  - Properly maintained and safeguarded in a securely locked area within the medical unit separately from other detention records. | Meets Standard      | There is a complete electronic medical record for each detainee which is organized and used by medical practitioners for health care documentation. It is user ID and password protected. It is kept separate from detention records. |
### STANDARD 4.3. MEDICAL CARE (Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>61. All medical providers, as well as detention officers and staff, shall protect the privacy of detainees’ medical information in accordance with established guidelines and applicable laws. These protections apply, not only to records maintained on paper, but also to electronic records where they are used. Staff training must emphasize the need for confidentiality and procedures must be in place to limit access to health records to only authorized individuals and only when necessary.</td>
<td>Meets Standard</td>
<td>Per policy and the training coordinator, all personnel are trained in medical information confidentiality. Access to health records is limited.</td>
</tr>
</tbody>
</table>
| 62. The HSA shall provide the facility administrator and designated staff information that is necessary:  
  - To preserve the health and safety of the detainee, other detainees, staff, or any other person.  
  - For administrative and detention decisions such as housing, voluntary work assignments, security, and transport.  
  - For management purposes such as audits and inspections. | Meets Standard | Per policy, the acting HSA provides the OIC and designated staff with detainee information related to health and safety concerns, classification issues and for management purposes. |
| 63. Copies of health records shall be released by the HSA directly to a detainee or their designee, at no cost to the detainee, within a reasonable timeframe after receipt by the HSA of a written authorization from the detainee. | Meets Standard | A detainee may receive a free copy of his health record by providing written authorization. |
| 64. Detainees who indicate they wish to obtain copies of their medical records shall be provided with the appropriate request form. ICE/ERO, or the facility administrator, shall provide limited-English proficient detainees and detainees who are deaf or hard of hearing with interpretation or translation services or other assistance as needed to make the written request and assist in transmitting the request to the facility HSA. | Meets Standard | Detainees are provided with the appropriate request form and assistance as necessary in obtaining copies of their medical records. |
| 65. **PRIORITY:** The HSA shall be given advance notice prior to the release, transfer, or removal of a detainee, so that medical staff may determine and provide for any medical needs associated with the transfer, release, or removal. | Meets Standard | The acting HSA is given advance notice of the detainee movement. |
# PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 INSPECTION WORKSHEET FOR OVER 72 HOUR FACILITIES

## STANDARD 4.3. MEDICAL CARE (Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>66. <strong>PRIORITY:</strong> Upon receiving notification that a detainee is to be transferred, appropriate medical staff at the sending facility notify the facility administrator of any medical/psychiatric alerts or holds that have been assigned to the detainee, as reflected in the detainee’s medical records. The facility administrator notifies ICE/ERO of any medical alerts or holds placed on a detainee that is to be transferred. Those detainees who are currently placed in a medical hold status are evaluated and cleared by a licensed independent practitioner prior to transfer or removal. In addition, the CMA or designee informs the facility administrator in writing if the detainee’s medical or psychiatric condition requires a medical escort during transfer or removal.</td>
<td>Meets Standard</td>
<td>Per policy, the OIC is notified when a transferring detainee has a medical/psychiatric alert or hold or requires a medical escort. The OIC notifies ICE. Detainees are evaluated and cleared for transfer.</td>
</tr>
</tbody>
</table>
| 67. When a detainee is transferred within the ICE Health Service Corps (IHSC) system, ICE ensures that:  
- Form USM-553, or equivalent Medical Transfer Summary, and a copy of the detainee’s full medical record accompanies the detainee; and  
- The full medical record is placed in a sealed envelope or other container labeled with the detainee’s name and A-number and marked “MEDICAL CONFIDENTIAL.”  
When a detainee is transferred to an IGSA detention facility, the sending facility ensures that the Transfer Summary accompanies the detainee. A copy of the full medical record accompanies each detainee during transfer unless extenuating circumstances make this impossible, in which case the full medical record follows as soon as practicable. | Meets Standard | During the previous inspection, this component was found Does Not Meet Standard because medical transfer information was not placed in a separate envelope which was labeled with the detainee’s name and A-number and marked "Medical Confidential". Currently, at this IGSA facility, per the acting HSA, a medical transfer summary and pertinent medical records are placed in a sealed, appropriately labeled envelope. If more than one detainee is being transferred to the same facility at the same time, all detainee records are placed in one sealed, appropriately labeled envelope. Per the standard, a full copy of the medical record is not furnished, unless requested. |
| 68. Detainees released or removed from detention receive a discharge treatment plan to ensure continuity of care, full copy of their medical record, medication and referrals to community-based providers as medically appropriate. | Meets Standard | Per policy, discharged detainees receive a copy of their medical record, upon request, a discharge plan, medications, and referrals to community providers, as appropriate. |
### STANDARD 4.3. MEDICAL CARE (Key: V)

This detention standard ensures that detainees have access to appropriate and necessary medical, dental, and mental health care, including emergency services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>69. Detainees will not participate in medical, pharmaceutical or cosmetic research while under the care of ICE detention facilities. This does not preclude the use of approved clinical trials that may be warranted for a specific detainee’s diagnosis or treatment when recommended and approved by the clinical medical director. Such measures require documented informed consent.</td>
<td></td>
<td>Per policy, detainees do not participate in medical, pharmaceutical, or cosmetic research. There are no current ongoing clinical trials.</td>
</tr>
<tr>
<td>70. <strong>PRIORITY:</strong> The HSA shall implement a system of internal review and quality assurance that includes data analysis, a multidisciplinary committee with regular monitoring of health service outcomes, and assessment of ongoing education and training needs.</td>
<td></td>
<td>The HSA has implemented a system of internal review and quality assurance consistent with this component. Current studies include medical observation, COVID-19, screening for infectious diseases, and medical grievances.</td>
</tr>
<tr>
<td>71. The HSA shall implement an intra-organizational, external peer review program for all independently licensed medical professionals. Reviews are conducted at least annually.</td>
<td></td>
<td>The acting HSA has implemented a peer review program consistent with this component. Reviews are conducted annually.</td>
</tr>
</tbody>
</table>

### STANDARD 4.3. MEDICAL CARE – Reviewer Summary

*Overall Remarks:* *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

When TB treatment is indicated, multi-drug, anti-TB therapy is administered using directly observed therapy (DOT). Active TB disease is ruled out before treatment for latent TB infection is initiated. International referrals are coordinated with the IHSC Public Health, Safety, and Preparedness Unit and local/state health departments. There is a written plan to address the management of hepatitis A, B, and C and HIV. Detainees may request hepatitis and HIV testing at any time. Medical personnel provide all detainees diagnosed with HIV/AIDS medical care consistent with national recommendations and guidelines. Medical and pharmacy personnel ensure that all FDA medications currently approved for the treatment of HIV/AIDS are accessible. Detainees with active TB are evaluated for possible HIV infection. New HIV-positive diagnoses are reported to government bodies according to state and local laws and requirements; the RN is responsible for ensuring that all applicable state requirements are met. The IHSC Public Health, Safety, and Preparedness Unit is notified of any detainee with a significant communicable disease or outbreak investigation.

Pharmaceutical management policy includes a formulary, obtaining non-formulary medications, prescription practices, perpetual inventory, medication administration error reports, training, and storage in a secure area (photo provided).

Detainees experiencing severe intoxication or withdrawal are immediately transferred to the emergency department for treatment and referral. The CMA or designee reviews all health assessments to assess priority for treatment. The CMA has overall responsibility for medical clinical care according to a written agreement and job description. Referrals for sexual abuse victims or abusers are as required by the standard. Mental health evaluations and screenings are consistent with the standard.

The emergency medical services plan includes provisions for emergency evacuation of the detainee from the facility. Non-medical personnel contacts medical personnel when questioning the need for emergency care. Emergency response equipment is available. All medications and treatments are provided on schedule.
**STANDARD 4.3. MEDICAL CARE – Reviewer Summary**

(Use following format for dates: mm/dd/yyyy)

Detainees who arrive with prescribed medications or who report being on such medications are evaluated by a qualified health care professional as soon as possible, but no later than 24 hours after arrival, and provisions are made to secure medically necessary medications. Detainees are not charged for any medical services to include pharmaceuticals dispensed by medical personnel.

Detainee treatment questions are answered by medical personnel. Detainees sign a refusal for treatment when appropriate. Refusals are reviewed to determine the reasons for refusal. The written authorization for release of health information is retained in the medical record. Lab results are made available to detainees’ post transfer or release. Inactive medical records are retained. The agenda of quarterly administrative meetings include items per standard. The quality assurance review includes items per standard. Detainees request an independent health examination by submitting a written request to the FOD. The cost of the exam is at the detainee’s expense. The facility uses psychiatric telemedicine.

Medical record review demonstrated that detainees are receiving medical, dental and mental health screenings, TB testing, and physical examinations within required time frames and as required by the standards. Decisions regarding detainees with disabilities, LEP detainees, and/or detainees included under any SAAPI/DHS PREA protection or category, will be made only after consideration of the disability, language difficulty, or SAAPI/PREA condition. The facility is managed in such a manner as to protect detainees from sexual assault or abuse.

Detainee interviews elicited one minor medical issue. The detainee had been and was receiving care for the issue. Per the acting HSA, his treatment plan will be reviewed with him. Detainees were able to note admission screening, TB testing, and how to access health care.

Detainees have access to appropriate and necessary medical, dental and mental health care, including emergency services, both on and off-site. This inspection was conducted remotely. Evaluation of the standard was based on a review of policy, procedure, and practice; on review of documentation in medical records, credentialing files, personnel files, and training records; review of postings, photos, diagrams, handbooks, and other documents; and on telephone interviews with the acting HSA, training coordinator, psychiatrist, quality assurance manager, and detainees.

<table>
<thead>
<tr>
<th>Overall Rating: Meets Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reviewer Name (Print)</td>
</tr>
<tr>
<td>[Sign Here]</td>
</tr>
</tbody>
</table>

Reviewer Signature (for printed form submission):
**STANDARD 4.4. MEDICAL CARE (WOMEN) (Key: W)**

This detention standard ensures that female detainees in U.S. Immigration and Customs Enforcement (ICE) custody have access to appropriate and necessary medical and mental health care.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
</table>
| 1. **PRIORITY:** In addition to the medical, mental health, and dental services provided to every detainee as required by standard “4.3 Medical Care,” the facility directly or contractually provides its female detainees with access to:  
  - Pregnancy services, including pregnancy testing, routine or specialized prenatal care, postpartum follow up, lactation services, and abortion services, as outlined herein;  
  - Counseling and assistance for pregnant women in keeping with their express desires in planning for their pregnancy, whether they desire abortion, adoptive services, or to keep the child;  
  - Mental health assessments for all detainees who have recently given birth, miscarried, or terminated a pregnancy; and  
  - Routine, age-appropriate, gynecological health care services, including women’s specific preventive care.                                                                                                                                                                               | N/A    | The facility does not house female ICE detainees. |
| 2. Within 12 hours of arrival, during their initial medical screening, all female detainees shall receive information on services related to women’s health care as provided for in this standard and standard “4.3 Medical Care.”                                                                                                                                                                                                 | N/A    | The facility does not house female ICE detainees. |
| 3. If the initial medical intake screening indicates the possibility of pregnancy, recent sexual assault, violence or history of mental health illness, an initial health appraisal shall be completed as soon as possible, but no more than 24 hours after arrival.                                                                                                                                                                                                                           | N/A    | The facility does not house female ICE detainees. |
### STANDARD 4.4. MEDICAL CARE (WOMEN) (Key: W)

This detention standard ensures that female detainees in U.S. Immigration and Customs Enforcement (ICE) custody have access to appropriate and necessary medical and mental health care.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
</table>
| 4. All initial health assessments of female detainees include a thorough evaluation and assessment of the reproductive system. In addition to the criteria listed on the health assessment form, the evaluation inquires about the following:  
  - Pregnancy testing and documented results;  
  - If the detainee is currently nursing (breastfeeding);  
  - Use of contraception;  
  - Reproductive history (number of pregnancies, number of live births, number of spontaneous/elective abortions, pregnancy complications, etc.);  
  - Menstrual cycle;  
  - History of breast and gynecological problems;  
  - Family history of breast and gynecological problems; and  
  - Any history of physical or sexual victimization and when the incident occurred.  
  
  A pelvic and breast examination, pap test, baseline mammography, and sexually transmitted disease (STD) screening are offered and provided as deemed appropriate or necessary by the medical provider. | N/A    | The facility does not house female ICE detainees. |
| 5. Female victims of sexual abuse are granted immediate access to emergency medical treatment and crisis intervention services. The facility provides access by giving detainees the current mailing addresses and telephone numbers, including toll-free hotline numbers, of local, state and/or national organizations that provide these services. | N/A    | The facility does not house female ICE detainees. |
| 6. Upon request, appropriately trained medical personnel within their scope of practice provide detainees with non-directive (impartial) advice and consultation about family planning and birth control, and where medically appropriate, prescribe and dispense birth control. | N/A    | The facility does not house female ICE detainees. |
### STANDARD 4.4. MEDICAL CARE (WOMEN) (Key: W)

This detention standard ensures that female detainees in U.S. Immigration and Customs Enforcement (ICE) custody have access to appropriate and necessary medical and mental health care.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
</table>
| 7. **PRIORITY:** A pregnant woman or woman in post-delivery recuperation is not restrained absent truly extraordinary circumstances that render restraints absolutely necessary as documented by a supervisor or directed by the on-site medical authority. Restraints are never permitted on women who are in active labor or delivery. Restraints are not considered an option unless one or more of the following applies:  
  - A medical officer has directed the use of restraints for medical reasons;  
  - Credible, reasonable grounds exist to believe the detainee presents an immediate and serious threat of hurting herself, staff, or others; or  
  - Reasonable grounds exist to believe the detainee presents and immediate and credible risk of escape that cannot be reasonably minimized through any other method. | N/A    | The facility does not house female ICE detainees. |

8. In the rare event that restraints are used, medical staff determine the safest method and duration for the use of restraints, and the least restrictive restraints necessary shall be used. No detainee known to be pregnant shall be restrained in a face-down position with four-point restraints, on her back, or in a restraint belt that constricts the area of the pregnancy. All attempts are made to ensure that the detainee is placed on her left side if she is immobilized. | N/A    | The facility does not house female ICE detainees. |

### STANDARD 4.4. MEDICAL CARE (WOMEN) – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

**Overall Remarks:** *(Record significant facts, observations, other sources used, etc.)* (5000 Character Max)

The facility does not house female ICE detainees.

**Overall Rating:** N/A

**Reviewer Name (Printed):** [Redacted]  
**Completion Date:** 10/1/2020

**Reviewer Signature (for printed form submission):**
**STANDARD 4.5. PERSONAL HYGIENE** (Key: X)

This detention standard ensures that each detainee is able to maintain acceptable personal hygiene practices through the provision of adequate bathing facilities and the issuance and exchange of clean clothing, bedding, linens, towels, and personal hygiene items.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Each detention facility shall have a written policy and procedures for the regular issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items.</td>
<td>Meets Standard</td>
<td>Written policy and procedure address the issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items.</td>
</tr>
<tr>
<td>2. Clothing or shoes that are lost, unserviceable, indelibly stained, or bear offensive or otherwise unauthorized markings should be discarded and replaced as soon as practicable.</td>
<td>Meets Standard</td>
<td>Per policy, inappropriate clothing and shoes are discarded and replaced as soon as possible.</td>
</tr>
<tr>
<td>3. All new detainees shall be issued clean, indoor/outdoor temperature-appropriate, size appropriate, presentable clothing during in-processing at no cost to the detainee. The standard issue of clothing is at least two uniform shirts and two pairs of uniform pants or two jumpsuits; two pairs of socks; two pairs of underwear; two brassieres, as appropriate; and one pair of facility-issued footwear.</td>
<td>Meets Standard</td>
<td>Per the laundry supervisor and the detainee handbook, newly arriving detainees are issued three uniforms, three t-shirts, three boxers, three pairs of socks, three pairs of underwear, and one pair of facility-issued footwear. Detainee interviews validated this practice. The clothing is issued at no cost to the detainee.</td>
</tr>
<tr>
<td>4. Each detainee assigned to a special work area shall be clothed in accordance with the requirements of the job and, when appropriate, provided protective clothing and equipment.</td>
<td>N/A</td>
<td>ICE detainees are not assigned to special work areas.</td>
</tr>
<tr>
<td>5. Staff shall provide male and female detainees personal hygiene items appropriate for their gender, including at a minimum, one bar of bath soap (or equivalent), comb, tube of toothpaste, toothbrush, bottle of shampoo (or equivalent), container of skin lotion, and feminine hygiene items, and shall replenish supplies as needed. The distribution of hygiene items shall not be used as reward or punishment.</td>
<td>Meets Standard</td>
<td>Per the laundry supervisor and the detainee handbook, the staff provides hygiene items as required. The detainee's interview validated this practice. Hygiene items are not used as a reward or punishment. Female ICE detainees are not housed at this facility.</td>
</tr>
<tr>
<td>6. Razors must be strictly controlled. Disposable razors will be provided to detainees on a daily basis. Razors will be issued and collected daily by staff.</td>
<td>Meets Standard</td>
<td>Per policy and the detainee handbook, razors are strictly controlled. They are available daily in exchange for the detainee ID card.</td>
</tr>
<tr>
<td>7. Female detainees shall be issued and may retain feminine hygiene items as needed.</td>
<td>N/A</td>
<td>Female ICE detainees are not housed at this facility.</td>
</tr>
</tbody>
</table>
STANDARD 4.5. PERSONAL HYGIENE (Key: X)

This detention standard ensures that each detainee is able to maintain acceptable personal hygiene practices through the provision of adequate bathing facilities and the issuance and exchange of clean clothing, bedding, linens, towels, and personal hygiene items.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>8. Detainees shall be provided an adequate number of toilets 24 hours per day that can be used without staff assistance when detainees are confined to their cells or sleeping areas.</td>
<td>Meets Standard</td>
<td>There is an adequate number of toilets that can be used independently 24 hours a day.</td>
</tr>
<tr>
<td>9. An adequate number of washbasins with temperature controlled hot and cold running water 24 hours per day.</td>
<td>Meets Standard</td>
<td>There is an adequate number of sinks with hot and cold running water 24 hours a day.</td>
</tr>
<tr>
<td>10. Operable showers that are thermostatically controlled to temperatures between 100 and 120 degrees Fahrenheit, to ensure safety and promote hygienic practices.</td>
<td>Meets Standard</td>
<td>Operable showers are thermostatically controlled with temperatures within industry standards. Maintenance is responsible to measure and record water temperatures monthly.</td>
</tr>
<tr>
<td>11. Detainees with disabilities shall be provided the facilities and support needed for self-care and personal hygiene in a reasonably private environment in which the individual can maintain dignity.</td>
<td>Meets Standard</td>
<td>Per the acting HSA and as per photos, facilities and support for detainees with disabilities are available. There are no current ICE detainees with disabilities on site.</td>
</tr>
<tr>
<td>12. <strong>PRIORITY:</strong> Detainees shall be provided with clean clothing, linen and towels on the following basis:</td>
<td>Meets Standard</td>
<td>Per written policy and the laundry supervisor, the laundry exchange schedule affords the provision of clean clothing, linens, and towels as required.</td>
</tr>
<tr>
<td>• A daily change of socks and undergarments. An additional exchange of undergarments shall be made available to detainees if necessary for health or sanitation reasons.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• At least twice weekly exchange of outer garments (with a maximum of 72 hours between changes).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• At least weekly exchange of sheets, towels, and pillowcases.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• An additional exchange of bedding, linens, towels, or outer garments shall be made available to detainees if necessary for health or sanitation reasons, and more frequent exchanges of outer garments may be appropriate, especially in hot and humid climates.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

STANDARD 4.5. PERSONAL HYGIENE – Reviewer Summary

*(Use following format for dates: mm/dd/yyyy)*

**Overall Remarks:** *(Record significant facts, observations, other sources used, etc.)* (5000 Character Max)

Per the laundry supervisor, the facility maintains an excess clothing inventory of at least 200 percent of the maximum funded detainee capacity. Personal items of clothing are not permitted, except in storage. In the housing units, toilets are provided at ratios of one for every ten detainees. Washbasins are provided at ratios of one for every eight detainees. Showers are provided at ratios of one for every twelve detainees. All ratios are within ACA guidelines. The facility periodically measures and documents the water temperature.
STANDARD 4.5. PERSONAL HYGIENE – Reviewer Summary
(Use following format for dates: mm/dd/yyyy)

Detainees are provided with a reasonable private environment per safety and security needs. Assistance to disabled detainees who cannot perform basic life functions is provided by individuals who are trained and qualified to assist persons with physical and/or mental impairments. Detainees can shower, perform bodily functions, and change clothing without being viewed by staff of the opposite gender, except in exigent circumstances or when such viewing is incidental to routine cell checks or is otherwise appropriate in connection with a medical examination or monitored bowel movement. Per policy, opposite gender staff announces its presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing. When operationally feasible, transgender and intersex detainees are given the opportunity to shower separately from other detainees. In order to provide access to programs and services, the facility provides communication assistance to LEP detainees and detainees with disabilities. This may be achieved by bilingual staff, translation services, or other means for LEP detainees, or in the form of auxiliary aids for detainees with disabilities, including but not limited to those aids listed in the standard.

Bedding, linens, and towels are issued as follows: one mattress, one blanket, and one pillow, two sheets and one pillowcase, one towel, and one washcloth. Clothing exchanges are on a one-for-one basis. Per the laundry supervisor, there are no washers or dryers in the housing units.

Detainees can maintain acceptable personal hygiene through the provision of adequate and temperature appropriate bathing facilities and the exchange of clean clothing, linens, and towels. This inspection was conducted remotely. Evaluation of the standard was based on a review of policy, procedures and housing unit information, and telephone interviews with the laundry supervisor and detainees.

Overall Rating: Meets Standard
Reviewer Name (Printed): [Redacted]  Completion Date: 10/1/2020

Reviewer Signature (for printed form submission):
### STANDARD 4.6. SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION

This detention standard protects the health and well-being of ICE detainees through a comprehensive Significant Self-Harm and Suicide Prevention and Intervention Program that minimizes risk.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
</table>
| 1. **PRIORITY:** The facility has a written suicide prevention and intervention program that is reviewed and approved by the clinical health authority, approved and signed by the administrative health authority and Facility Administrator and reviewed annually. At a minimum, the Program shall include procedures to address suicidal detainees. Key components of this program include:  
  - Staff training,  
  - Identification,  
  - Referral,  
  - Evaluation,  
  - Treatment,  
  - Housing,  
  - Monitoring,  
  - Communication,  
  - Intervention,  
  - Notification and reporting,  
  - Review, and  
  - Debriefing. | Meets Standard | Per the review, the facility has written a suicide prevention and intervention program that is reviewed, approved, and signed by the clinical health authority, the OIC, and the health services administrator. All the bulleted items listed in this component are addressed in the program. There is also a multidisciplinary suicide prevention committee. |
| 2. **PRIORITY:** All facility staff who interact with and/or are responsible for detainees are trained, during orientation and at least annually on the facility’s Suicide Prevention and Intervention Program, to include:  
  - Why the environments of detention facilities are conducive to suicidal behavior,  
  - Standard first aid training, cardiopulmonary resuscitation (CPR) training and training in the use of emergency equipment,  
  - Liability issues associated with detainee suicide,  
  - Recognizing verbal and behavioral cues that indicate potential suicide,  
  - Demographic, cultural, and precipitating factors of suicidal behavior,  
  - Responding to suicidal and depressed detainees,  
  - Communication between correctional and health care personnel,  
  - Necessary referral procedures,  
  - Housing observation and suicide-watch procedures,  
  - Follow-up monitoring of detainees who have attempted suicide, and  
  - Reporting and written documentation procedures. | Meets Standard | Per training documentation, all staff are trained during orientation for eight hours and annual training for two hours on the program, which encompasses all bulleted points. |
STANDARD 4.6. SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION (Key: Y)

This detention standard protects the health and well-being of ICE detainees through a comprehensive Significant Self-Harm and Suicide Prevention and Intervention Program that minimizes risk.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. <strong>PRIORITY:</strong> Detainees who are identified as being “at risk” for significant self-harm or suicide shall immediately be referred to a mental health provider, who shall evaluate the detainee within 24 hours of the referral.</td>
<td>Meets Standard</td>
<td>Per policy, an at-risk detainee is immediately referred to a mental health provider who evaluates the detainee within 24 hours of the referral.</td>
</tr>
<tr>
<td>4. Evaluation by a mental health provider of detainees who are identified as being “at risk” for significant self-harm or suicide will be documented in the medical record and include:</td>
<td>Meets Standard</td>
<td>Per policy, the mental health evaluation is documented in the medical record and encompasses all bulleted points, as well as diagnoses and treatment plans.</td>
</tr>
<tr>
<td>• Relevant history,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Environmental factors,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Lethality of suicide plan,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Psychological factors,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• A determination of level of suicide risk,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Level of supervision needed,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Referral/transfer for inpatient care (if needed),</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Instructions to medical staff for care, and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Reassessment time frames.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Detainees who are placed on suicide watch are to be re-evaluated by appropriately trained and qualified medical staff on a daily basis and this re-evaluation is documented in the detainee’s medical record. Only the mental health professional, clinical medical authority, or designee may terminate a suicide watch after a current suicide risk assessment is completed.</td>
<td>Meets Standard</td>
<td>Per policy, detainees on suicide watch have a daily, documented re-evaluation. Only the mental health professional, CMA or designee may terminate a suicide watch after a risk assessment is completed.</td>
</tr>
<tr>
<td>6. <strong>PRIORITY:</strong> Suicidal detainees should be closely supervised in a setting that minimizes opportunities for self-harm. The isolation room designed for evaluation and treatment must be free of objects or structural elements that could facilitate a suicide attempt, and security staff shall ensure that the area for suicide observation is initially inspected so that there are no objects that pose a threat to the detainee’s safety. A suicidal detainee may be placed in the Special Management Unit only if space has been approved for this purpose by medical staff and such space allows for unobstructed observation.</td>
<td>Meets Standard</td>
<td>Suicidal detainees are isolated in a room in medical observation which has been made as suicide resistant as possible. By review of the photo, it contains a molded bed; a stainless-steel toilet and sink; two lights, a vent, a smoke detector, and a water sprinkler attached to the inaccessible ceiling. The room is initially inspected.</td>
</tr>
<tr>
<td>7. A detainee placed in a special isolation room designed for evaluation and treatment must receive continuous one-to-one monitoring, documented every 15 minutes or more frequently if necessary. Detainees not placed in an isolated confinement setting must receive documented close observation at staggered intervals not to exceed 15 minutes.</td>
<td>Meets Standard</td>
<td>By policy, suicidal detainees receive one to one continuous monitoring, with 15-minute documented checks.</td>
</tr>
</tbody>
</table>
STANDARD 4.6. SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION (Key: Y)

This detention standard protects the health and well-being of ICE detainees through a comprehensive Significant Self-Harm and Suicide Prevention and Intervention Program that minimizes risk.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>8. All detainees on suicide precautions are checked at least every 8 hours by clinical staff, and provided daily mental health treatment by a qualified clinician.</td>
<td>Meets Standard</td>
<td>By policy, suicidal detainees are checked every shift by clinical staff and provided daily mental health treatment.</td>
</tr>
<tr>
<td>9. Detainees are provided suicide smocks to wear when medically indicated, and under circumstances are held without clothing.</td>
<td>Meets Standard</td>
<td>Per policy, detainees are provided suicide resistant smocks, when indicated, and are never held without clothing.</td>
</tr>
<tr>
<td>10. Following a suicide attempt, security staff shall initiate and continue appropriate life-saving measures until relieved by arriving medical personnel.</td>
<td>Meets Standard</td>
<td>Per policy and by procedure, in the event of a suicide attempt, all available security and medical personnel initiate and continue life-saving measures.</td>
</tr>
<tr>
<td>11. In the event of a suicide attempt or a completed suicide, all appropriate ICE and IHSC officials shall be notified through the chain of command. The victim’s family and appropriate outside authorities, as appropriate, shall also be immediately notified. Medical staff shall complete an Incident Report Form within 24 hours.</td>
<td>Meets Standard</td>
<td>Per policy and the SDDO, in the event of a suicide attempt or completed suicide, the facility notifies ICE, who in turn notifies the next of kin and other interested parties. Medical personnel complete an incident report within 24 hours. There were no serious suicide attempts or completed suicides during the inspection period.</td>
</tr>
<tr>
<td>12. Every completed suicide shall be subject to a mortality review process. A critical incident debriefing shall be provided to all affected staff and detainees within 24 to 72 hours after the critical incident.</td>
<td>Meets Standard</td>
<td>As with any death, completed suicide is subject to mortality review. Critical incident debriefing is offered to staff and detainees. There were no serious suicide attempts or completed suicides during the inspection period.</td>
</tr>
</tbody>
</table>

STANDARD 4.6. SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

Per the psychiatrist, personnel are trained that the practice of "contracting for safety" is not used at the facility. When a staff member identifies someone, who is at risk of significant self-harm or suicide, the detainee is placed on suicide precautions and is immediately referred to a qualified mental health professional. Based on an evaluation, a mental health provider develops a documented treatment plan that is placed in the medical record. The treatment plan includes strategies and interventions to be followed by staff and the detainee if suicidal ideation reoccurs; strategies for improved functioning; and regular follow-up appointments based on the level of acuity.

When medical personnel determine that a detainee is at imminent risk of bodily injury, they may recommend hospitalization for purposes of evaluation and treatment. A court order is sought, if necessary. After referral for evaluation, security personnel place the detainee in a secure environment, pending transfer.
STANDARD 4.6. SIGNIFICANT SELF-HARM AND SUICIDE PREVENTION AND INTERVENTION – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Mental health professionals determine what clothing the suicidal detainee may wear including standard-issue clothing and suicide resistant smocks. Privacy accommodations shall be allowed for showering, performing bodily functions, and changing clothes, but must be implemented in a way that does not pose a safety risk for the detainee. Incidents of opposite gender coverage during a period when the inmate is undressed should be documented.

Deprivations and restrictions placed on suicidal detainees are kept to a minimum. Any detainee who is believed to require seclusion and/or restraint due to self-harming or suicidal behavior is transferred to a psychiatric facility if deemed to be medically necessary to appropriately treat the needs of the detainee. After discharge from suicide watch, detainees are reassessed by qualified medical staff members within 72 hours, and then periodically at intervals consistent with the level of acuity.

The CMA is notified when the detainee is referred to the local hospital.

In the event of a suicide attempt or completed suicide, all personnel who encountered the detainee before the incident submits statements including their knowledge of the detainee and the incident. The facility offers appropriate mental health services to other detainees who may have been affected. The multidisciplinary suicide prevention committee includes custody, mental health, and medical staff and meets quarterly and after any suicide attempt.

To provide access to programs and services, the facility provides communication assistance to LEP detainees and/or other assistance to detainees with disabilities.

There have been no serious suicide attempts or suicides at the facility since the last inspection. Therefore, this inspector is unable to ascertain if the facility is in full compliance with the standard. This inspection was conducted remotely. Evaluation of the standard was based on a review of policy, procedure, medical records, and photos; and on telephone interviews with the acting HSA, training coordinator, psychiatrist, and quality assurance manager.

Overall Rating: Meets Standard

Reviewer Name (Printed): [Redacted] Completion Date: 10/1/2020

Reviewer Signature (for printed form submission):
### STANDARD 4.7. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH (Key: Z)

This detention standard ensures that each facility’s continuum of health care services addresses terminal illness and advance directives, and provides specific guidance in the event of a detainee’s death.

**Standard N/A**

Click the above button if the facility does not accept ICE detainees who are severely or terminally ill. ALWAYS complete all references to detainee death and related notifications. (All Line Items and standard will be rated “N/A”)

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. When a detainee’s medical condition becomes life-threatening, he/she is transferred to an appropriate off-site medical or community facility, if necessary. The facility’s clinical medical authority or health services administrator immediately notifies the facility administrator and/or ICE/ERO Field Office Director (FOD) of the detainee's condition both verbally and in writing, describing the detainee’s illness and prognosis. The facility administrator or designee immediately notifies ICE/ERO and IHSC.</td>
<td>Meets Standard</td>
<td>Per policy and the acting HSA, when a detainee’s medical needs exceed the level of care available at the facility, he is transferred to a more appropriate facility. The OIC and ICE are notified, both verbally and in writing, of the detainee's condition by the HSA.</td>
</tr>
<tr>
<td>2. The FOD or designee shall immediately notify (or make reasonable efforts to notify) the detainee’s next-of-kin of the medical condition and status, the detainee's location, and the visiting hours and rules at that location, in a language or manner which they can understand.</td>
<td>Meets Standard</td>
<td>Per policy and the SDDO, when a detainee becomes seriously or terminally ill, medical personnel notify ICE of the detainee’s medical condition. ICE notifies the next of kin regarding the detainee's status, location and visiting restrictions in a comprehensible language or manner.</td>
</tr>
<tr>
<td>3. Once a detainee is diagnosed as having a terminal illness or remaining life expectancy of less than one year, medical staff offer the detainee access to forms or other related materials on Advance Directives or Living Wills. When the detainee is at an off-site facility, that facility is expected to assist the detainee in completing an Advance Directive and/or Living Will. All facilities shall use the State Advance Directive form (in which the facility is located) for implementing Living Wills and Advance Directives.</td>
<td>Meets Standard</td>
<td>Per policy and the acting HSA, the State of New Mexico advance directive and living will materials are offered to detainees. Off-site facilities are expected to assist detainees in completing an advance directive or living will.</td>
</tr>
<tr>
<td>4. When the terms of the advanced directive must be implemented the medical professional overseeing the detainee’s care will contact the appropriate ICE/ERO representative.</td>
<td>Meets Standard</td>
<td>Per the SDDO, ICE is notified as required.</td>
</tr>
<tr>
<td>5. Each facility holding detainees shall establish written policy and procedures governing DNR orders in accordance with the laws of the state in which the facility is located.</td>
<td>Meets Standard</td>
<td>Per written policy and procedures, DNR orders are written following the laws of the State of New Mexico. Per the acting HSA, there have been no DNR orders written during the inspection period.</td>
</tr>
</tbody>
</table>
# STANDARD 4.7. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH

This detention standard ensures that each facility’s continuum of health care services addresses terminal illness and advance directives, and provides specific guidance in the event of a detainee’s death.

**Standard N/A**

Click the above button if the facility does not accept ICE detainees who are severely or terminally ill. ALWAYS complete all references to detainee death and related notifications. (All Line Items and standard will be rated “N/A”)

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Health care will continue to be provided consistent with the DNR order.</td>
<td>Meets Standard</td>
<td>Per policy, health care is provided consistent with the DNR order.</td>
</tr>
<tr>
<td>7. The detainee’s medical file shall include documentation validating the DNR order.</td>
<td>Meets Standard</td>
<td>Per the acting HSA, documentation validating the DNR order is contained in the medical record.</td>
</tr>
<tr>
<td>8. The facility shall follow written procedures for notifying attending medical staff of the DNR order.</td>
<td>Meets Standard</td>
<td>Written procedures address this component. Per the acting HSA, the cover page of the computerized medical record has a red flag alert.</td>
</tr>
<tr>
<td>9. The facility has procedures to address the issues of organ donation by detainees.</td>
<td>Meets Standard</td>
<td>Written procedures address organ donation. There have been no organ donation requests during the inspection period.</td>
</tr>
<tr>
<td>10. Each facility shall have written policy and procedures that are followed to notify ICE/ERO officials, next-of-kin, and consulate officials of a detainee’s death while in custody.</td>
<td>Meets Standard</td>
<td>Per written policy and procedure and the SDDO, the facility is required to notify ICE, who in turn notifies next of kin and consulate officials of a detainee's death.</td>
</tr>
<tr>
<td>11. Within seven calendar days of the date of notification (in writing or in person), the family shall have the opportunity to claim the remains.</td>
<td>Meets Standard</td>
<td>Per the SDDO, the family has seven days from notification to claim the remains.</td>
</tr>
<tr>
<td>12. If family members cannot be located or decline orally or in writing to claim the remains, ICE/ERO shall notify the consulate.</td>
<td>Meets Standard</td>
<td>Per the SDDO, if the family does not claim the remains, the consulate is notified.</td>
</tr>
<tr>
<td>13. The facility administrator shall specify policy and procedures regarding responsibility for proper distribution of the death certificate.</td>
<td>Meets Standard</td>
<td>Per policy and the SDDO, the original death certificate is given to whoever claims the body, and a certified copy of the certificate is given to ICE for placement in the A-file. If the body is not claimed, the original is placed in the A-file.</td>
</tr>
</tbody>
</table>
**STANDARD 4.7. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH**

This detention standard ensures that each facility’s continuum of health care services addresses terminal illness and advance directives, and provides specific guidance in the event of a detainee’s death.

**Standard N/A**

Click the above button if the facility does not accept ICE detainees who are severely or terminally ill. ALWAYS complete all references to detainee death and related notifications. (All Line Items and standard will be rated “N/A”)

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>14. The facility’s written procedures for autopsies shall address, at a minimum:</td>
<td>Meets Standard</td>
<td>Policy and written procedures address the requirements of the component. The local coroner or medical examiner is notified.</td>
</tr>
<tr>
<td>- Contacting the local coroner or medical examiner, in accordance with established guidelines and applicable laws;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Scheduling the autopsy;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Identifying the person who will perform the autopsy;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Obtaining the official death certificate, and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Transporting the body to the coroner or medical examiner’s office.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

15. Medical staff shall arrange for the approved autopsy to be performed by the local coroner or medical examiner in accordance with established guidelines and applicable laws.

| | Meets Standard | Medical personnel request an autopsy following applicable guidelines and laws. |

---

**STANDARD 4.7. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH – Reviewer Summary**

*Use following format for dates: mm/dd/yyyy*

**Overall Remarks:** *(Record significant facts, observations, other sources used, etc.)* *(5000 Character Max)*

When a detainee is hospitalized, IHSC managed care and the HSA follow up daily to receive information about major developments. In conjunction with medical providers, ICE provides family members and any others as many opportunities for visitation as possible, in keeping with the safety, security, and good order of the facility.

Advance directive guidelines include having a living will other than the generic form made available by medical staff; appointing another individual to make advance decisions for the detainee; and having a private attorney prepare the document at the detainee’s expense.

DNR policy complies with the following stipulations: A DNR order written by a staff physician must be reviewed by a community medical professional; it protects basic patient rights and complies with state requirements; a decision to withhold resuscitative services is considered only under specified conditions (the detainee has a terminal illness, the detainee has requested and signed the order, the decision is consistent with sound medical practice and is not in any way associated with any measures to hasten death); the medical file includes explicit directions regarding DNR orders and forms and memoranda regarding diagnosis and prognosis, express wishes of the detainee, immediate family’s wishes, consensual decisions and recommendations of medical professionals identified by name and title, mental competency evaluation and informed consent; a detainee with a DNR order receives all therapeutic efforts short of resuscitation; and the CD or HSA notifies the IHSC medical director and the ICE Office of Chief Counsel of the basic circumstances of any detainee with a DNR order.

Procedures for organ donation include: The organ recipient is an immediate family member; no blood or blood products are donated; all costs are at the expense of the detainee; the detainee signs a statement documenting his decision to donate the organ to a specific family member; his understanding of the risks, that the decision is undertaken without coercion or duress, and that the government is not responsible for any resulting medical complications or financial obligations; medical staff assists in the preliminary medical evaluation and the facility coordinates arrangements for the donation.
### STANDARD 4.7. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Per the SDDO, the facility turns over the property of a deceased detainee to ICE within a week. ICE gives the property of deceased detainees to the next-of-kin within two weeks unless it is being held as part of an investigation.

ICE may assist the family with transporting the remains to a location in the U.S. Per the SDDO, this was done with a recent ICE detainee death. If neither family nor consulate claims the remains, ICE schedules an indigent’s burial after contacting the Department of Veterans Affairs to determine burial benefits. The chaplain does not advise the OIC about religious considerations in remains disposition nor is he involved in the formulation of autopsy procedures. ICE does not authorize cremation or donation of the remains for medical research. The original death certificate is sent to the person who claims the remains and a certified copy is placed in the A-file. While an autopsy decision is pending, no actions are taken that could affect the validity of the results. The FOD verifies and accommodates the detainee’s religious preference before autopsy or embalming.

The facility provides communication assistance to LEP detainees and detainees with disabilities. This may be achieved via bilingual staff, translation services, or other means for LEP detainees or in the form of auxiliary aids for detainees with disabilities.

There was one death at the facility since the last inspection. On 12/11/2019, a 40-year-old African male ICE detainee was admitted to the facility at 9:35 p.m. His transfer paperwork from another ICE facility mentioned no medical or mental health history. His medical intake was completed at 12:22 a.m., on 12/12/2020. He was seen by the mid-level provider at 10:47 a.m. and sent to the emergency room with abdominal pain and to rule out sepsis. He underwent surgery on 12/16/2020. He passed away on 12/29/2020. Per autopsy, the manner of death was natural with pathologic diagnoses of coccidioidomycosis, atherosclerotic cardiovascular disease, and clinical history of sigmoid volvulus.

Policy and procedure address terminal illness, advance directives, DNR orders, organ donation, death in custody, reporting requirements, and disposition of the body. This inspection was conducted remotely. Evaluation of the standard was based on a review of policy and procedure; and on telephone interviews with the acting HSA, ICE SDDO, OIC, and quality assurance manager.

**Overall Rating:** Meets Standard

<table>
<thead>
<tr>
<th>Reviewer Name (Printed)</th>
<th>Completion Date: 10/1/2020</th>
</tr>
</thead>
</table>

**Reviewer Signature (for printed form submission):**
Section V: ACTIVITIES

Correspondence and Other Mail
Escorted Trips for Non-Medical Emergencies
Marriage Requests
Recreation
Religious Practices
Telephone Access
Visitation
Voluntary Work Program
<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Each facility shall have written policy and procedures concerning detainee correspondence and other mail.</td>
<td>Meets Standard</td>
<td>Policy, written procedures, and the local handbook detail the rules and procedures governing detainee correspondence and other mail.</td>
</tr>
</tbody>
</table>
| 2. **PRIORITY:** A detainee is considered "indigent" if he or she has less than $15.00 in his or her account. Indigent detainees will be permitted to mail a reasonable amount of mail each week at government expense, as determined by the ICE/ERO, including the following:  
  - An unlimited amount of special correspondence or legal mail, within reason.  
  - At least three pieces of general correspondence.  
  - Packages as deemed necessary by ICE.  
  Each facility shall have written procedures that explain how indigent detainees can request postage at government expense. | Meets Standard | Policy states a detainee with less than $15.00 in their commissary account is considered indigent. Each week indigent detainees are permitted to mail out, at no cost, an unlimited but reasonable amount of special/legal correspondence and up to three general correspondence letters; packages/parcels are approved on a case-by-case basis, per the mailroom officer. Policy describes how a detainee can request free postage but there were no written procedures available that describe the process. |
| 3. The facility shall notify detainees of its rules on correspondence and other mail through the Detainee Handbook, or supplement, provided to each detainee upon admittance, and shall post those rules in each housing area. | Meets Standard | The rules on correspondence and other mail are included in the local handbook (English and Spanish), which detainees receive during intake. This information is also posted in the housing units. Submitted photos support the posting. |
| 4. The facility shall provide key information to detainees in languages spoken by any significant portion of the facility's detainee population. | Meets Standard |                                                                                                                                 |

**STANDARD 5.1. CORRESPONDENCE AND OTHER MAIL** *(Key: AA)*

This detention standard ensures that detainees shall be able to correspond with their families, the community, legal representatives, government offices, and consular officials consistent with the safe and orderly operation of the facility.
### STANDARD 5.1. CORRESPONDENCE AND OTHER MAIL (Key: AA)

This detention standard ensures that detainees shall be able to correspond with their families, the community, legal representatives, government offices, and consular officials consistent with the safe and orderly operation of the facility.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
</table>
| 5. **PRIORITY**: Detainee correspondence and other mail shall be delivered to the detainee and to the postal service on regular schedules.  
  - Incoming correspondence shall be distributed to detainees within 24 hours (one business day) of receipt by the facility.  
  - Outgoing correspondence shall be delivered to the postal service no later than the day after it is received by facility staff or placed by the detainee in a designated mail depository, excluding weekends and holidays. | Meets Standard | Per the mailroom officer, incoming general correspondence and other mail are delivered to the detainee within one business day of its receipt at the facility and outgoing correspondence and other mail are delivered to the U.S. postal service within one business day of it entering the facility mailroom. Excluding weekends and holidays, the mail is picked up daily from the housing units by mailroom personnel and delivered to the mailroom for out-processing. |
| 6. All facilities shall implement procedures for the inspection of all incoming general correspondence and other mail (including packages and publications) for contraband in the presence of the detainee (unless otherwise authorized by the facility administrator). | Meets Standard | All general correspondence and other mail are opened and inspected for contraband before they are delivered to the detainee. This policy and practice have been approved by OIC and it adheres to the requirements of the component and the standard. |
| 7. All facilities shall implement procedures for inspecting incoming special correspondence and legal mail for contraband in the presence of the detainee. Detainees shall sign a logbook upon receipt of special correspondence and/or legal mail to verify that the special correspondence or legal mail was opened in their presence. Incoming special correspondence and legal mail may not be read. | Meets Standard | Procedure requires that legal/special correspondence is delivered to the detainee and then opened and inspected for contraband in their presence. The detainee signs a form attesting to these actions. Submitted documentation supports the practice. Incoming legal/special correspondence is not read. |
| 8. Outgoing special correspondence and legal mail shall not be opened, inspected, or read. | Meets Standard | |
| 9. All facilities shall implement policies and procedures addressing acceptable and non-acceptable mail. | Meets Standard | |
| 10. When an officer finds an item that must be removed from a detainee’s mail, he or she shall make a written record. | Meets Standard | Any item removed from detainee correspondence and other mail is documented by the individual removing the item, per the mailroom officer. |
### STANDARD 5.1. CORRESPONDENCE AND OTHER MAIL (Key: AA)

This detention standard ensures that detainees shall be able to correspond with their families, the community, legal representatives, government offices, and consular officials consistent with the safe and orderly operation of the facility.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>11. Prohibited items discovered in the mail shall be handled as follows:</td>
<td></td>
<td>Procedures adhere to the component requirements, per the mailroom officer, ICE/ERO, and chief of unit management. Domestic currency may be credited to a detainee's account through deposit into the visitors' entrance lobby kiosk or it can be mailed in. Receipts are issued for all account transactions.</td>
</tr>
<tr>
<td>- A receipt shall be issued to the detainee for all cash, which shall be safeguarded and credited to the detainee's account in accordance with the Detention Standard on Funds and Personal Property.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>- Identity documents, such as passports, birth certificates, etc., shall be placed in the detainee's A-file. Upon request, the detainee shall be provided with a copy of the document, certified by an ICE/ERO officer to be a true and correct copy.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. The facility shall provide a postage allowance at government expense to all detainees, if the facility does not have a system for detainees to purchase stamps.</td>
<td>Meets Standard</td>
<td>The commissary sells stamps; envelopes are provided by the facility at no charge. Detainees are permitted to shop weekly.</td>
</tr>
<tr>
<td>13. The facility shall provide writing paper, envelopes, and writing implements at no cost to ICE detainees.</td>
<td>Meets Standard</td>
<td>Writing paper, envelopes and writing implements are provided to detainees at no charge, upon request to mailroom officer when delivering mail in the housing units (Monday through Friday). Those supplies are readily available for distribution from the mail cart. Submitted photos of the mail cart were evidence of the claim.</td>
</tr>
<tr>
<td>14. All facilities shall have written policy and procedures regarding mail privileges for detainees housed in a Special Management Unit.</td>
<td>Meets Standard</td>
<td>Written policy and procedures address mail privileges for detainees in administrative or disciplinary segregation status; they have the same correspondence privileges as detainees in the general population.</td>
</tr>
</tbody>
</table>

### STANDARD 5.1. CORRESPONDENCE AND OTHER MAIL – Reviewer Summary

*Use following format for dates: mm/dd/yyyy*

**Overall Remarks:** *(Record significant facts, observations, other sources used, etc.)* *(5000 Character Max)*

Communication assistance is provided when explaining correspondence and other mail rules and procedures to detainees with disabilities and/or limited English proficiency, through the use of audio/visual materials, telephone equipment, translation services, staff intervention, and/or other auxiliary aids including but not limited to those listed in the standard.

Incoming special correspondence, priority mail, overnight mail, certified mail, and deliveries from a private package service are documented. The detainee signs a form attesting to its receipt. Packages and publications are subject to certain restrictions. Detainees are not permitted to send or receive packages without prior OIC or designee approval.
<table>
<thead>
<tr>
<th>STANDARD 5.1. CORRESPONDENCE AND OTHER MAIL – Reviewer Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Outgoing general correspondence is sealed. Occasionally, general correspondence and other mail arrive in the mailroom unsealed. Upon receipt of unsealed envelopes, mailroom personnel seals them then finishes processing the material for delivery to the post office. Mail is only inspected if it is addressed to another detainee or there is reason to believe that it may present a threat to the facility or others. The quantity of correspondence a detainee may send or receive at their own expense is not limited.</strong></td>
</tr>
<tr>
<td><strong>Rejected mail is considered contraband and is handled per the Contraband standard. Both the sender and the addressee are provided a written notice of correspondence and other mail rejection; it cites justification for the action. Detainees may appeal the rejection of correspondence. Correspondence to or from the media is handled as special correspondence if it is properly identified as such. Detainees may not receive compensation or anything of value for correspondence with the media and may not act as a reporter or publish under a byline.</strong></td>
</tr>
<tr>
<td><strong>The facility assists any detainee without legal representation who requests certain services in connection with a legal matter (notary public, certified mail, etc.) if the detainee has no outside resource to assist.</strong></td>
</tr>
<tr>
<td><strong>A review of policy and local handbook content and interviews with the mailroom supervisor, the compliance manager, the chief of unit management, and detainees revealed detainees can correspond with family, the community, legal representatives, government/consular officials and the media through an established and accessible mail system.</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Overall Rating: Meets Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reviewer Name (Printed):</td>
</tr>
<tr>
<td>Completion Date: 10/1/2020</td>
</tr>
</tbody>
</table>

Reviewer Signature (for printed form submission):
### STANDARD 5.2. TRIPS FOR NON-MEDICAL EMERGENCIES (Key: AB)

This detention standard permits detainees to maintain ties with their families through emergency staff-escorted trips into the community to visit critically ill members of the immediate family or to attend their funerals.

**Standard N/A**

Click the above button if all ICE Non-Medical Emergency Escorted Trips are handled only by the ICE Field Office or Sub-Office in control of the detainee case. (All Line Items and standard will be rated “N/A”)

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
</table>
| 1. On a case-by-case basis, and with approval of the respective Field Office Director, the facility administrator may allow a detainee, under ICE/ERO staff escort:  
  - To visit a critically ill member of his or her immediate family  
  - To attend an immediate-family member’s funeral and/or wake  
  - To attend a family-related state court proceeding. | N/A    |                         |
| 2. Facility staff assist detainees in preparing requests for non-medical emergency trip requests. The Field Office Director is the approving official for all non-medical escorted trips. | N/A    |                         |
| 3. Escorts shall ensure that detainees with physical or mental disabilities are provided reasonable accommodations in accordance with security and safety concerns. | N/A    |                         |

### STANDARD 5.2. TRIPS FOR NON-MEDICAL EMERGENCIES – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

**Overall Remarks:** *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

Detainee trips for non-medical emergencies are handled by ICE/ERO personnel.

**Overall Rating:** N/A

Reviewer Name (Printed) [ ] (Print/Handwritten) Completion Date: 10/1/2020

Reviewer Signature (for printed form submission):
### STANDARD 5.3. MARRIAGE REQUESTS

This detention standard ensures that each marriage request from an ICE/ERO detainee receives a case-by-case review, based on internal guidelines for approval of such requests.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. All facilities shall have in place written policy and procedures to enable eligible ICE/ERO detainees to marry.</td>
<td>Meets Standard</td>
<td>Written policy and procedures enable a detainee to request permission to marry.</td>
</tr>
<tr>
<td>2. A detainee, or his or her legal representative, may submit the request for permission to marry to the facility administrator or Field Office Director in writing.</td>
<td>Meets Standard</td>
<td>The chaplain assists the detainee, as needed, to understand the process and the documentation that will be needed. The detainee or their legal representative may submit the information to ICE or the facility administrator, in writing. The approval of a detainee request to marry rests solely with ICE.</td>
</tr>
<tr>
<td>3. The Field Office Director or Facility Administrator considers detainee marriage requests on a case-by-case basis.</td>
<td>Meets Standard</td>
<td>Each request is considered on a case-by-case basis.</td>
</tr>
<tr>
<td>4. The facility administrator or designated Field Office staff shall notify the detainee in a timely manner of a time and place for the ceremony.</td>
<td>Meets Standard</td>
<td>Facility personnel notify detainees promptly of a time and place for the ceremony.</td>
</tr>
<tr>
<td>5. Once the marriage has taken place, the facility administrator shall forward original copies of all documentation to the detainee’s A-file and maintain copies in the facility’s detention File.</td>
<td>Meets Standard</td>
<td>ICE personnel maintain copies of all documentation regarding the marriage request, approval, and ceremony in each detainee A-file.</td>
</tr>
</tbody>
</table>

### STANDARD 5.3. MARRIAGE REQUESTS – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

**Overall Remarks:** *(Record significant facts, observations, other sources used, etc.)* *(5000 Character Max)*

Detainees are informed about marriage request procedures through the local detainee handbook. The facility provides communication assistance to detainees with disabilities and detainees who are limited in their English proficiency (LEP). The facility provides detainees with disabilities with effective communication, which includes the provision of auxiliary aids as needed. The facility provides detainees who are LEP with language assistance, including bilingual staff or professional interpretation and translation services. All written materials provided to detainees are translated into Spanish.

The approval or denial of marriage requests is solely an ICE function and determined by ICE field personnel. If denied, ICE notifies the detainee in writing of the reasons for the denial within thirty days from the date of request. Detainees may seek legal assistance throughout the marriage application process. Guidelines for denying a detainee’s marriage request include the following: the detainee is not legally eligible to be married; the detainee is not mentally competent, as determined by a qualified medical practitioner; the intended spouse has not affirmed, in writing, her intent to marry the detainee; the marriage would present a threat to the security or orderly operation of the facility, or there are compelling government interests for denying the request.

When a request is approved the detainee, his/her legal representative, or other individual acting on the detainee's behalf, makes all the marriage arrangements, including, but not limited to blood tests, obtaining a marriage license, and retaining an official to perform the marriage ceremony. There were no marriage requests submitted during the inspection period.

ICE personnel do not participate in making marriage arrangements nor serve as witnesses in the ceremony. The marriage
### STANDARD 5.3. MARRIAGE REQUESTS – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

does not interrupt nor stay any hearing, transfer to another facility or removal from the United States and transfers do not occur solely to prevent a marriage. Arrangements made are consistent with the security and orderly operation of the facility per the following stipulations: the ceremony shall take place inside the facility; all expenses relating to the marriage are paid by the detainee or person acting on the detainee’s behalf; the ceremony shall be private with no media publicity and only individuals essential for the marriage ceremony may attend.

Evaluation of this standard was based on a review of policy and documentation and interviews with ICE personnel and the chaplain.

<table>
<thead>
<tr>
<th>Overall Rating: Meets Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reviewer Name (Printed)</td>
</tr>
<tr>
<td>Completion Date: 10/1/2020</td>
</tr>
</tbody>
</table>

Reviewer Signature (for printed form submission):
## STANDARD 5.4. RECREATION (Key: AD)

This detention standard ensures that each detainee has access to recreational and exercise programs and activities, within the constraints of safety, security, and good order.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The facility provides an indoor recreation program.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>2. The facility provides an outdoor recreation program.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>3. <strong>PRIORITY:</strong> If outdoor recreation is available at the facility, each detainee shall have access for at least one hour daily, at a reasonable time of day, weather permitting. Detainees shall have access to clothing appropriate for weather conditions. If only indoor recreation is available, detainees shall have access for at least one hour each day to a large recreation room with exercise equipment and access to natural sunlight. All detainees participating in outdoor recreation shall have access to drinking water and toilet facilities.</td>
<td>Meets Standard</td>
<td>Detainees have daily access to outdoor recreation at a reasonable time of day, weather permitting, for two hours. All recreation areas have access to drinking water and toilet facilities. Detainees are provided appropriate clothing for existing weather conditions.</td>
</tr>
<tr>
<td>4. If a detainee is housed for more than 10 days in a facility that provides neither indoor nor outdoor recreation, he or she may be eligible for a voluntary transfer to a facility that does provide recreation. Likewise, if a detainee is housed for more than three months in a facility that provides only indoor recreation, he or she may be eligible for a voluntary transfer to a facility that also provides outdoor recreation.</td>
<td>N/A</td>
<td>Indoor and outdoor recreation are provided.</td>
</tr>
<tr>
<td>5. <strong>PRIORITY:</strong> All facilities shall have an individual responsible for the development and oversight of the recreation program. Every facility with a rated capacity of 350 or more detainees shall employ a full-time recreation specialist with special training in implementing and overseeing a recreation program, who assesses the needs and interests of the detainees.</td>
<td>N/A</td>
<td>An acting recreation specialist is responsible for the development and oversight of the recreation program. The detainee count at the time of the inspection was less than 350 detainees.</td>
</tr>
<tr>
<td>6. All facilities shall provide recreational opportunities for detainees with disabilities.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>7. Exercise areas shall offer a variety of equipment. Weight training, if offered, must be limited to fixed equipment. Free weights are prohibited.</td>
<td>Meets Standard</td>
<td>Basketball, soccer, and stationary weight training equipment is available on the recreation yards. Free weights are not allowed.</td>
</tr>
<tr>
<td>8. Cardiovascular exercise shall be available to detainees for whom outdoor recreation is unavailable.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>9. <strong>PRIORITY:</strong> Dayrooms in general population housing units shall offer board games, television, and other sedentary activities. Detention personnel shall supervise dayroom activities, distributing games and other recreation materials daily.</td>
<td>Meets Standard</td>
<td>Board games, television, and other sedentary activities are available to detainees in the day rooms of the general housing units. Officers supervise dayroom activities. Photos of table games, television, and other recreation materials were provided for review.</td>
</tr>
</tbody>
</table>
**STANDARD 5.4. RECREATION** (Key: AD)

This detention standard ensures that each detainee has access to recreational and exercise programs and activities, within the constraints of safety, security, and good order.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>10. Recreational activities shall be based on the facility’s size and location. With the facility administrator’s approval, recreational activities may include limited-contact sports, such as soccer, basketball, volleyball, and table games, and may extend to intramural competitions among units.</td>
<td>Meets Standard</td>
<td>Recreational activities include basketball and soccer tournaments. All outdoor recreation is supervised by officers equipped with radios.</td>
</tr>
<tr>
<td>11. Recreation areas shall be under continuous supervision by staff equipped with radios or other communication devices to maintain contact with the Control Center.</td>
<td>Meets Standard</td>
<td>All outdoor recreation is supervised by officers equipped with radios.</td>
</tr>
<tr>
<td>12. <strong>PRIORITY:</strong> Recreation for detainees housed in the SMU shall be separate from the general population. Detainees in the SMU for administrative reasons shall be offered at least one hour of exercise opportunities per day, seven days a week, outside their cells, and outdoors when practicable, and scheduled at a reasonable time. Detainees in the SMU for disciplinary reasons shall be offered at least one hour of recreation per day, five days per week, outside their cells, and outdoors when practicable, and scheduled at a reasonable time. Where cover is not provided to mitigate inclement weather, detainees shall be provided weather-appropriate equipment and attire.</td>
<td>Meets Standard</td>
<td>The outdoor recreation areas for detainees housed in the restricted housing unit (RHU) are partially covered to mitigate inclement weather. Additional clothing is provided for cooler weather. Detainees housed in the RHU for administrative and/or disciplinary reasons are provided outdoor recreation at least two hours a day, seven days a week, weather permitting. The RHU recreation areas are separate from the general population recreation areas.</td>
</tr>
<tr>
<td>13. Each detainee in a Special Management Unit (SMU) shall be offered access to exercise opportunities and equipment outside the living area and outdoors, when practicable, unless documented security, safety or medical considerations dictate otherwise.</td>
<td>Meets Standard</td>
<td>If a detainee is denied recreation a written report is forwarded to the warden and ICE. This denial is reviewed by supervisory personnel daily. There were no instances of a detainee in the RHU being denied recreation.</td>
</tr>
<tr>
<td>14. When a detainee in an SMU is deprived of recreation (or any usual authorized items or activity), a written report of the action is forwarded to the facility administrator. Denial of recreation must be evaluated daily by a shift supervisor.</td>
<td>Meets Standard</td>
<td>Policy mirrors the requirements of this component. There were no instances of a detainee in the RU being denied recreation.</td>
</tr>
<tr>
<td>15. When recreation privileges are suspended, the disciplinary panel or facility administrator shall provide the detainee written notification, documentation of the reason for the suspension, any conditions that must be met before restoration of privileges, and the duration of the suspension provided the requisite conditions are met for its restoration.</td>
<td>Meets Standard</td>
<td>Policy mirrors the requirements of this component. There were no instances of a detainee in the RHU being denied recreation.</td>
</tr>
</tbody>
</table>
# STANDARD 5.4. RECREATION (Key: AD)

This detention standard ensures that each detainee has access to recreational and exercise programs and activities, within the constraints of safety, security, and good order.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>16. The case of a detainee denied recreation privileges shall be reviewed at least once each week as part of the reviews required for all detainees in SMU status.</td>
<td>Meets Standard</td>
<td>Policy states should a detainee be denied recreation privileges for more than seven days, the concurrence of the warden and a health care professional would be required. There were no instances of a detainee in the RHU being denied recreation.</td>
</tr>
<tr>
<td>17. Denial of recreation privileges for more than 7 days requires the concurrence of the facility administrator and a health care professional.</td>
<td>Meets Standard</td>
<td>Policy states should a detainee be denied recreation privileges for more than seven days, the concurrence of the warden and a health care professional would be required. There were no instances of a detainee in the RHU being denied recreation.</td>
</tr>
<tr>
<td>18. The facility shall notify the ICE/ERO Field Office in writing when a detainee’s denied recreation privileges exceeds 7 days.</td>
<td>Meets Standard</td>
<td></td>
</tr>
</tbody>
</table>

## STANDARD 5.4. RECREATION – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

**Overall Remarks:** *(Record significant facts, observations, other sources used, etc.) *(5000 Character Max)*

Detainees have access to recreational and exercise programs and activities within the constraints of the safe, secure, and orderly operation of the facility. Detainees are provided access to indoor and outdoor recreation, with all recreation being under constant staff supervision. Recreational activities are supervised by officers who ensure the program is operated in an orderly, safe, and secure manner. Detainees are not required to forgo basic law library privileges for recreation privileges. Officers search the recreation areas before and after each use to detect altered or damaged equipment, hidden contraband, and security breaches. All recreational issued equipment is checked for damage and general condition by officers. Searches of detainees moving from locked areas are conducted per the standard.

Based on a review of documentation, policy, and photographs provided by the facility and telephone interviews with the acting recreation specialist and the chief of security, the facility appears to provide safe and secure recreational activities to the detainees.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed) (D)/(Y)/(C) Completion Date: 10/1/2020**

**Reviewer Signature (for printed form submission):**
## STANDARD 5.5. RELIGIOUS PRACTICES
(Key: AE)

This detention standard ensures that detainees of different religious beliefs are provided reasonable and equitable opportunities to participate in the practices of their respective faiths, constrained only by concerns about safety, security, and the orderly operation of the facility.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>PRIORITY:</strong> Detainees have opportunities to engage in practices of their religious faiths (including observance of important holy days, observance of special diets, and use of personal religious property) consistent with safety, security, and the orderly operation of the facility. Attendance at all religious activities is voluntary.</td>
<td>Meets Standard</td>
<td>Under normal circumstances, religious activities are open to the entire detainee population. The facility strives to provide opportunities for religious services and programming in the most common languages spoken by detainees. Currently, due to the state’s response to the COVID-19 pandemic, religious services have been limited to the chaplain making daily rounds in all areas of the facility to include the special management unit (SMU). The chaplain maintains the facility’s common fare program, facilitates the observance of important religious holy days and verifies the distribution of religious materials and articles of faith; such as Bibles, Korans, and prayer beads. Attendance at religious functions is voluntary.</td>
</tr>
<tr>
<td>2. Efforts shall be made to allow for religious practice in a manner that does not adversely affect detainees not participating in the practice. Detainees cannot be required to participate in or attend a religious activity in order to receive a service of the facility or participate in other, nonreligious activities.</td>
<td>Meets Standard</td>
<td>Religious programming is scheduled in a manner that does not adversely affect detainees who are not participating in the program. Detainees are not required to participate in or attend any religious activity to receive a service of the facility.</td>
</tr>
</tbody>
</table>
### STANDARD 5.5. RELIGIOUS PRACTICES (Key: AE)

This detention standard ensures that detainees of different religious beliefs are provided reasonable and equitable opportunities to participate in the practices of their respective faiths, constrained only by concerns about safety, security, and the orderly operation of the facility.

<table>
<thead>
<tr>
<th>Component</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Religious activities shall be open to the entire detainee population, without discrimination based on a detainee’s race, ethnicity, religion, national origin, gender, sexual orientation, or disability. Accommodations will be provided to residents who have limited English proficiency, or who are deaf or hard of hearing, to ensure their access to services should they wish to participate.</td>
<td>Meets Standard</td>
<td>Under normal circumstances, religious activities are open to the entire detainee population. The facility strives to provide opportunities for religious services and programming in the most common languages spoken by detainees. Currently, due to the state's response to the COVID-19 pandemic, religious services have been limited. Additional accommodations are provided to detainees with special communication needs to allow the detainee access to religious services should they wish to participate.</td>
</tr>
<tr>
<td>4. Facility records shall reflect the limitation or discontinuance of a religious practice along with the reason for such limitation or discontinuance.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>5. <strong>PRIORITY</strong>: A facility religious services coordinator manages and coordinates religious activities for detainees, which are augmented and enhanced by community clergy, contractors, volunteers, and groups that provide individual and group assembly religious services and counseling that the facility religious services coordinator cannot personally deliver.</td>
<td>Meets Standard</td>
<td>Religious services are managed and coordinated by the chaplain. They are normally augmented and enhanced by community volunteers; however, due to current enhanced health and safety guidelines, volunteers are not allowed in the facility. All religious volunteers must complete a background check and provide a letter of good standing from the religious group they represent. Before the enhanced health and safety enhancements, 21 religious volunteers were approved to provide services.</td>
</tr>
<tr>
<td>6. The chaplain or other religious coordinator shall have physical access to all areas of the facility to serve detainees.</td>
<td>Meets Standard</td>
<td>The chaplain has access to all areas of the facility.</td>
</tr>
<tr>
<td>7. All facilities shall designate adequate space for religious activities that is sufficient to accommodate the needs of all religious groups in the detainee population fairly and equitably.</td>
<td>Meets Standard</td>
<td></td>
</tr>
</tbody>
</table>
## STANDARD 5.5. RELIGIOUS PRACTICES (Key: AF)

This detention standard ensures that detainees of different religious beliefs are provided reasonable and equitable opportunities to participate in the practices of their respective faiths, constrained only by concerns about safety, security, and the orderly operation of the facility.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>8. The chaplain or religious services coordinator shall not ordinarily</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>schedule religious services to conflict with meal times.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. When recruiting citizen volunteers, the chaplain or religious services</td>
<td>Meets Standard</td>
<td>Prior to the enhanced health and safety requirements, the chaplain could facilitate arrangements for pastoral visits by clergy or a representative of the detainees’ faith. This process will be available when the facility is re-opened to approved visitors.</td>
</tr>
<tr>
<td>services coordinator and other staff shall be cognizant of the need for</td>
<td></td>
<td></td>
</tr>
<tr>
<td>representation from all cultural and socioeconomic parts of the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>community.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Detainees who are members of faiths not represented by clergy may</td>
<td>Meets Standard</td>
<td>Detainees may request the introduction of new or unfamiliar religious components to the religious services program. The chaplain may ask the detainee to provide additional information regarding their request. Upon completing the review, the chaplain will make recommendations to the warden regarding the appropriateness of the request. The chaplain and warden’s recommendations will be reviewed by ICE. The chaplain will communicate the decision to the detainee. Decisions regarding the expansion of the religious services program are made considering the facility maintaining a safe, secure and orderly operation and the availability of staff for appropriate supervision.</td>
</tr>
<tr>
<td>conduct their own services, provided they do not interfere with facility</td>
<td></td>
<td></td>
</tr>
<tr>
<td>operations.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. If requested by a detainee, the chaplain or religious services</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>coordinator or designee shall facilitate arrangements for pastoral visits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>by a clergyperson or representative of the detainee’s faith.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Detainees may make a request for the introduction of a new component</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>to the Religious Services program (e.g. schedule, meeting time and space,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>religious items and attire) to the chaplain. The chaplain or religious</td>
<td></td>
<td></td>
</tr>
<tr>
<td>services coordinator may ask the detainee to provide additional</td>
<td></td>
<td></td>
</tr>
<tr>
<td>information to use in deciding whether to include the practice.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## STANDARD 5.5. RELIGIOUS PRACTICES (Key: AE)

This detention standard ensures that detainees of different religious beliefs are provided reasonable and equitable opportunities to participate in the practices of their respective faiths, constrained only by concerns about safety, security, and the orderly operation of the facility.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>13. Each facility shall have written policy and procedures to facilitate detainee observance of important holy days, consistent with maintaining safety, security and orderly operations, and the chaplain shall work with detainees to accommodate proper observances.</td>
<td>Meets Standard</td>
<td>Policy and procedures address the facilitation of the observance of important holy days. The chaplain welcomes the input of detainees to accommodate proper observances.</td>
</tr>
<tr>
<td>14. Each facility administrator shall allow detainees access to personal religious property, both during religious services and throughout the facility, as is consistent with safety, security and orderly operation of the facility.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>15. When a detainee’s religion requires special food services, daily or during certain holy days or periods that involve fasting, restricted diets, etc., staff shall make all reasonable efforts to accommodate those requirements (for example, modifying the detainee’s menus to exclude certain foods or food combinations, or providing the detainee’s meals at unusual hours).</td>
<td>Meets Standard</td>
<td>Written policy and procedure provide guidelines for the facilitation of the observance of important religious holy days that involve special fasts, dietary regulations, worship, or work proscription. Accommodations are made for recognized holy day observances by providing special meals, honoring fasting requirements, facilitating religious services and allowing activity restrictions. The warden may request the chaplain to consult with community representatives of a detainee’s faith group and/or other appropriate sources to verify the religious significance of the requested observance.</td>
</tr>
<tr>
<td>16. The chaplain or religious services coordinator shall develop the religious fast schedule for the calendar year and provide it to the facility administrator or designee.</td>
<td>Meets Standard</td>
<td></td>
</tr>
</tbody>
</table>

### STANDARD 5.5. RELIGIOUS PRACTICES – Reviewer Summary

*Use following format for dates: mm/dd/yyyy*

**Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)**

The religious program provides detainees the opportunity to participate in their respective religious faith. Religious programming is directed by the chaplain and supported by community volunteers when enhanced health and safety requirements due to COVID-19 are not in place. The volunteers are recruited to represent the cultural makeup of the community. During this inspection period, before COVID-19, 21 religious volunteers were approved to participate in religious programming. The program recognizes holy days and offers special meals specific to those holidays. Per policy, the facility does not disparage the religious beliefs of a detainee, nor coerce or harass a detainee to change religious affiliation. ICE does not require a detainee to profess a religious belief. Detainees can designate any or no religious preference during in processing. With a written request to the chaplain, a detainee can request to change his/her designation at any time, and the
STANDARD 5.5. RELIGIOUS PRACTICES – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

change will be affected in a timely fashion. In the interest of maintaining the security of the facility and to prevent abuse or disrespect by detainees of religious practices or observances, changes in declarations of religious preferences are monitored. When a determination of a request to allow a detainee to participate in specific religious activities is under consideration, the information contained both on the initial classification and the detainee’s religious designation is considered.

Detainees showing "No Preference" can be restricted from participation in those activities deemed appropriate for members only. During the booking process, an intake officer enters the religious designation. When a request for a change of religious preference is approved, the classification officer is responsible for making the necessary change in the detention file.

The facility provides communication assistance to detainees with disabilities and detainees who are limited in their English proficiency (LEP). The facility provides detainees with disabilities with effective communication, which may include the provision of auxiliary aids, such as readers, telecommunications devices for deaf persons (TTYS), and interpreters, as needed. The facility provides detainees who are LEP with language assistance, including bilingual staff or professional interpretation and translation services.

The evaluation of this standard was based on a review of policy and interviews with the chaplain and the chief of security.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** 

**Completion Date:** 10/1/2020

**Reviewer Signature (for printed form submission):**
### STANDARD 5.6. TELEPHONE ACCESS (Key: AF)

This detention standard ensures that detainees may maintain ties with their families and others in the community, legal representatives, consulates, courts, and government agencies, by providing them reasonable and equitable access to telephone services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. To ensure sufficient access, each facility shall provide at least one operable telephone for every 25 detainees.</td>
<td>Meets Standard</td>
<td>Per the chief of unit management, each housing unit meets the required telephone to detainee ratio.</td>
</tr>
<tr>
<td>2. <strong>PRIORITY:</strong> Each facility shall ensure that detainees have access to reasonably priced telephone services. Contracts for such services shall comply with all applicable state and federal regulations and be based on rates and surcharges commensurate with those charged to the general public. Any variations shall reflect actual costs associated with the provision of services in a detention setting.</td>
<td>Meets Standard</td>
<td>Talton Communications (telephone contractor) has posted a rate schedule in each housing unit. Submitted photos confirmed the posting. There are no connection fees. The rates are compatible with prevailing general public rates. The Talton contract, awarded by ICE, adheres to all applicable state and federal regulations, per the OIC, and his understanding of procurement procedures.</td>
</tr>
<tr>
<td>3. Each facility shall maintain detainee telephones in proper working order. Designated facility staff shall inspect the telephones daily, promptly report out-of-order telephones to the repair service and ensure that required repairs are completed quickly. Facility staff shall notify detainees and the ICE/ERO free legal service providers of procedures for reporting problems with telephones.</td>
<td>Meets Standard</td>
<td>Telephones are checked daily by housing unit officers, per their post order duties and at least weekly by touring ICE/ERO, to ensure they remain in good working order. Out of order concerns are promptly reported to Talton for corrective action by the supervisor who was initially informed of the problem. That individual is responsible for monitoring the progress of the repair order. Procedures for reporting telephone problems are described to detainees and the ICE/ERO free legal service providers, per the intake officer.</td>
</tr>
<tr>
<td>4. Facility staff is responsible for ensuring on a daily basis that telephone systems are operational and that the free telephone number list is posted. Any problems identified must immediately be logged and reported to the appropriate facility and ICE staff personnel.</td>
<td>Meets Standard</td>
<td>Housing unit officers check detainee telephones daily to ensure they are in good working order, as part of their post order duties. Problems identified are promptly communicated to chain-of-command supervisors who generate a repair order; they are responsible for monitoring its successful outcome.</td>
</tr>
<tr>
<td>Components</td>
<td>Rating</td>
<td>Remarks (1000 Char Max)</td>
</tr>
<tr>
<td>------------</td>
<td>--------</td>
<td>-------------------------</td>
</tr>
<tr>
<td>5. Each facility shall have a written policy on the monitoring of detainee telephone calls. If telephone calls are monitored, the facility shall include a recorded message on its phone system stating that all telephone calls are subject to monitoring. At each monitored telephone, place a notice that states that detainee calls are subject to monitoring. A detainee’s call to a court, a legal representative, OIG, or CRCL, or for the purposes of obtaining legal representation, may not be electronically monitored.</td>
<td>Meets Standard</td>
<td>Policy addresses telephone call monitoring. Detainees are informed of this control through the local handbook, which detainees receive during intake, a posting in their housing unit and by an audio broadcast played through the receiver prior to each call connection. Monitoring does not occur on telephone calls to the entities listed in the component, per the shift supervisor (designated detainee telephone supervisor). Submitted photos support the postings.</td>
</tr>
<tr>
<td>6. Each facility shall provide telephone access rules in writing to each detainee upon admission, and shall post these rules and telephone access hours where detainees may easily see them, in Spanish and other languages spoken by significant segments of the limited English proficient population where practicable. Updated telephone and consulate lists, along with a list of card and calling rates, shall be posted in the detainee housing units. Translation and interpretation services shall be provided as needed.</td>
<td>Meets Standard</td>
<td>Telephone access rules and access hours are described in the local handbook, which detainees receive during intake, and they are posted in the housing units (English and Spanish). Updated telephone and consulate lists and telephone calling rates are posted in the housing units. Submitted photos confirmed the postings. Translation and interpretive services are provided using a language line or attendant services.</td>
</tr>
<tr>
<td>7. Each facility administrator shall establish and oversee rules and procedures that provide detainees reasonable and equitable access to telephones during established facility “waking hours.”</td>
<td>Meets Standard</td>
<td>The OIC has determined that detainees have access to telephones in the housing units from 4:00 a.m. to 10:00 p.m. daily, except during announced times. Extended telephone access hours may be applied during weekends/holidays, at the discretion of shift supervisor.</td>
</tr>
<tr>
<td>8. Detainees are afforded a reasonable degree of privacy for legal phone calls.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>9. A procedure exists to assist a detainee who is having trouble placing a confidential call.</td>
<td>Meets Standard</td>
<td></td>
</tr>
</tbody>
</table>
### STANDARD 5.6. TELEPHONE ACCESS (Key: AF)

This detention standard ensures that detainees may maintain ties with their families and others in the community, legal representatives, consulates, courts, and government agencies, by providing them reasonable and equitable access to telephone services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>10. The facility provides the detainees with the ability to make non-collect (special access) calls, as well as international calls.</td>
<td>Meets Standard</td>
<td>Special access telephone numbers are programmed into the detainees' telephone system, per the shift supervisor. International calls may be placed on housing unit telephones.</td>
</tr>
<tr>
<td>11. Even if telephone service is generally limited to collect calls, each facility shall permit detainees to make direct or free calls to the offices and individuals required by the standard. Updated lists need to be posted in the detainee housing units.</td>
<td>Meets Standard</td>
<td>When a detainee makes a direct or free telephone call it will be completed from the privacy of a designated office telephone, if requested and if possible. ICE/ERO provides current pro bono contact information for facility staff to post in the housing units.</td>
</tr>
<tr>
<td>12. If detainees are required to complete request forms to make direct or free calls, facility staff must assist them as needed, especially illiterate or non-English speaking detainees.</td>
<td>Meets Standard</td>
<td>Detainees are not required to complete a request form to make a direct/free telephone call.</td>
</tr>
<tr>
<td>13. <strong>PRIORITY:</strong> All detainees are able to call their consulate, the DHS Office of the Inspector General, the ICE/OPR Joint Intake Center, and any organization on the ICE/ERO-provided list of free legal service providers at no charge to the detainee or receiving party. The FOD will ensure that all information is kept current and provided to each facility. Updated contact lists are posted in the detainee housing units. Indigent detainees are afforded the same telephone access and privileges as detainees in the general population. The indigent detainee may also request a free call to immediate family or others in personal or family emergencies or for a compelling need (to be interpreted liberally).</td>
<td>Meets Standard</td>
<td>Detainees are permitted to call all the parties referred to in the component at no cost to them or the receiving party, per the shift supervisor. ICE/ERO ensures all contact information for these parties, which is posted in the housing units, is provided to facility staff for their posting. Indigent detainees receive the same telephone privileges as non-indigent detainees. During COVID-19 conditions, the telephone contractor is providing each detainee thirteen, ten-minute telephone calls each month, at no charge.</td>
</tr>
<tr>
<td>14. A facility may neither restrict the number of calls a detainee places to his/her legal representatives nor limit the duration of such calls by rule or automatic cut-off, unless necessary for security purposes or to maintain orderly and fair access to telephones.</td>
<td>Meets Standard</td>
<td>Detainees' telephone calls to their legal representatives are unrestricted in frequency and duration.</td>
</tr>
</tbody>
</table>
**STANDARD 5.6. TELEPHONE ACCESS** (Key: AF)

This detention standard ensures that detainees may maintain ties with their families and others in the community, legal representatives, consulates, courts, and government agencies, by providing them reasonable and equitable access to telephone services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>15. The facility has a system for taking and delivering emergency detainee telephone messages.</td>
<td>Meets Standard</td>
<td>Detainee telephone messages can be left electronically on a voice mail/message system or they can be phoned in and left with the shift supervisor, who is responsible for their prompt delivery.</td>
</tr>
<tr>
<td>16. The facility shall take and deliver telephone messages to detainees as promptly as possible. When facility staff receive an emergency telephone call for a detainee, the caller’s name and telephone number will be obtained and promptly given to the detainee. The detainee shall be permitted to promptly return the emergency call at their own cost within the constraints of security and safety. The facility shall enable indigent detainees to make a free return emergency call.</td>
<td>Meets Standard</td>
<td>The facility adheres to all component requirements.</td>
</tr>
<tr>
<td>17. The facility shall provide a TTY device or Accessible Telephone (telephones equipped with volume control and telephones that are hearing-aid compatible for detainees who are deaf or hard of hearing). Detainees who are hard of hearing will be provided access to the TTY on the same terms as hearing detainees. Accommodations shall also be made for detainees with speech disabilities.</td>
<td>Meets Standard</td>
<td>The facility has two TDD devices available for detainee use. Detainees with speech, communication, and/or other disabilities are provided attendant services and/or special equipment to assist in the completion of their telephone calls.</td>
</tr>
<tr>
<td>18. Even where telephone access is reasonably restricted for detainees in Special Management Units, detainees and their legal counsel shall nevertheless be accommodated in order for them to be able to communicate effectively with each other. Telephone access for legal calls, courts, government offices (including the DHS OIG and the DHS JIC) and embassies or consulates shall not be denied.</td>
<td>Meets Standard</td>
<td>Special management unit (SMU) detainees' telephone calls to legal representatives, courts, government offices, DHS OIG, and JIC, embassies, and/or consulates are unrestricted in frequency and duration, per the shift supervisor.</td>
</tr>
<tr>
<td>19. Detainees in Disciplinary Segregation may be restricted from using telephones to make general calls as part of the disciplinary process. Even in Disciplinary Segregation, however, detainees shall have some access for special purposes.</td>
<td>Meets Standard</td>
<td>Disciplinary segregation status detainees may have their general calls restricted pending behavioral concerns. However, they will have open access to make special direct/access telephone calls, per the shift supervisor.</td>
</tr>
<tr>
<td>Components</td>
<td>Rating</td>
<td>Remarks</td>
</tr>
<tr>
<td>---------------------------------------------------------------------------</td>
<td>------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>20. Generally, detainees in administrative segregation should receive</td>
<td>Meets</td>
<td>Administrative segregation status detainees have the same telephone privileges as general population detainees, unless documented safety and security concerns prevail, per the shift supervisor.</td>
</tr>
<tr>
<td>the same telephone privileges that are available to detainees in the</td>
<td>Standard</td>
<td></td>
</tr>
<tr>
<td>general population, subject to any safety and security considerations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>that may exist.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Upon a detainee’s request, facility staff shall make special</td>
<td>Meets</td>
<td>Detainees are permitted to place a telephone call to an immediate family member detained in another facility if approved by ICE/ERO.</td>
</tr>
<tr>
<td>arrangements to permit the detainee to speak by telephone with an</td>
<td>Standard</td>
<td></td>
</tr>
<tr>
<td>immediate family member detained in another facility.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22. <strong>LYON AGREEMENT:</strong> When a detainee requests a direct or free Legal</td>
<td>Meets</td>
<td>Detainee telephone call requests for direct or free legal telephone calls are ordinarily granted within eight waking hours but always within 24 hours, per the shift supervisor. If delays beyond that timeline occur, documentation will cite reasons for the delay.</td>
</tr>
<tr>
<td>Call to an attorney, court, or government agency or demonstrates a</td>
<td>Standard</td>
<td></td>
</tr>
<tr>
<td>compelling need for other direct or free calls, access is granted within</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24 hours of the request and ordinarily within 8 facility waking hours.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Further delays may be justified by extraordinary circumstances.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. <strong>LYON AGREEMENT:</strong> The facility documents and reports to ICE/ERO any</td>
<td>Meets</td>
<td></td>
</tr>
<tr>
<td>delays in responding to requests for free or direct Legal Calls beyond 8</td>
<td>Standard</td>
<td></td>
</tr>
<tr>
<td>facility waking hours.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24. <strong>LYON AGREEMENT:</strong> Detainees are provided private settings for Legal</td>
<td>Meets</td>
<td></td>
</tr>
<tr>
<td>Calls such that calls cannot be overheard by officers, other staff, or</td>
<td>Standard</td>
<td></td>
</tr>
<tr>
<td>other detainees.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25. <strong>LYON AGREEMENT:</strong> The facility has a system for taking and</td>
<td>Meets</td>
<td>All detainee telephone messages are recorded on a voice mail/message system or they are taken and delivered by staff promptly. It is dependent on the detainee to periodically check the phone system for their messages. Emergency messages taken by the shift supervisor are promptly and personally delivered to the detainee, per the shift supervisor.</td>
</tr>
<tr>
<td>delivering telephone messages to detainees, including but not limited to</td>
<td>Standard</td>
<td></td>
</tr>
<tr>
<td>attorney messages, other messages related to a detainee’s legal case,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>and emergency messages, and ensures the timeliness of such message</td>
<td></td>
<td></td>
</tr>
<tr>
<td>delivery.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26. <strong>LYON AGREEMENT:</strong> The facility provides translation and</td>
<td>Meets</td>
<td>Detainees who are unable to comprehend telephone access rules, as posted or instructed, will be provided with an attendant and/or the resources to enable their completion of the task.</td>
</tr>
<tr>
<td>interpretation services to detainees who are unable to read written</td>
<td>Standard</td>
<td></td>
</tr>
<tr>
<td>telephone access rules in the languages provided.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
STANDARD 5.6. TELEPHONE ACCESS (Key: AF)

This detention standard ensures that detainees may maintain ties with their families and others in the community, legal representatives, consulates, courts, and government agencies, by providing them reasonable and equitable access to telephone services.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>27. <strong>LYON AGREEMENT:</strong> Detainees in segregation or other environments with limited physical access to telephones have reasonable and equitable access to telephones during waking hours (i.e., they can request telephone calls and receive them in a timely manner).</td>
<td>Meets Standard</td>
<td>Portable telephone pedestals are available for detainee use throughout the facility, per the shift supervisor.</td>
</tr>
</tbody>
</table>

STANDARD 5.6. TELEPHONE ACCESS – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

**Overall Remarks:** *(Record significant facts, observations, other sources used, etc.)* (5000 Character Max)

The facility permits detainees to make direct calls to the local immigration court and the Board of Immigration Appeals; Federal and State courts where the detainee is or may become involved in a legal proceeding; to consular officials; to legal service providers, in pursuit of legal representation or to engage in consultation concerning their expedited removal case; to a government office, to obtain documents relevant to his immigration case; address a personal or family emergency; or when the detainee can otherwise demonstrate a compelling need.

Current contact information for pro bono legal services and consulates is posted in the housing units. Telephone privileges may be suspended entirely during an emergency, but only with the authorization of command staff, and then only for the briefest period necessary under the circumstances.

To provide access to programs and services, the facility provides communication assistance to LEP detainees and detainees with disabilities. This may be achieved via bilingual staff, translation services, or other means for LEP detainees; or in the form of auxiliary aids for detainees with disabilities, including but not limited to those aids listed in the Standard. All detainees are screened upon intake or as otherwise required by the standard. Decisions regarding detainees with disabilities, LEP detainees, and/or detainees included under any SAAPI/DHS PREA protection or category, are made only after consideration of the disability, language difficulty, or SAAPI/PREA condition. The facility is managed in such a manner as to protect detainees from sexual assault or abuse.

A review of policy, handbook content, posted telephone access rules/hours, and monitoring notices and interviews with the shift supervisor, compliance manager, and the OIC revealed detainees can maintain ties with families and others in the community through reasonable and equitable access to telephone services.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):**  
**Completion Date:** 10/1/2020

**Reviewer Signature (for printed form submission):**
### STANDARD 5.7. VISITATION (Key: AG)

This detention standard ensures that detainees shall be able to maintain morale and ties through visitation with their families, the community, legal representatives, and consular officials, within the constraints of safety, security, and good order of the facility.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. There is a written visitation procedure, schedule, and hours for general visitation.</td>
<td>Meets Standard</td>
<td>Written visitation procedures, schedules, and hours for general visitation are posted in the housing units, in the visitors' entrance lobby, and on the facility website. The website visiting information; however, is not indicative of current COVID-19 conditions and practices.</td>
</tr>
<tr>
<td>2. Each facility administrator shall decide whether to permit contact visits, as is appropriate for the facility's physical plant and detainee population.</td>
<td>Meets Standard</td>
<td>The OIC has selected on-site contact visits and video-visits as the select formats for all visits. During COVID-19 conditions; however, on-site visits are prohibited, except for attorney visits. If and attorney visit is requested on-site visit, special mandatory protocols are implemented governing entry procedures and behaviors throughout the visit. The visits require OIC or designee approval. Attorney visits may be contact or non-contact.</td>
</tr>
<tr>
<td>3. A facility administrator may temporarily restrict visiting when necessary to ensure the security and good order of the facility. Each restriction or denial of visits shall be documented in writing, including the duration of and reasons for the restriction.</td>
<td>Meets Standard</td>
<td>The OIC may impose visiting restrictions for cause. No such action occurred during this inspection period.</td>
</tr>
</tbody>
</table>
**STANDARD 5.7. VISITATION** *(Key: AG)*

This detention standard ensures that detainees shall be able to maintain morale and ties through visitation with their families, the community, legal representatives, and consular officials, within the constraints of safety, security, and good order of the facility.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Each facility shall:</td>
<td></td>
<td>The visitation schedule and procedures are posted in the visitors’ entrance lobby and the housing units, in English and Spanish. Submitted photos displayed the postings. The website information does not currently reflect COVID-19 visiting conditions; it is available in English only. Other language needs are accommodated through a language line. This information is also communicated through telephone inquiries in a language and/or manner the caller can understand, per the chief of unit management (the designated visitation coordinator).</td>
</tr>
<tr>
<td>• Make the schedule and procedures available to the public, both in written form and telephonically.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Post that information in the visitor waiting area in English, Spanish, and, where practicable, other major languages spoken in the facility, as well as in each housing unit where detainees can easily see them.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meets Standard</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. <strong>PRIORITY:</strong> General visitation is permitted during set hours on Saturdays, Sundays, and holidays, and, to the extent practicable, the facility also establishes visiting hours on weekdays and during evening hours. The facility accommodates the scheduling needs of visitors for whom scheduled visiting hours pose a hardship. The number of visitors a detainee receives and the length of visits are limited only by reasonable constraints of space, scheduling, staff availability, safety, security, and good order.</td>
<td></td>
<td>General visitation is scheduled on Sundays through Tuesdays and Thursdays through Saturdays. If a holiday falls on a Wednesday, visiting is permitted, per the chief of unit management. Special visit accommodations are made for hardship/disability circumstances, upon shift supervisor approval. The number of visitors and the length of visits adheres to the constraints of space and staff availability.</td>
</tr>
<tr>
<td>Meets Standard</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Each facility shall maintain a log of all general visitors, and a separate log of legal visitors.</td>
<td></td>
<td>On-site visits are recorded on a paper logbook. Tablet video-visits are recorded electronically. Submitted electronic logbook entries for video-visits confirmed the practice.</td>
</tr>
<tr>
<td>Meets Standard</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. If the facility establishes and maintains a dress code for visitors, it shall be made available to the public.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meets Standard</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. The facility’s visiting areas shall be appropriately furnished and arranged, and as comfortable and pleasant as practicable.</td>
<td></td>
<td>Submitted photos indicate the visitation areas are reasonably comfortable and clean.</td>
</tr>
</tbody>
</table>
**STANDARD 5.7. VISITATION** (Key: AG)

This detention standard ensures that detainees shall be able to maintain morale and ties through visitation with their families, the community, legal representatives, and consular officials, within the constraints of safety, security, and good order of the facility.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>9. <strong>PRIORITY:</strong> The facility's written rules shall specify time limits for visits. Visits should be for the maximum period practicable but not less than one hour with special consideration given to family circumstances and individuals who have traveled long distances.</td>
<td>Meets Standard</td>
<td>Written visitation rules limit on-site general family visits to one visit per week for one to two hours. Special accommodation is made for visitors experiencing travel and/or special family circumstances, per the chief of unit management. Current video visits can occur daily from 8:00 a.m. to 7:00 p.m.</td>
</tr>
<tr>
<td>10. Facilities should have provisions to allow for contact or non-contact visitation with minor children, stepchildren and foster children. Facilities that allow visitations by minor children, stepchildren and foster children should try to facilitate contact visitation when possible. Facilities should allow detainees to see their minor children as soon as possible after admission. Generous time allotments for visitation with minor children are recommended. At facilities where there is no provision for visits by minors, ICE arranges for visits by children, stepchildren, and foster children on request, within the first 30 days.</td>
<td>Meets Standard</td>
<td>The facility permits minors to visit under the supervision of an adult, per policy. Such visits are permitted soon after the detainee is admitted to the facility. Extended time allotments for visits with children may be considered by the shift supervisor.</td>
</tr>
<tr>
<td>11. Written procedures shall detail the limits and conditions of contact visits in facilities permitting them.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>12. While in administrative or disciplinary segregation status, a detainee ordinarily retains visiting privileges.</td>
<td>Meets Standard</td>
<td>Detainees in disciplinary or administrative segregation status are permitted the same visiting privileges as general population detainees, unless safety concerns contraindicate, per the chief of unit management.</td>
</tr>
<tr>
<td>13. <strong>PRIORITY:</strong> Legal visitation is available seven (7) days a week, including holidays. Legal visitation hours provide for a minimum of eight (8) hours per day on regular business days, and a minimum of four (4) hours per day on weekends and holidays.</td>
<td>Meets Standard</td>
<td>On-site legal visits are permitted Monday through Friday from 8:00 a.m. to 4:00 p.m. Strict COVID-19 protocols must be followed for these visits. Attorney video-visits can occur daily from 8:00 a.m. to 7:00 p.m. Other times may be granted for either format, upon shift supervisor approval.</td>
</tr>
</tbody>
</table>
**STANDARD 5.7. VISITATION** (Key: AG)

This detention standard ensures that detainees shall be able to maintain morale and ties through visitation with their families, the community, legal representatives, and consular officials, within the constraints of safety, security, and good order of the facility.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>14. Private consultation rooms are available for meetings with legal representatives or legal assistants. There is a mechanism for the detainee and his/her legal representative or assistant to exchange documents, even when contact visitation rooms are unavailable.</td>
<td>Meets Standard</td>
<td>Legal visits are generally held in an open table/contact format, but non-contact visits are also available. Document exchanges for non-contact visits are assisted by a visitation officer, per the chief of unit management.</td>
</tr>
<tr>
<td>15. Legal representatives and assistants are subject to a non-intrusive search - such as a pat-down search of the person or a search of the person's belongings - at any time for the purpose of ascertaining the presence of contraband.</td>
<td>Meets Standard</td>
<td>Legal representatives and their assistants are required to pass through a metal detector and subject their belongings to a search for contraband before they are granted entry.</td>
</tr>
<tr>
<td>16. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.</td>
<td>Meets Standard</td>
<td>A current list of pro bono legal organizations is posted in the housing units and law library. Submitted photos support the postings. The lists are updated and posted routinely, per the chief of unit management.</td>
</tr>
<tr>
<td>17. Facility visitation procedures shall cover law enforcement officials requesting interviews with detainees. Facilities will notify and seek approval from ICE ERO of any proposed law enforcement officer visit with a detainee.</td>
<td>Meets Standard</td>
<td>All requests from law enforcement officials seeking to interview detainees are forwarded to ICE/ERO and the OIC for approval.</td>
</tr>
<tr>
<td>18. Former ICE/ERO detainees, individuals with criminal records and individuals in deportation proceedings shall not be automatically excluded from visiting. Individuals in any of these categories must so notify the facility administrator before registering for visitation privileges.</td>
<td>Meets Standard</td>
<td>Former detainees or individuals with criminal records and individuals in deportation proceedings who request to visit with a detainee require prior ICE/ERO and OIC approval.</td>
</tr>
</tbody>
</table>

**STANDARD 5.7. VISITATION – Reviewer Summary**

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: *(Record significant facts, observations, other sources used, etc.)* (5000 Character Max)

All general visits are currently restricted to tablet video-visits. On-site visits are currently prohibited due to COVID-19 conditions. General video-visits are unlimited in frequency or duration between posted visiting hours. All legal visits may be either contact or non-contact. On-site contact attorney visits are permitted Monday through Friday from 8:00 a.m. to 4:00 p.m. Video visits are permitted daily from 8:00 a.m. to 7:00 p.m. Attorney visit exceptions to the posted days/times are generally granted. Strict COVID-19 safety protocols are mandatory for on-site visits. No adult visitor is admitted without a current government-issued photo identification. Legal representatives must present credentials validating their positions, and their person and property are subject to search.

Legal visitors may be accompanied by interpreters. Legal visitors are not required to know the detainee’s A-number to visit and policy permits legal visitors to call ICE before the visit to determine if the detainee is at the facility. Legal providers are not required to file a Form G-28 for pre-representation meetings with detainees or representation of non-immigration
STANDARD 5.7. VISITATION – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

matters but must file a G-28 to represent detainees for immigration matters. Visitation officers visually observe legal visits but are not able to hear conversations. Legal visits may continue through meals and counts.

All requirements of the standard are adhered to for news media visits and interviews, per the SDDO. Policy outlines consular visitation procedures, visits from representatives of community organizations, law enforcement officials, media, medical service providers, former detainees or Aliens in Proceedings, business visitors, and rules regarding animal visits.

Visitation may be restricted through the disciplinary process. Criminal behavior during a visit may be referred for prosecution. In those cases, the officer will be required to immediately notify the OIC and ICE/ERO personnel and document the action.

To provide access to programs and services, the facility provides communication assistance to LEP detainees and detainees with disabilities. This may be achieved via bilingual staff, translation services, or other means for LEP detainees; or in the form of auxiliary aids for detainees with disabilities, including but not limited to those aids listed in the Standard. All detainees are screened upon intake or as otherwise required by the standard. Decisions regarding detainees with disabilities, LEP detainees, and/or detainees included under any SAAPI/DHS PREA protection or category, will be made only after consideration of the disability, language difficulty, or SAAPI/PREA condition. The facility is managed in such a manner as to protect detainees from sexual assault or abuse.

Visitors are permitted to mail money into the facility for credit to a detainee's commissary account, and they can deposit money into the visitors' entrance lobby kiosk for credit to a detainee's account. All account transactions generate a receipt, which is provided to the detainee/visitor. Visitors may not give money directly to a detainee.

A review of policy, handbook content, COVID-19 protocols, submitted photos, and the facility website and an interview with the chief of unit management and SDDO revealed detainees can maintain morale and ties with their family, the community, legal representatives, and consular officials through the visitation program.

Overall Rating: Meets Standard

Reviewer Name (Printed): [Redacted] Completion Date: 10/1/2020

Reviewer Signature (for printed form submission):
**STANDARD 5.8. VOLUNTARY WORK PROGRAM** *(Key: AH)*

This detention standard provides detainees opportunities to work and earn money while confined, subject to the number of work opportunities available and within the constraints of safety, security, and good order of the facility. While not legally required to do so, ICE/ERO affords working detainees basic Occupational Safety and Health Administration (OSHA) protections.

**Standard N/A**

Click the above button if ICE detainees are not authorized to work at the IGSA facility. *(All Line Items and standard will be rated “N/A”)*

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Detainees who are physically and mentally able to work</td>
<td>Meets Standard</td>
<td>Detainees are provided the opportunity to participate in the volunteer work program.</td>
</tr>
<tr>
<td>shall be provided the opportunity to participate in a voluntary work program.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. The detainee’s classification level shall determine the type of work assignment for which he/she is eligible. Generally, high custody detainees shall not be given work opportunities outside their housing units/living areas.</td>
<td>Meets Standard</td>
<td>Detainees only work as housing porters, regardless of their classification level.</td>
</tr>
<tr>
<td>3. ICE detainees may not work outside the secure perimeter of non-dedicated IGSA facilities.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>4. The facility administrator shall develop site-specific rules for selecting work detail volunteers in a facility procedure that will include a voluntary work program agreement.</td>
<td>Meets Standard</td>
<td>Site-specific rules have been developed and implemented for the selection of volunteer workers in each area. A volunteer work agreement is signed by each detainee.</td>
</tr>
<tr>
<td>5. Detainees shall not be denied voluntary work opportunities on the basis of such factors as a detainee’s race, religion, national origin, gender, sexual orientation or disability.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>6. While medical or mental health restrictions may prevent some physically or mentally challenged detainees from working, those with less severe disabilities shall have the opportunity to participate in the voluntary work program in appropriate work assignments.</td>
<td>Meets Standard</td>
<td>All detainees can participate in the volunteer work program as appropriate to the extent positions are available.</td>
</tr>
<tr>
<td>7. Detainees who participate in the volunteer work program are required to work according to a fixed schedule that does not exceed 8 hours daily, 40 hours weekly.</td>
<td>Meets Standard</td>
<td>Detainees work according to a fixed schedule which does not exceed eight hours daily or forty hours weekly.</td>
</tr>
<tr>
<td>8. Detainees shall receive monetary compensation for work completed in accordance with the facility’s standard policy of at least $1.00 (USD) per day.</td>
<td>Meets Standard</td>
<td>Detainees are paid $1 per day for their work in the program.</td>
</tr>
<tr>
<td>9. The facility administrator shall establish procedures for informing detainee volunteers about on-the-job responsibilities and reporting procedures.</td>
<td>Meets Standard</td>
<td>Detainees are informed of the on-the-job responsibilities and reporting procedures. This process is documented.</td>
</tr>
</tbody>
</table>
### STANDARD 5.8. VOLUNTARY WORK PROGRAM (Key: AH)

This detention standard provides detainees opportunities to work and earn money while confined, subject to the number of work opportunities available and within the constraints of safety, security, and good order of the facility. While not legally required to do so, ICE/ERRO affords working detainees basic Occupational Safety and Health Administration (OSHA) protections.

**Standard N/A**

Click the above button if ICE detainees are not authorized to work at the IGSA facility. (All Line Items and standard will be rated “N/A”)

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>10. When a detainee is removed from a work detail, staff place the written justification for the action in the detainee’s detention file. Detainees are permitted to file a grievance to the facility administrator or local Field Office Director if they believe they were unfairly removed from work.</td>
<td>Meets Standard</td>
<td>When a detainee is removed from a work detail, written documentation of the circumstances and justification for the removal are placed in the detainee’s detention file.</td>
</tr>
<tr>
<td>11. All detention facilities shall comply with all applicable health and safety regulations and standards, to include training.</td>
<td>Meets Standard</td>
<td>Training is provided to detainees specific to their work as housing porters. This training is documented, and the documentation was reviewed during the inspection.</td>
</tr>
<tr>
<td>12. The facility administrator shall ensure that all department heads, in collaboration with the facility’s safety/training officer, develop and institute appropriate training for all detainee workers.</td>
<td>Meets Standard</td>
<td>A review of documentation confirmed that training on safe work methods and working with hazardous materials is provided to detainees employed as housing porters.</td>
</tr>
<tr>
<td>13. Upon a detainee’s assignment to a job or detail, the supervisor shall provide thorough instructions regarding safe work methods and, if relevant, hazardous materials.</td>
<td>Meets Standard</td>
<td>An interview with the chief of security indicated appropriate safety equipment is provided to volunteer detainee workers specific to their work assignment. Photos of the PPE available to housing porters were provided for review during this remote inspection.</td>
</tr>
<tr>
<td>14. The facility shall provide detainees with safety equipment that meets OSHA and other standards associated with the task performed.</td>
<td>Meets Standard</td>
<td>Policies and procedures are in place for the immediate and appropriate response to a detainee who is injured on their work assignment.</td>
</tr>
<tr>
<td>15. The facility administrator shall implement procedures for immediately and appropriately responding to on-the-job injuries, including immediate notification of ICE/ERRO.</td>
<td>Meets Standard</td>
<td></td>
</tr>
</tbody>
</table>

---

**STANDARD 5.8. VOLUNTARY WORK PROGRAM – Reviewer Summary**

(Use following format for dates: mm/dd/yyyy)
**STANDARD 5.8. VOLUNTARY WORK PROGRAM – Reviewer Summary**

*(Use following format for dates: mm/dd/yyyy)*

**Overall Remarks:** *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

Detainees are provided the opportunity to work and earn money as housing porters, subject to the number of work opportunities available and within the constraints of the safe, secure, and orderly operation of the facility. Policy mandates the voluntary work program operates in compliance with codes and regulations of all applicable federal, state, or local work safety laws and regulations. During the inspection, approximately thirteen detainees were involved in the volunteer work program. Detainees receive appropriate training as required before starting their assignments. Per policy, as a requirement of the program, detainees are required to maintain their immediate living area in a neat and orderly manner.

Reasonable accommodations and modifications are made, if possible, to ensure detainees with disabilities have an equal opportunity to participate in the work program.

During this remote inspection, evaluation of this standard was based on a review of policy and documentation of detainee worker training and interviews with the chief of security.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** [Redacted]  
**Completion Date:** 10/1/2020

**Reviewer Signature (for printed form submission):**
Section VI: JUSTICE

Detainee Handbook
Grievance System
Law Libraries and Legal Material
Legal Rights Group Presentations
**STANDARD 6.1. DETAINEE HANDBOOK** (Key: A1)

This detention standard requires that, upon admission, every detainee be provided comprehensive written orientation materials that describe such matters as the facility’s rules and sanctions, disciplinary system, mail and visiting procedures, grievance system, services, programs, and medical care, in English, Spanish, and other languages and that detainees acknowledge receipt of those materials.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>PRIORITY:</strong> Upon admission to a facility, as part of the orientation program, each detainee shall be provided a copy of the ICE National Detainee Handbook and that facility’s local supplement to the handbook.</td>
<td>Meets Standard</td>
<td>The Torrance County Detention Facility handbook (the handbook), and the National Detainee Handbook are provided to detainees upon admission to the facility.</td>
</tr>
<tr>
<td>2. The facility administrator shall ensure that the local supplement is translated into Spanish and, where practicable, any other language spoken by significant numbers of limited-English proficient detainees in that facility.</td>
<td>Meets Standard</td>
<td>The handbook is available in English and Spanish.</td>
</tr>
<tr>
<td>3. Staff shall require each detainee to verify, by signature, receipt of the handbook and maintain that acknowledgement in the detainee’s detention file.</td>
<td>Meets Standard</td>
<td>Detainees sign for the receipt of the handbook. The acknowledgment is maintained in the detention file along with other property inventory receipts.</td>
</tr>
<tr>
<td>4. If a detainee cannot read or does not understand the language of the handbook, the facility administrator shall arrange for the orientation materials to be read to the detainee, provide the material using audio or video tapes in a language the detainee does understand, or provide a translator or interpreter within a reasonable amount of time.</td>
<td>Meets Standard</td>
<td>The handbooks are supplemented by an orientation video that is available in English and Spanish. Orientation information will be read to detainees who cannot read or understand the language of the handbooks. Interpretive services are provided as needed.</td>
</tr>
<tr>
<td>5. The facility administrator shall provide a copy of the ICE National Detainee Handbook and the local supplement to every staff member who has contact with detainees, and cover their contents in initial and annual staff training.</td>
<td>Meets Standard</td>
<td>Facility personnel is provided a copy of the handbooks. The contents of the handbooks are covered in pre-service and annual training.</td>
</tr>
<tr>
<td>6. The facility administrator shall appoint a committee to review the local supplement annually and recommend changes. While the handbook does not have to be immediately revised and reprinted to incorporate every change, the facility administrator shall establish procedures for immediately communicating such changes to staff and detainees.</td>
<td>Meets Standard</td>
<td>Policy requires that a committee will be appointed to review the local handbook and recommend changes. Procedures have been established to immediately communicate changes to staff and detainees.</td>
</tr>
<tr>
<td>Components</td>
<td>Rating</td>
<td>Remarks (1000 Char Max)</td>
</tr>
<tr>
<td>------------</td>
<td>--------</td>
<td>-------------------------</td>
</tr>
<tr>
<td><strong>7. PRIORITY:</strong> The detainee handbook (local supplement) address the following issues:</td>
<td></td>
<td>Meets Standard</td>
</tr>
<tr>
<td>• The rules, regulations, policies and procedures with which every detainee must comply</td>
<td></td>
<td>The elements of this component are addressed in the handbook.</td>
</tr>
<tr>
<td>• Detainee rights and responsibilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Procedures for requesting interpretive services for essential communication</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• The facility’s services and programs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• The facility’s classification system</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Medical care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• The facility’s zero tolerance policy for all forms of sexual abuse and assault</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• The facility’s rules of conduct and prohibited acts, the disciplinary scale, the sanctions imposed for violations of the rules, the disciplinary process, the procedure for appealing disciplinary findings, and detainees’ rights in the disciplinary system (as required by Standard 3.1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Information about the facility’s grievance system, including medical grievances (as required by Standard 6.2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• The facility’s policies on telephone access and on the monitoring of telephone calls, if telephone calls are monitored</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• The facility’s visitation rules and hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Rules and procedures governing access to the law library (as required by Standard 6.3) and to legal counsel</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Content and procedures of the facility’s rules on legal rights group presentations, and the availability of legal orientation programs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• The facility’s rules on correspondence and other mail (including information on correspondence procedures as required by Standard 5.1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• The facility’s policies and procedures related to personal property (as required by Standard 2.5)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• The facility’s marriage request procedures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Contact information for the ICE/ERO Field Office and the scheduled hours and days that ICE/ERO staff is available to be contacted by detainees at the facility</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Procedures to submit written questions, requests, or concerns to ICE/ERO staff, as well as the availability of assistance to prepare such requests.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**STANDARD 6.1. DETAINEE HANDBOOK – Reviewer Summary**

*(Use following format for dates: mm/dd/yyyy)*

**Overall Remarks:** *(Record significant facts, observations, other sources used, etc.)* *(5000 Character Max)*

The local handbook, written in English and Spanish, is comprehensive and accurately describes the facility's rules, programs, procedures, and requirements for detainees during their detention. Detainees receive the handbooks during the intake/orientation process. The handbooks are free from derogatory or insensitive statements about detainee religion or culture.

The handbooks address how detainees report allegations of abuse and civil rights violations, along with violations of officer misconduct directly to ICE management or the DHS Office of Inspector General. The facility provides written guidance through policy and training to personnel to ensure that the treatment of ICE detainees is consistent with these standards.

Evaluation of this standard was based on a review of the handbook and interviews with personnel and detainees.

<table>
<thead>
<tr>
<th>Overall Rating: Meets Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reviewer Name (Printed): 1(6), 0(7)(C)</td>
</tr>
<tr>
<td>Reviewer Signature (for printed form submission):</td>
</tr>
</tbody>
</table>
**STANDARD 6.2. GRIEVANCE SYSTEM** *(Key: AI)*

This detention standard protects a detainee’s rights and ensures they are treated fairly by providing a procedure for them to file both informal and formal grievances, which shall receive timely responses relating to any aspect of their detention, including medical care.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
</table>
| **1. PRIORITY:** Each facility shall have written policy and procedures for a detainee grievance system that:  
  - Establishes a procedure for any detainee to file a formal grievance;  
  - Establishes a procedure to track or log all ICE detainee grievances separately from other facility populations;  
  - Establishes reasonable time limits for:  
    - Processing, investigating, and responding to grievances;  
    - Convening a grievance committee (or actions of a single designated grievance officer) to review formal complaints; and  
    - Providing written responses to detainees who filed formal grievances, including the basis for the decision.  
  - Ensures a procedure in which all medical grievances are received by the administrative health authority within 24 hours or the next business day, with a response from medical staff within five working days, where practicable;  
  - Establishes a special procedure for time-sensitive, emergency grievances, including having a mechanism by which emergency medical grievances are screened as soon as practicable by appropriate personnel;  
  - Ensures each grievance receives appropriate review;  
  - Provides at least one independent appeal that excludes individuals previously involved in the decision making process for the same grievance;  
  - Includes guarantees against reprisal; and  
  - Ensures information, advice, and directions are provided to detainees in a language or manner they can understand, or that interpretation/translation services are utilized. | Meets Standard | Detailed policy and procedures address the elements of this component. |

| 2. Detainees are informed about the facility’s informal and formal grievance system in a language or manner they understand. | Meets Standard | The processes for filing an informal and formal grievance are addressed in the handbook. Assistance in understanding the grievance policy and procedures is provided to detainees with disabilities and those limited in English proficiency. |
**STANDARD 6.2. GRIEVANCE SYSTEM** *(Key: AJ)*

This detention standard protects a detainee’s rights and ensures they are treated fairly by providing a procedure for them to file both informal and formal grievances, which shall receive timely responses relating to any aspect of their detention, including medical care.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks <em>(1000 Char Max)</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>3. The grievance section of the handbook explains all steps in the grievance process.</td>
<td>Meets Standard</td>
<td>The grievance process is explained in detail in the local handbook.</td>
</tr>
<tr>
<td>4. Written procedures allow for the informal oral presentation and resolution of grievances. A detainee is free to bypass or terminate the informal grievance process at any point and proceed directly to the formal grievance stage.</td>
<td>Meets Standard</td>
<td>Policy and procedure provide for the informal presentation and resolution of grievances. Detainees are encouraged to resolve their grievances and complaints informally with the housing officer. They are also free to bypass or terminate the informal process at any point and proceed directly to the formal grievance stage. Detainees may file a grievance directly to ICE at any time.</td>
</tr>
<tr>
<td>5. Detainees may submit a formal written grievance to a Grievance Officer at any time during, after, or in lieu of lodging an information complaint. To prepare a grievance, a detainee may obtain assistance from another detainee, the housing officer or other facility staff, family members, legal representatives, or non-governmental organizations.</td>
<td>Meets Standard</td>
<td>Detainees may submit a formal grievance at any time instead of using the informal grievance process. Detainees may request and obtain assistance in filing a grievance.</td>
</tr>
<tr>
<td>6. Formal written grievances regarding medical care shall be submitted directly to medical personnel designated to receive and respond to medical grievances at the facility.</td>
<td>Meets Standard</td>
<td>Detainees are instructed to file medical grievances in the medical grievance box on each housing unit. Medical grievances are picked up and responded to by medical services personnel. When completed, the grievances are filed in the detainee medical file.</td>
</tr>
<tr>
<td>7. Each facility shall implement written procedures for identifying and handling a time-sensitive emergency grievance that involves an immediate threat to a detainee’s health, safety or welfare.</td>
<td>Meets Standard</td>
<td>Policy and procedure address the process for the identification and handling of time-sensitive emergency grievances. Personnel is trained to recognize and respond to emergency grievances.</td>
</tr>
<tr>
<td>8. All staff will be trained to appropriately respond to emergency grievances in an expeditious matter.</td>
<td>Meets Standard</td>
<td>Personnel is trained to recognize and respond to emergency grievances.</td>
</tr>
</tbody>
</table>
### STANDARD 6.2. GRIEVANCE SYSTEM  
(Key: AJ)

This detention standard protects a detainee’s rights and ensures they are treated fairly by providing a procedure for them to file both informal and formal grievances, which shall receive timely responses relating to any aspect of their detention, including medical care.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>9. A designated Grievance Officer (GO) shall conduct the initial adjudication of a grievance. The detainee shall have the option to file an appeal with a Grievance Appeals Board (GAB) if dissatisfied with a GO decision, and with the facility administrator if dissatisfied with a GAB decision. At all stages, detainees shall receive a decision on the grievance within five days of receipt of the appeal by the reviewing entity.</td>
<td>Meets Standard</td>
<td>Detainees receive responses to their grievances within five days of the receipt of the original grievance or the appeal of a proposed resolution of a grievance.</td>
</tr>
<tr>
<td>10. Facilities shall allow any ICE/ERO detainee dissatisfied with the facility’s response to a grievance, or fearing retaliation, to appeal to or communicate directly with ICE/ERO.</td>
<td>Meets Standard</td>
<td>Detainees can appeal any proposed grievance resolution to ICE/ERO. A detainee fearing retaliation or who is dissatisfied with a grievance resolution may appeal to or communicate with ICE/ERO.</td>
</tr>
<tr>
<td>11. <strong>PRIORITY:</strong> Each facility shall maintain a Detainee Grievance Log. The documentation shall include: the date the grievance was filed, the name of the detainee that filed the grievance, the nature of the grievance, the date the decision was provided to the detainee, and the outcome of the adjudication. A copy of the grievance disposition shall be placed in the detainee’s detention file and provided to the detainee. Medical grievances are maintained in the detainee’s medical file.</td>
<td>Meets Standard</td>
<td>The detainee grievance log is maintained by the grievance officer. The log contains the information required in this component. A copy of each grievance resolution is placed in the detainee’s detention file and is provided to the detainee. Medical grievances are maintained in the detainee’s medical file.</td>
</tr>
<tr>
<td>12. <strong>PRIORITY:</strong> Upon receipt, facility staff must forward all detainee grievances containing allegations of staff misconduct to a supervisor or higher-level official in the chain of command. While such grievances are to be processed through the facility’s established grievance system, CDFs and IGSA facilities must also forward a copy of any grievances alleging staff misconduct to ICE/ERO in a timely manner.</td>
<td>Meets Standard</td>
<td>Any grievance containing allegations of staff misconduct are forwarded to the OIC. The grievance is processed through the facility’s established grievance system. ICE personnel receive notification the grievance has been filed and or advised of the resolution of the grievance.</td>
</tr>
<tr>
<td>13. Staff shall not harass, discipline, punish, or otherwise retaliate against a detainee who files a complaint or grievance or who contacts the Inspector General. Immediately following any indication or allegation of retaliation, the facility and ICE/ERO shall conduct an investigation of alleged acts of retaliation in a timely manner, and take all steps necessary to remedy any retaliation determined to have occurred.</td>
<td>Meets Standard</td>
<td>Policies and procedures address the elements of this component. Staff receives training that addresses the prohibition against harassing, disciplining, punishing, or otherwise retaliating, in any manner, against a detainee who files a complaint or grievance or contacts the inspector general.</td>
</tr>
</tbody>
</table>
**STANDARD 6.2. GRIEVANCE SYSTEM – Reviewer Summary**

*(Use following format for dates: mm/dd/yyyy)*

**Overall Remarks:** *(Record significant facts, observations, other sources used, etc.)* (5000 Character Max)

Policies and procedures are in place that protects detainee rights and ensures detainees are treated fairly by providing an avenue to file formal grievances and appeals and to receive timely responses. This inspection was conducted remotely.

Written procedures are in place for handling emergency grievances and urgent access to legal counsel and the law library. Translation and interpretation services are available as needed. Procedures are in place to ensure that detainees with disabilities, LEP detainees, and detainees with literacy limitations are aided when filing a formal grievance. Formal grievance procedures are communicated to detainees in a language and manner they understand. All materials are translated into Spanish, or other languages if significant segments of the detainee population have the need. Grievances alleging sexual abuse or assault, and the accompanying decisions, are forwarded to the FOD upon completion of the grievance process.

Eight-four grievances were filed in 2020. Sixty-six percent (66%) were resolved in favor of the detainee. The GO attempts to resolve any grievance as soon as it is received and indicates this process is generally successful. The grievance log indicated grievances are received and responded to promptly. Responses were appropriate and specific to the detainees’ complaints.

The facility provides communication assistance to detainees with disabilities and detainees who are limited in their English proficiency (LEP). The facility provides detainees with disabilities with effective communication, which may include the provision of auxiliary aids, such as readers, telecommunications devices for deaf persons (TTYS), and interpreters, as needed. The facility provides detainees who are LEP with language assistance, including bilingual staff or professional interpretation and translation services.

Evaluation of this standard was based on a review of grievances filed by detainees, grievance policy and the grievance log and interviews with the grievance officers and detainees.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** [Name]

**Completion Date:** 10/1/2020

**Reviewer Signature (for printed form submission):**
### STANDARD 6.3. LAW LIBRARIES AND LEGAL MATERIALS (Key: AK)

This detention standard protects detainees’ rights by ensuring their access to courts, counsel, and comprehensive legal materials.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Each facility shall provide a properly equipped law library in a designated, well-lit room that is reasonably isolated from noisy areas and large enough to provide reasonable access to all detainees who request its use. It shall be furnished with a sufficient number of tables and chairs to facilitate detainees’ legal research and writing.</td>
<td>Meets Standard</td>
<td>The main law library is combined with the general library in a large open well-lit room. The area is quiet and furnished with enough tables and chairs to accommodate its capacity and use demands, as indicated by submitted photos.</td>
</tr>
<tr>
<td>2. <strong>PRIORITY:</strong> Each detainee shall be permitted to use the law library for a minimum of five hours per week and may not be forced to forego his or her minimum recreation time to use the law library.</td>
<td>Meets Standard</td>
<td>The schedule permits each detainee to use the law library for a minimum of five hours per week. The law library is open Monday through Friday from 7:30 a.m. to 2:45 p.m. The schedule is posted in the local handbook and the detainee housing units as evidenced by submitted photos. Detainees do not forgo basic law library privileges for recreation privileges.</td>
</tr>
<tr>
<td>3. <strong>PRIORITY:</strong> The law library shall provide an adequate number of computers with printers, photocopiers and sufficient writing implements, paper, and related office supplies to enable detainees to prepare documents for legal proceedings, special correspondence, or legal mail. Typewriters, with replacement ribbons, carbon paper, and correction tape may be temporarily substituted for computers and printers only until such time as the facility can provide computers and printers, and if approved by ICE/ERO. Each facility administrator shall designate an employee to inspect the equipment at least daily and ensure it is in good working order and to stock sufficient supplies.</td>
<td>Meets Standard</td>
<td>The main law library has four LexisNexis computer workstations; there are two LexisNexis computers in a satellite location and one portable LexisNexis computer in the special management unit (SMU). All LexisNexis computers have word processing capabilities. Copies of casework are printed by the law librarian or designee; there is no charge for the service. There is a sufficient inventory of office supplies in all law library locations; submitted photos support the claim. The OIC has designated the law librarian as responsible for the daily inspection of law library equipment and office supply inventory to ensure they are in good working order and sufficiently stocked.</td>
</tr>
</tbody>
</table>
# STANDARD 6.3. LAW LIBRARIES AND LEGAL MATERIALS

This detention standard protects detainees’ rights by ensuring their access to courts, counsel, and comprehensive legal materials.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Detainees are provided with the means to save legal work in a private electronic format for future use.</td>
<td>Meets Standard</td>
<td>Detainees are provided a memory stick for saving their casework. The law librarian retains possession of the devices.</td>
</tr>
<tr>
<td>5. The facility subscribes to updating services where applicable and legal materials requiring updates are current.</td>
<td>Meets Standard</td>
<td>LexisNexis software is installed on all law library computers when quarterly updates are provided by ICE/ERO. The most current software edition was installed on all LexisNexis computer terminals, per chief of unit management (law library supervisor).</td>
</tr>
<tr>
<td>6. Each facility administrator shall designate a facility law library coordinator to be responsible for updating legal materials, inspecting them weekly, maintaining them in good condition and replacing them promptly as needed.</td>
<td>Meets Standard</td>
<td>The OIC has designated the law librarian as responsible for adhering to all component requirements.</td>
</tr>
<tr>
<td>7. <strong>PRIORITY:</strong> The law library contains all materials listed in Appendix 6.3.A: “List of Legal Reference Materials for Detention Facilities” and any materials provided to the facility by ICE/ERO. As an alternative to obtaining and maintaining the paper-based publications in Appendix 6.3.A, a facility may substitute the Lexis/Nexis publications on CD ROM. Any materials listed in Appendix 6.3.A which are not loaded onto the Lexis/Nexis CD ROM must be maintained in paper form. If materials are provided on CD-ROM or in another electronic format, technical assistance shall be provided.</td>
<td>Meets Standard</td>
<td>Detainees have access to the LexisNexis electronic library which provides all materials listed in Appendix 6.3.A. The LexisNexis law library is available in English and Spanish. The latest edition of LexisNexis software was installed into each LexisNexis computer workstation. Technical assistance is provided by the law librarian.</td>
</tr>
<tr>
<td>8. An up-to-date list of the law library’s holdings, including the date and content of the most recent updates of all legal materials available to detainees in print and electronic media, are posted in the law library.</td>
<td>Meets Standard</td>
<td></td>
</tr>
</tbody>
</table>
| 9. The facility administrator must certify to the respective Field Office Director – and the Field Office Director must verify -- that the facility provides detainees sufficient:  
  - Operable computers that are capable of running the Lexis/Nexis CDROM,  
  - Operable printers,  
  - Supplies for both, and  
  - Instructions for detainees on the basic use of the system. | Meets Standard | The provisions identified in the component have been submitted by the OIC and subsequently reviewed, verified, and deemed sufficient by the current FOD designee, per an 11/18/2019 memo. |
**STANDARD 6.3. LAW LIBRARIES AND LEGAL MATERIALS** *(Key: AK)*

This detention standard protects detainees’ rights by ensuring their access to courts, counsel, and comprehensive legal materials.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks <em>(1000 Char Max)</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>10. Outside persons and organizations may submit published or unpublished legal material for inclusion in a facility’s law library. If the material is in a language other than English, an English translation must be provided. Outside unpublished material is forwarded and reviewed by the ICE prior to inclusion.</td>
<td>Meets Standard</td>
<td>Legal materials may be submitted from an outside person or organization, but must have prior authorization from ICE/ERO, per the chief of unit management. An English translation must be provided for any materials in a language other than English.</td>
</tr>
<tr>
<td>11. Detainees who require legal material not available in the law library may make a written request to the facility law library coordinator, who shall inform the Field Office of the request as soon as possible.</td>
<td>Meets Standard</td>
<td>Detainees requesting legal material not currently available in the LexisNexis collection are required to complete a written request for the information and submit it to the law librarian. The request is forwarded to ICE/ERO for their approval. If approved, the pursuit of the materials will commence by the facility’s law librarian.</td>
</tr>
<tr>
<td>12. The facility shall ensure that detainees can obtain at no cost to the detainee photocopies of legal material and special correspondence when such copies are reasonable and necessary for a legal proceeding involving the detainee. Detainees shall also be permitted to photocopy grievances, letters regarding conditions of confinement, disciplinary decisions, special needs forms, or other documents that are relevant to the presentation of any type of immigration proceeding.</td>
<td>Meets Standard</td>
<td>Detainees are provided photocopies of legal materials and special correspondence, at no charge. Copies of other documents, that are relative to a detainee’s immigration proceedings, are also duplicated at no cost.</td>
</tr>
<tr>
<td>13. Facility staff provide assistance to detainees in accessing legal materials where needed (e.g. orientation to written or electronic media and materials; assistance in accessing related programs, forms, and materials).</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>14. The facility permits detainees to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents.</td>
<td>Meets Standard</td>
<td>Detainees are permitted to assist one another in the research and preparation of their casework, per the chief of unit management.</td>
</tr>
<tr>
<td>15. Unrepresented illiterate, limited-English proficient, or disabled detainees who wish to pursue a legal claim related to their immigration proceedings or detention, and who indicate difficulty with the legal materials, must be provided assistance beyond access to a set of English-language law books. To the extent practicable and consistent with the good order and security of the facility, efforts will be made to assist all illiterate, limited-English proficient, and disabled persons in using the law library.</td>
<td>Meets Standard</td>
<td></td>
</tr>
</tbody>
</table>
STANDARD 6.3. LAW LIBRARIES AND LEGAL MATERIALS (Key: AK)

This detention standard protects detainees’ rights by ensuring their access to courts, counsel, and comprehensive legal materials.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>16. The facility shall permit a detainee to retain all personal legal material upon admittance to the general population or Administrative Segregation or Disciplinary Segregation units, unless this would create a safety, security or sanitation hazard. Stored legal materials are accessible within 24 hours of a written request. Detainees with scheduled immigration hearings within 72 hours are provided access to their personal legal materials to the extent practicable.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>17. Detainees housed in Administrative Segregation and Disciplinary Segregation units have the same law library access as the general population, unless compelling security concerns require limitations.</td>
<td>Meets Standard</td>
<td>Detainees in administrative and disciplinary segregation status have the same law library and/or legal material access as detainees in general population status, per the chief of unit management.</td>
</tr>
<tr>
<td>18. Denial of access to the law library must be:</td>
<td>Meets Standard</td>
<td>If a detainee is denied access to the law library, the action will adhere to component requirements. No such action was imposed during this inspection period.</td>
</tr>
<tr>
<td>• Supported by compelling security concerns,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Be for the shortest period required for security, and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Be fully documented in the Special Management Unit housing logbook.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Documented, with reasons listed, in the detention file. The facility shall notify the Field Office every time access is denied and send a copy of the proper documentation.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. The facility shall provide assistance to any unrepresented detainee who requests a notary public, certified mail, or other such services to pursue a legal matter, if the detainee is unable to do so through a family member, friend, or community organization.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>20. Staff shall not permit a detainee to be subjected to reprisals, retaliation or penalties because of a decision to seek judicial or administrative relief or investigation of any matter.</td>
<td>Meets Standard</td>
<td>Detainees are not subject to reprisals, retaliation, or penalties when seeking judicial or administrative relief of any matter, per the chief of unit management.</td>
</tr>
</tbody>
</table>

STANDARD 6.3. LAW LIBRARIES AND LEGAL MATERIALS – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

Each detainee can research their legal status and is provided with the necessary equipment and materials to do so. The facility has seven LexisNexis computers throughout. The latest software update has been installed into all LexisNexis computers. Photocopies of a detainee’s casework are provided at no charge. The law librarian or designee inspect photocopied law library documents to ensure they are licit; these documents are not read. Copy requests are only denied if the documents pose a security risk, a threat to orderly operations, violation of any law or regulation, and/or the request is abusive or excessive.
### STANDARD 6.3. LAW LIBRARIES AND LEGAL MATERIALS – Reviewer Summary

<table>
<thead>
<tr>
<th>(Use following format for dates: mm/dd/yyyy)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indigent detainees are provided free envelopes and stamps for domestic mail related to their legal matters and for correspondence to a legal representative, a potential legal representative, or any court. Requests to send international mail at no cost are reviewed, on a case-by-case basis, by the law librarian and ICE/ERO staff.</td>
</tr>
<tr>
<td>ICE determines the acceptance of outside published materials submitted for inclusion into the law library based on the usefulness of the materials and space limitations.</td>
</tr>
<tr>
<td>The local handbook, law library, and housing unit postings provide law library information regarding its rules, procedures, accessible hours, and information to request additional time in the law library and how to access legal materials.</td>
</tr>
<tr>
<td>To provide access to programs and services, the facility provides communication assistance to LEP detainees and detainees with disabilities. This may be achieved via bilingual staff, translation services, or other means for LEP detainees; or in the form of auxiliary aids for detainees with disabilities, including but not limited to those aids listed in the Standard. All detainees are screened upon intake or as otherwise required by the standard. Decisions regarding detainees with disabilities, LEP detainees, and/or detainees included under any SAAP/DHS PREA protection or category, will be made only after consideration of the disability, language difficulty, or SAAP/PREA condition. The facility is managed in such a manner as to protect detainees from sexual assault or abuse.</td>
</tr>
<tr>
<td>A review of policy and handbook content; submitted photos of law library equipment and supplies; and interviews with the chief of unit management and detainees revealed detainees’ rights are protected by ensuring their access to courts, counsel, and current legal materials.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Overall Rating: Meets Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reviewer Name (Printed): [Signature]</td>
</tr>
<tr>
<td>Completion Date: 10/1/2020</td>
</tr>
</tbody>
</table>

Reviewer Signature (for printed form submission):
### STANDARD 6.4. LEGAL RIGHTS GROUP PRESENTATIONS (Key: AL)

This detention standard protects detainees’ rights by providing all detainees access to information presented by authorized persons and organizations for the purpose of informing them of U.S. immigration law and procedures.

Standard N/A

Click the above button if No Group Presentations were conducted within the past 12 months. (All Line Items and standard will be rated “N/A”)

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. If upon notification by the Field Office Director that a group presentation on legal rights has been approved, the facility administrator shall telephone the listed contact person to arrange a mutually acceptable date and time for the presentation according to the standard.</td>
<td></td>
<td>The field office has notified the facility that the New Mexico Immigrant Law Center (NMILC) is approved to conduct routine presentations. The OIC's office has arranged mutually agreed upon times for the presentations. During COVID-19 conditions, all presentations are conducted over the telephone and using video broadcasts due to the gathered audience.</td>
</tr>
<tr>
<td>2. <strong>PRIORITY:</strong> At least 48 hours before a scheduled presentation, facility staff shall in each housing unit prominently display the informational posters provided by the presenter, and provide a sign-up sheet for detainees who plan to attend. Detainees that fail to sign up shall not be deprived of the opportunity to attend a presentation for that reason. The facility shall ensure that presentations are open to all detainees, regardless of the presenter’s intended audience, except when a particular detainee’s attendance would pose a security risk. Detainees in segregation are notified in advance of a presentation and provided the opportunity to attend. If the attendance of a detainee in segregation would pose a security risk, facility staff shall make arrangements with the presenters to offer a separate presentation and individual consultation to the detainee.</td>
<td></td>
<td>The NMILC has been approved to conduct presentations. Each housing unit has a permanently posted announcement alerting detainees of the weekly presentation. All detainees are free to attend. NMILC sends a list of detainees they wish to speak with and detainees not on the list who want to speak with a presenter about their case can speak directly with them each week. According to the chief of unit management and compliance manager, component requirements are consistently followed. Observation of documentation confirmed the practice is consistent with component requirements</td>
</tr>
<tr>
<td>3. One or more legal assistants may help with a presentation.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**STANDARD 6.4. LEGAL RIGHTS GROUP PRESENTATIONS** (Key: AL)

This detention standard protects detainees’ rights by providing all detainees access to information presented by authorized persons and organizations for the purpose of informing them of U.S. immigration law and procedures.

Standard N/A

Click the above button if No Group Presentations were conducted within the past 12 months. (All Line Items and standard will be rated “N/A”)

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. The presenters ordinarily will have at least one hour for the presentation and additional time for a question-and-answer session. ICE/ERO and/or facility staff may observe and monitor presentations, assisted by interpreters as necessary. ICE/ERO and facility personnel will not interrupt a presentation, except for security purposes or if the allotted time has expired.</td>
<td>Meets Standard</td>
<td>Per the chief of unit management, presentations can last up to two hours. Time is available for a post-presentation question and answer session. During these periods, officers are posted for security concerns only; they do not interfere with the consults.</td>
</tr>
<tr>
<td>5. If approved in advance by ICE/ERO, presenters may distribute brief written materials that inform detainees of U.S. immigration law and procedure. The request for approval of a presentation must list any published or unpublished materials proposed for distribution, and the requestor must provide a copy of any unpublished material, with a cover page.</td>
<td>Meets Standard</td>
<td>All materials distributed during NMILC presentations have been approved by ICE, per the chief of unit management.</td>
</tr>
<tr>
<td>6. Following a group presentation, the facility shall permit presenters to meet with small groups of detainees to discuss their cases as long as meetings do not interfere with facility security and orderly operations.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>7. The facility may discontinue or temporarily suspend group presentations by any or all presenters, if they:</td>
<td>Meets Standard</td>
<td>If a group presentation is discontinued or temporarily suspended by any or all presenters, the action shall be documented and based on component criteria. No such action was imposed during the inspection period.</td>
</tr>
<tr>
<td>• Pose an unreasonable security risk;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Interfere substantially with the facility’s orderly operation;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Deviate materially from approved presentation materials or procedures; or if</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• The facility is operating under emergency conditions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. <strong>PRIORITY</strong>: If ICE/ERO approves an electronic presentation submitted by qualified individuals or organizations, the facility shall provide regularly scheduled and announced opportunities for detainees in the general population to view or listen to the electronic presentation(s). Each facility shall present only ICE/ERO-approved electronic presentations on detainee legal rights.</td>
<td>Meets Standard</td>
<td>According to the chief of unit management, no new electronic presentations have been submitted for review or authorization. If they are, component requirements will be met.</td>
</tr>
</tbody>
</table>
### STANDARD 6.4. LEGAL RIGHTS GROUP PRESENTATIONS (Key: AL)

This detention standard protects detainees’ rights by providing all detainees access to information presented by authorized persons and organizations for the purpose of informing them of U.S. immigration law and procedures.

**Standard N/A**

**Click the above button if No Group Presentations were conducted within the past 12 months. (All Line Items and standard will be rated “N/A”)**

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>9. The facility shall also provide detainees in administrative or disciplinary segregation for more than one week with at least one opportunity to view pre-approved presentation(s) during their placement in segregation, unless precluded by security concerns regarding a particular detainee.</td>
<td>Meets Standard</td>
<td>All detainees, regardless of their custody level or housing assignment, are eligible to participate in NMILC presentations, per the chief of unit management</td>
</tr>
<tr>
<td>10. The facility shall maintain electronically-formatted presentations and equipment in good condition.</td>
<td>Meets Standard</td>
<td></td>
</tr>
</tbody>
</table>

#### STANDARD 6.4. LEGAL RIGHTS GROUP PRESENTATIONS – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

**Overall Remarks:** *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

NMILC has been approved by the El Paso Field Office to conduct legal rights group presentations at the facility through telephone and on-site audio and video presentations. During COVID-19 conditions, presenters and their interpreters are restricted to telephonic access to detainees for formal and informal discussions regarding immigration law and to answer procedural questions relative to their casework.

The procedure for attending legal rights group presentations is addressed in the local handbook. Illiterate, limited-English proficient and disabled detainees are notified about the scheduled presentations in a language and manner that they understand. The ICE Know Your Rights video is broadcast to all newly admitted detainees, in English and Spanish, during in-processing. A post question and answer session are available after each presentation.

To provide access to programs and services, the facility provides communication assistance to LEP detainees and detainees with disabilities. This is achieved via bilingual staff, translation services, or other means for LEP detainees; or in the form of auxiliary aids for detainees with disabilities, including but not limited to those aids listed in the Standard. The presentations are available in English and Spanish. Other translation services are provided for detainees who speak other languages.

Interviews with the chief of unit management and the SDDO revealed detainees’ rights are protected by providing them access to information presented by informed and credentialed professionals on U.S. immigration law and procedures.

**Overall Rating:** Meets Standard

**Reviewer Name (Printed):** [Redacted]  
**Completion Date:** 10/1/2020

**Reviewer Signature (for printed form submission):**
Section VII: ADMINISTRATION & MANAGEMENT

Detention Files
News Media Interviews and Tours
Staff Training
Transfer of Detainees
## STANDARD 7.1. DETENTION FILES

(Key: AM)

This detention standard contributes to efficient and responsible facility management by maintaining, for each detainee booked into a facility for more than 24 hours, a file of all significant information about that detainee. This standard also addresses security for electronic files.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. For every new arrival whose stay will exceed 24 hours, a designated officer shall create a detainee detention file.</td>
<td>Meets Standard</td>
<td>A detention file is created for every detainee during in-processing.</td>
</tr>
<tr>
<td>2. The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.</td>
<td>Meets Standard</td>
<td>Files contain originals and copies of documents generated during intake e.g., property inventories, facility classification forms, orientation materials, local handbook receipts, legal telephone requests, and orientation forms/materials. Submitted photos of a detainee file confirmed the content.</td>
</tr>
<tr>
<td>3. The detention files are located and maintained in a secured area.</td>
<td>Meets Standard</td>
<td>Detention files are kept in locked cabinets inside the controlled access records area. Submitted photos revealed a lock on each storage cabinet and the storage room door.</td>
</tr>
<tr>
<td>4. Each detention file remains active during the detainee’s stay. When the detainee is released from the facility, staff add copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent and other documentation.</td>
<td>Meets Standard</td>
<td>Detention files remain active and serve as an open repository for all documentation generated during a detainee’s stay. The record office staff are responsible for filing all documentation in the detention files.</td>
</tr>
</tbody>
</table>
| 5. At a minimum, a logbook entry recording the file’s removal from the cabinet shall include:  
- The detainee’s name and A-File number;  
- Date and time removed;  
- Reason for removal;  
- Signature of person removing the file, including title and department;  
- Date and time returned; and  
- Signature of person returning the file. | Meets Standard | The record office supervisor maintains a sign-out logbook that records all component requirements when a detention file leaves the storage room. A submitted photo confirmed the logbook was inclusive of component requirements. |
| 6. Electronic record-keeping systems and data are protected from unauthorized access. | Meets Standard | Access to the electronic recordkeeping systems is password protected. |

---

**STANDARD 7.1. DETENTION FILES – Reviewer Summary**

(Use following format for dates: mm/dd/yyyy)
## STANDARD 7.1. DETENTION FILES — Reviewer Summary

*Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

The chief of unit management ensures the intake unit has all necessary supplies and equipment to process detainees, and that all equipment is maintained in good working order. Approved personnel have access to detention files on an as needed, and for official purposes only. Information is only released to an outside third party when the detainee has signed a release of information consent form consistent with state and federal regulations, and ICE has approved the request.

Interviews with the chief of unit management and a review of submitted photos of detention file storage areas and file content revealed that a detention file is created and securely stored for each newly admitted detainee during intake.

<table>
<thead>
<tr>
<th>Overall Rating: Meets Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completion Date: 10/1/2020</td>
</tr>
</tbody>
</table>

**Reviewer Name (Printed):**

**Reviewer Signature (for printed form submission):**
<table>
<thead>
<tr>
<th><strong>STANDARD 7.2. INTERVIEWS AND TOURS</strong> (Key: AN)</th>
</tr>
</thead>
<tbody>
<tr>
<td>This detention standard ensures that the public and the media are informed of events within the facility’s areas of responsibility through interviews and tours.</td>
</tr>
<tr>
<td><strong>Components</strong></td>
</tr>
<tr>
<td>----------------</td>
</tr>
<tr>
<td>1. Interviews by reporters, other news media representatives, non-governmental organizations, academics, and parties not included in other visitation categories in the Detention Standard on Visitation shall be permitted access to facilities only by special arrangement and with prior approval of the respective ICE/ERO Field Office Director.</td>
</tr>
<tr>
<td>2. News media organizations shall abide by the policies and procedures of the facility being visited or toured. Media representatives must obtain advance permission from the facility administrator and FOD before taking photographs in or of any facility. The facility administrator shall advise both media representatives and detainees that use of any detainee’s name, identifiable photo, or recorded voice requires his or her prior permission.</td>
</tr>
<tr>
<td>3. Media representatives shall obtain a signed release from the detainee before photographing or recording his or her voice. The original of the form is to be filed in the detainee’s A-file with a copy in the facility’s Detention File.</td>
</tr>
<tr>
<td>4. Detainees should not be pressured or coerced out of granting a personal interview request, nor should the facility in any way retaliate against a detainee for lawful communication with a member of the media or a member of the public.</td>
</tr>
<tr>
<td>5. A press pool may be established when the Public Affairs Officer, Field Office Director and facility administrator determine that the volume of interview requests warrants such action.</td>
</tr>
<tr>
<td>6. If a tour or visit by a non-governmental organization or other stakeholders is approved by ICE/ERO, the facility shall post both the ICE sign-up sheet and the ICE stakeholder tour/visit notification flyer at least 48 hours in advance of the tour or visitation in appropriate locations (e.g. message boards, housing areas). Facility staff permit NGO or stakeholder access to pre-identified detainees and/or detainees who have signed up in advance to speak with the stakeholder.</td>
</tr>
</tbody>
</table>
STANDARD 7.2. INTERVIEWS AND TOURS – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

**Overall Remarks:** *(Record significant facts, observations, other sources used, etc.)* *(5000 Character Max)*

The privacy of detainees and staff, including the right of a detainee to not be photographed or recorded, is protected. Media representatives, media visitors, tours, personal interviews, press pools, and visits by NGOs are coordinated and approved by the El Paso FOD. The public and the media are not denied access based on their political or editorial viewpoints. Before a tour, the OIC and ICE/ERO will explain the terms and guidelines of the interview/tour to the participants. There were no tours or media interviews conducted at the facility during this inspection period.

To provide access to programs and services, the facility provides communication assistance to LEP detainees and detainees with disabilities. This may be achieved via bilingual staff, translation services, or other means for LEP detainees; or in the form of auxiliary aids for detainees with disabilities, including but not limited to those aids listed in the Standard. All detainees will be screened upon intake or as otherwise required by the standard. Decisions regarding detainees with disabilities, LEP detainees, and/or detainees included under any SAAPI/DHS PREA protection or category, will be made only after consideration of the disability, language difficulty, or SAAPI/PREA condition. The facility is managed in such a manner as to protect detainees from sexual assault or abuse.

A review of policy and interviews with the OIC and SDDO revealed public and the media will be informed of events within the facility’s area of responsibility through interviews and tours.

**Overall Rating:** Meets Standard

<table>
<thead>
<tr>
<th>Reviewer Name (Printed)</th>
<th>Completion Date: 10/1/2020</th>
</tr>
</thead>
</table>

Reviewer Signature (for printed form submission):
# STANDARD 7.3. STAFF TRAINING

(Key: AO)

This detention standard ensures that facility staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing training.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The facility conducts appropriate orientation, initial training, and annual training for all staff, contractors, and volunteers with appropriate assessment measures.</td>
<td>Meets Standard</td>
<td>Appropriate orientation and annual training are provided to staff, contractors, and volunteers. Testing is conducted after the completion of the nine-day orientation training all personnel attends. Security personnel are provided an additional three weeks of security and self-defense training and are tested after that training.</td>
</tr>
<tr>
<td>2. The amount and content of training is consistent with the duties and function of each individual and the degree of direct supervision that individual receives.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>3. At least one qualified individual with specialized training for the position coordinates and oversees the staff development and training program. At a minimum, training personnel complete a 40-hour training-for-trainers course.</td>
<td>Does Not Meet Standard</td>
<td>The learning and development manager (LDM) has not completed a training-for-trainers course. He has been scheduled to attend several times, but the course has been canceled due to COVID-19 travel restrictions. The LDM is a certified instructor in several training areas.</td>
</tr>
<tr>
<td>4. Training is governed and guided by a training plan that is reviewed and approved annually by the facility administrator.</td>
<td>Meets Standard</td>
<td>The 2020 facility training plan was reviewed. It has been approved by the facility administrator as well as the corporate training officer.</td>
</tr>
<tr>
<td>5. Training shall be conducted by trainers certified in the subject matter.</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td>6. Each trainee shall be required to pass a written or practical examination to ensure the subject matter has been mastered.</td>
<td>Meets Standard</td>
<td>Trainees must pass a practical or written examination to demonstrate their competence in the subject matter presented. Examples of the testing materials provided for review.</td>
</tr>
<tr>
<td>7. The formal training received by each trainee shall be fully documented in permanent training records.</td>
<td>Meets Standard</td>
<td>Automated, as well as hard copies of training records, are maintained.</td>
</tr>
</tbody>
</table>
### STANDARD 7.3. STAFF TRAINING (Key: AO)

This detention standard ensures that facility staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing training.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>8.</strong> Each new employee, contractor, and volunteer is provided an orientation prior to assuming duties. While tailored specifically for staff, contractors, and volunteers, the orientation programs include, at a minimum:</td>
<td></td>
<td>Each new employee, contractor, and volunteer is provided training which addresses the elements of this component. Trainees complete a written test or practical examination at the end of each training program to ensure they understand subject matter.</td>
</tr>
<tr>
<td>• ICE/ERO detention standards</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Cultural and language issues, including requirements related to limited English proficient detainees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Requirements related to detainees with disabilities and special-needs detainees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Code of ethics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Drug-free workplace</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Emergency plans and procedures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Signs of suicide risk, suicide precautions, prevention, and intervention</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Use of force</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Key and lock control</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Tour of the facility</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Staff rules and regulations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Sexual abuse/sexual misconduct awareness and reporting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Hostage situations and staff conduct if taken hostage</td>
<td>Meets Standard</td>
<td></td>
</tr>
<tr>
<td><strong>9.</strong> Employees and contractors who have minimal detainee contact and no significant responsibilities involving detainees receive initial and annual training that includes:</td>
<td></td>
<td>Personnel who have minimal detainee contact must complete nine days of initial training that addresses working in a correctional setting, as well as training that addresses their specific job duties. The employees also complete forty-hours of annual training.</td>
</tr>
<tr>
<td>• ICE/ERO detention standards update</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Cultural and language issues including requirements related to limited English proficient detainees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Requirements related to detainees with disabilities and special needs detainees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Code of ethics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Staff rules and regulations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Key and lock control</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Signs of suicide risk, suicide precautions, prevention, and intervention</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Drug-free workplace</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Health-related emergencies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Emergency plans and procedures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Sexual abuse and sexual misconduct awareness</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Hostage situations and staff conduct if taken hostage</td>
<td>Meets Standard</td>
<td></td>
</tr>
</tbody>
</table>
### STANDARD 7.3. STAFF TRAINING (Key: AO)

This detention standard ensures that facility staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing training.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>10. Professional and support employees (including contractors) who have</td>
<td></td>
<td></td>
</tr>
<tr>
<td>regular or daily detainee contact will receive initial and annual training</td>
<td></td>
<td></td>
</tr>
<tr>
<td>on the following subjects, at a minimum:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• ICE/ERO detention standards</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Cultural and language issues including requirements related to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>limited English proficient detainees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Requirements related to detainees with disabilities and special</td>
<td></td>
<td></td>
</tr>
<tr>
<td>needs detainees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Security procedures and regulations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Sexual harassment and sexual misconduct awareness (including the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>contents of Standard 2.11)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Appropriate conduct with detainees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Code of Ethics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Health-related emergencies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Drug-free workplace</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Supervision of detainees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Signs of hunger strike</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Signs of suicide risk, suicide precautions, prevention, and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>intervention</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Use-of-force regulations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Hostage situations and staff conduct if taken hostage</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Report writing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Detainee rules and regulations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Key and lock control</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Rights and responsibilities of detainees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Safety procedures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Emergency plan and procedures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Interpersonal relations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Communication skills</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Cardiopulmonary resuscitation (CPR)/First aid</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Counseling techniques</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Meets Standard

Professional and support personnel, including contractors, are provided training which addresses the elements of this component. Trainees complete a written test or practical examination at the end of each training program to ensure they understand subject matter.
## STANDARD 7.3. STAFF TRAINING  
(Key: AO)

This detention standard ensures that facility staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing training.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>11. Full-time health care employees receive, in addition to the training</td>
<td>Meets</td>
<td>Full-time health care employees are provided additional training in which the elements of this</td>
</tr>
<tr>
<td>areas above, instruction in the following:</td>
<td>Standard</td>
<td>component are addressed.</td>
</tr>
<tr>
<td>• Medical grievance procedures and protocols</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Emergency medical procedures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Occupational exposure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Personal protective equipment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Bio-hazardous waste disposal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Overview of the detention operations.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Security personnel will receive, in addition to the training areas</td>
<td>Meets</td>
<td>Security personnel is provided three-weeks training in addition to the initial nine-days training</td>
</tr>
<tr>
<td>above, training on the following subjects, at a minimum:</td>
<td>Standard</td>
<td>all personnel must complete. The additional training covers the elements of this component.</td>
</tr>
<tr>
<td>• Searches of detainees, housing units, and work areas</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Self-defense techniques</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Use-of-force regulations and tactics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Situation Response Teams (SRTs) receive:</td>
<td>Meets</td>
<td>The facility employees a special operations response team (SORT). In addition to the basic</td>
</tr>
<tr>
<td>Specialized training before undertaking their assignments.</td>
<td>Standard</td>
<td>training provided to security personnel, SORT members must complete an additional 56-hours of</td>
</tr>
<tr>
<td></td>
<td></td>
<td>specialized training before taking part in SORT activities. They are provided an additional</td>
</tr>
<tr>
<td></td>
<td></td>
<td>eight-hours of specialized training each month.</td>
</tr>
<tr>
<td>14. <strong>PRIORITY:</strong> Personnel authorized to use firearms receive training</td>
<td>Meets</td>
<td>Personnel authorized to use firearms complete classroom training and must qualify with a semi-</td>
</tr>
<tr>
<td>that covers their use, safety, and care and constraints on their use --</td>
<td>Standard</td>
<td>automatic handgun and shotgun. Also, these officers must qualify with firearms annually. The</td>
</tr>
<tr>
<td>before being assigned to a post involving their possible use.</td>
<td></td>
<td>additional training addresses the elements of this component.</td>
</tr>
<tr>
<td>All personnel authorized to use firearms demonstrate competency in their</td>
<td></td>
<td></td>
</tr>
<tr>
<td>use at least annually.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. <strong>PRIORITY:</strong> Personnel authorized to use chemical agents receive</td>
<td>Meets</td>
<td>Specific personnel, generally supervisors, are trained in the use of chemical agents and the</td>
</tr>
<tr>
<td>training in the use of chemical agents and in the treatment of</td>
<td>Standard</td>
<td>treatment of individuals who have been exposed to the chemical. This training must be completed</td>
</tr>
<tr>
<td>individuals exposed to a chemical agent before being assigned to a post</td>
<td></td>
<td>before the officer is cleared to use a chemical agent.</td>
</tr>
<tr>
<td>involving their possible use.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### STANDARD 7.3. STAFF TRAINING – Reviewer Summary

(Use following format for dates: mm/dd/yyyy)

#### Overall Remarks: (Record significant facts, observations, other sources used, etc.) (5000 Character Max)

The facility maintains a training plan that ensures personnel, contractors, and volunteers are provided appropriate orientation, initial training, and annual refresher training. The training program is designed to provide appropriate training to new personnel, contractors, and volunteers before their entering the facility and having contact with the detainee population. Annual refresher training is provided to enhance and reinforce the facility personnel's understanding of policy and procedure.

Evaluation of this standard was based on a review of the training policy, training curriculums, and training documentation, and an interview with the LDM.

<table>
<thead>
<tr>
<th>Overall Rating: Meets Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reviewer Name (Printed): [Redacted]</td>
</tr>
</tbody>
</table>

Reviewer Signature (for printed form submission):
**STANDARD 7.4. DETAINEE TRANSFERS** *(Key: AP)*

This detention standard is written to ensure that transfers of detainees from one facility to another are accomplished in a manner that ensures the safety and security of the staff, detainees, and the public; and that the process relating to transfers of detainees is carried out professionally and responsibly with respect to notifications, detainee records, and the protection of detainee funds and property.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The sending facility ensures that:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Specific plans and time schedules are not discussed with the detainee prior to transfer.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• The detainee is notified of the transfer immediately prior to departing the facility, in a language or manner he/she can understand.</td>
<td>Meets Standard</td>
<td>Standard operating procedures adhere to the requirements of the component, per the chief of unit management and an intake officer.</td>
</tr>
<tr>
<td>• The detainee is not permitted to make or receive any phone calls, or have contact with any detainee in the general population, until he/she reaches the destination facility.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. The sending facility shall ensure that the detainee acknowledges at the time of transfer, in writing, that:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• He or she has received the transfer destination information;</td>
<td>Meets Standard</td>
<td>This component was rated Does Not Meet Standard during the last inspection because detainees transferring to other facilities did not acknowledge, in writing, that they had received the information required in the component. Currently, all component requirements are met by the facility, per the chief of unit management. Detainees are provided a copy of the Detainee Transfer Notification Form during out-processing. Detainees sign a receipt acknowledging all out-processing materials, notification, and their property have been provided.</td>
</tr>
<tr>
<td>• It is his or her responsibility to notify family members if so desired, upon admission into the receiving facility; and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• He or she may place a domestic phone call, at no expense to the detainee, upon admission into the receiving facility.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. A detainee may not be transferred from any facility without the appropriate Form I-203 or I-216 or equivalent authorizing the detail.</td>
<td>Meets Standard</td>
<td>Form I-203 and/or I-216 is required for all transfers, per the chief of unit management.</td>
</tr>
<tr>
<td>4. The facility health care provider shall be notified sufficiently in advance of the transfer that medical staff may determine and provide for any associated medical needs.</td>
<td>Meets Standard</td>
<td>Health care staff are provided sufficient advance notice of transfers, per the health services administrator (HSA).</td>
</tr>
</tbody>
</table>
### STANDARD 7.4. DETAINEE TRANSFERS (Key: AP)

This detention standard is written to ensure that transfers of detainees from one facility to another are accomplished in a manner that ensures the safety and security of the staff, detainees, and the public; and that the process relating to transfers of detainees is carried out professionally and responsibly with respect to notifications, detainee records, and the protection of detainee funds and property.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>5. When a detainee is transferred within the ICE Health Service Corps (IHSC) system, ICE/ERO shall ensure that:</td>
<td></td>
<td>This component was rated Does Not Meet Standard during the last inspection because when a detainee was transferred, the Medical Transfer Summary was not placed in a sealed envelope with the detainee’s name, A-number and marked “MEDICAL CONFIDENTIAL.”</td>
</tr>
<tr>
<td>• Form USM-553, or equivalent Medical Transfer Summary, and a copy of the detainee’s full medical record accompanies the detainee; and</td>
<td></td>
<td>When a detainee is transferred to an IGSA detention facility, the sending facility shall ensure that the Transfer Summary accompanies the detainee. A copy of the full medical record must accompany each detainee during transfer unless extenuating circumstances make this impossible, in which case the full medical record will follow as soon as practicable.</td>
</tr>
<tr>
<td>• The full medical record is placed in a sealed envelope or other container labeled with the detainee’s name and A-number and marked “MEDICAL CONFIDENTIAL.”</td>
<td>Meets Standard</td>
<td></td>
</tr>
</tbody>
</table>

When a detainee is transferred to an IGSA detention facility, the sending facility shall ensure that the Transfer Summary accompanies the detainee. A copy of the full medical record must accompany each detainee during transfer unless extenuating circumstances make this impossible, in which case the full medical record will follow as soon as practicable.
**STANDARD 7.4. DETAINEE TRANSFERS** (Key: AP)

This detention standard is written to ensure that transfers of detainees from one facility to another are accomplished in a manner that ensures the safety and security of the staff, detainees, and the public; and that the process relating to transfers of detainees is carried out professionally and responsibly with respect to notifications, detainee records, and the protection of detainee funds and property.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. The sending facility's medical staff shall prepare a Transfer Summary that must accompany the transferee. Either the USM 553 Form or a facility-specific form may be used, provided it shows: TB clearance, including PPD with the test dates, and Chest x-ray results if the detainee has received a positive PPD reading; Current mental and physical health status, including all significant health issues; Current medications, with specific instructions for medications that must be administered en route; Any pending medical or mental health evaluations, tests, procedures, or treatments for a serious medical condition scheduled for the detainee at the sending facility; and The name and contact information of the transferring medical official.</td>
<td>Meets Standard</td>
<td>A Transfer Summary, completed by health care personnel, accompanies each transferring detainee. This document includes all the information listed in the component, per the HSA.</td>
</tr>
<tr>
<td>7. Transportation staff may not transport a detainee without the required Transfer Summary, which is essential for detainee safety while in transit.</td>
<td>Meets Standard</td>
<td>A completed Transfer Summary is a required document for all detainee transfers.</td>
</tr>
<tr>
<td>8. Upon receiving notification that a detainee is to be transferred, appropriate medical staff at the sending facility shall notify the facility administrator of any medical/psychiatric alerts or holds that have been assigned to the detainee, as reflected in the detainee’s medical records. The facility administrator shall notify ICE/ERO of any medical/psychiatric alerts or holds placed on a detainee that is to be transferred.</td>
<td>Meets Standard</td>
<td>The HSA is responsible for notifying the OIC or designee, ICE/ERO, and the HSA counterpart at the receiving facility of any transferring detainee’s medical and/or psychiatric alerts or holds.</td>
</tr>
<tr>
<td>9. If a detainee has been placed in a medical hold status, the detainee must be evaluated and cleared by a licensed independent practitioner prior to transfer. If the evaluation indicates that transfer is medically appropriate but that health concerns associated with the transfer remain, medical staff at the sending facility shall notify ICE and shall provide ICE requested information and other assistance, to the extent practicable, to enable ICE to make appropriate transfer determinations.</td>
<td>Meets Standard</td>
<td></td>
</tr>
</tbody>
</table>
### STANDARD 7.4. DETAINEE TRANSFERS (Key: AP)

This detention standard is written to ensure that transfers of detainees from one facility to another are accomplished in a manner that ensures the safety and security of the staff, detainees, and the public; and that the process relating to transfers of detainees is carried out professionally and responsibly with respect to notifications, detainee records, and the protection of detainee funds and property.

<table>
<thead>
<tr>
<th>Components</th>
<th>Rating</th>
<th>Remarks (1000 Char Max)</th>
</tr>
</thead>
</table>
| **10. PRIORITY:** Prior to transfer, medical personnel shall provide the transporting officers instructions and, if applicable, medication(s) for the detainee’s care in transit. Detainees shall be transferred with, at a minimum, 7 days’ worth of prescription medications (TB medications, a 15 day supply) to ensure continuity of care throughout the transfer and subsequent intake process. Medications shall be:  
- Placed in a property envelope with the detainee’s name and A-number, and appropriate administration instructions, on it,  
- Accompany the transfer, and  
- If unused, be turned over to the receiving medical personnel. | Meets Standard | Transport officers are provided with only the information necessary to assist in the safe transport of a detainee. To ensure continuity of care throughout the transfer process, a detainee is provided a minimum of seven days' worth of their prescription medications, fifteen days' supply of TB medications and a thirty-day supply of HIV/AIDS medication, when applicable, per the HSA. Medications are placed in a properly marked envelope, as prescribed in the component. Medications accompany the detainee in the transport vehicle. Procedure requires unused medication to be turned over to an appropriate staff member at the receiving jurisdiction. |
| **11. Before transfer, the sending facility shall return all funds and small valuables to the detainee and close out all forms G-589 (or local IGSA funds and valuables receipts) in accordance with the Detention Standard on Funds and Personal Property.** | Meets Standard | All property, funds, and valuables are returned to detainees being transferred to another facility. All local property forms are closed out during release processing. Procedures adhere to the requirements of the Funds and Personal Property standard. |
| **12. After admission into the receiving facility or Field Office, all detainees must be given the documented opportunity to make one domestic three-minute phone call at no cost to the detainee. The responsible processing supervisor or his/her designee shall ensure that the detainee is promptly informed that he/she may notify interested persons of the transfer.** | Meets Standard | During intake processing, detainees are offered a free telephone call to announce their arrival at this facility, per the intake officer. Documentation supports the practice. |

### STANDARD 7.4. DETAINEE TRANSFERS – Reviewer Summary

*(Use following format for dates: mm/dd/yyyy)*
## STANDARD 7.4. DETAINEE TRANSFERS – Reviewer Summary

**Overall Remarks:** *(Record significant facts, observations, other sources used, etc.) (5000 Character Max)*

Detainee transfers are conducted following the required notification, safety, and medical requirements specified in the standard. The facility does not provide a full medical record for transfers, per the 2016 supplemental language to the PBNDS 2011 Detainee Transfers standard. Food and water are provided per the Transportation by Land standard, when necessary.

Communication assistance is provided when explaining detainee transfers to detainees with disabilities and/or limited English proficiency through the use of audio/visual materials, telephone equipment, translation services, staff intervention, and/or other auxiliary aids including but not limited to those aids listed in the standard.

A review of policy and interviews with the HSA, the chief of unit management, an intake officer and the food service director revealed the transfer of detainees from one facility to another is professionally and responsibly managed concerning notifications, detainee records, safety and security concerns, and protection of detainee funds and personal property.

<table>
<thead>
<tr>
<th>Overall Rating: Meets Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reviewer Name (Printed):</td>
</tr>
</tbody>
</table>

**Reviewer Signature** *(for printed form submission):*
**DOCUMENT CHECK**

The document check should be run upon completion of the review form and PRIOR to submission to DHS-ICE. This check will help ensure the form is ready for upload to DHS-ICE systems. Errors indicate issues were found with specific data entered into the form. Items Not Rated indicate there were line items found on the form which remain in a “Not Rated” status. This action will also update the table of contents.

**The check will take several minutes to complete, during which the screen will flash.**

<table>
<thead>
<tr>
<th>Review Document Issue Summary</th>
<th>Ratings check complete.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check Document:</td>
<td>Run Check</td>
</tr>
<tr>
<td>Error(s) Found:</td>
<td>0</td>
</tr>
<tr>
<td>Items Not Rated:</td>
<td>0</td>
</tr>
</tbody>
</table>

**Errors:**

No Errors Found

**Items Not Rated:**

All Items Rated

*Run Indicator: ☒*
October 1, 2020

TO: [Redacted]
Assistant Director for Detention Management

FROM: [Redacted]
Lead Compliance Inspector
The Nakamoto Group, Inc.

SUBJECT: Annual Inspection of the Torrance County Detention Facility

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE Performance-Based National Detention Standards (PBNDS) 2011 of the Torrance County Detention Facility in Estancia, New Mexico during the period of September 29, 2020, to October 1, 2020. This is an IGSA facility.

The inspection was performed under the guidance of Jack T. Hartwig, Lead Compliance Inspector. Team Members were:

<table>
<thead>
<tr>
<th>Subject Matter Field</th>
<th>Team Member</th>
</tr>
</thead>
<tbody>
<tr>
<td>Detainee Rights</td>
<td>[Redacted]</td>
</tr>
<tr>
<td>Security</td>
<td></td>
</tr>
<tr>
<td>Medical Care</td>
<td></td>
</tr>
<tr>
<td>Medical Care</td>
<td></td>
</tr>
<tr>
<td>Safety</td>
<td></td>
</tr>
</tbody>
</table>

Type of Inspection

This is a scheduled annual inspection, which is performed to determine overall compliance with the ICE PBNDS 2011 for Over 72-hour facilities. The facility received a rating of Meets Standards during the November 2019 annual inspection.

Inspection Summary

The Torrance County Detention Facility is currently accredited by:

- The American Correctional Association (ACA) - No
- The National Commission on Correctional Health Care (NCCHC) - No
- The Joint Commission (TJC) - No
- Prison Rape Elimination Act (PREA) - No

Standards Compliance

The following information is a summary of the standards that were reviewed and overall compliance that was determined as a result of the 2019 90-day follow-up inspection and 2020 PBNDS annual compliance inspections:
<table>
<thead>
<tr>
<th>2019 Annual Inspection 90-day follow-up</th>
<th>2020 Annual Inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meets Standards</td>
<td>Meets Standards</td>
</tr>
<tr>
<td>39</td>
<td>39</td>
</tr>
<tr>
<td>Does Not Meet Standards</td>
<td>Does Not Meet Standards</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Repeat Finding</td>
<td>Repeat Finding</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Not Applicable</td>
<td>Not Applicable</td>
</tr>
<tr>
<td>3</td>
<td>3</td>
</tr>
</tbody>
</table>

The inspection team identified one (1) deficient component in the following one (1) standard:

Staff Training - 1

**Facility Snapshot/Description**

The Torrance County Detention Facility is in Estancia, New Mexico, approximately fifty miles southwest of Albuquerque. The facility is owned and operated by CoreCivic. During the inspection, the facility housed 127 adult male and female detainees, which included 47 ICE detainees, 42 Torrance County detainees, and 38 U. S. Marshals Service detainees. The facility has an operational capacity of 842 beds and houses all classification levels. Detainees are classified by ICE before their arrival. ICE detainees are not housed with non-ICE detainees. The average length of stay for an ICE detainee is 151 days.

The compound contains the main facility and three out-buildings that are all surrounded by two sixteen-foot-high chain link fences supplemented with razor ribbon on top and bottom, and an electric stun fence to complete the secure perimeter. Surveillance cameras offer visibility to the entire perimeter and interior movement corridors. The facility is equipped with a 199-surveillance camera network, that is monitored 24-hours a day by central control officers. All exterior building doors and interior security gates and doors are under constant camera surveillance and controlled by central control staff.

There are five housing units divided into sub-sections for a total of eight separate living areas that are configured into cell and dormitory designs. Five of the living areas are further divided into four sub-sections containing either 38 or 40 beds each. Two dormitory living areas contain 75 beds each; there is one special management unit (SMU) living area designed with eighteen two-bed cells. There was one ICE detainee in segregation status during the inspection. The facility dedicated part of one living area that currently serves as a COVID-19 housing unit; it was empty during the inspection.

Each living area, except the SMU, has a common dayroom which is equipped with a television, fixed table/chair units for detainees to eat their meals, play games, and gather for conversation. Electronic tablets are available for all detainees to send and receive emails, make telephone calls, play games, read books, participate in video-visits, send requests directly to facility staff and ICE/ERO personnel, and to file grievances. Tablets include the LexisNexis collection, the local handbook, and all posted announcements and bulletins. Detainees are provided indoor and outdoor recreation.
Inspectors interviewed 22 English and non-English speaking detainees with some assistance from the language line interpreters. Generally, the detainees felt safe in the facility; however, six detainees stated they felt a racist attitude from the officers and one captain. The Detainee Rights SME discussed this topic with the OIC who stated he was aware of the captain incident and would give consideration and review to the other reported concerns. Detainees reported they received their handbooks and had no substantive concerns about medical treatment. The Medical SME discussed the minimal minor health care complaints with the health services administrator. The identified detainees were seen by the health care unit and received the proper medical care in all cases. Follow-up care was scheduled and will be scheduled for those detainees whose conditions present a need. There was a general dislike for the food, i.e. watery rice, mushy potatoes, bad lettuce, no meat, etc. The Safety SME discussed the comments with the food service director who concluded the menu does not reflect the comments and the meals have all been approved by a registered dietician. No further action was determined necessary. There was a general concern that the bathrooms were dirty because the detainees could not get the proper cleaning supplies. The Detainee Rights SME discussed this topic with the OIC. The OIC claimed the complaints were not true but he would investigate the matter further.

An incident where 29 detainees declared they were on a hunger strike took place from May 12-14, 2020. The detainees cited concerns about COVID-19 and added other general complaints to the agenda. The Detainee Rights SME discussed the issue with the OIC who claimed the reaction was primarily due to COVID-19 restrictions and testing. The detainees felt the precautions were not protective enough to guard their health. Discussions between staff and the detainees ensued and ultimately resulted in the declaration lasting less than 72 hours.

An assessment of the general cleanliness of the facility could not be determined due to the remote nature of the inspection.

Detainee telephone services are provided by Talton Communication. Medical services are provided by CoreCivic. Food service operations are contracted with Trinity Group. ICE detainees are not charged medical co-pays.

Areas of Concern/Significant Observations

There was a notable number of staff misconduct grievances filed during the first eight months of 2020. Of the 84 grievances filed, 62 alleged staff misconduct; 46 of those were substantiated in the detainee’s favor. The inspection was conducted remotely, and inspectors were unable to personally observe practices and procedures within the facility. The inspection team relied upon photographs and/or videos to validate the observation of many standards.

Recommended Rating and Justification
LCI Assurance Statement

The findings of compliance and non-compliance are accurately and completely documented on the G-324A Inspection Form and are supported by documentation in the inspection file. A telephone, call-in out brief was conducted at the facility. In addition to the entire Nakamoto Group, Inc. Inspection Team, there was facility and ICE/ERO personnel who phoned in and listened to the final comments.

[Redacted]

Lead Compliance Inspector

October 1, 2020

Printed Name of LCI

Date
Good morning,

Attached is the El Paso Field Office submission.

Thank you,

Special Assistant
El Paso Field Office
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
desk: 915-856-5400; cell: 915-315-9701
11541 Montana Avenue, Suite 2
El Paso, TX 79936
ice.dhs.gov

Greetings,

On behalf of Assistant Director, Inspections and Detention Oversight, the Office of Detention Oversight (ODO) has completed the report for the inspection of the Torrance County Detention Facility, in Estancia, New Mexico, which took place May 3-7, 2021. The report and transmittal memo are available here.

Additionally, please send the approved Uniform Corrective Action Plan addressing ODO's deficiencies by September 19, 2021, to ice.dhs.gov.

Please let me know if you have any questions or concerns.

V/R
(i) This e-mail and any files transmitted with it are confidential and intended solely for the use of the intended recipient(s). If you have received this e-mail in error, please notify the sender immediately and delete this e-mail and any associated files from your system. (ii) Views or opinions presented in this e-mail are solely those of the author and do not necessarily represent those of CoreCivic. (iii) The recipient should check this e-mail and any attachments for the presence of viruses. The company accepts no liability for errors or omissions caused by e-mail transmission or any damage caused by any virus transmitted by or with this e-mail. This email has been scanned for content and viruses by the Symantec Email Security Cloud service.
Uniform Corrective Action Plan

ICE Uniform Corrective Action Plan (ODO Reviews)

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Torrance County Detention Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (Street and Name)</td>
<td>209 County Road 49</td>
</tr>
<tr>
<td>City, State and Zip Code</td>
<td>Estancia, NM 87016</td>
</tr>
<tr>
<td>County</td>
<td>Torrance</td>
</tr>
<tr>
<td>Date[s] of Facility Review</td>
<td>May 3-7, 2021</td>
</tr>
<tr>
<td>Complete and Return to ICE HQ No Later Than:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Facility Corrective Action Plan Assigned to (Signed by AFOD or Higher)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acting Deputy Field Office Director</td>
</tr>
<tr>
<td>Date of Final Submission</td>
</tr>
<tr>
<td>09/10/2021</td>
</tr>
</tbody>
</table>

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

Report produced on June 24, 2013
Department of Homeland Security  
Immigration and Customs Enforcement  
Office of Enforcement and Removal Operations  

Instructions for Corrective Action Response

Provide a detailed description of the corrective action taken by the facility to address each of the deficiencies identified in the Office of Detention Oversight review. Please ensure that each corrective action corrects the noted deficiency to the fullest extent possible. In the event a deficiency cannot be corrected within the authorized timeline, an explanation is required in the “Corrections Made” column. The explanation should include a work around solution while pending final resolution, and an approximate completion date. If an extension is needed, the Field Office must contact the appropriate DMD staff member with this request in advance of the specified timelines for submission.

*Exceptions to this timeline may be granted for necessary construction and staffing requirements, but will require an estimated completion date and temporary “work around” as part of the approved UCAP. Serious life and safety issues must be corrected immediately.*

<table>
<thead>
<tr>
<th>ICE Uniform Corrective Action Plan</th>
<th>Torrance County Detention Facility (ELP)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Standard</strong></td>
<td><strong>Deficiency</strong></td>
</tr>
<tr>
<td>1. SECURITY ADMISSIONS AND RELEASE (FS&amp;C) (V)(H)(1)(9)(c)</td>
<td><em>ODO reviewed five detainee release files and found no Order to Release form (Form I-203) in two out of five release files (Deficiency AR-80).</em>&lt;br&gt;&lt;br&gt;<em>ODO reviewed five detainee release files and found one out of five release files did not contain a copy of the detainee’s property inventory form (Deficiency AR-91).</em></td>
</tr>
</tbody>
</table>

---


2 “The detainee shall check his/her property against the original personal property inventory form. If all property is correctly accounted for, the detainee shall sign the inventory sheet, a copy of which the officer shall place in the detainee’s detention file.” See ICE PBNDs 2011 (2013 Errata), Standard, Admission and Release, Section (V)(H)(9)(c).

---

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)  
Report produced on June 24, 2013
account for Forms I-203 / I-216.

On 05/20/2021, TCDF implemented an intake file checklist that includes verifying the presence of detainee property inventory forms. Ex #1 page 8

On 05/25/2021, TCDF conducted a final verification by records staff that all release documentation is present prior to filing the records. Ex. #1 page 16

Effective 06/10/2021, TCDF staff began notifying ICE/ERO of any discrepancies with Forms I-203/I-216.

On 06/22/2021, TCDF Chief of Unit Mgmt. conducted refresher training with Receiving
2. CUSTODY CLASSIFICATION SYSTEM (V)(K)

ODO reviewed the facility’s detainee handbook and found no explanation of the classification levels with the conditions and restrictions applicable to each. Specifically, the handbook did not include an explanation of a high-classification level with the conditions and restrictions (Deficiency CCS-66-3).

Effective 08/09/2021, TCDF added a supplement to the Detainee Handbook to address the classification levels with the conditions and restrictions applicable to each. A copy of the supplement will be provided to existing detainees and issued with the Detainee Handbook to all new arrivals during the intake process. Exhibit 2 (p. 9)

08/09/2021

---

3 “The ICE Detainee Handbook standard section on classification shall include: …

- An explanation of the classification levels, with the conditions and restrictions applicable to each.
- The procedures by which a detainee may appeal his or her classification.” See ICE PBND 2011 (2013 Errata), Standard, Custody Classification System, Section (V)(K).

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

Report produced on June 24, 2013
3. FUNDS AND PERSONAL PROPERTY

| ODO reviewed the facility’s detainee handbook and found no procedures for filing a claim for lost or damaged property (Deficiency FPP-194) |
| ODO reviewed the facility’s detainee handbook and found no notification to detainees on how to access personal funds to pay for legal services (Deficiency FPP-205) |
| ODO reviewed seven personal property forms and found seven out of seven forms did not indicate the detainee’s time of admission (Deficiency FPP-856) |

Effective 08/09/2021, TCDF created a supplement to the Detainee Handbook to address the procedures for filing a claim for lost or damaged property and notification to detainees on how to access personal funds to pay for legal services. A copy of the supplement will be provided to existing detainees and issued with the Detainee Handbook to all new arrivals during the intake process. Exhibit 2 (pp. 7-8 & 21)

---

4 “The detainee handbook or equivalent shall notify the detainees of facility policies and procedures related to personal property, including: …
   5. the procedure for filing a claim for lost or damaged property.” See ICE PBNDS 2011 (2013 Errata), Standard, Funds and Personal Property, Section (V)(C)(5).

5 “The detainee handbook or equivalent shall notify the detainees of facility policies and procedures related to personal property, including: …
   6. access to detainee personal funds to pay for legal services.” See ICE PBNDS 2011 (2013 Errata), Standard, Funds and Personal Property, Section (V)(C)(6).

6 “The personal property inventory form must contain the following information at a minimum:
   1. date and time of admission.” See ICE PBNDS 2011 (2013 Errata), Standard, Funds and Personal Property, Section (V)(I)(1).
On 06/17/2021, TCDF implemented a computer-generated Order Management System (OMS) property form which include a section to indicate the detainee's date & time of admission. Exhibit 3

On 06/22/2021, TCDF Chief of Unit Mgmt. conducted training with R&D staff on the proper completion of the OMS property form, specifically addressing entry of detainee's date & time of admission. The training was documented on a Form 4-2A, Training/Activity Attendance Roster. Exhibit 4
4. CARE FOOD SERVICES (V)(G)(5)(V)(K)(1)

**ODO reviewed photographs of bread used for kosher trays and found the facility did not purchase bread labeled “pareve” or “parve” (Deficiency FS-1997).**

**ODO reviewed six purchase requests for controlled-food items and found the food service director did not mark the item “hot” in six out of six purchase requests for sugar to signal the need for special handling (Deficiency FS-42614).**

<table>
<thead>
<tr>
<th>05/18/2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>After further research, TCDF confirmed the bread in use at that time for kosher trays was Parve, however, it was not labeled as Parve. On 05/18/2021, TCDF changed bread products for kosher trays to a product that is clearly labeled as Parve. Exhibit 5</td>
</tr>
<tr>
<td>05/04/2021</td>
</tr>
</tbody>
</table>

---

7 Only bread and margarine labeled “pareve” or “parve” shall be purchased for the kosher tray.” See ICE PBNDS 2011 (2013 Errata), Standard, Food Service, Section (V)(G)(5).
annotation compliance on 05/04/2021. Communication to the vendor, directing that purchase orders contain special handling requirements for delivery of controlled items shall be retained with each applicable purchase order. The TCDF Food Service Director shall inspect all purchase orders for controlled items prior to facility entry for a period of 2 months, beginning 05/2021, to monitor compliance. This review will be documented by initialing the purchase order(s) containing special handling instructions for delivery of controlled-food items or "hot item."
<table>
<thead>
<tr>
<th>5. MEDICAL CARE (V)(I)</th>
<th><strong>ODO reviewed 12 detainee medical records and found no reviews to assess priority of treatment by the clinical medical authority in 7 out of 12 records (Deficiency MC-14015).</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Exhibit 6</strong></td>
</tr>
<tr>
<td></td>
<td>On 05/20/2021, the TCDF Health Services Administrator conducted refresher training with the facility Nurse Practitioner regarding the requirement to submit all completed health assessments to the Certified Medical Assistants (CMAs) to review priority of treatment. The training was documented on a Form 4-2A, Training/Activity Attendance Roster. Exhibit 7</td>
</tr>
<tr>
<td></td>
<td>On 05/21/2021, formal disciplinary action was issued to the responsible staff member.</td>
</tr>
<tr>
<td></td>
<td>Effective 05/20/2021, a 60-day Continuous Quality Improvement Plan was developed and implemented.</td>
</tr>
</tbody>
</table>
(CQI) study was implemented to monitor compliance. Results of the study will be documented in the quarterly CQI meeting and provided to the Health Services Administrator. Further non-compliance will result in additional training, counseling, and/or progressive disciplinary action, as appropriate.
Office of Detention Oversight
Follow-Up Compliance Inspection

Enforcement and Removal Operations
ERO El Paso Field Office

Torrance County Detention Facility
Estancia, New Mexico

May 3-7, 2021
# TABLE OF CONTENTS

FACILITY OVERVIEW ........................................................................................................ 4

FOLLOW-UP COMPLIANCE INSPECTION PROCESS ......................................................... 5

FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS  
2011 (2013 ERRATA) MAJOR CATEGORIES ...................................................................... 6

DETAINEE RELATIONS ........................................................................................................ 7

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS ....................................................... 7

  SAFETY .................................................................................................................................. 7
  Environmental Health and Safety ......................................................................................... 7

  SECURITY ............................................................................................................................. 7
  Admission and Release ......................................................................................................... 7
  Custody Classification System ............................................................................................. 8
  Funds and Personal Property ............................................................................................... 8

  CARE ................................................................................................................................... 8
  Food Service ......................................................................................................................... 8
  Medical Care ....................................................................................................................... 9

CONCLUSION ....................................................................................................................... 9
# FOLLOW-UP COMPLIANCE INSPECTION TEAM MEMBERS

<table>
<thead>
<tr>
<th>Team Lead</th>
<th>ODO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assistant Team Lead</td>
<td>ODO</td>
</tr>
<tr>
<td>Contractor</td>
<td>Creative Corrections</td>
</tr>
<tr>
<td>Contractor</td>
<td>Creative Corrections</td>
</tr>
<tr>
<td>Contractor</td>
<td>Creative Corrections</td>
</tr>
<tr>
<td>Contractor</td>
<td>Creative Corrections</td>
</tr>
</tbody>
</table>

[Redacted]
FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a follow-up compliance inspection of the Torrance County Detention Facility (TCDF) in Estancia, New Mexico, from May 3 to 7, 2021. This inspection focused on the standards found deficient during ODO’s last inspection of TCDF from November 30 to December 3, 2020. The facility opened in May 2019 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at TCDF in August 2019 under the oversight of ERO’s Field Office Director in El Paso (ERO El Paso). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (2013 Errata).

ERO has assigned deportation officers (DO) and a detention services manager to the facility. A TCDF warden handles daily facility operations and manages 245 personnel. Trinity Food Service provides food services, and CoreCivic provides medical care and commissary services at the facility. The facility does not hold any accreditations from any outside entities.

<table>
<thead>
<tr>
<th>Capacity and Population Statistics</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICE Detainee Bed Capacity</td>
<td>842</td>
</tr>
<tr>
<td>Average ICE Detainee Population</td>
<td>81</td>
</tr>
<tr>
<td>Male Detainee Population (as of May 3, 2021)</td>
<td>7^5</td>
</tr>
<tr>
<td>Female Detainee Population (as of May 3, 2021)</td>
<td>N/A</td>
</tr>
</tbody>
</table>

During its last inspection, in Fiscal Year (FY) 2021, ODO found 3 deficiencies in the following areas: Facility Security and Control (2) and Special Management Units (1).

---

1 This facility holds male detainees with low, medium-low, medium-high, and high-security classification levels for periods longer than 72 hours.
2 On January 12, 2021, ERO Custody Management informed ODO TCDF had not changed to PBNDS 2011 (Revised 2016) and to inspect the facility in accordance with PBNDS 2011 (2013 Errata).
4 Ibid.
5 Per the ERO Facility List Report of May 3, 2021, TCDF had an FY 2020 average daily population of 23 detainees, and hence justification for ODO to schedule TCDF for an inspection in FY 2021. Although the facility’s population count during the inspection was less than 10, the facility has a current contract to house ICE detainees, serving as further justification for ODO to continue with the inspection.
FOLLOW-UP COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population of 10 or more detainees, and where detainees are housed for longer than 72 hours, to assess compliance with ICE National Detention Standards. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being. In FY 2021, to meet congressional requirements, ODO began conducting follow-up inspections at all ICE ERO detention facilities, which ODO inspected earlier in the FY.

While follow-up inspections are intended to focus on previously identified deficiencies, ODO will conduct a complete review of several core standards, which include but are not limited to Medical Care, Hunger Strikes, Suicide Prevention, Food Service, Environmental Health and Safety, Emergency Plans, Use of Force and Restraints/Use of Physical Control Measures and Restraints, Admission and Release, Classification, and Funds and Personal Property. ODO may decide to conduct a second full inspection of a facility in the same FY based on additional information obtained prior to ODO’s arrival on-site. Factors ODO will consider when deciding to conduct a second full inspection will include the total number of deficiencies cited during the first inspection, the number of deficient standards found during the first inspection, the completion status of the first inspection’s UCAP, and other information ODO obtains from internal and external sources ahead of the follow-up compliance inspection. Conditions found during the inspection may also lead ODO to assess new areas and identify new deficiencies or areas of concern should facility practices run contrary to ICE standards. Any areas found non-compliant during both inspections are annotated as “Repeat Deficiencies” in this report.

ODO was unable to conduct an on-site inspection of this facility, as a result of the COVID-19 pandemic and instead, conducted a remote inspection of the facility. During this remote inspection, ODO interviewed facility staff, ERO field office staff, and detainees, reviewed files and detention records, and was able to assess compliance for at least 90 percent or more of the ICE national detention standards reviewed during the inspection.
# FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (2013 ERRATA) MAJOR CATEGORIES

<table>
<thead>
<tr>
<th>PBNDS 2011 (2013 Errata) Standards Inspected(^6)</th>
<th>Deficiencies</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Part 1 – Safety</strong></td>
<td></td>
</tr>
<tr>
<td>Environmental Health and Safety</td>
<td></td>
</tr>
<tr>
<td><strong>Sub-Total</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Part 2 – Security</strong></td>
<td></td>
</tr>
<tr>
<td>Admission and Release</td>
<td></td>
</tr>
<tr>
<td>Custody Classification System</td>
<td></td>
</tr>
<tr>
<td>Facility Security and Control</td>
<td></td>
</tr>
<tr>
<td>Funds and Personal Property</td>
<td></td>
</tr>
<tr>
<td>Special Management Units</td>
<td></td>
</tr>
<tr>
<td>Use of Force and Restraints</td>
<td></td>
</tr>
<tr>
<td><strong>Sub-Total</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Part 4 – Care</strong></td>
<td></td>
</tr>
<tr>
<td>Food Service</td>
<td></td>
</tr>
<tr>
<td>Medical Care</td>
<td></td>
</tr>
<tr>
<td>Hunger Strikes</td>
<td></td>
</tr>
<tr>
<td>Significant Self-harm and Suicide Prevention and Intervention</td>
<td></td>
</tr>
<tr>
<td><strong>Sub-Total</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Total Deficiencies</strong></td>
<td></td>
</tr>
</tbody>
</table>

\(^6\) For greater detail on ODO’s findings, see the *Follow-Up Compliance Inspection Findings* section of this report.
DETAINEE RELATIONS

There were only seven detainees assigned to the facility, who all voluntarily agreed to participate in ODO interviews. None of the detainees made allegations of discrimination, mistreatment, nor abuse. Most detainees reported satisfaction with facility services except for the concern listed below. ODO conducted detainee interviews via video teleconference.

**Staff-Detainee Communication:** One detainee stated all documents he received were in English, which he does not understand, and had requested a Spanish-speaking translator.

- **Action Taken:** ODO interviewed the assigned DO and found ERO El Paso did know of this detainee’s need for translation services. ERO El Paso provided document translation for the detainee and instructed the detainee how to request future translation services.

FOLLOW-UP COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EHS)

ODO interviewed the safety manager (SM) and found the facility had not received annual fire inspections since July 2019 due to COVID-19 protocols. The SM provided ODO documentation showing the facility’s requests for annual inspections in 2020 and 2021, which showed the city fire marshal declined. ODO cited this as an **Area of Concern**.

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed five detainee release files and found no Order to Release form (Form I-203) in two out of five release files (**Deficiency AR-80**).

ODO reviewed five detainee release files and found one out of five release files did not contain a copy of the detainee's property inventory form (**Deficiency AR-91**).

---


8 “The detainee shall check his/her property against the original personal property inventory form. If all property is correctly accounted for, the detainee shall sign the inventory sheet, a copy of which the officer shall place in the detainee’s detention file.” See ICE PBNDS 2011 (2013 Errata), Standard, Admission and Release, Section (V)(H)(9)(c).
CUSTODY CLASSIFICATION SYSTEM (CCS)

ODO reviewed the facility’s detainee handbook and found no explanation of the classification levels with the conditions and restrictions applicable to each. Specifically, the handbook did not include an explanation of a high-classification level with the conditions and restrictions (Deficiency CCS-669).

ODO reviewed the facility’s assigned detainees’ color-coded uniforms in three different colors, based on classification levels with medium-high and high classifications wearing the same colors. The facility assigned uniforms as follows: dark green for low, chocolate brown for medium-low, and blue for medium-high/high. However, the facility’s detainee handbook documented the following uniform colors for classification: yellow for low, tan for medium-low, and dark green for medium-high/high. ODO cited this as an Area of Concern.

Funds and Personal Property (FPP)

ODO reviewed the facility’s detainee handbook and found no procedures for filing a claim for lost or damaged property (Deficiency FPP-1910)

ODO reviewed the facility’s detainee handbook and found no notification to detainees on how to access personal funds to pay for legal services (Deficiency FPP-2011)

ODO reviewed seven personal property forms and found seven out of seven forms did not indicate the detainee’s time of admission (Deficiency FPP-8512)

CARE

Food Services (FS)

ODO reviewed photographs of bread used for kosher trays and found the facility did not purchase bread labeled “pareve” or “parve” (Deficiency FS-19913).

9 “The ICE Detainee Handbook standard section on classification shall include: …
   • An explanation of the classification levels, with the conditions and restrictions applicable to each.
   • The procedures by which a detainee may appeal his or her classification.” See ICE PBNDS 2011 (2013 Errata), Standard, Custody Classification System, Section (V)(K).
10 “The detainee handbook or equivalent shall notify the detainees of facility policies and procedures related to personal property, including: …
   5. the procedure for filing a claim for lost or damaged property.” See ICE PBNDS 2011 (2013 Errata), Standard, Funds and Personal Property, Section (V)(C)(5).
11 “The detainee handbook or equivalent shall notify the detainees of facility policies and procedures related to personal property, including: …
   6. access to detainee personal funds to pay for legal services.” See ICE PBNDS 2011 (2013 Errata), Standard, Funds and Personal Property, Section (V)(C)(6).
12 “The personal property inventory form must contain the following information at a minimum:
   1. date and time of admission.” See ICE PBNDS 2011 (2013 Errata), Standard, Funds and Personal Property, Section (V)(C)(1).
13 Only bread and margarine labeled “pareve” or “parve” shall be purchased for the kosher tray.” See ICE PBNDS 2011 (2013 Errata), Standard, Food Service, Section (V)(G)(5).
ODO reviewed six purchase requests for controlled-food items and found the food service director did not mark the item “hot” in six out of six purchase requests for sugar to signal the need for special handling (Deficiency FS-426\textsuperscript{14}).

**MEDICAL CARE (MC)**

ODO reviewed 12 detainee medical records and found no reviews to assess priority of treatment by the clinical medical authority in 7 out of 12 records (Deficiency MC-140\textsuperscript{15}).

**CONCLUSION**

During this inspection, ODO assessed the facility’s compliance with 11 standards under PBNDS 2011 (2013 Errata) and found the facility in compliance with 6 of those standards. ODO found nine deficiencies in the remaining five standards.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>StandardsReviewed</td>
<td>20</td>
<td>11</td>
</tr>
<tr>
<td>Deficient Standards</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>Overall Number of Deficiencies</td>
<td>3</td>
<td>9</td>
</tr>
<tr>
<td>Repeat Deficiencies</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Areas of Concern</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Corrective Actions</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

\textsuperscript{14} “On the purchase request for potentially dangerous items (e.g., knives, mace, yeast, nutmeg, cloves, and other items considered contraband if found in a detainee’s possession), the FSA shall mark them “hot,” signaling the need for special handling.” See ICE PBNDS 2011 (2013 Errata), Standard, Food Service, Section (V)(K)(1).

\textsuperscript{15} “The CMA shall be responsible for review of all comprehensive health assessments to assess the priority for treatment.” See ICE PBNDS 2011 (2013 Errata), Standard, Medical Care, Section (V)(I).
MEMORANDUM FOR: Acting Executive Associate Director
Office of Enforcement and Removal Operations

FROM: Assistant Director
Inspections and Detention Oversight

SUBJECT: Compliance Inspection
Torrance County Detention Facility

The ICE Office of Professional Responsibility (OPR), Inspections and Detention Oversight Division (IDO), Office of Detention Oversight (ODO), conducted a follow-up compliance inspection of the Torrance County Detention Facility in Estancia, New Mexico, from May 3-7, 2021. The attached report contains ODO’s findings.

This report documents inspection results and serves as an official record. It is intended to provide senior management with an evaluation of the facility’s compliance with the ICE Performance-Based National Detention Standards 2011 (2013 Errata).

Attached is a PDF file of the facility report for dissemination to your designated field managers. If you wish to discuss the report findings, please have a member of your staff contact Acting Unit Chief OPR ODO, at (202) 732.

Attachment
DISCHARGE FILE CHECKLIST

This checklist must be completed at Discharge. All documentation required must be complete.

NAME: ___________________________ CCA#: ___________________________
DATE: 5-25-2021

Please initial each one when completed.

✓ Receiving and Discharging Checklist (note: only the discharge portion should be completed at Discharge.)
✓ Disposition of Non-Allowable Property Closed-Out (14-6A, if applicable)
✓ Facility Issued Property Close-out (14-6CC) (Dated and Condition)
✓ Allowable Personal Property Inventory/Receipt Closed-out (14-6BB, if applicable) Acknowledgement of Reason for Inventory.

✓ Account Transaction Receipt Closed-Out (if applicable)
✓ Detainee Transfer Notification (if applicable) NO
✓ Contracting Agency Offense Information (ICE-203/216, TCSO-Released Booking Sheet, Inmate Released Summary, Offender Released Summary, USMS 129)
✓ Inmate Discharge Checklist

Release Review by Booking Staff

FOR RECORDS DEPT. USE ONLY

File Close Out Date 7-19-21

Revised 03-04-2020

2022-ICLI-00045 12273
DI HARGE FILE CHECKLIST

This checklist must be completed at Discharge. All documentation required must be complete.

NAME: ____________________________ CCA#: ____________________________

DATE: 7-11-21

Please initial each one when completed.

☐ Receiving and Discharging Checklist (note: only the discharge portion should be completed at Discharge.)

☐ Disposition of Non-Allowable Property Closed-Out (14-6A, if applicable)

☐ Facility Issued Property Close-out (14-6CC) (Dated and Condition)

☐ Allowable Personal Property Inventory/Receipt Closed-out (14-6BB, if applicable) Acknowledgement of Reason for Inventory.

☐ Account Transaction Receipt Closed-Out (if applicable)

☐ Detainee Transfer Notification (if applicable)

☐ Contracting Agency Offense Information (ICE-203/216, TCSO-Released Booking Sheet, Inmate Released Summary, Offender Released Summary, USMS 129)

☐ Inmate Discharge Checklist

Release Review by Booking Staff: ____________________________

FOR RECORDS DEPT. USE ONLY

Release Date: ____________________________ File Close Out Date: 7-19-21

Revised 03-04-2020

2022-ICLI-00045 12274
DISCHARGE FILE CHECKLIST

This checklist must be completed at Discharge. All documentation required must be complete.

NAME: ___________________________ CCA#: ___________________________

DATE: 07/18/2021

Please initial each one when completed.

☐ Receiving and Discharging Checklist (note: only the discharge portion should be completed at Discharge.)

☐ Disposition of Non-Allowable Property Closed-Out (14-6A, if applicable)

☐ Facility Issued Property Close-out (14-6CC) (Dated and Condition)

☐ Allowable Personal Property Inventory/Receipt Closed-out (14-6BB, if applicable) Acknowledgement of Reason for Inventory.

☐ Account Transaction Receipt Closed-Out (if applicable)

☐ Detainee Transfer Notification (if applicable)

☐ Contracting Agency Offense Information (ICE-203/216, TCSO-Released Booking Sheet, Inmate Released Summary, Offender Released Summary, USMS 129)

☐ Inmate Discharge Checklist

Release Review by Booking Staff:

FOR RECORDS DEPT. USE ONLY

Release Date: ___________________________
Close Out Date: 7.19.21

2022-ICLI-00045 12275

Revised 03-04-2020
DISCHARGE FILE CHECKLIST

This checklist must be completed at Discharge. All documentation required must be complete.

NAME: [Redacted] CCA#: [Redacted]

DATE: 7-16-21

Please initial each one when completed.

- Receiving and Discharging Checklist (note: only the discharge portion should be completed at Discharge.)
- Disposition of Non-Allowable Property Closed-Out (14-6A, if applicable)
- Facility Issued Property Close-out (14-6CC) (Dated and Condition)
- Allowable Personal Property Inventory/Receipt Closed-out (14-6BB, if applicable) Acknowledgement of Reason for Inventory.
- Account Transaction Receipt Closed-Out (if applicable)
- Detainee Transfer Notification (if applicable)
- Contracting Agency Offense Information (ICE-203/216, TCSO-Released Booking Sheet, Inmate Released Summary, Offender Released Summary, USMS 129)
- Inmate Discharge Checklist

Release Review by Booking Staff: [Redacted]

FOR RECORDS DEPT. USE ONLY

Release Close Out Date: 7/19/21

Revised: 03-04-2020

2022-ICLI-00045 12276
<table>
<thead>
<tr>
<th>AGENCY</th>
<th>RECORDS</th>
<th>INTAKE</th>
<th>TOTAL</th>
<th>SIGNATURE</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICE-MALES</td>
<td>16</td>
<td>0</td>
<td>16</td>
<td></td>
<td>01/08/2021</td>
</tr>
<tr>
<td>TCSO-MALES</td>
<td>25</td>
<td>4</td>
<td>29</td>
<td></td>
<td>01/08/2021</td>
</tr>
<tr>
<td>TCSO-FEMALES</td>
<td>8</td>
<td>4</td>
<td>12</td>
<td></td>
<td>01/08/2021</td>
</tr>
<tr>
<td>USMS-MALES</td>
<td>58</td>
<td>2</td>
<td>60</td>
<td></td>
<td>01/08/2021</td>
</tr>
<tr>
<td>USMS FEMALES</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
<td>01/08/2021</td>
</tr>
<tr>
<td>AGENCY</td>
<td>RECORDS</td>
<td>INTAKE</td>
<td>TOTAL</td>
<td>SIGNATURE</td>
<td>DATE</td>
</tr>
<tr>
<td>ICE-MALES</td>
<td>7</td>
<td>0</td>
<td>7</td>
<td></td>
<td>05-7-21</td>
</tr>
<tr>
<td>TCSO-MALES</td>
<td>37</td>
<td>5</td>
<td>42</td>
<td></td>
<td>05-7-21</td>
</tr>
<tr>
<td>TCSO-FEMALES</td>
<td>9</td>
<td>2</td>
<td>11</td>
<td></td>
<td>05-7-21</td>
</tr>
<tr>
<td>USMS-MALES</td>
<td>49</td>
<td>1</td>
<td>50</td>
<td></td>
<td>05-7-21</td>
</tr>
<tr>
<td>USMS FEMALES</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
<td>05-7-21</td>
</tr>
<tr>
<td>AGENCY</td>
<td>RECORDS</td>
<td>INTAKE</td>
<td>TOTAL</td>
<td>SIGNATURE</td>
<td>DATE</td>
</tr>
<tr>
<td>ICE-MALES</td>
<td>7</td>
<td>0</td>
<td>7</td>
<td></td>
<td>05-7-21</td>
</tr>
<tr>
<td>TCSO-MALES</td>
<td>34</td>
<td>5</td>
<td>39</td>
<td></td>
<td>05-7-21</td>
</tr>
<tr>
<td>TCSO-FEMALES</td>
<td>8</td>
<td>2</td>
<td>10</td>
<td></td>
<td>05-7-21</td>
</tr>
<tr>
<td>USMS-MALES</td>
<td>50</td>
<td>0</td>
<td>50</td>
<td></td>
<td>05-7-21</td>
</tr>
<tr>
<td>USMS FEMALES</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
<td>05-7-21</td>
</tr>
<tr>
<td>AGENCY</td>
<td>RECORDS</td>
<td>INTAKE</td>
<td>TOTAL</td>
<td>SIGNATURE</td>
<td>DATE</td>
</tr>
<tr>
<td>ICE-MALES</td>
<td>7</td>
<td>300</td>
<td>367</td>
<td></td>
<td>05-21-21</td>
</tr>
<tr>
<td>TCSO-MALES</td>
<td>39</td>
<td>7</td>
<td>46</td>
<td></td>
<td>05-21-21</td>
</tr>
<tr>
<td>TCSO-FEMALES</td>
<td>45</td>
<td>2</td>
<td>47</td>
<td></td>
<td>05-21-21</td>
</tr>
<tr>
<td>USMS-MALES</td>
<td>49</td>
<td>0</td>
<td>49</td>
<td></td>
<td>05-21-21</td>
</tr>
<tr>
<td>USMS FEMALES</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
<td>05-21-21</td>
</tr>
<tr>
<td>AGENCY</td>
<td>RECORDS</td>
<td>INTAKE</td>
<td>TOTAL</td>
<td>SIGNATURE</td>
<td>DATE</td>
</tr>
<tr>
<td>ICE-MALES</td>
<td>33</td>
<td>133</td>
<td>366</td>
<td></td>
<td>05-28-21</td>
</tr>
<tr>
<td>TCSO-MALES</td>
<td>31</td>
<td>6</td>
<td>37</td>
<td></td>
<td>05-28-21</td>
</tr>
<tr>
<td>TCSO-FEMALES</td>
<td>5</td>
<td>2</td>
<td>7</td>
<td></td>
<td>05-28-21</td>
</tr>
<tr>
<td>USMS-MALES</td>
<td>45</td>
<td>0</td>
<td>45</td>
<td></td>
<td>05-28-21</td>
</tr>
<tr>
<td>USMS FEMALES</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
<td>05-28-21</td>
</tr>
</tbody>
</table>
TCDF
DETAINEE
HANDBOOK

Updated August 6, 2021
TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction/Mission</td>
<td>P. 3</td>
</tr>
<tr>
<td>Contacting ICE staff/Immigration court</td>
<td>P. 3</td>
</tr>
<tr>
<td>Purpose</td>
<td>P. 3</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>P. 3</td>
</tr>
<tr>
<td>Basic Detainee Responsibilities</td>
<td>P. 4</td>
</tr>
<tr>
<td>No Smoking Policy</td>
<td>P. 5</td>
</tr>
<tr>
<td>PREA/Victim Advocate (SAAPI)</td>
<td>P. 5</td>
</tr>
<tr>
<td>Initial Admission</td>
<td>P. 6</td>
</tr>
<tr>
<td>Reasonable Accommodation</td>
<td>P. 7</td>
</tr>
<tr>
<td>Funds and Personal Property</td>
<td>P. 7</td>
</tr>
<tr>
<td>Finances</td>
<td>P. 8</td>
</tr>
<tr>
<td>Classification</td>
<td>P. 9</td>
</tr>
<tr>
<td>Laundry/Clothing</td>
<td>P. 10</td>
</tr>
<tr>
<td>Personal Hygiene</td>
<td>P. 11</td>
</tr>
<tr>
<td>Barbering Services</td>
<td>P. 11</td>
</tr>
<tr>
<td>Detainee Dress Code</td>
<td>P. 11</td>
</tr>
<tr>
<td>Inspection of Persons/Property</td>
<td>P. 12</td>
</tr>
<tr>
<td>Contraband</td>
<td>P. 13</td>
</tr>
<tr>
<td>Living Conditions</td>
<td>P. 13</td>
</tr>
<tr>
<td>Sleeping Area/Sanitation</td>
<td>P. 14</td>
</tr>
<tr>
<td>Safety/Evacuation Drills</td>
<td>P. 14</td>
</tr>
<tr>
<td>Official Counts</td>
<td>P. 15</td>
</tr>
<tr>
<td>Meals</td>
<td>P. 15</td>
</tr>
<tr>
<td>Tablets</td>
<td>P. 16</td>
</tr>
<tr>
<td>Access to Telephones</td>
<td>P. 16</td>
</tr>
<tr>
<td>Religious</td>
<td>P. 17</td>
</tr>
<tr>
<td>Commissary</td>
<td>P. 17</td>
</tr>
<tr>
<td>Voluntary Work Program</td>
<td>P. 17</td>
</tr>
<tr>
<td>Library/Law Library</td>
<td>P. 18</td>
</tr>
<tr>
<td>Visitation</td>
<td>P. 19</td>
</tr>
<tr>
<td>Attorney Visitation</td>
<td>P. 19</td>
</tr>
<tr>
<td>Group Legal Rights Presentation</td>
<td>P. 20</td>
</tr>
<tr>
<td>Marriage</td>
<td>P. 20</td>
</tr>
<tr>
<td>Correspondence</td>
<td>P. 20</td>
</tr>
<tr>
<td>Notary, Copies &amp; Money Orders</td>
<td>P. 21</td>
</tr>
<tr>
<td>Detainee Disciplinary</td>
<td>P. 21</td>
</tr>
<tr>
<td>Grievance Procedures</td>
<td>P. 27</td>
</tr>
<tr>
<td>Segregation/Short Stay Unit</td>
<td>P. 29</td>
</tr>
<tr>
<td>Sick Call</td>
<td>P. 30</td>
</tr>
<tr>
<td>Access to Medical Services</td>
<td>P. 30</td>
</tr>
<tr>
<td>Pill Line</td>
<td>P. 31</td>
</tr>
<tr>
<td>Recreation</td>
<td>P. 31</td>
</tr>
<tr>
<td>Legal File</td>
<td>P. 32</td>
</tr>
<tr>
<td>Detention File</td>
<td>P. 32</td>
</tr>
<tr>
<td>Rights and Responsibilities</td>
<td>P. 32</td>
</tr>
<tr>
<td>Additional ICE Contact Information</td>
<td>P. 34</td>
</tr>
</tbody>
</table>

Updated August 6, 2021
INTRODUCTION / MISSION

- CoreCivic/Torrance County Detention Facility, (CoreCivic/TCDF) is a private company contracted by Immigration and Customs Enforcement (ICE). The mission of Torrance County Detention Facility is to provide a detention facility that is safe, secure and sanitary for detainees awaiting processing of their administrative hearing.
- ICE will answer your questions regarding the status of your travel and/or immigration documentation. CoreCivic/TCDF is not a part of ICE and has no control over your present situation related to court appearance, deportation matters, etc.

CONTACTING ICE STAFF

- Scheduled hours and days that ICE/ERO staff will be available to you in your unit are Tuesdays and Thursdays between the hours of 09:00am-10:00am. Any changes to this schedule shall be posted in your unit. Local Field Office address: 5441 Watson Drive, Albuquerque, NM 87106 (505) 452-4771.
- The ICE Officer in Charge (OIC), the Assistant Officer in Charge (AOIC) and designated department heads will conduct weekly unannounced (not scheduled) visits to your housing area. The purpose of these visits is to address your personal concerns and observe your living and working conditions. You have the opportunity to submit written questions, requests or concerns to ICE staff utilizing the Immigration Special Correspondence form. The Immigration Special Correspondence form should be placed in the box labeled “ICE” in your housing area and it will be delivered to ICE staff without reading, altering or delay. You may obtain assistance from another detainee, detention housing officer or other facility staff in preparing your request form. The ICE staff receiving your request form will respond as soon as possible but not later than within 72 hours from receiving your request. This procedure is not to be used for submitting formal grievances. (See “Grievance” section.)
- ICE staff will have the keys for the ICE boxes, located in the housing unit. ICE staff will pick up the requests, facility staff do not have access to these boxes.
- For additional contacting information, reference the last page of the handbook.

PURPOSE

- The purpose of this handbook is to explain to you the specific rules, regulations, policies and procedures that must be followed while in custody at this facility. The handbook will also hold you accountable for your actions while in custody at this facility. Therefore, it is each detainee’s responsibility to become familiar with the contents of this handbook.
- A copy of this handbook will be issued to each detainee upon intake and certain sections are posted on the bulletin boards in each housing area as well as on other bulletin boards throughout the facility. All detainees are required to acknowledge by signature, receipt of this handbook. If you have any questions, please ask the officer stationed at your housing area or send a written “Inmate Request” (not to be used for sending requests for information to ICE Staff) to the appropriate departments as listed throughout this handbook and on the bulletin board in your housing unit.

MAILING ADDRESS

- Your Name: ________________________________
- Your Alien Number: _________________________
- Your Housing Location: ______________________
- The facility is located at:

  CoreCivic/TCDF  
P.O. Box 837  
Estancia, New Mexico 87016

To write to the local ICE office the address is:

Updated August 6, 2021
Directions are available to visitors and/or attorneys by calling 505-384-2711.

**BASIC DETAINEE RESPONSIBILITIES**

It is the policy of the CoreCivic/TDCF and ICE to treat detainees with dignity and respect while maintaining a safe, secure, and sanitary detention facility. It is expected that staff will receive your full cooperation while waiting the processing of your case. In the simplest terms, you are expected to:

1. Follow and obey rules, laws, policies and procedures;
2. Obey all orders as given by staff members and contract security personnel;
3. Respect staff and other detainees at all times;
4. Respect TCDF and government property and the property of others;
5. Keep yourself, your clothing and living area clean at all times; and
6. Obey all safety, security, and sanitation rules, policies and procedures.

If you observe and comply with the above guidelines, you should have no problems while living at this facility awaiting the outcome of your hearing. When addressing staff, you should not refer to them by first name or nickname. You must refer to staff by their rank/title and last name (i.e.; Detention Officer, Shift Supervisor, Dr., Nurse, Mr., and Mrs. Ms). Staff members will address you in the same manner if they know your name. It is unreasonable to expect an officer to know all detainees within the facility by name. However, the officer or staff member will address you in an appropriate manner.

The following regulations pertain to specific expectations of each detainee to ensure the safety, health and security of each person assigned to this facility. These regulations are not separated from the posted rules of discipline; therefore, any violation may result in sanctions imposed against you. The purpose for separating these rules is to provide you with the opportunity to be aware of specific rules imposed relating to the activities, program and procedures related to living in the housing unit.

**Facility Rules**

1. **TABLES**
   Do not sit on table tops.

2. **THEFT**
   No unauthorized taking of an item of any kind that belongs to someone else, including CoreCivic/TCDF property.

3. **FIGHTING**
   Fighting is not allowed. Sparring, boxing, wrestling and play-fighting are not allowed at this facility.

4. **BED TIME**
   Regular bedtime will be at 10:00pm every night including weekends, you must be in your bed at this time. You will not be allowed to visit with each other after lights are out and must stay in your own bed. No one will be allowed in the dayroom after bedtime except pod orderlies while cleaning. No games of any kind are allowed in the bed area after bedtime.

5. **RESTRICTED AREAS**
   You are not allowed to make physical contact with the bars, doors, glass window area of the dormitories/housing units or the fence in the outside recreation areas.

6. **GAMBLING**
   No gambling of any kind is allowed.

Updated August 6, 2021
7. **SELLING or GIVING AWAY OF PERSONAL ARTICLES IS PROHIBITED**
   No black-market activities shall take place. Running a "store" is prohibited (i.e., selling candy, food, clothing radios, etc.)

8. **VERBAL AND PHYSICAL ABUSE**
   Verbal and physical abuse toward staff, detainees or other persons is prohibited and will not be tolerated.

9. **DESTRUCTION OF CoreCivic/TCDF PROPERTY**
   Destruction, alteration, graffiti, unauthorized use or wasting of property belonging to CoreCivic/TCDF or to another person is not allowed.

10. **RADIOS**
    Radios played without earphones will be confiscated as contraband.

11. **RULES AND REGULATIONS**
    You must follow all orders, either written or verbal, given by CoreCivic staff.

12. **Covering/Blocking Windows/Lights**
    Windows/lights of any kind are not to be covered and/or blocked at any time.

**NO SMOKING POLICY**

This is a non-smoking facility. NO CIGARETTES, tobacco, chewing tobacco, smokeless tobacco and/or E-Cigarettes, or smoking paraphernalia of any kind is allowed. Detainees who violate these rules will face disciplinary actions.

**PRISON RAPE ELIMINATION ACT (PREA) – SAAPI (Sexual Abuse & Assault Prevention Intervention)**

Engaging in or pressuring others to engage in sexual activities is **not** allowed. Criminal or Disciplinary Charges will be filed. Educational Materials regarding these acts are provided upon entry to the facility and are posted in each dormitory/housing unit. Contact any staff member to report activities of this nature. While you are incarcerated, no one has the right to pressure you to engage in sexual acts. Rape and sexual assault are violent acts. Regardless of your age, race, size, ethnicity, or sexual orientation, detainees should have the opportunity to serve their detention with dignity. Transgender and intersex inmates/detainees shall be given the opportunity to shower separately from other inmates/detainees. Following a review of the individual inmate's needs, a schedule and location will be determined with options to include showering at count time or other designated times.

**TORRANCE COUNTY DETENTION FACILITY HAS A ZERO TOLERANCE FOR ALL FORMS OF SEXUAL ABUSE AND ASSAULT.**

You do not have to tolerate sexual pressure, harassment, manipulation, or assault. Every detainee has a responsibility to eliminate sexual assault and sexual activity. If you are approached, pressured, or assaulted—**report it immediately**. You have several ways in which you can report sexual abuse:

1. Verbally telling any staff member you trust, to include detention officers, deportation officers, chaplains, medical staff or supervisors, the DHS Office of Inspector General, and the Joint Intake Center. Staff member will keep your information confidential and only discuss it with the appropriate officials on a need to know basis.
2. Writing a letter to the Warden/Administrator, sealing and marking it "CONFIDENTIAL".
3. Calling or writing someone outside the facility who can notify facility administrative staff.
4. Call at no expense to you the DHS Office of Inspector General (OIG) at the phone number 202-254-4100 or 1-800-323-8603 / 1-844-889-4357-TTY
5. Contacting their counselor official.
6. Writing the Office of DHS Office of Inspector General MAIL STOP 0305 at the following address:

   Updated August 6, 2021
7. Contact the ICE Detention Reporting and Information Line: 1-888-351-4024 or 9116# Language assistance is available.
8. Writing letter to Security or Unit Management Staff, sealing and marking it "CONFIDENTIAL".
9. Writing to the Managing Director, Facility Operations at the following address:
   5501 Virginia Way
   Brentwood, Tennessee, 37027

To ensure that your environment is safe, if you are aware of another detainee being sexually assaulted or involved in sexual behavior, report it immediately. Consensual sexual conduct between detainees, between detainees and staff, volunteers, or contract personnel is prohibited. Deliberate false allegations can result in disciplinary action and/or prosecution.

You will not be subjected to retaliation, reprisal, harassment, or disciplinary for truthfully reporting abuse or signs of abuse observed. Rape Crisis Center of Central New Mexico located at: 9741 Candelaria Rd. NE Albuquerque, NM 87112. Telephone number: 505-266-7711

INITIAL ADMISSION

- You are subject to a search upon admission into the facility and when there is reasonable cause to believe you may have contraband concealed on your person.
- We must obtain specific information to ensure that records of your entry are adequately documented. This information will also be utilized so we may classify you to the living area most suited to your individual needs. Such information will include; previous residence, nationality, race, sex, medical history and criminal history, if any.
- Identity documents such as Passports, Birth Certificates, etc. will be inventoried then given to your Deportation Officer for placement in your file.
- Upon arrival, your clothes, personal property, valuables and funds will be searched and retained by the processing officer for safekeeping. Itemized receipts will be issued to you and one (1) placed in your file for all your clothing, personal property, valuables and funds. **It is important that you retain these receipts to claim your properties when you are released.**
- All personal property and valuables that you bring with you will be inventoried and accounted for. A receipt will be issued to you for these items.
  1. Cash in your possession upon arrival at CoreCivic/TCDF will be inventoried, a receipt issued and then placed in an account for your use at the commissary.
  2. Personal checks in your possession upon arrival to CoreCivic/TCDF will be placed in your property. You will not need money during your stay. If you are found with any **money in your possession, it will be confiscated as contraband** and you may be subject to disciplinary action.
  3. Upon your discharge from this facility, you are required to turn in all CoreCivic/TCDF property to the officer assigned to the Receiving and Discharge area. After you have confirmed that all items have been accounted for, **you will be required to make restitution for lost or damaged property.** This includes clothing, bedding and any recreation/leisure time equipment (i.e. games and library books).
  4. Your property and any funds that you have on your accounts will be returned to you prior to departure. You must sign for these items.
  5. Any property that you are not authorized to keep with you will be placed in an appropriate bag assigned to you and locked in a secure storage area. Excess personal property should be mailed out.

- Initial Intake Screening:
a. Each detainee entering the facility will receive an initial medical screening by the clinical staff. At that time, you should discuss any medications that you are taking and any health problems that you are experiencing. Some medications such as heart or diabetic medications will be continued when you arrive.

b. All new arrivals shall receive TB screening by PPD (mantoux method) or chest x-ray. The PPD shall be the primary screening method unless this diagnostic test is contraindicated; then a chest x-ray is obtained.

c. All female detainees will be given a pregnancy test as part of the initial intake screening.

A medical examination will be conducted by a member of Health Services within fourteen (14) days of your arrival. At that time, you should discuss any medications that you are taking and any health problems that you may be experiencing.

**Disability, Identification, Assessment, and Accommodation:**

The facility's reasonable accommodations policy is CoreCivic Policy 14-101 Disability, Identification, Assessment, and Accommodation. This policy outlines the necessary processes to ensure that detainees with a disability will have an equal opportunity to participate in, access, and enjoy the benefits of the facility's programs, services, and activities. Such participation will be accomplished in the least restrictive and most integrated setting possible, through the provision of reasonable accommodations, modifications, and/or auxiliary aids and services, as necessary, and in a facility that is physically accessible.

- A detainee may identify him- or herself as having a disability and/or request a reasonable accommodation at any point during detention.
- Detainees may submit a formal or informal (i.e. verbal or written) request for accommodations or assistance to the Disability Compliance Manager.
- The processes described in this policy apply to any detainee who has requested an accommodation or auxiliary aid or service, or who has otherwise been identified as potentially needing an accommodation.
- Facility staff and Health Services staff will ensure that any need for immediate accommodation is met.
- The facility will provide the detainee with written notification of the final decision on his/her request for accommodation, regardless of whether an accommodation was granted or denied, and regardless of whether the accommodation requires further approval by ICE.
- Detainees are permitted to raise concerns about disability-related accommodations and/or the accommodations process through the grievance system.

**Funds and Personal Property** - While at this facility, you are permitted to retain (all items listed must be retained prior to property storage being sealed). All personal property and your assigned living area, are subject to search at any time:

- To prevent overcrowding and related storage problems, staff shall encourage detainees to send extra suitcases, televisions and other “soft” (not illegal or dangerous) contraband to a third party of his/her choosing.
- If a detainee does not provide an appropriate mailing address within 30 days of entry, the facility may make reasonable accommodations to store the property until the detainee’s removal or release. Ordinarily the amount stored may not exceed 40 pounds.
- If a detainee does not provide an appropriate mailing address or is unable to pay the postage, the facility administrator may dispose of the property in accordance with standard “2.3 Contraband,” after providing the detainee with written notice.
- **ICE Detainees only:** In accordance with PBNDS 2011 2.5 Funds and Personal Property, this facility has an automated funds system and does not accept funds through the mail. Any funds received through the

Updated August 6, 2021
mail will be returned to sender. Non-U.S. Currency will be inventoried utilizing a G-589 or equivalent OMS-generated receipt for each currency and placed with the detainee's personal property. The detainee shall receive a copy of the G-589 or similar OMS-generated receipt.

- Property that has been lost or damaged due to CoreCivic employee negligence will be eligible for claim investigation. If you wish to request an investigation of property that has been lost or damaged due to CoreCivic employee negligence, you must complete Page 1 of the 14-6D Lost/Damaged/Stolen Property Claim and forward it to Unit Management/Property Officer. All claims must be submitted within seven (7) calendar days of the incident. Verification of proof of ownership and value must occur immediately upon investigation. Items are also pro-rated for "wear and tear". A copy of this policy is available in the library.

Finance

- Within a reasonable time after your arrival, the Business Office initiates an account for you. Your alien number (A-number) will be your account number. If you have money in your possession when you arrive, you will be given a receipt and the money will be placed in your account the next business day. Currency, of any type, in your possession after intake is considered contraband. The currency will be confiscated and disciplinary action may be taken. No currency will be accepted through the mail. Any currency received will be returned to the addressee. No currency will be accepted through visitation.

To send money, submit an "Authorization to Release Funds" form to your Unit Management Team and a check will be issued from your account for the amount authorized, if funds are available. All forms can be obtained from your assigned detention officer.

- All transactions have to be verified before being posted to your account. This process can take up to 24 hours Monday-Thursday, excluding weekends and holidays.

- If you receive money in the mail, the mail officer, will return the money to the sender. No money will be accepted for County inmates at this facility.

- To send money, contact unit management staff to make arrangements to prepare a release of funds. You are allowed access to personal funds to pay for legal services. Contact unit management staff if you have any questions.

Property

1. Legal documents, legal papers, and legal information, within reason. Large amounts of Legal work will be stored in the property room, you may only keep legal work and/or documents of the current case you are working on. You may request your additional documentation by submitting a facility request to the Intake Supervisor.

2. Photos of family, friends and associates, (i.e. not more than ten (10) photos in your possession, (5) x (7) or smaller, may only be placed in designed areas of your assigned sleeping area.

3. Medical prostheses, (i.e. eyeglasses, dentures, etc.),

4. Personal reference materials, (i.e. address/phone book and/or list of relatives, friends and/or other correspondents.

5. Radios must be used with earphones at all times, limit one (1) radio per person. No plug in radios permitted. Radios played without earphones will be confiscated and placed in your property. No radios or earphones are allowed outside of your dormitory/housing unit. Your radio must have your Alien number etched on it or it will be considered contraband.

6. A wedding band and a small religious item (including religious jewelry, will be authorized to remain in your possession during your stay here. All other jewelry will be inventoried and placed in a safe for storage until your release. A receipt will be issued to you for your valuables.

8

Updated August 6, 2021
7. Magazines, books, religious and secular reading material (softbound), and other literature are limited to any combination of five (5) to ensure accumulations do not produce and/or effect fire safety standards. Items may only be received directly from a book store or publisher. No pornographic materials are allowed.

- All food items must be consumed upon being opened to ensure sanitation standards are met. You are allowed to purchase and have in your possession two (2) bowls, one (1) spork and one (1) cup.
- Additional personal property allowed to be retained by detainees must be approved by the Chief of Security or Chief of Unit Management prior to purchase/possession to ensure acceptable sanitation is appropriately maintained.
- All personal items that you are allowed to keep must be stored in your locker. No items are to be attached to the bunk, wall, windows or left on windowsills. All items must be stored in their original container.
- Detainees are responsible for the loss of personal items not safeguarded or stored by CoreCivic/TCDF.
- Clean linens are provided for each person entering the facility to include:
  - two (2) sheets,
  - one (1) towels,
  - one (1) pillowcase,
  - one (1) blanket, and
  - one (1) laundry bag.
- Your initial issue of clothing/linens shall be limited to include (Personal items of clothing, including undergarments and shoes are not permitted):
  - Three (3) uniforms sets (pants and shirts)
  - One (1) pair of shoes (personal shoes are not allowed unless medically authorized)
  - Three (3) t-shirts
  - Three (3) pairs of underwear
  - Three (3) pairs of socks

CLASSIFICATION

- All detainees arrive classified, by ICE and are screened before being admitted into the general population. The classification system will ensure that you are placed in the appropriate category and physically separated from detainees in other categories. You will be housed according to your classification level and issued color-appropriate i.d.'s and uniforms. There are four (4) classification levels at this facility with corresponding I.D. marker colors.
  - Yellow - (Low);
  - Tan - (Medium/Low); and
  - Dark Green - (Medium/High)
  - Blue – (High)

- The basic uniform for detainees shall be distinctive in appearance in order to identify detainees according to their custody level. At CoreCivic/TCDF, the uniform colors are as follows:
  - Low Custody – Yellow
  - Medium Low – Tan
  - Medium/High – Dark Green
  - High - Blue

- Housing Restrictions: Low and Medium Low detainees may be housed together (unless there is a history of assaultive or combative behavior). High and Medium/High detainees may be housed together. Low and Medium High or High detainees are never housed together.
Medium High will be escorted outside the housing area and may only be in specified common areas with other classifications of detainees.

High custody detainees will be escorted outside of the housing area and are not permitted to work a job assignment outside of the housing unit. High are considered a greater risk and may only co-mingle or be housed with like classification or Medium-High classification detainees.

All housing, work assignments and programmatic activities will be decided by the level of classification received.

After your initial classification, your first review will be within sixty (60) days to ninety (90) days from your arrival date. Thereafter, assessment reviews will be conducted ninety (90) days to one hundred twenty (120) day intervals from your original arrival date.

APPEALS: All new arrivals classified as Medium/High or High may appeal their classification designation by submitting their appeal on an ICE request to the ICE Staff as outlined in the procedures Section 2 Procedures in this handbook. Written notification of the outcome of the appeal will be made within fifteen (15) business days by the ICE Staff. All other classification appeals should be forwarded to the Chief of Unit Management for review. Written notification of the outcome of the appeal will be made within (15) business days.

LAUNDRY

In order to insure an adequate supply for all detainees, the hoarding of clothing is prohibited. Generally, detainees are not permitted to wash clothing, bedding or other items in their living unit.

Laundry must be turned in to the in-pod laundry worker by 6:00am. If you must leave the housing unit it is your responsibility to ensure that your laundry is turned in. It will be returned to you before the end of each day. (NOTE: Do not overfill your laundry bag. Ensure that the bags are tightly tied. Leave enough room in the bag for soap and water to flow through as well as heat from the dryer.)

Clothing/laundering for male and female detainees, will be conducted according to the schedule posted in the dormitory/housing units bulletin boards.

A laundry schedule is posted in each housing unit, all clothing is required to be sent to be cleaned according to the posted schedule.

Any items over these amounts will be considered contraband. Quantities of clothing items include items purchased in the commissary.

You will be issued a hygiene kit and will be required to take a shower and change into clean uniforms.

Medical services are provided by the facility to ensure your health is adequately maintained and those problems that occur during your stay at this facility are resolved. The medical services offered and the procedures for obtaining these services are outlined below.

CLOTHING

All issued clothing and I.D.'s will be worn as specified in the following instructions and in no other manner. These requirements are essential to ensure compliance of Security, Hygiene and Conduct within the realm of property for all people.

1. I.D.'s must be worn at all times. If your I.D. becomes torn, notify the officer in your unit that you need a new one or speak to one of the Classification Officers.

2. Clothing must be clean and not torn when worn.

3. The wearing of mixed colored uniforms is not authorized.

4. Undergarments may be worn without outer garments only while inside the sleeping quarters or in the restroom/shower areas. NO EXCEPTIONS!

5. Shower shoes may be worn only while inside the housing units.

Updated August 6, 2021
6. CoreCivic/TCDF issued shoes will be worn at all times when outside the housing units. Personal shoes are not allowed unless medically required or authorized by the Chief of Security/Chief of Unit Management.

7. Hats or other head covers will not be authorized for the general population. Designated detainee workers will be issued the proper head cover when required to be worn only while performing work related duties.

8. Detainees will wear a complete uniform (shirts, pants, shoes) at all times while outside the dormitory/housing unit.

9. Pants will be worn at a point about the waist that prevents the crease of the buttocks from showing despite the length of the shirt.

10. You are not to walk about the facility with your hands inside the waistband of your pants regardless of weather conditions.

11. No article of clothing will be worn in a manner not normally intended for that item (using a shirt as a head band or head cover, etc.)

PERSONAL HYGIENE

- You will be living in a housing unit with other individuals, so personal hygiene is essential. You are expected to bathe daily and to keep your hair clean.

- Personal hygiene items such as soap, toothpaste, toothbrushes, combs, shampoo, skin lotion, and other items will be issued to you upon admission. If you should run out of an item, you may request a replacement from any staff member. Disposable razors will be provided on a daily basis. Razors will be checked out on an as needed basis and returned when you have finished shaving. Disposable razors will not be used by more than one (1) detainee for health and safety reasons meant to protect the detainees and staff. Personal hygiene products will be replenished on an as needed basis. Contact your detention officer when needing hygiene product replacement.

- Detainees leaving to court will be allowed to shave before departing.

BARBERING SERVICE

General population and eligible segregated detainees will receive access to the barber shop, opening at 8a.m. to 4p.m. Monday through Sunday, according to the schedule posted on the bulletin boards in your housing area. The officer stationed in your housing area will call for detainees who wish to have a haircut. For sanitary reasons, the cutting of hair in the dormitory/housing unit is strictly prohibited. No barber will serve any detainee when the skin of the detainee’s face, neck, or scalp is inflamed, scaling, contains pus, or is erupted, unless service of such detainee is performed in accordance with the specific authorization of the Health Services Administrator. No person will be served when infested with head lice. It is also prohibited to possess cut hair or clippings, either your own or others.

DETAINEE DRESS CODE

- You are required to keep yourself clean and wear proper clothing/footwear during all activities.

- You are reminded that poor hygiene, poor sanitation and not wearing proper clothing and footwear can cause potential conflict with your peers and others and can have a negative impact upon your health and safety as well as that of those around you.

Updated August 6, 2021
● Failure to comply with the dress code and grooming standards will ultimately become an issue that requires staff intervention in the form of appropriate disciplinary action to correct the situation.
● The Dress Code for daily living and work assignments is the same.
● Ordinarily, detainees may wear any hairstyle with the following exceptions:
  For safety and hygiene reasons Detainee workers operating machinery will keep their hair in a neat, clean and in a commonly acceptable style.
  1. Hairstyles will not interfere with the safety and hygiene requirements.
  2. Ordinarily, facial hair may be grown without restriction with the following exceptions;
     • For safety reasons, detainee workers operating machinery may be expected to be clean shaven at all times. These restrictions are a requirement for employment in the above described work assignments and accepting a job in these areas denotes acceptance of the grooming standards for the above described work assignments.

There will be no exceptions to these requirements, even for medical reasons.
  ● Complete uniforms (pants, shirts, shoes and I.D.’s) are required to be worn when outside the housing unit.
  ● T-shirts and shower shoes are allowed in the dayroom areas after 5pm and on weekends/holidays.
  ● T-shirts are allowed on the recreation yard.
  ● Headwear is not allowed outside the bed area unless authorized by the proper approving authority.
  ● Religious apparel may only be worn as approved by the Chaplain.
  ● No towels, sheets or blankets will be permitted as clothing and are not to be used for cleaning unless designated by staff as such.

● Intentional or neglectful damage to CoreCivic/TCDF property (altered, torn, lost ripped, or gratified) will result in disciplinary action and restitution.

INSPECTIONS OF PERSONS AND PROPERTY (Searches)

● Routine unscheduled searches of the facility, detainee’s persons and property will be conducted as deemed necessary.
● Searches are conducted of persons when:
  1. Entering or exiting the housing units;
  2. Leaving the visit area after a visit; and
  3. Entering or exiting other buildings or areas.
● Searches are conducted for the purposes of:
  1. Detecting and preventing the introduction of contraband (i.e.; weapons, drugs, unauthorized clothing items, etc.);
  2. Ensuring that safe and sanitary conditions exist within the facility;
  3. Recovering lost, missing or stolen property; and
  4. Preventing escapes and other disturbances.
● Searches will be conducted in a manner that avoids unnecessary force, embarrassment or indignity to the detainee and is not intended to be punitive in nature.
● Types of Searches Performed at TCDF:
  1. Visual Inspection: A search of a detainee or an area for contraband without physical contact.
  2. Frisk or Pat Search: A search conducted by placement of hands on the detainee’s clothing to feel for weapons/contraband. A thorough search is done of all pockets, collar, jackets waistbands and shoes. Shoes are removed to check socks and bottom of feet.
  3. Shakedown: A physical or visual search of a specific area of the facility.
● CoreCivic/TCDF will conduct mandatory urinalysis testing under the following conditions:
  1. When security staff have reasonable suspicion that a detainee has used or is under the influence of drugs or intoxicants;
2. When a detainee is found to be in possession of suspected unauthorized drugs or intoxicants or when suspected unauthorized drugs or intoxicants are detected or found in the area controlled, occupied or inhabited by a detainee;
3. When the detainee is observed to be in possession of or using unauthorized drugs or intoxicants, but staff are unable to obtain a sample of the substance;
4. On a random basis, utilizing an appropriate random testing procedure or on a routine basis when detainees return from an outside work detail; or
5. Pursuant to an appropriate random testing procedure, the entire detainee population of the facility, any identifiable program area or any identifiable classification of detainees may be tested.
6. The random testing program will not be used for the purpose or have the effect of harassing or intimidating any individual or group of detainees.
7. Refusal to submit to urinalysis testing will result in severe disciplinary penalties.

**CONTRABAND**

- Items, which are considered to be detrimental to the safe and orderly operation of the facility, are prohibited. Contraband items include but are not limited to:
  1. Any dangerous drug, narcotic drug, marijuana, intoxicating liquor of any kind, deadly weapons, dangerous instruments, explosives or any other article that, if used or possessed, would endanger the preservation of order in the facility;
  2. Any item which could be used as an aide to escape;
  3. Any item which could be used to disguise or alter the appearance of a detainee;
  4. Any article of clothing or item for personal use or consumption which has not been cleared first through the OIC or purchased by a detainee from the commissary;
  5. Cameras, video, audio, or related equipment that can be used to make unauthorized photographs or audio, or audio/video recordings of detainees, staff or government property;
  6. Cigarettes, tobacco, E-cigarettes, or smoking paraphernalia, alcoholic beverages, cardboard boxes and excessive magazines;
  7. Pictures of any kind that have been placed on dormitory/housing unit walls; and
  8. Any item not purchased through authorized channels (commissary).

**LIVING CONDITIONS – General Population**

You are temporally being held at Torrance County Detention Facility (TCDF) that is operated by CoreCivic. You will stay at the facility until (ICE) Immigration and Customs Enforcement Agency determines it is time to transfer you to another facility. The facility cannot make the determination regarding your release.

TCDF houses an additional contract that includes Torrance County Sheriff’s Office (TCSO). At no time will ICE Detainees comingle with TCSO inmates.

The facility is divided into twenty-four (24) housing units, not including medical observation. Each celled housing unit can hold two in each room, up to 40 in each pod. There are two dormitories that have been designed to house multiple detainees in an open type setting, these can house up to 75 in each area.

- Detainees are required to keep their assigned living areas clean at all times. Your bed must be made immediately upon waking and remain made when not in use and all personal property must be and organized. It is in your best interest to maintain a clean living area and avoid many of the problems associated with unsanitary living conditions.
- Padlocks are available at no charge for indigent detainees, and sold to non-indigent detainees through the facility Warehouse Manager. If you would like a padlock, submit a written request to the Unit Manager or Warehouse Manager.

Updated August 6, 2021
Each housing unit has sufficient areas for showers, toilet facilities, dining, dayrooms that allow indoor recreation and are in conformance with ACA requirements. Because of this type of living arrangement, we expect your cooperation by showing other detainees the respect you wish to receive and respecting the property of others. You are also asked to respect the need to share common equipment such as telephones, tables, televisions, recreational games and equipment. If a detainee should be placed in a restrictive housing unit, there are separate housing locations, this area has restricted movement/housing.

**SLEEPING AREA/SANITATION**

- You are required to keep your bed and immediate area clean and neat. You are also required to make your bed daily before reporting to your work assignment or when you begin your daily routine. When your bed is not in use it **must be made**! The hanging of sheets, towels, blankets or clothing from sash bars, overhead lights or beds is not permitted.
- Personal effects, to include hygiene items, are to be stored in your property bin. Do not place items on windowsills, windows, bunks, lockers, under a mattress, etc. These items will be confiscated as contraband and removed when left in unauthorized areas. It will be your responsibility to identify and reclaim the items through the appropriate supervisor.
- To ensure cleanliness is maintained, you will be asked to participate in cleaning the dormitories/housing units to include dayroom areas, sleeping areas, restroom area and shower area in cooperation with the housing unit orderlies. While we realize your stay at this facility is temporary, it is your home during this time and we expect your cooperation to keep it safe and clean.
- The dormitories/housing units are cleaned as needed or as directed by a staff member, including after each meal, to ensure proper sanitation and safety. A staff member will issue all equipment, supplies and instructions.
- It will be your responsibility to ensure that the area around your bed is clean.
- A significant number of showers are provided in each housing unit to allow each detainee an opportunity to **shower daily**. Please respect the other detainees by cleaning up after you have finished in the area.
- All cleaning supplies will be placed in appropriate storage locations when not in use.

**Safety Regulations/Emergency Procedures** - The staff at TCDF will make every effort to help ensure your safety while you are here. You must assume some responsibility for helping to make this facility safe. Signs are available to mark hazardous areas wherever they occur. If you spill, clean it up. If you encounter a possible hazard, tell the officer in your area. Don’t assume that problems have been reported. Pay attention to warning signs and use reasonable care in potentially hazardous situations such as wet floors.

1. Detainees must follow all safety regulations, signs, instructions, directions, labels and any training provided.
2. All detainees must attend all safety/emergency training. Detainees must be trained before doing any hazardous task.
3. Detainees must wear personal protective equipment when handling cleaning or other chemicals.
4. Detainees cannot alter items or use an item for other than its intended purpose. Altered items are contraband and will be confiscated.
5. Do not remove the blade from disposable razors.
6. Detainees must immediately clean up any liquid spilled or stay clear of the area until it can be cleaned up.
7. Detainees injured in the housing unit, on the recreation yard, or anywhere else in the facility, must immediately report the injury to the employee on duty in that area.
8. Detainees will not tamper with, prop open, block, or disable any locking device and/or door.
9. Detainees will not hang shirts on the Recreation Yard.
10. Detainees will not reach in the razor wire for any reason.
11. Detainees will not climb any fence for any reason.

Updated August 6, 2021
12. Drills are conducted throughout the facility including the living areas. In the event of an emergency or drill detainees are responsible for following all instructions given by staff. Failure to comply will be considered interfering/hindering with facility Safety Regulations.
13. There is an Evacuation Plan/Map posted in every housing unit that shows the emergency evacuation route in case of fire. Do not remove these plans.

OFFICIAL COUNTS

- In order to maintain proper accountability of detainees at this facility, official counts are conducted at the following times:
  1. **Formal counts** are conducted at the following times: 3:00a.m., 7:00a.m., 10:30a.m., 3:00p.m., 7:00p.m., 10:00p.m. (picture ID/Roster count – Stand-Up Count), 12:00 a.m.
  2. **Informal counts** are conducted at irregular, unannounced times.

- Detainees are expected to cooperate during each count. The televisions will be turned off and no movement is allowed while the count is being conducted. When Officer’s are counting you must return to and remain seated on your bunk until cleared for movement by the officer. During counts no talking is permitted. Disruptions during counts may result in a lock-down being initiated. Detainees must stand during emergency counts.

MEALS

- All meals are nutritionally balanced, pork free, dietician approved, properly prepared and attractively served in wholesome, clean and safe surroundings. To obtain a special diet for religious purposes, send a request stating the religion and the special diet requirements to the Chaplain. Special diets are subject to monitoring for compliance. The use of food, (i.e., withholding of or variation from the standard menu) as a disciplinary measure or reward is prohibited. You will be issued appropriate eating and drinking utensil(s). Menus are posted on the bulletin board in your housing unit.
- For those detainees who require a special diet due to medical reasons, the diet may be requested through Health Services. To be considered, submit a sick call form, to medical. The nurse will then make an appointment for you to see a medical provider who will evaluate your request.
- CoreCivic/TCDF will provide you with three (3) meals per day; breakfast at 5:00am, lunch at 11:00am and dinner at 5:00pm. These are approximate times. Meals and a beverage are served in each housing unit. You are to follow the rules of the detention officers. You’re facility issued I.D. must be shown to collect your meal, no cutting in line, grabbing trays or taking trays to the bed area. You are only allowed one (1) tray per meal, detainees are not permitted to pick up another detainees meal tray. Each detainee is required to pick up their own meal tray.
  1. All food is to be eaten at the tables provided in the housing unit.
  2. You are to eat at the designated time and immediately return your tray to the cart provided.
  3. No outside food will be permitted in the housing unit other than that provided through the kitchen and commissary facilities, unless ordered through "food night" (you must have money in your account to purchase).

4. MEALS ARE NOT TO BE Eaten IN THE BED AREA.
5. DO NOT put meal trays in the microwaves. DO NOT put foil items in the microwaves.
6. Microwaves are to be cleaned after each use.
7. You will have a total of twenty (20) minutes to eat each meal.
8. No food from meals will be stored in lockers or locker boxes.

Updated August 6, 2021
TABLETS

- Tablets are available for use in general population and administrative segregation. You will be able to listen to music, download movies, send messages to your friends / family, and have video visitation (at your expense). The tablets have free access to Lexis Nexis, to send requests, and to submit grievances.
- Inmates/Detainees will be allowed to use the tablet within the housing unit. Tablets are available to use when housing phones are turned on. Tablets are available on a first come, first serve basis.
- You will not be able to use the tablet, for visitation, when we are in count or there is an emergency situation or after final lockdown.
- Tablet charging areas will open at 4:00am through 10:00pm, Sunday thru Thursday and until midnight Friday and Saturday.
- The docking station will be kept secure, with the tablet charging.
- All video visits will be initiated by the inmate/detainee. The video will not work if it is not on the docking station.
- Video visitation will not be allowed during counts or emergency situations.
- If any inappropriate behavior is conducted during the visit, your visit will be terminated and the visitor may be blocked.
- Only one person (inmate/detainee) is allowed to be on a video visit, unless prior approval is given from a Unit Manager/Investigator or ADO Staff.

Failure to follow this directive may result in a misconduct/disciplinary report.
It is important to know, this is a privilege and not a right, if you are misusing the tablets or destroying them we will hold the inmate/detainee accountable.
Please note, anytime your time or use is terminated, you will not be reimbursed for the time used.

Tablet Sessions are monitored
Any misuse may result in losing access.
Video visits and/or pictures will be blocked if; any nudity, gang affiliation, weapons, or drugs are viewed.
You are required to be fully clothed during video visits or in the dayroom areas.

ACCESS TO TELEPHONES

- The housing units have been equipped with telephones. These telephones have been provided so you can communicate with friends and/or relatives.
- Upon your arrival, the Processing Officer will issue you a PIN number, this will allow you a one time, free 3 minute phone call. This pin number will be active through out your stay at the facility.
- The telephone calls can be made collect or you may elect to participate in the prepaid calling system. This system allows you to purchase phone minutes through the commissary.
- Your family or friends may also deposit money to your phone account by calling Talton
- To increase the volume on the telephones, press the star (*), button, or volume, while you are talking.
- Incoming calls will not be received on these telephones, nor is three (3)-way calling available.
- To respect the privacy of others, we ask that you quietly wait your turn, as the telephones will be used on a first-come-first-serve basis. If you need assistance, ask the officer assigned to your area.
- **All phone calls are subject to monitoring and/or recording.** To obtain an unmonitored call to a court, a legal representative or for the purposes of obtaining legal representation, submit a Request form to your Detention Counselor.

16

Updated August 6, 2021
- The telephone numbers to inquire about the status of your case as well as the numbers to a majority of consulates have been made available to you at no charge. (Consult your housing unit bulletin board for a list of numbers).
- In the event that you are unable to contact your attorney or consulate using the housing unit phones, you may submit a request form to any of your Unit Management Team for alternative telephone access.
- TDD telephone machines are available for the hearing impaired.
- When telephone demand is high you are expected to limit your telephone calls to twenty (20) minutes to permit others the same telephone privileges, but will be allowed to continue your call if you desire as soon as the demand allows.
- The telephones are available for your use from wake-up time until bed time, phones will be off turned during count times.
- When facility staff receives an emergency telephone call for a detainee, the caller's name and telephone number shall be obtained and promptly given to the detainee.
- You will be permitted to promptly return an emergency call within the constraints of security and safety of the facility.

**RELIGIOUS SERVICES**

- All detainees will have access to religious resources, services, instructions and counseling on a voluntary basis. All detainees will be extended the amount of freedom and opportunity necessary for pursuing any legitimate religious belief or practice within the constraints of security and safety conditions.
- Religious services are provided through the Chaplaincy Office and through services provided by community volunteers. These services may include individual counseling, group prayer, bible study and various religious organizational church/worship services. Times may begin from 8:30a.m. to 8:30p.m., a schedule of the days and times of each regularly scheduled service is posted on the bulletin board in your housing unit. These services are open to all who wish to attend with regard to space limitations and security concerns.
- Religion-based educational programs and special activities are also available according to the activity schedule posted on the bulletin board in your housing unit.
- Religious materials from various faiths are available upon request.

**COMMISSARY**

- Commissary will be open for your use Monday – Friday according to posted schedules in your housing unit, except on commissary inventory days.
- Commissary orders are to be completed and placed in the mail box located in each housing unit. The order form must be properly completed in ink, with your name, housing unit number and Alien number, in order to receive commissary on that day. (WRITE LEGIBLY). All order forms must be received by 7:30am on the day of commissary.
- Commissary items are subject to limitations and/or changes without notification.

**VOLUNTARY WORK PROGRAM -**

Detainees may have opportunities to work and earn money while confined, subject to the number of work opportunities available and within the constraints of the safety, security and good order of the facility. Detainees shall be able to volunteer for work assignments but otherwise shall not be required.
to work, except to do personal housekeeping. (5.8 2011 PBNDS).

- Every effort will be made to provide you with an opportunity to participate in the voluntary work program.
- Detainees will receive compensation for work completed.
- You will not be permitted to work in excess of eight (8) hours daily, or forty (40) hours weekly.
- You will be required to sign a voluntary work program statement and receive necessary training.
- Detainees that participate in the volunteer work program are required to work according to an assigned work schedule and unexcused absence from work or unsatisfactory work performance could result in removal from the voluntary work program. No detainee will have supervision/control over any other detainee.
- You are asked to perform tasks associated with the daily operation of the facility. Such tasks may include general sanitation, as well as other tasks. Under no circumstances will you be forced to take part in the work program.
- Your eligibility to work will be determined by ICE and TCDF staff. If you desire to be placed on a work program, send an Inmate Request form to the responsible Shift Supervisor or Department Head who will forward your name for consideration. Please remember that there are not enough job assignments for each person, therefore, we ask for your patience and cooperation.
- If Detainees are given an assignment, that is outside their scope of duties, report the information to a staff member or staff supervisor.

LIBRARY / LAW LIBRARY

- The library at this facility contains standard library materials found in a school or community library. The needs, interest and abilities of the majority of detainees is carefully considered, the library collection developed accordingly. The Library books are available by completing a request and selecting from a provided list of available books. Once submitted, the Library staff will deliver the requested book(s) to you no later than the following day, Monday-Friday, excluding weekends and holidays. Requests submitted on the weekends will be processed the following business day.
- One (1) general reading book may be checked out, for seven (7) days. The item must be returned before checking out additional material. It is important that you take care of the books and return them timely so other detainees have the opportunity to read and enjoy them. All books must be returned before your release from the facility, in the same condition they were received.
- Personal reading time will be given Monday-Sunday, in the Programs room. Reading time will be offered for an hour each day, to ensure all detainees have the opportunity to read quietly. You may not request an extended time, due to other programs offered. Days and times for reading hour will be posted in your assigned housing area.
- Reference materials, legal materials and magazines are not to be taken out of the library.
- The law library is available for all detainees to use, during their housing units’ scheduled time. A schedule is posted in each of the housing units. When more time is needed, a written request may be submitted to the library staff. The request will be answered in a timely manner, usually by the next business day upon receiving the request. The law library at this facility contains self help reference materials that ICE has determined to be essential in providing you with information relevant to immigration law and proceedings. This information is accessible on the computers in the library in the Lexis/Nexis Program. The instructions for accessing the Lexis/Nexis Program are posted above the computers in the Law Library.
- All detainees in the Facility will have access to the tablets in their Housing Unit seven days a week. The tablets have the Legal program, Lexis Nexis on them. If a typewriter and/or copies are needed or any other legal materials are needed, a request is to be submitted to the Library or Unit Team staff.
- All detainees in Restricted Housing have access to a tablet which contains the Lexis Nexis Legal program. There is also a mobile unit with the Lexis Nexis that is kept in the Restricted Housing Unit and available to them. If they need copies of legal materials, notary services or anything else related to their legal need, they
may submit a request form to the Library or Unit Team staff. General library books will be offered on a weekly basis.

- If you need additional reference materials not maintained in the law library, you may submit a request to the library, stating the name and type of material needed. Your request will be forwarded to ICE for approval.
- If you find library material missing or damaged, notify the library coordinator by submitting a request to the recreation department.
- The Law Library hours begin at 7:30a.m. to 2:45p.m., according to the posted schedule, on the bulletin board in the housing units. Extra Law Library time (beyond the five-hours-per-week) is available by submitting a request to the Librarian and/or the Library Aide. Detainees with court deadlines will be given priority.
- All detainees will sign in and out of the Library.
- **Computers:** computers are available in the Law Library for preparation of legal documents ONLY. Violators are subject to disciplinary actions. Printers will be provided during your law library session to print legal documents for the preparation of your case.

**VISITATION**

- TCDF provides an opportunity for you to have one (1) visit per week (Sunday-Tuesday and Thursday-Saturday) for up to one (2) hour of contact visitation with family and friends. Times will vary according to the schedule. If there are more visitors than can be accommodated in the visiting room, it may be necessary to limit visits to lesser periods of time. Visiting times can also be shortened due to security risks, count, or other unanticipated events.
- For approval for visits on days that are not scheduled for your housing unit or for extended visits due to long distance travel or other extenuating circumstances, submit a Special Visit Form to the Chief of Unit Management.
- If visitor(s) bring children (eighteen (18) years of age or under) they are expected to remain under the direct supervision of the adult visitor(s) so they will not disturb others who have visitor(s). Only two (2) adults and two (2) minor children (ages eighteen (18) and under) will be allowed to visit at a time, as space is limited.
- You should discourage visitors from bringing large quantities of hand carried items. The visitor(s) may be required to leave certain items in a locker or in their vehicle. All visitors and item(s) are subject to search.
- You will need to notify visitors of these hours and procedures and that they must bring a government issued picture I.D. (for ages eighteen (18) and up) in order to be allowed to visit.
- Visitors must be in appropriate and socially acceptable attire. The following clothing is PROHIBITED: SHORTS, ABOVE knee MINI-SKIRT, SHORT DRESSES, TANK TOPS, SLEEVELESS SHIRTS, and ANY SEE-THROUGH CLOTHING, open toe shoes, or heels higher than 2 inches are not allowed during visitation.
- Visitation schedules, as well as rules for visitation, are posted in your housing unit.
- Visitors are not allowed to give you any items, money, or paperwork.

**ATTORNEY VISITS**

- General attorney visitation hours are Monday – Friday, 8a.m. to 4p.m. and are available Saturday and Sunday if needed.
- If necessary, you will be given the option to meet with your legal representative during meal hours and you will be provided with a menu tray or a sack meal.
- You are allowed to receive legal documents only from your attorney once approved by appropriate supervisory personnel.
- If you have made an appointment to meet with an attorney, legal representative or paralegal from an organization, legal firm or other association or company, it is your responsibility to cancel the appointment if you do not intend to keep the appointment. Appointment cancellations will not be accomplished on your behalf by, or through an officer or another.
A list of pro bono (free) legal organizations will be posted in all detainee housing areas and other appropriate areas. If you wish to see a representative or paralegal from that organization, it is your responsibility to contact them for an appointment.

You may contact them by mail or phone to request their assistance.

If you have questions concerning the status of your case call #222 from the housing unit phones or submit a Request form to ICE, place it in the ICE mailbox.

GROUP RIGHTS PRESENTATIONS

“Know Your Rights” (KYR) / “Legal Orientation Programs” (LOP) are given by volunteer legal representatives. You will be given the opportunity to attend one of these presentations once you have been assigned housing. Attendance is voluntary and only limited by space available and security concerns of the facility.

Presentations shall occur in the facility visitation room

Detainees in Special Management Unit (SMU) shall be given notification of scheduled presentations

Notification of scheduled presentations shall be posted in your unit at least 48 hours prior to occurrence. You must indicate your interest in attending by signing up on the posted sign-up sheets in your unit.

These presentations cover general information and are not intended to give specific legal advice.

MARRIAGE

Request for marriage must be sent to the Warden. If denied, the request will be reviewed by ICE officials who may uphold or reverse the Warden’s denial. You must be able to provide documentation of the following:

1. You are legally eligible to marry in this state; and
2. Your intended spouse has affirmed, in writing, his/her intent to marry you. (This must accompany your request.)

CORRESPONDENCE

Mail will be picked up and delivered Monday – Friday (excluding holidays).

You may send or receive mail from anyone you know personally. You may place your unsealed outgoing letters in the box in your housing unit marked “MAIL”.

All incoming and outgoing mail must be properly addressed and include your name, Immigration A# and housing unit/bed number. If all information is not included, mail will be returned.

Drawing on the front of your outgoing envelopes is prohibited due to postal regulations.

“Special correspondence” is defined as written communication to or from private attorneys and other legal representatives, government attorneys, judges, courts, embassies and consulates, the President and Vice President of the United States, members of Congress, the Department of Justice, including the Office of the Inspector General, the Department of Homeland Security, U.S. Immigrations and Customs Enforcement, ICE Health Services Corps, the Office of Enforcement and Removal Operations, the DHS Office for Civil Rights and Civil Liberties, and the DHS Office of the Inspector, grievance officers, outside healthcare professionals, and news media representatives. If you receive incoming special correspondence, it will be opened in your presence (unless otherwise authorized by the Warden) and inspected for physical contraband. Staff will neither read nor copy special correspondence. If you do not accept the letter or permit the letter to be inspected, in your presence, it will be returned to the sender. Correspondence will only be treated as “special” if the title and office of the sender or addressee are clearly identified on the envelope, indicating without a doubt that the correspondence is “special” as defined above.

You will not be allowed to receive or send packages without advance arrangements and prior approval from the Chief of Security. The postage for sending packages and oversized or overweight mail will be your responsibility.

Updated August 6, 2021
Incoming and outgoing mail, with the exception of special correspondence or legal mail, shall be opened and inspected for contraband, and to intercept cash, checks, and money orders. In accordance with PBNDS 2011 2.5 Funds and Personal Property, this facility has an automated funds system and does not accept funds through the mail. Any funds received through the mail will be returned to sender.

All envelopes containing outgoing regular mail should be sent to the mailroom unsealed and ready for inspection.

All incoming and outgoing packages will be opened in your presence (unless otherwise authorized by the Warden) and inspected for contraband. Contraband includes, but is not limited to the following: materials that depict, describe or encourage activities that could lead to physical violence such as materials dealing with the subjects of self-defense or survival, weaponry, armaments, explosives, or incendiary devices; information regarding escape plots, plans to commit illegal activities or to violate ICE rules or facility guidelines; information regarding the production of drugs or alcohol; sexually explicit material; threats, extortion, obscenity, or gratuitous profanity; a code; stamps, envelopes and blank paper; phone cards; photos larger than 5x7; books and magazines (if approved, they must be received directly from the publisher); or other contraband as outlined in this handbook. A package received without prior approval is considered contraband.

Identity documents such as passports, birth certificates, etc., are contraband and may be used by ICE as evidence or as otherwise appropriate. You are not allowed to keep an identity document in your possession. You will be provided a copy of the document, certified by an ICE officer to be a true and correct copy.

When correspondence or packages are rejected, you will receive a written notice explaining the reasons for rejection.

When you are released from the facility, your incoming mail will be sent to the forwarding address you provide to the officers during your intake/release. If you do not provide a forwarding address, your mail will be endorsed, “No Forwarding Address, Return to Sender”. All such mail will be returned to the Post Office.

To obtain paper, writing implements and envelopes for your personal use, submit an Inmate/Detainee Request form to the Unit Team.

Postage stamps may be purchased from the commissary for outgoing mail. Indigent detainees will be allowed postage to mail an unlimited amount of special correspondence or legal mail, within reason; three pieces of general correspondence; and/or packages deemed necessary by ICE. **To be considered indigent you must have maintained a balance of $15.00 or less on your CoreCivic/TCDF account for the past 10 days.**

**NOTARY, COPIES AND RELEASE OF FUNDS**

- **NOTARY** - Notary assistance may be obtained by sending a request to the Unit Team. You will be contacted as soon as possible to accomplish the task.
- **COPIES** - Request for copies of legal material should be forwarded to the Unit Team.
- **RELEASE OF FUNDS** – Request for Release of Funds Form (2-5A) should be submitted to the Unit Management Team for approval. You will not be allowed to send or transfer money from your account to other detainees account within CoreCivic/TCDF.

**DETAINEE DISCIPLINE**

In a facility where many individuals live together in a relatively small amount of space, it is extremely important that order and discipline be maintained. Discipline and order are not only for the benefit of the staff, but also for the safety and welfare of you and all other detainees. While many problems can be solved informally through counseling, disciplinary measures must occasionally be imposed.

**Disciplinary Severity Scale and Prohibited Acts:**

**Appendix 3.1.A: Offense Categories**

Updated August 6, 2021
I. “Greatest” Offense Category

A. Prohibited Acts

100 Killing

101 Assaulting any person (includes sexual assault)

102 Escape from escort; escape from a secure facility

103 Setting a fire (charged with this act in this category only when found to pose a threat to life or a threat of serious bodily harm or in furtherance of a prohibited act of greatest severity [e.g., a riot or an escape]; otherwise the charge is classified as Code 222, 223 or 322))

104 Possession or introduction of a gun, firearm, weapon, sharpened instrument, knife, dangerous chemical, explosive, escape tool, device or ammunition

105 Rioting

106 Inciting others to riot

107 Hostage-taking

108 Assaulting a staff member or any law enforcement officer

109 Threatening a staff member or any law enforcement officer with bodily harm

B. Sanctions

1. Initiate criminal proceedings

2. Disciplinary transfer (recommend)

3. Disciplinary segregation (up to 60 days)

4. Make monetary restitution, if funds are available

5. Loss of privileges (e.g., commissary, vending machines, movies, recreation, etc.)

II. “High” Offense Category

A. Prohibited Acts

200 Escape from unescorted activities open or secure facility, proceeding without violence

201 Fighting, boxing, wrestling, sparring and any other form of physical encounter, including horseplay that causes or could cause injury to another person, except when part of an approved recreational or athletic activity

202 Possession or introduction of an unauthorized tool

203 Loss, misplacement or damage of any restricted tool

204 Threatening another with bodily harm
205 Extortion, blackmail, protection and demanding or receiving money or anything of value in return for protection against others, avoiding bodily harm or avoiding a threat of being informed against

206 Engaging in sexual acts

207 Making sexual proposals or threats

208 Wearing a disguise or mask

209 Tampering with or blocking any lock device

210 Adulterating of food or drink

211 Possessing, introducing, or using narcotics, narcotic paraphernalia or drugs not prescribed for the individual by the medical staff

212 Possessing an officer’s or staff member’s clothing

213 Engaging in or inciting a group demonstration

214 Encouraging others to participate in a work stoppage or to refuse to work

215 Refusing to provide a urine sample or otherwise cooperate in a drug test

216 Introducing alcohol into the facility

217 Giving or offering an official or staff member a bribe or anything of value

218 Giving money to, or receiving money from, any person for an illegal or prohibited purpose (e.g., introducing/conveying contraband)

219 Destroying, altering, or damaging property (government or another person’s) worth more than $100

220 Being found guilty of any combination of three or more high moderate or low moderate offenses within 90 days

222 Possessing or introducing an incendiary device (e.g., matches, lighter, etc.)

223 Engaging in any act that could endanger person(s) and/or property

**B. Sanctions**

1. Initiate criminal proceedings

2. Disciplinary transfer (recommend)

3. Disciplinary segregation (up to 30 days)

4. Make monetary restitution, if funds are available

5. Loss of privileges (e.g., commissary, vending machines, movies, recreation, etc.)

6. Change housing

7. Remove from program and/or group activity

8. Loss of job

9. Impound and store detainee’s personal property
10. Confiscate contraband
11. Restrict to housing
12. Warning

III. “High Moderate” Offense Category

A. Prohibited Acts

300 Indecent exposure
301 Stealing (theft)
302 Misusing authorized medication
303 Loss, misplacement or damage of a less restricted tool
304 Lending property or other item of value for profit/increased return
305 Possessing item(s) not authorized for receipt or retention and not issued through regular channels
306 Refusing to clean assigned living area
307 Refusing to obey the order of a staff member or officer (may be categorized and charged as a greater or lesser offense, depending on the kind of disobedience: continuing to riot is Code 105—Rioting; continuing to fight Code 201—Fighting; refusing to provide a urine sample, Code 215—Refusing to provide a urine sample or otherwise cooperate in a drug test).
308 Insolence toward a staff member
309 Lying or providing false statement to staff
310 Counterfeiting, forging or other unauthorized reproduction of money proceedings or other official document or item (e.g., security document, identification card, etc.); may be categorized as greater or lesser offense, depending on the nature and purpose of the reproduction (e.g., counterfeiting release papers to effect escape—Code 102 or 200).
311 Participating in an unauthorized meeting or gathering
312 Being in an unauthorized area
313 Failing to stand count
314 Interfering with count
315 Making, possessing, or using intoxicant(s)
316 Refusing a breathalyzer test or other test of alcohol consumption
317 Gambling
318 Preparing or conducting a gambling pool
319 Possessing gambling paraphernalia
320 Unauthorized contact with the public

Updated August 6, 2021
321 Giving money or another item of value to, or accepting money or another item of value from, anyone, including another detainee, without staff authorization

322 Destroying, altering, or damaging property (government or another person’s) worth equal to or less than $100

323 Signing, preparing, circulating, or soliciting support for group petitions that threaten the security or damaging property (government or another person’s) worth equal to or less than $100

323 Signing, preparing, circulating, or soliciting support for group petitions that threaten the security or orderly operation of the facility.

B. Sanctions

1. Initiate criminal proceedings
2. Disciplinary transfer (recommend)
3. Disciplinary segregation (up to 72 hours)
4. Make monetary restitution, if funds are available
5. Loss of privileges (e.g. commissary, vending machines, movies, recreation, etc.)
6. Change housing
7. Remove from program and/or group activity
8. Loss of job
9. Impound and store detainee’s personal property
10. Confiscate contraband
11. Restrict to housing unit
12. Reprimand
13. Warning

IV. “Low Moderate” Offense Category

A. Prohibited Acts
400 Possessing property belonging to another person
401 Possessing unauthorized clothing
402 Malingered; feigning illness
403 Smoking where prohibited
404 Using abusive or obscene language
405 Tattooing, body piercing or self-mutilation
406 Unauthorized use of mail or telephone (with restriction or temporary suspension of the abused privileges often the appropriate sanction)
407 Conduct with a visitor in violation of rules and regulations (with restriction or temporary suspension of visiting privileges often the appropriate sanction)
408 Conducting a business
409 Possessing money or currency, unless specifically authorized
410 Failing to follow safety or sanitation regulations
411 Unauthorized use of equipment or machinery
412 Using equipment or machinery contrary to posted safety standards
413 Being unsanitary or untidy; failing to keep self and living area in accordance with posted standards

**B. Sanctions**

1. Loss of privileges, commissary, vending machines, movies, recreation, etc.
2. Change housing
3. Remove from program and/or group activity
4. Loss of job
5. Impound and store detainee’s personal property
6. Confiscate contraband
7. Restrict to housing unit
8. Reprimand
9. Warning

The detainee will be provided with a copy of the report at the conclusion of the disciplinary hearing.

**Institution Disciplinary Panel (IDP)**

- Shall conduct formal hearing on Incident Reports referred from investigations or UDCs and may impose higher level sanctions for "greatest" and "high" level prohibited acts.
- Detainees before the IDP shall be afforded a staff representative, upon request, or automatically if the detainee is illiterate, has limited English language skills or otherwise needs special assistance.

**Unit Disciplinary Committee (UDC)**

- The UDC committee will conduct hearings and, to the best extent possible, shall informally resolve cases involving high moderate or low moderate charges in accordance with the list of charges and related sanctions.
- The UDC committee will offer the detainee the right to due process, which includes the rights to:
  - Remain silent at any stage of the disciplinary process;
  - Have a UDC hearing within 24 hours after the conclusion of the investigations, unless the detainee:
    - Waiver the notification period and requests an immediate hearing, or
    - Requests more time to gather evidence or otherwise prepare a defense;
  - Attend the entire hearing (excluding committee deliberations), or waive the right to appear.
  - Present statements and evidence, including witness testimony on his/her own behalf; and
  - Appeal the committee's determination through the detainee grievance process.

Updated August 6, 2021
The detainee will receive copies of;
  o The UDC decision which will contain the reason for the disposition and sanctions imposed; or
  o Written notification of charges and hearing before the IDP

Staff Representation for the IDP

The facility administrator shall upon the detainee's request, assign a staff representative to help prepare a defense prior to the commencement of the IDP. This help shall be automatically provided for detainees who are illiterate, have limited English-language skills, or who are without means of collecting and presenting essential evidence. Detainees shall also have the option of receiving assistance from another detainee of their selection, subject to approval from the facility administrator.

CONFIDENTIAL INFORMANTS – the UDC or IDP shall disclose as much confidential information as may be disclosed without jeopardizing the safety and security of facility staff and other persons, and shall include in the hearing record the factual basis for finding the information reliable.

SANCTIONS – range from the withholding of privilege(s) to segregation.

  While a detainee may be charged with multiple prohibited acts and may receive multiple sanctions for one incident, sanctions arising from a single incident shall run concurrently.

APPEAL – Detainees can appeal disciplinary decisions through a formal grievance system.

EXPUNGEMENT - If a detainee is found not guilty of an offense, major or minor, either after the hearing or the appeal, all reference to that offense will be removed from their file.

CRIMINAL MISCONDUCT – Torrance County Detention Facility, in coordination with the Field Office Director, shall work with prosecutors and other law enforcement officials to ensure that detainees who engage in serious criminal activity, including violence against staff and other detainees, face criminal prosecutions when appropriate.

At Torrance County Detention Facility, detainees are not subjected to personal abuse, corporal punishment, personal injury, disease, property damage, or harassment. Inmate property is protected. Detainees cannot supervise or be in charge of other detainees.

GRIEVANCE PROCEDURES

CoreCivic/TCDF provides a means for all detainees to address complaints regarding facility conditions, treatment, medical care and policies and procedures. Most matters can and should be resolved directly and promptly between the detainee and staff.

MEDICAL GRIEVANCES: Medical grievances must be placed in the box marked "Medical" or "Sick Call". All detainees have access to an informal resolution process to resolve their complaints. At any time the informal resolution process has not provided successful resolution of the complaint or in the event of an emergency grievance, detainees may use the formal grievance process. All complaints will be assessed in a fair and impartial manner. Resolution in the best interest of the detainee and the facility is the primary goal.

You can invoke the grievance procedure regardless of disciplinary, classification, or other administrative decisions to which you may be subject.

You may not submit a grievance on behalf of another detainee; however, assistance from a staff member or another detainee may be provided when necessary to communicate the problem on the grievance form. Grievances are considered special correspondence.

You will not be subject to retaliation, reprisal, harassment, or discipline for use or participation in the informal resolution process or grievance process. Any allegations of this nature will be thoroughly investigated by the Warden.

If it is determined by the Warden that you are deliberately abusing the grievance system through excessive filing of grievances and/or repeated refusal to follow procedures, the Warden may suspend your right to file
additional grievances until all pending grievances have been resolved. Continued abuse may result in an adverse action initiated against you.

- With the exception of emergency grievances, you should utilize the informal resolution process concerning questions, disputes, or complaints prior to the submission of a formal grievance. You may orally present your complaint to any staff member at any time of the event or submit the CoreCivic form, 14-5A Informal Resolution Form to the housing officer or unit staff.
- While you are free to bypass or terminate the informal grievance process, and proceed directly to the formal grievance stage, you are encouraged to utilize the informal process and allow the complaint to be resolved at the lowest level since complaints should be, whenever possible, resolved through direct contact with the staff responsible for the particular issue and with two-way communication encouraged between staff and detainees.
  - If you are not satisfied with the results of the informal resolution process, you may submit a 14-5B ICE Detainee Grievance Form to the Grievance Officer by placing it in the box marked "Grievance" in the housing unit. The Grievance Officer will check the grievance mail boxes daily, excluding weekends and holidays. The appropriate department head will act on the grievance within five (5) working days through informal or formal resolution and provide you with a written response.
  - When filing a grievance, if a detainee needs assistance in preparing a grievance or needs assistance due to impairments or disabilities, or interpretation/translation services, detainees with limited English proficiency (LEP) and assistance with limited literacy, request assistance from a staff member.
  - If you do not accept the department head’s solution, a Grievance Appeals Board (GAB) will convene to study the grievance within five (5) working days of the detainee’s appeal. Within five (5) working days of reaching a decision, the GAB will provide you with a written response.
  - If you disagree with the Grievance Appeals Board (GAB), you may appeal to the Warden.
  - The Warden, and in some cases the Field Office Director (and/or designee) shall review the finding of the Grievance Appeals Board (GAB) will provide you with a written decision within five (5) days of receiving the appeal.

- A copy of all grievances will be maintained in your detention file.
- If you submit a grievance for review and you are released/deported, efforts to resolve the grievance will normally continue. It is your responsibility to notify the Grievance Officer of your release/deportation and provide a forwarding address and any other pertinent information.
- **EMERGENCY GRIEVANCES** – Detainees can file an emergency grievance for incidents that involve an immediate threat to health, safety, or welfare, and will receive a written response in a timely manner.
- There is no time limit on when you may submit a grievance regarding an allegation of sexual abuse.
- At any point you have the right to file a complaint directly to the Department of Homeland Security (DHS) OIG about staff misconduct, physical or sexual abuse or civil rights violations; complaints may be filed by calling the DHS OIG Hotline at 1-800-323-8603, or you may write to:
  
  Department of Homeland Security  
  Washington, D.C. 20528  
  Attn: Office of the Inspector General

- **NON-GRIEVABLE MATTERS** - The following matters are not grievable by detainees through the grievance procedure:
  1. State and Federal Court decisions;
  2. State and Federal laws and regulations;
  3. Final decisions on grievances;

Updated August 6, 2021
4. Contracting agency (ICE) policies, procedures, decisions or matters (i.e., institutional transfers, release/deportations decisions, etc.);
5. Property issues (all property issues must be addressed in accordance with property procedures); and
6. No grievance may be submitted on behalf of another.

SEGREGATION/SHORT STAY UNIT

Administrative Segregation
1. Intended for detainees with special housing requirements;
2. Pending investigation/hearing of prohibited acts(s);
3. Medical observation;
4. Pending a transfer or release within twenty-four (24) hours;
5. Security risk; or
6. Protective custody.

Disciplinary Segregation
1. Special housing unit for detainees who;
2. Are a serious disruption to general population;
3. Require additional physical confines; or
4. Have received a sanction by the Institutional Disciplinary Panel.

Programs and Services
1. Programs and Services as offered to general population are available to administrative segregation.
2. Detainees in Administrative Segregation will be offered at least two (2) hours of recreation or exercise opportunities per day, seven (7) days a week. Detainees in Disciplinary Segregation will be offered one (1) hour of recreation or exercise opportunity per day, seven (7) days a week.
3. The Law Library is available during Restricted Housing scheduled time. If there is a security concern, a mobile LexisNexis computer will be taken to the Restricted Housing Unit for detainees to use during their scheduled time. If more time is needed, submit a written request to the library staff. Photocopies, notary services, and all other law library needs are available to detainees by request to Library or Unit Team staff.
4. The General Library is available on a weekly basis.
5. Medical Care/Sick Call for segregated detainees will be provided by Health Services staff through daily rounds.
6. CoreCivic/TCDF provides an opportunity for you to have one (1) visit per week (Monday through Sunday) for up to one (1) hour of contact visitation with family and friends. Disruptive conduct by either party will result in the termination of the visit and may have an adverse affect on future visits.
7. Detainees in segregation will be allowed to attend religious services if security is not compromised. If necessary, the Chaplain will minister to detainees in segregation or, upon special request and considering security concerns, arrangements can be made for religious volunteers of your faith to conduct one-on-one services.
8. Personal hygiene items are available upon request from the segregation housing officer. Showers are available and should be taken advantage of on Mondays, Wednesdays and Fridays between the hours of 8:00am and 4:00pm.
9. Mail will be picked up from segregation by 8:30am Monday – Friday except on holidays. Mail will handled for segregation detainees in the same manner as general population detainees.

Updated August 6, 2021
10. Detainees in segregation will be allowed to attend Group Legal Rights Presentations, if security is not compromised. If it becomes necessary, presentations may be made to individuals in segregation, pending agreement with the presenter and security can be maintained. If a detainee in segregation cannot attend for this reason, and both he/she and the presenter(s) so request, alternative arrangements will be made.

11. Prior to being released from segregation, detainees will be re-evaluated/reclassified to ensure that they have been properly classified and are housed in an appropriate housing unit.

12. Laundry will be picked up, washed and returned to segregated detainees according to the same schedule as set for general population.

13. All other services not specifically mentioned in this section regarding segregation will be subject to the same access procedures as outlined for general population detainees.

MEDICAL CARE - Health Services provides medical care to detainees at this facility. If you are ill or in need of medical attention, you must submit a sick call form. Ask any staff member for a form, describe your medical issue, keep completed sick call form with you and hand to the nurse when you are called to the sick call clinic. Do not place in a box or hand to non-medical staff. If it is an emergency, you must notify your Housing Unit Officer, who will contact the medical staff.

SICK CALL

- Sick call at CoreCivic/TCDF is provided by Health Services staff to all detainees, from the time of admission to the time of release in order to provide continuous medical care.
- Clinic Hours - The clinic will be open and nursing staff available twenty-four (24) hours a day. The facility health care providers schedule appointments Monday through Friday and may schedule appointments on weekends/holidays. Sick call hours are per posted schedules, seven (7) days per week.

ACCESS TO MEDICAL SERVICES

- Routine Medical Services - If you are experiencing non-emergency medical problems, submit a sick call form – request a form from a staff member. If the need exists, medical will schedule you to see medical personnel. Appointments are scheduled according to medical necessity.
- Emergency Medical Services - If you are experiencing an emergency medical problem, notify the officer stationed in your area. The nursing staff will be notified and appropriate action will be taken by them to resolve your medical problems. Trained staff is available to administer emergency first aid and life saving techniques. Nursing staff and doctors are always available through on-call services.
- Chronic Care Services - The clinic provides chronic care services to those detainees who require medication renewals, treatments and follow-up care for specific illnesses (i.e., high blood pressure, diabetes, heart conditions, asthma, etc.). These services are provided on a regular basis.
- Living wills are available through Health Services upon request.
- **DO NOT** come to the clinic without prior permission. The detention officer in your housing unit must call the clinic first to obtain prior approval for you to visit the clinic.
- Mental Health Services - If you are experiencing mental health problems, follow the procedures outlined above under routine/emergency services. You will be seen by a health care provider who will determine if a mental health referral is needed.
- Dental Services - If you are experiencing dental health problems, follow the procedures outlined above under routine/emergency medical services. You will be seen by the health care provider who will determine if a dental referral is needed. Provisions will be made for emergency dental needs.
- Medication
  1. KOP (Keep on Person) medications are medications that detainees are allowed to keep in their possession. KOP medication must be stored and secured in your locker. Medications found in your locker

Updated August 6, 2021
or property that was not prescribed to you will be confiscated as contraband and disciplinary action will be taken. Detainees found to be not taking their medications as instructed, or sharing your medication will be taken off KOP status and will receive their medications under supervision of the nursing staff. Medication removed from the KOP package will be confiscated as contraband. KOP pill line is Monday, Tuesday, Thursday, and Friday afternoons.

2. Non-KOP medications are dispensed at pill call daily at the following times: 8:00am and 8:00pm.

❖ AIDS/HIV Education / Testing - Testing for AIDS/HIV are available and education services are provided to all detainees. You may request these services from the medical staff at sick call sign-up.

**Pill Line (Med-Line)** - The location is the Medical Department Window, between C-20 and C-30 Slider. However, location of med-line may change due to the needs of the facility.

- Inmates are responsible to report to med-line when called. Detention Officers or Staff Members will announce Med-Line in the Housing Unit. You will be given a few minutes to be ready by the door, to be searched. You must be in full uniform, shirt tucked in, with your ID badge.
- If you are not prescribed Medication, you cannot go to Med-Line. This is not a time to roam the halls or request to see the Nurse/ No sick call.
- You must present your ID badge in order to receive your medications. All medications will be taken in front of the Nurse and/or a Security Staff member, who will inspect your mouth and hands to ensure you have swallowed your medication.
- A disciplinary report may be issued to anyone hiding or taking another inmate's medication.

**RECREATION**

❖ Recreation activities are provided as a means to release built-up energy and to help you keep in good physical condition. Outdoor/Indoor Recreation is offered daily, between 7:45a.m. and 4:00 p.m. on a rotating basis depending on your posted schedule.

❖ **In-pod recreation facilities** - The Recreation Coordinator will be scheduling specific activities for your pleasure and development. We ask that you cooperate and participate in these activities; some will be new and different.

❖ TELEVISIONS have been placed in each housing unit for your entertainment and should be shared to ensure each person has an opportunity to view programs of interest. While we have no specific rules governing what programs will be viewed, we expect each of you to be considerate (i.e.; Spanish/English language programs) and avoid unnecessary problems regarding its usage. In the event a problem develops, the officer in your housing unit will resolve the problem and may decide to discontinue usage until the situation can be resolved.

1. Television viewing and dayroom recreation activities may begin at 5:00am wake-up and will end at bedtime 10:00pm seven days a week. You are cautioned not to begin viewing a program that will end after the designated viewing hours, because the television will be turned off at the designated time.
2. Televisions will be turned off during official counts, Final Lockdown, cleaning of housing areas and when it interferes with other facility operations.
3. At the end of a program, a vote may be taken to choose which program to watch next. The majority vote rules. The channel will not be changed during a program if someone is watching the television. Do not vote on a program and then leave the area.
4. The volume of the televisions will be kept at a reasonable level so as not to disturb other detainees or facility operations.
5. Televisions are not to be removed from their locations or tampered with for any reason.

❖ **LEISURE TIME ACTIVITIES** - This facility provides leisure time activities in the dormitories/housing units for your entertainment, as well as for physical and mental development. Leisure time activities include table games, cards, television, pull up bars etc. You are asked to handle these items with care and to be considerate
of others who may wish to use them. Persons that have been discovered abusing these items may be disciplined in accordance with specific guidelines established by this facility and be required to make restitution for damaged items.
1. The use of these leisure time items will be handled on a first-come first-serve basis to ensure that each person has an equal opportunity to use them.
2. To obtain additional recreational supplies, ask a recreation staff member.
3. We expect you to take care of supplies and equipment issued and for you to return the items after use. You will be held accountable for any recreational or leisure time item until it has been returned.

- **Access to Outside Recreation** - All detainees, weather permitting, will be provided at a minimum, one hour of out of housing recreation daily.
  1. Outdoor recreation activities may include basketball, soccer, handball, track and cardiovascular exercise equipment.
  2. DO NOT SIT AGAINST THE FENCE or hang clothes on it when in outside recreation.
  3. The recreation schedule for all housing units is rotated daily for fair and equal access. You will be advised when it is your housing unit’s turn to go.
  4. Detainees who worked during the day and who are unable to attend recreation with their housing unit will be provided recreational opportunities at the end of the day upon verification of their work attendance.
  5. T-shirts must be worn at all times during inside/outside recreation.

- **Recreation may be cancelled at any time for security reasons and due to inclement/adverse weather conditions.** Your cooperation is appreciated.

**LEGAL FILE**

Your legal file is an Immigration legal record commonly called an “A” file maintained by the ICE Deportation Department for each individual. This “A” file contains your legal transactions and documentation pertaining to your case; including but not limited to identification cards, photos, passports and immigration history.

**DETENTION FILE**

- **Your detention file is maintained by CoreCivic/TCDF for each individual and contains no less than the following:**
  1. Facility Disciplinary Actions;
  2. Behavior Reports;
  3. Funds, Valuables and Property Receipts;
  4. Detainee’s Written Requests, Complaints and Issues;
  5. Response to the aforementioned requests; and
  6. Special Housing Unit Records.

**RIGHTS AND RESPONSIBILITIES**

- **You have the right to be informed of the rules, procedures and schedules concerning the operation of the facility.**
  - *You have the responsibility to know and abide by them.*
    1. The right to protection from personal abuse, corporal punishment, unnecessary or excessive use of force, personal injury, disease, property damage and harassment;
    2. The right of freedom from discrimination based on race, religion, national origin, gender, sexual orientation, physical or mental ability, or political beliefs;
    3. The right to pursue a grievance in accordance with procedures provided in the detainee handbook, without fear of retaliation;

Updated August 6, 2021
4. The right to pursue a grievance in accordance with standard “6.2 Grievance System” and procedures provided in the detainee handbook.
5. The right to correspond with persons or organizations, consistent with safety, security and the orderly operation of the facility; and
6. The right to due process, including the prompt resolution of a disciplinary matter.

- You have the right to health care which includes nutritious meals, proper bedding and clothing. A laundry schedule for cleanliness of the same, an opportunity to shower regularly, proper ventilation for warmth and fresh air, a regular exercise period, toilet articles and medical treatment at no cost to you.
  - It is your responsibility not to waste food, to follow the laundry and shower schedules, to maintain neat and clean living quarters and to seek medical care as needed.

- You have the right to have family members and friends visit with you in keeping with the facility rules and schedules.
  - It is your responsibility to conduct yourself properly during visits and to not accept or pass contraband.

- You have the right to unrestricted and confidential access to the courts by correspondence.
  - You have the responsibility to present honestly and fairly your petitions, questions and problems to the courts.

- You have the right to legal counsel from an attorney of your choice by means of interviews and correspondence at no cost to the United States Government.
  - It is your responsibility to obtain the services of an attorney honestly and fairly.

- You have the right to have access to reading materials for your own enjoyment. These materials may include approved magazines.
  - It is your responsibility to seek and utilize such materials for your personal benefit, without depriving others of the same benefit.

- You have the right to participate in the use of the law library reference materials to assist you in resolving legal problems. You also have the right to receive help when it is available through legal assistance programs.
  - It is your responsibility to use those resources in keeping with the procedures and schedule prescribed and to respect the rights of other detainees to the use of the materials.

- You have the right to a wide range of reading material for educational purposes and for your own enjoyment. These materials may include magazines and newspapers sent from the publishers.
  - It is your responsibility to seek and utilize such material for personal benefit, without depriving others of their equal rights to use this material.

- You have the right to participate in a work program as far as resources are available, and in keeping with your interest, needs and abilities.
  - You have the responsibility to take advantage of activities which may help you live a successful and abiding life within the Facility and in the community. You will be expected to abide by the regulations governing the use of such activities.

- You have the right to an administrative hearing before an Immigration Judge to determine your status in the United States.
  - It is your responsibility to seek and provide evidence for your defense.

- If you are not an exclusion case and eligible, you have the right to be released on bond until your scheduled administrative hearing.
  - It is your responsibility to seek methods of payment for your bond.

- You have the right to apply for political asylum if you believe that you will be persecuted because of your race, religion, nationality, membership in a social group or political opinion.
  - It is your responsibility to prepare and submit the proper forms accurately.

- You have the right to request voluntary departure if statutorily eligible prior to a hearing but if you request voluntary departure you waive your right to a hearing.
  - It is your responsibility to inform an ICE Officer that you request voluntary departures.
You have the right to have an interpretative service if you do not understand the orientation language in which it is written.
  o It is your responsibility to contact CoreCivic staff members to request the interpretative service.

Additional ICE Contact Information:

OIG
Office of Inspector General
U.S. Department of Health & Human Services
ATTN: HOTLINE
PO Box 23489
Washington, DC 20026
Phone: (800) HHS-TIPS [(800) 447-8477]
Fax: (800) 223-8164
TTY: (800) 377-4950

OPR
U.S. Department of Justice
Office of Professional Responsibility
950 Pennsylvania Ave, NW, Suite 3266
Washington, DC 20530-0001
By Phone: 202-514-3365
By Fax: 202-514-5050
By Email: opr.complaints@usdoj.gov
Website: https://www.justice.gov/opr

JIC-Joint Intake Center for ICE

  • Calling the toll-free Joint Intake Center Hotline at 1-877-2INTAKE or sending a fax to (202) 344-3390;
  • Sending an e-mail message to Joint.Intake@dhs.gov;
  • Writing to the Joint Intake Center at P.O. Box 14475, 1200 Pennsylvania Avenue, NW, Washington, D.C. 20044;
  • Calling the DHS Office of Inspector General (OIG) at 1-800-323-8603 or 1-844-889-4357 (TTY); or sending a fax to (202) 254-4297;
  • Accessing the online DHS OIG Complaint/Allegation Form; or

From: Unit12379 Torrence Co Detent
Sent: Tuesday, May 18, 2021 11:32 AM
To: [redacted]
Subject: FW: 1-22A CAP ICE ODO Contingency Inspection May 2021 Food Service
Attachments: 01-22A CAP ICE ODO Contingency Inspection May 2021 Food Service - edits.docx; IMG_2595.jpg

CAUTION: This email came from outside the organization. Attachments and links may contain viruses and other malicious software.

From: [redacted]
Sent: Tuesday, May 18, 2021 11:05 AM
To: [redacted]
Cc: [redacted]
Subject: RE: 1-22A CAP ICE ODO Contingency Inspection May 2021 Food Service

Here is the CAP for Torrence and below is the info for the Parve bread from Bimbo. We can start ordering the bread below for Kosher diets as of now at Torrence.

Bimbo added the following Kosher bread. Your team should be able to order starting this week. Any questions please let us know.

<table>
<thead>
<tr>
<th>PRODUCTNUM</th>
<th>PROD_NAME</th>
<th>UPC</th>
<th>COST</th>
</tr>
</thead>
<tbody>
<tr>
<td>003253</td>
<td>SL CL WHITE 20Z</td>
<td>7294560133 006</td>
<td>$1.10</td>
</tr>
<tr>
<td>002823</td>
<td>SL CL HNYWHE 20Z</td>
<td>7294560136 000</td>
<td>$1.50</td>
</tr>
</tbody>
</table>

Thanks,
From: Unit12379 Torrance Co Detent trinityservicesgroup.com
Sent: Monday, May 24, 2021 1:18 PM
To: 
Cc: 
Subject: FW: Kosher Bread- Torrance NM
Attachments: si cl white 7294560133 - Kosher certificate.pdf; si hny wheat 7294560136 - Kosher certificate.pdf

CAUTION: This email came from outside the organization. Attachments and links may contain viruses and other malicious software.

From: trinityservicesgroup.com
Sent: Monday, May 24, 2021 1:13 PM
To: Unit12379 Torrance Co Detent trinityservicesgroup.com; 
Subject: FW: Kosher Bread- Torrance NM

Good Morning

Can you please send these Kosher Certificates to the ICE Auditor for the Kosher Parve bread from Bimbo?

Thanks.

Purchasing Manager-Food Service
Trinity Services Group
477 Commerce Blvd.
Oldsmar, Fl. 34677

Work 813-477-0320
Cell 813-753-1026
Email address: trinityservicesgroup.com

From: grupobimbo.com
Sent: Monday, May 24, 2021 2:59 PM
To: trinityservicesgroup.com
Cc: Unit12379 Torrance Co Detent trinityservicesgroup.com; 
Subject: RE: Kosher Bread- Torrance NM

Hi,
Please let me know if these do not work. Thanks.........

From: trinityservicesgroup.com
Sent: Monday, May 24, 2021 12:36 PM
To: grupobimbo.com; Unit12379 Torrance Co Detent

2022-ICLI-00045 12313
Good Morning,

The ICE auditor is asking for the Kosher Certificate for the bread below. Can you please send the Kosher Parve Certificate for these?

Thanks,

Purchasing Manager-Food Service
Trinity Services Group
477 Commerce Blvd.
Oldsmar, Fl. 34677
Work 813-471-3399
Cell 813-753-2555
Email address: trinityservicesgroup.com

From: grupobimbo.com
Sent: Wednesday, May 12, 2021 1:46 PM
To: trinityservicesgroup.com

Subject: Kosher Bread- Torrance NM

Hi,

We added the following Kosher bread. Your team should be able to order starting next week. Any questions please let us know. Have a great day.

<table>
<thead>
<tr>
<th>PRODUCTNUM</th>
<th>PROD_NAME</th>
<th>UPC</th>
<th>COST</th>
</tr>
</thead>
<tbody>
<tr>
<td>003253</td>
<td>SL CL WHITE 20Z</td>
<td>7294560133 006</td>
<td>$1.10</td>
</tr>
<tr>
<td>002823</td>
<td>SL CL HNYWHE 20Z</td>
<td>7294560136 000</td>
<td>$1.50</td>
</tr>
</tbody>
</table>

National Account Manager, Foodservice  | +1 854 255 Business Center Dr.  | Horsham PA 19044

BIMBO
Bakhouse

Aviso de Privacidad y Confidencialidad // Privacy and Confidentiality Notice // Avis de confidentialité:
https://privacy.grupobimbo.com/

Aviso de Privacidad y Confidencialidad // Privacy and Confidentiality Notice // Avis de confidentialité:
https://privacy.grupobimbo.com/
From: Unit12379 Torrence Co Detent trinityservicesgroup.com>
Sent: Thursday, May 6, 2021 10:51 AM
To: [REDACTED]
Cc: FW: Add

CAUTION: This email came from outside the organization. Attachments and links may contain viruses and other malicious software.

From: [REDACTED]
Sent: Wednesday, May 5, 2021 6:59 PM
To: Unit12379 Torrence Co Detent trinityservicesgroup.com>
Subject: RE: Add

Received your order and add ons. I will also make the notations on the invoice for the sugar.

Assistant Director Institutional Sales
Cell 602 47 [REDACTED]
kelloggsupply.net

From: Unit12379 Torrence Co Detent trinityservicesgroup.com>
Sent: Wednesday, May 5, 2021 9:08 AM
To: [REDACTED]
Subject: Add

CAUTION: External sender.

For TCDF I need Parboiled Rice 5 50lbs. Bags, Also need Sugar Cookie Mix 3 50lbs. Bags Please and thank you.

Have a great day,

TCDF AFSD
505-384 [REDACTED]
From: Unit12379 Torrence Co Detent
Sent: Thursday, May 6, 2021 10:48 AM
To: trinityservicesgroup.com>
Subject: FW: Instruction
Attachments: Kellog shipping order.pdf

CAUTION: This email came from outside the organization. Attachments and links may contain viruses and other malicious software.

From: Unit12379 Torrence Co Detent
Sent: Wednesday, May 5, 2021 8:26 AM
To: @kelloggsupply.net>
Cc: trinityservicesgroup.com>
Subject: Instruction

Good morning [REDACTED]

I need you to add Granulated Sugar one 50 lbs. bag, to my order May 11, 2021 delivery date. Also, please be advised this is a controlled item in the Correctional Facility. You need to have special handling instruction. Also need instruction on the drivers. On the “Uniform Straight Bill of Lading” paper thank you.
Uniform Straight Bill of Lading

TO:
Consignee: Torrance CCA

FROM:
Shipper: KSC, LLC

Street: 209 Co Rd A049
Street: 4427 W Buckeye Rd STE A

Destination: ESTANCIA NM
Zip Code: 87016
Origin: Phoenix AZ
Zip Code: 85043

Route: 
Vehicle Number: 

<table>
<thead>
<tr>
<th>Places</th>
<th>Item #</th>
<th>Kind of Packaging, Description of Articles</th>
<th>Special Marks and Exceptions</th>
<th>Weight</th>
<th>Subject to CORRECTION</th>
</tr>
</thead>
</table>

This invoice contains HOT ______

and require special handling ______

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

INVOICE #: 568502

SEAL #: 

Driver is required to assist

Shipper agrees that payment for this Bill of Lading may be made by KSC to shipper directly to any broker or intermediary acting as Shipper's Agent. Shipper designates person as Agent for payment. In the event KSC tenders payment to Shipper's Agent, Shipper agrees to accept KSC and Consignee from all liability for payment, once made to Shipper's Agent. In the event of any damage to the contents shown on this Bill of Lading, Shipper agrees that Shipper and Shipper's Agent shall be jointly and severally responsible to KSC for damages caused. Shipper and Shipper's Agent also agree that KSC may withhold future payments to Shipper and/or Shipper's Agent until the cost of any damage is recouped.

CONSIGNEE RECEIVING SIGNATURE

Received, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable. Otherwise the rate classifications and rules that have been established by the carrier and are available to the shipper, on request, shall apply as well as all applicable state and federal regulations.

SHIPPER: KSC
PER SIGNATURE
DATE/TIME: May 11, 2021

DRIVER/PHONE: 
PER SIGNATURE
DATE/TIME: 

NOTE: The agreed or declared value of property is hereby specifically stated by the shipper

$ ______ per cwt.
<table>
<thead>
<tr>
<th>ITEM #</th>
<th>DESCRIPTION</th>
<th>UPC</th>
<th>EACH PRICE</th>
<th>QTY$</th>
<th>UIC</th>
<th>SOLD QTY</th>
<th>EXT</th>
<th>PROMO</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>06878</td>
<td>Coffee PC</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09606</td>
<td>Instant Coffee Buo</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09700</td>
<td>Sliced Jalapenos</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19008</td>
<td>Sugar Substitute</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19030</td>
<td>Breaded Fish Patty</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20929</td>
<td>Jiffy Sugar Cookie Mix</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20969</td>
<td>Salad Dressing PC</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09568</td>
<td>Kosher Beef Patty Meal</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09574</td>
<td>Kosher Ital Meat loaf Meal</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09578</td>
<td>Kosher Pico de Gallo Chicken</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09576</td>
<td>Kosher Crmy Chicken Meal</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09581</td>
<td>Kosher Beef Meatball Meal</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16645</td>
<td>Kosher Fish Meal in Broth PO</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17062</td>
<td>Zesty Chili Kosher Meal</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17079</td>
<td>Beefish Marinara Kosher Meal</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09656</td>
<td>Corn Flakes Bulk</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09037</td>
<td>GP Elbow Macaroni Bulk</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09057</td>
<td>GP Rotini Bulk</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09086</td>
<td>LC 8&quot; Flour Tortilla</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09517</td>
<td>Skippack Tuna</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09031</td>
<td>Legacy BBQ Sauce</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09122</td>
<td>Cheese Moz Shredded</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>094132</td>
<td>Breakfast Patties 1oz</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>094149</td>
<td>Diced Tomatoes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>094159</td>
<td>Vegetarian Beans</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>094167</td>
<td>Lemon Juice Bulk</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>094179</td>
<td>Liquid Smoke</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

--- SALES ---

**Trinity Services Group, Inc.**
477 Commerce Blvd
Oldsmar, FL 34677
813-854-4264

--- BILLOTO ---

**TSG - CCA Torrance**
209 East Allen Avens
Estancia, NM 87016
505-364-2711

**INVOICE # 566502**

**DATE:** 05/11/2021

**ROUTE:** 100

NON-HANDELD - House Route

(DNo Commission)

**PAGE:** DSD/PO# 12379-1202

--- TOTAL ---

**OTHER CHARGES**

**TOTAL**
**Trinity Services Group, Inc.**
477 Commerce Blvd
Oldsmar, FL 34677
813-854-4264

<table>
<thead>
<tr>
<th>Item Description</th>
<th>Unit</th>
<th>Quantity</th>
<th>Price</th>
<th>Extended Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Imit Cheddar Cheese Shred</td>
<td>1/20LB</td>
<td>1</td>
<td>1.1370</td>
<td>2.2740</td>
</tr>
<tr>
<td>Tomato Puree</td>
<td>6/10CAN</td>
<td>1</td>
<td>2.9950</td>
<td>17.9700</td>
</tr>
<tr>
<td>3 Comp. Styrofoam Container</td>
<td>200/1CA</td>
<td>2</td>
<td>0.1091</td>
<td>0.2182</td>
</tr>
<tr>
<td>Film Wrap 12&quot;</td>
<td>2000/1CA</td>
<td>1</td>
<td>0.8956</td>
<td>10.7500</td>
</tr>
<tr>
<td>Film Wrap 18&quot;</td>
<td>2000/1CA</td>
<td>1</td>
<td>0.9500</td>
<td>17.1000</td>
</tr>
<tr>
<td>Trash Liner 40x46</td>
<td>10/25CA</td>
<td>1</td>
<td>2.1250</td>
<td>21.2500</td>
</tr>
</tbody>
</table>

**SALES TOTALS**

<table>
<thead>
<tr>
<th>Description</th>
<th>Quantity</th>
<th>Price</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TSG - CCA Torrance</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>209 East Allen Avers Estancia, NM 87016</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>505-364-2711</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**INVOICE TOTAL**

<table>
<thead>
<tr>
<th>Description</th>
<th>Quantity</th>
<th>Price</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TSG - CCA Torrance</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>209 East Allen Avers Estancia, NM 87016</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>505-364-2711</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

VIA EDI-850 FROM INV LOAD #566502 - 12379-TSG - CCA Torrance

**CHARGE**

**TOTAL AMOUNT DUE**

2,748.24

**PAID**

5-11-21

Printed: 05/10/2021 17:33:50
Uniform Straight Bill of Lading

KSC KELLOGG

DATE 6/7/2021

TO: Consignee Torrance CCA
Street 209 Co Rd A049

FROM: Shipper KSC, LLC
Street 4427 W BUCKEYE RD STE A

Destination ESTANCIA NM Zip Code 87016
Origin Phoenix AZ Zip Code 85043

Route

Pieces Item # Kind of Packaging, Description of Articles Special Marks and Exceptions Weight (subject to correction)

This INVOICE contains NO ITEMS That Require Special Handling

INVOICE # 578854

SEAL

This is a Uniform Straight Bill of Lading. The information provided is for the purpose of transporting the goods described herein. The sender and receiver agree to all terms and conditions as stated.

Driver is required to assist.

Shipper Certification

Placards Required? Yes Yes

Shippers Certification

Placards Provided?

Per Yes

NOTE: The agreed or declared value of property is hereby specifically stated by the shipper.

SHIPPER KSC

PER SIGNATURE

DATE/TIME June 7, 2021

Driver/Phone #

PER SIGNATURE

Date/Time
Trinity Services Group, Inc.
477 Commerce Blvd
Oldsmar, FL 34677
813-854-4264

TSG - CCA Torrance
209 East Allen Ayers
Estancia, NM 87016
505-384-2711

--- SALES ---

<table>
<thead>
<tr>
<th>ITEM #</th>
<th>DESCRIPTION</th>
<th>UPC</th>
<th>EACH PRICE</th>
<th>QTY</th>
<th>U/C</th>
<th>QTY</th>
<th>EXT</th>
<th>PROMO</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>90020</td>
<td>Granulated Sugar</td>
<td>1/50LB</td>
<td>27.4400</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>54.88</td>
<td>0.00</td>
<td>54.88</td>
</tr>
<tr>
<td>90242</td>
<td>Brown Sugar</td>
<td>1/50LB</td>
<td>43.4800</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>86.96</td>
<td>0.00</td>
<td>86.96</td>
</tr>
<tr>
<td>90532</td>
<td>Powdered Sugar</td>
<td>1/50LB</td>
<td>43.7000</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>87.40</td>
<td>0.00</td>
<td>87.40</td>
</tr>
<tr>
<td>94571</td>
<td>La Fina Bulk Salt</td>
<td>1/25LB</td>
<td>6.0600</td>
<td>8</td>
<td></td>
<td></td>
<td>241.36</td>
<td>0.00</td>
<td>241.36</td>
</tr>
</tbody>
</table>

** SALES TOTALS **

FROM INV LOAD #572193 - 12379-TSG - CCA Torrance

** INVOICE TOTAL **

TOTAL AMOUNT DUE 241.36

Parked 10-21
### Training/Activity Attendance Roster

**Training Location:** Torrance  
**Curriculum:** Health Assessment Signage to CMA required for NP's

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>LMS Course Code</th>
<th>Instructor</th>
<th>Time</th>
<th>Start</th>
<th>End</th>
</tr>
</thead>
<tbody>
<tr>
<td>5/20/21</td>
<td>Health Assessment Signage to CMA required for NP's</td>
<td></td>
<td>0(6); (b)(7)(C)</td>
<td>1000</td>
<td>1030</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Print Name</th>
<th>Signature</th>
<th>Emp #</th>
<th>Title</th>
<th>Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>(b)(6); (b)(7)(C)</td>
<td>(b)(6); (b)(7)(C)</td>
<td></td>
<td>Acen</td>
<td></td>
</tr>
</tbody>
</table>

---

Signature of person entering data into LMS

Learning and Development Manager's Signature

Comments:

---

06/01/2017

Proprietary Information – Not for Distribution – Copyrighted – Property of CoreCivic

2022-ICLI-00045 12322
# Uniform Corrective Action Plan

## ICE Uniform Corrective Action Plan (ODO Reviews)

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Torrance County Detention Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (Street and Name)</td>
<td>209 County Road 49</td>
</tr>
<tr>
<td>City, State and Zip Code</td>
<td>Estancia, NM 87016</td>
</tr>
<tr>
<td>County</td>
<td>Torrance</td>
</tr>
<tr>
<td>Date[s] of Facility Review</td>
<td>May 3-7, 2021</td>
</tr>
<tr>
<td>Complete and Return to ICE HQ No Later Than:</td>
<td></td>
</tr>
</tbody>
</table>

---

Facility Corrective Action Plan Assigned to (Signed by AFOD or Higher)

**[Signature]**

**Acting Deputy Field Office Director**

<table>
<thead>
<tr>
<th>Date of Final Submission:</th>
</tr>
</thead>
</table>

---

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

Report produced on June 24, 2013
**Instructions for Corrective Action Response**

Provide a detailed description of the corrective action taken by the facility to address each of the deficiencies identified in the Office of Detention Oversight review. Please ensure that each corrective action corrects the noted deficiency to the fullest extent possible. In the event a deficiency cannot be corrected within the authorized timeline, an explanation is required in the “Corrections Made” column. The explanation should include a work around solution while pending final resolution, and an approximate completion date. If an extension is needed, the Field Office must contact the appropriate DMD staff member with this request in advance of the specified timelines for submission.

*Exceptions to this timeline may be granted for necessary construction and staffing requirements, but will require an estimated completion date and temporary “work around” as part of the approved UCAP. Serious life and safety issues must be corrected immediately.*

<table>
<thead>
<tr>
<th>ICE Uniform Corrective Action Plan</th>
<th>Torrance County Detention Facility (ELP)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Standard</strong></td>
<td><strong>Deficiency</strong></td>
</tr>
</tbody>
</table>
| 1. SECURITY ADMISSIONS AND RELEASE (FS&C) (V)(H)(1)(9)(c) | *ODO reviewed five detainee release files and found no Order to Release form (Form I-203) in two out of five release files (Deficiency AR-80)¹.*  
ODO reviewed five detainee release files and found one out of five release files did not contain a copy of the detainee’s property inventory form (Deficiency AR-91)².* | On 05/07/2021, TCDF staff conducted an audit of current detainee files to account for Forms I-203 / I-216 forms.  
On 05/20/2021, TCDF supervisory staff began reviewing files to | 06/22/2021 |


²“The detainee shall check his/her property against the original personal property inventory form. If all property is correctly accounted for, the detainee shall sign the inventory sheet, a copy of which the officer shall place in the detainee’s detention file.” See ICE PBNDS 2011 (2013 Errata), Standard, Admission and Release, Section (V)(H)(9)(c).
| | account for Forms I-203 / I-216.  
| | On 05/20/2021, TCDF implemented an intake file checklist that includes verifying the presence of detainee property inventory forms. Ex #1 page 8  
| | On 05/25/2021, TCDF conducted a final verification by records staff that all release documentation is present prior to filing the records. Ex. #1 page 16  
| | Effective 06/10/2021, TCDF staff began notifying ICE/ERO of any discrepancies with Forms I-203/I-216.  
| | On 06/22/2021, TCDF Chief of Unit Mgmt. conducted refresher training with Receiving
2. CUSTODY CLASSIFICATION SYSTEM (V)(K)

**ODO reviewed the facility's detainee handbook and found no explanation of the classification levels with the conditions and restrictions applicable to each. Specifically, the handbook did not include an explanation of a high-classification level with the conditions and restrictions (Deficiency CCS-66**3**).**

| Effective 08/09/2021, TCDF added a supplement to the Detainee Handbook to address the classification levels with the conditions and restrictions applicable to each. A copy of the supplement will be provided to existing detainees and issued with the Detainee Handbook to all new arrivals during the intake process. Exhibit 2 (p. 9) | 08/09/2021 |

---

3 “The ICE Detainee Handbook standard section on classification shall include: …
- An explanation of the classification levels, with the conditions and restrictions applicable to each.
- The procedures by which a detainee may appeal his or her classification.” See ICE PBNDS 2011 (2013 Errata), Standard, Custody Classification System, Section (V)(K).
3. FUNDS AND PERSONAL PROPERTY

| ODO reviewed the facility’s detainee handbook and found no procedures for filing a claim for lost or damaged property (Deficiency FPP-19⁴) |

| ODO reviewed the facility’s detainee handbook and found no notification to detainees on how to access personal funds to pay for legal services (Deficiency FPP-20⁵) |

| ODO reviewed seven personal property forms and found seven out of seven forms did not indicate the detainee’s time of admission (Deficiency FPP-85⁶) |

| Effective 08/09/2021, TCDF created a supplement to the Detainee Handbook to address the procedures for filing a claim for lost or damaged property and notification to detainees on how to access personal funds to pay for legal services. A copy of the supplement will be provided to existing detainees and issued with the Detainee Handbook to all new arrivals during the intake process. Exhibit 2 (pp. 7-8 & 21) |

---

⁴ “The detainee handbook or equivalent shall notify the detainees of facility policies and procedures related to personal property, including: …
5. the procedure for filing a claim for lost or damaged property.” See ICE PBNDS 2011 (2013 Errata), Standard, Funds and Personal Property, Section (V)(C)(5).

⁵ “The detainee handbook or equivalent shall notify the detainees of facility policies and procedures related to personal property, including: …
6. access to detainee personal funds to pay for legal services.” See ICE PBNDS 2011 (2013 Errata), Standard, Funds and Personal Property, Section (V)(C)(6).

⁶ “The personal property inventory form must contain the following information at a minimum:
1. date and time of admission.” See ICE PBNDS 2011 (2013 Errata), Standard, Funds and Personal Property, Section (V)(I)(1).
<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/17/2021</td>
<td>TCDF implemented a computer-generated Order Management System (OMS) property form which include a section to indicate the detainee's date &amp; time of admission. Exhibit 3</td>
</tr>
<tr>
<td>06/22/2021</td>
<td>TCDF Chief of Unit Mgmt. conducted training with R&amp;D staff on the proper completion of the OMS property form, specifically addressing entry of detainee's date &amp; time of admission. The training was documented on a Form 4-2A, Training/Activity Attendance Roster. Exhibit 4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ODO reviewed photographs of bread used for kosher trays and found the facility did not purchase bread labeled “pareve” or “parve” (Deficiency FS-1997).</th>
</tr>
</thead>
<tbody>
<tr>
<td>ODO reviewed six purchase requests for controlled-food items and found the food service director did not mark the item “hot” in six out of six purchase requests for sugar to signal the need for special handling (Deficiency FS-42614).</td>
</tr>
</tbody>
</table>

After further research, TCDF confirmed the bread in use at that time for kosher trays was Parve, however, it was not labeled as Parve. On 05/18/2021, TCDF changed bread products for kosher trays to a product that is clearly labeled as Parve. Exhibit 5

On 05/04/2021, TCDF’s food vendor was provided instruction on proper special handling instructions that must be annotated on purchase orders. The food vendor implemented the coding change resulting in purchase order

| 05/18/2021 |

---

7 Only bread and margarine labeled “pareve” or “parve” shall be purchased for the kosher tray.” See ICE PBNDS 2011 (2013 Errata), Standard, Food Service, Section (V)(G)(5).
<p>| annotation compliance on 05/04/2021. Communication to the vendor, directing that purchase orders contain special handling requirements for delivery of controlled items shall be retained with each applicable purchase order. The TCDF Food Service Director shall inspect all purchase orders for controlled items prior to facility entry for a period of 2 months, beginning 05/2021, to monitor compliance. This review will be documented by initialing the purchase order(s) containing special handling instructions for delivery of controlled-food items or &quot;hot item.&quot; |</p>
<table>
<thead>
<tr>
<th>5. MEDICAL CARE (V)(I)</th>
<th><strong>5. MEDICAL CARE (V)(I)</strong></th>
<th><strong>Exhibit 6</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>5. MEDICAL CARE (V)(I)</strong></td>
<td>ODO reviewed 12 detainee medical records and found no reviews to assess priority of treatment by the clinical medical authority in 7 out of 12 records (Deficiency MC-14015).</td>
<td>On 05/20/2021, the TCDF Health Services Administrator conducted refresher training with the facility Nurse Practitioner regarding the requirement to submit all completed health assessments to the Certified Medical Assistants (CMAs) to review priority of treatment. The training was documented on a Form 4-2A, Training/Activity Attendance Roster. Exhibit 7. On 05/21/2021, formal disciplinary action was issued to the responsible staff member. Effective 05/20/2021, a 60-day Continuous Quality Improvement</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(CQI) study was implemented to monitor compliance. Results of the study will be documented in the quarterly CQI meeting and provided to the Health Services Administrator. Further non-compliance will result in additional training, counseling, and/or progressive disciplinary action, as appropriate.</td>
<td></td>
</tr>
</tbody>
</table>
CAUTION: This email originated from outside of DHS. DO NOT click links or open attachments unless you recognize and/or trust the sender. Please use the Cofense Report Phishing button to report. If the button is not present, you can click on report.

Notes attached from closeout.

Warden's Secretary

Torrance County Detention Facility
209 E. Alan Ayers Rd. - AO49
PO Box 837
Estancia, New Mexico 87016
505-384-0070 505-384-0070
@corecivic.com

CONFIDENTIALITY NOTICE: This e-mail transmission, and any documents, files or previous e-mail messages attached to it, may contain confidential information that is legally privileged. If you are not the intended recipient, or a person responsible for delivering it to the intended recipient, you are hereby notified that any disclosure, copying, distribution or use of any of the information contained in or attached to this message is STRICTLY PROHIBITED. If you have received this transmission in error, please immediately notify me by reply e-mail at 505-384-0070 505-384-0070 CoreCivic.com or by telephone at (505)384-0070 505-384-0070 and destroy the original transmission and its attachments without reading them or saving them to disk. Thank you!

(i) This e-mail and any files transmitted with it are confidential and intended solely for the use of the intended recipient(s). If you have received this e-mail in error, please notify the sender immediately and delete this e-mail and any associated files from your system. (ii) Views or opinions presented in this e-mail are solely those of the author and do not necessarily represent those of CoreCivic. (iii) The recipient should check this e-mail and any attachments for the
presence of viruses. The company accepts no liability for errors or omissions caused by e-mail transmission or any damage caused by any virus transmitted by or with this e-mail. This email has been scanned for content and viruses by the Symantec Email Security.cloud service.
Facility Requests (ICE) log must be kept (on the spot correction)

Information in English/Spanish posted regarding all ICE Legal calls (on the spot correction)

Numerous maintenance issues in Units (maintenance working diligently, back up of work orders)

Detainess filling water jugs from utility sinks (on the spot correction)

Security bubble on 7/8 floor questions about visibility, officer having to look through two different barred area windows blind spots on cameras. Alleged that 7 Control was not manned

COVID mask usage not consistent with detainees

Staffing 121+ vacancies

Classification - Files not complete

Segregation- 2 detainees in medical without access to what would be usual unit accessibility

Medical-
  - Dental Eval process should be conducted twice admit/exit
  - Pill or sick call process / refusal or no show reasons not clear in Allscripts Data
  - MAR’s documentation not consistent, only updated at nightshift
  - Narcotics cabinet found unsecure ( key issues, on the spot correction)
  - Chronic Care guidelines (lab results) not clear in medical records Allscripts Data
  - Detainee grievance Forms do not allow documentation beyond the initial complaint
Good afternoon,

Please see the below items that were brought up during OIG close out today.

1. **Facility Requests**
   a. Log needs to be kept

2. **Units - Maintenance Issues**
   a. Work orders taking to long to be completed
   b. hard water, calcium
   c. no hot water in cells
   d. shower heads dripping
   e. empty cell cleanliness
   f. sink continued to run
   g. water on the floor
   h. sinks not draining fast enough
   i. toilets leaking

3. **Information on Legal Call**
   a. Not posted in English and Spanish

4. **Water Containers in Unit**
   a. Being filled from spicket inside the unit same location as the mop bucket

5. **Detention Files**
   a. Classification documents not in the files

6. **Staffing and Security**
   a. 121 vacancies
   b. Staff was not in Unit Control room
   c. Visibility into units from control room obstructed

7. **Segregation/Medical**
   a. Detainees do not have the same access as regular units

8. **Medical**
   a. Dental exams and documentation
   b. Narcotic cabinet found unsecure
   c. Chronic Care guidance and process need to be clear
d. Med Line-Who did or did not get meds. Documentation
e. Grievance Forms need more than just initial complaint options

9. COVID-19
   a. Mask usage not consistent

Respectfully,

[Redacted]
Assistant Field Office Director
El Paso Field Office
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
Desk-505-45 [Redacted]
Please see the below list of items identified by the Office of Inspector General.

I would like to get in front of this. As stated in the out brief, there may be allowances given for spot/immediate corrections. Please work with AFOD [REDACTED] and DSM [REDACTED] to begin correcting these items.

The inspectors stated some of these items were corrected; please detail which items and how each was resolved.

Given the staffing concerns raised in the report, do you in fact have the staff you need to accommodate the additional 200+ cases we discussed two weeks ago? I need to provide this information to leadership today.

Thank you,

Acting Deputy Field Office Director

1. Facility Requests
   a. Log needs to be kept

2. Units - Maintenance Issues
   a. Work orders taking to long to be completed
   b. hard water, calcium
   c. no hot water in cells
   d. shower heads dripping
   e. empty cell cleanliness
   f. sink continued to run
   g. water on the floor
   h. sinks not draining fast enough
   i. toilets leaking

3. Information on Legal Call
   a. Not posted in English and Spanish

4. Water Containers in Unit
   a. Being filled from the spicket inside the unit same location as the mop bucket
5. Detention Files
   a. Classification documents not in the files

6. Staffing and Security
   a. 121 vacancies
   b. Staff was not in Unit Control room
   c. Visibility into units from control room obstructed

7. Segregation/Medical
   a. Detainees do not have the same access as regular units

8. Medical
   a. Dental exams and documentation
   b. Narcotic cabinet found unsecure
   c. Chronic Care guidance and process need to be clear
   d. Med Line-Who did or did not get meds. Documentation
   e. Grievance Forms need more than just initial complaint options

9. COVID-19
   a. Mask usage not consistent
I added some comments/opinions/possible recommendations in red from what I observed from the below OIG findings documented by DFOD.
Thanks,

Standards Compliance Officer
Detention Oversight Unit – Central Region
Oversight, Compliance, and Acquisition Division
Custody Management Division
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
Cell: (520) 483-6395

From: D(b)(6), D(b)(7)(C)@ice.dhs.gov>
Sent: Friday, February 4, 2022 9:42 AM
To: D(b)(6), D(b)(7)(C)@corecivic.com>
Cc: D(b)(6), D(b)(7)(C)@ice.dhs.gov>; D(b)(6), D(b)(7)(C)@ice.dhs.gov>; D(b)(6), D(b)(7)(C)@ice.dhs.gov; D(b)(6), D(b)(7)(C)@ice.dhs.gov
Subject: FW: TCDF OIG Visit

Warden D(b)(6), D(b)(7)(C)

Please see the below list of items identified by the Office of Inspector General.

I would like to get in front of this. As stated in the out brief, there may be allowances given for spot/immediate corrections. Please work with AFOD D(b)(6), D(b)(7)(C) and DSM D(b)(6), D(b)(7)(C) to begin correcting these items.

The inspectors stated some of these items were corrected; please detail which items and how each was resolved.

Given the staffing concerns raised in the report, do you in fact have the staff you need to accommodate the additional 200+ cases we discussed two weeks ago? I need to provide this information to leadership today.

Thank you,

Acting Deputy Field Office Director
1. Facility Requests
   a. Log needs to be kept

2. Units - Maintenance Issues
   a. Work orders taking to long to be completed
   b. hard water, calcium
   c. no hot water in cells
   d. shower heads dripping
   e. empty cell cleanliness
   f. sink continued to run
   g. water on the floor
   h. sinks not draining fast enough
   i. toilets leaking

3. Information on Legal Call
   a. Not posted in English and Spanish

4. Water Containers in Unit
   a. Being filled from the spicket inside the unit same location as the mop bucket

5. Detention Files
   a. Classification documents not in the files

6. Staffing and Security
   a. 121 vacancies
   b. Staff was not in Unit Control room
   c. Visibility into units from control room obstructed

7. Segregation/Medical
   a. Detainees do not have the same access as regular units

8. Medical
   a. Dental exams and documentation
   b. Narcotic cabinet found unsecure
   c. Chronic Care guidance and process need to be clear
   d. Med Line-Who did or did not get meds. Documentation
   e. Grievance Forms need more than just initial complaint options

9. COVID-19
   a. Mask usage not consistent
From: [Redacted]
The: [Redacted]
To: [Redacted]
Cc: [Redacted]
Subject: FW: TCDF OIG Visit

CAUTION: This email originated from outside of DHS. DO NOT click links or open attachments unless you recognize and/or trust the sender. Please use the Cofense Report Phishing button to report. If the button is not present, you can click on report.

Good afternoon,

Thank You,

Warden
Torrance County Detention Facility
Office: 505- [Redacted]
Cell: 386- [Redacted]
[Redacted]@corecivic.com
CAUTION: This email came from outside the organization. Attachments and links may contain viruses and other malicious software.

I added some comments/opinions/possible recommendations in red from what I observed from the below OIG findings documented by DFOD Stephens:
Thanks,

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

Standards Compliance Officer
Detention Oversight Unit – Central Region
Oversight, Compliance, and Acquisition Division
Custody Management Division

Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
Cell: (520) 483-(b)(6)

From: [email]
Sent: Friday, February 4, 2022 9:42 AM
To: [email]
Cc: [email]; [email]; [email]

Subject: FW: TCDF OIG Visit

Warden

Please see the below list of items identified by the Office of Inspector General.
I would like to get in front of this. As stated in the out brief, there may be allowances given for spot/immediate corrections. Please work with AFOD\[6\] and DSM\[7\] to begin correcting these items.

The inspectors stated some of these items were corrected; please detail which items and how each was resolved.

Given the staffing concerns raised in the report, do you in fact have the staff you need to accommodate the additional 200+ cases we discussed two weeks ago? I need to provide this information to leadership today.

Thank you,

[b](6), [b](7)

Acting Deputy Field Office Director

1. **Facility Requests**
   a. Log needs to be kept

2. **Units - Maintenance Issues**
   a. Work orders taking too long to be completed
   b. Hard water, calcium
   c. No hot water in cells
   d. Shower heads dripping
   e. Empty cell cleanliness
   f. Sink continued to run
   g. Water on the floor
   h. Sinks not draining fast enough
   i. Toilets leaking

3. **Information on Legal Call**
   a. Not posted in English and Spanish

4. **Water Containers in Unit**
   a. Being filled from the spicket inside the unit same location as the mop bucket

5. **Detention Files**
   a. Classification documents not in the files

6. **Staffing and Security**
   a. 121 vacancies
   b. Staff was not in Unit Control room
   c. Visibility into units from control room obstructed

7. **Segregation/Medical**
   a. Detainees do not have the same access as regular units
8. **Medical**
   a. Dental exams and documentation
   b. Narcotic cabinet found unsecure
   c. Chronic Care guidance and process need to be clear
   d. Med Line-Who did or did not get meds. Documentation
   e. Grievance Forms need more than just initial complaint options

9. **COVID-19**
   a. Mask usage not consistent

(ii) This e-mail and any files transmitted with it are confidential and intended solely for the use of the intended recipient(s). If you have received this e-mail in error, please notify the sender immediately and delete this e-mail and any associated files from your system. (ii) Views or opinions presented in this e-mail are solely those of the author and do not necessarily represent those of CoreCivic. (iii) The recipient should check this e-mail and any attachments for the presence of viruses. The company accepts no liability for errors or omissions caused by e-mail transmission or any damage caused by any virus transmitted by or with this e-mail. This email has been scanned for content and viruses by the Symantec Email Security.cloud service.
Warden

Thank you for the below response. Beginning next week, ERO El Paso will begin sending you new intakes to get the facility up to the 380 we discussed.

I would ask AFOD and DSM to continue to work with your facility to address the OIG concerns.

R/Stephens

CAUTION: This email originated from outside of DHS. DO NOT click links or open attachments unless you recognize and/or trust the sender. Please use the Cofense Report Phishing button to report. If the button is not present, you can click on report.
Thank You,

Warden
Torrance County Detention Facility
Office: 505-1
Cell: 386-36
@corecivic.com

From: @ice.dhs.gov
Sent: Friday, February 4, 2022 12:05 PM
To: @ice.dhs.gov; @corecivic.com
Cc: @ice.dhs.gov; @corecivic.com
Subject: RE: TCDF OIG Visit

CAUTION: This email came from outside the organization. Attachments and links may contain viruses and other malicious software.

I added some comments/opinions/possible recommendations in red from what I observed from the below OIG findings documented by DFOD Stephens:
Thanks,

[Redacted]

Standards Compliance Officer
Detention Oversight Unit – Central Region
Oversight, Compliance, and Acquisition Division
Custody Management Division

Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
Cell: (520) 483-
From: [redacted]@corecivic.com
Sent: Friday, February 4, 2022 9:42 AM
To: [redacted]@corecivic.com
Cc: [redacted]@corecivic.com; [redacted]@corecivic.com; [redacted]@corecivic.com
Subject: FW: TCDF OIG Visit

Warden

Please see the below list of items identified by the Office of Inspector General.

I would like to get in front of this. As stated in the out brief, there may be allowances given for spot/immediate corrections. Please work with AFOD and DSM to begin correcting these items.

The inspectors stated some of these items were corrected; please detail which items and how each was resolved.

Given the staffing concerns raised in the report, do you in fact have the staff you need to accommodate the additional 200+ cases we discussed two weeks ago? I need to provide this information to leadership today.

Thank you,

Acting Deputy Field Office Director

1. Facility Requests
   a. Log needs to be kept

2. Units - Maintenance Issues
   a. Work orders taking to long to be completed
      b. hard water, calcium
      c. no hot water in cells
      d. shower heads dripping
      e. empty cell cleanliness
      f. sink continued to run
      g. water on the floor
      h. sinks not draining fast enough
      i. toilets leaking

3. Information on Legal Call
   a. Not posted in English and Spanish

4. Water Containers in Unit
a. Being filled from the spicket inside the unit same location as the mop bucket

5. Detention Files
   a. Classification documents not in the files

6. Staffing and Security
   a. 121 vacancies
   b. Staff was not in Unit Control room
   c. Visibility into units from control room obstructed

7. Segregation/Medical
   a. Detainees do not have the same access as regular units

8. Medical
   a. Dental exams and documentation
   b. Narcotic cabinet found unsecure
   c. Chronic Care guidance and process need to be clear
   d. Med Line-Who did or did not get meds. Documentation
   e. Grievance Forms need more than just initial complaint options

9. COVID-19
   a. Mask usage not consistent

(i) This e-mail and any files transmitted with it are confidential and intended solely for the use of the intended recipient(s). If you have received this e-mail in error, please notify the sender immediately and delete this e-mail and any associated files from your system. (ii) Views or opinions presented in this e-mail are solely those of the author and do not necessarily represent those of CoreCivic. (iii) The recipient should check this e-mail and any attachments for the presence of viruses. The company accepts no liability for errors or omissions caused by e-mail transmission or any damage caused by any virus transmitted by or with this e-mail. This email has been scanned for content and viruses by the Symantec Email Security.cloud service.
Good morning,

Following the close-out yesterday afternoon, I provided the preliminary report to the Warden and Assistant Warden explaining that I needed an idea of what there corrective actions would be by COB today. Please see the attached documents for their response for each finding.

Respectfully,

[Redacted]
Assistant Field Office Director
El Paso Field Office
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
Desk-505-4524

From: [Redacted]ice.dhs.gov
Sent: Friday, May 6, 2022 8:29 AM
To: [Redacted]ce.dhs.gov; [Redacted]ce.dhs.gov; [Redacted]ce.dhs.gov
Cc: [Redacted]ce.dhs.gov
Subject: FW: Compliance Inspection – Torrance County Detention Facility - Preliminary Report
Importance: Low

Please see the ODO Inspection Report at the link below and share with CC and medical staff. Be prepared to discuss at next week’s TEAMS meeting and provide updates on each line item.

Thanks,

[Redacted]
Deputy Field Office Director
Immigration and Customs Enforcement
11541 Montana Ave., Suite 200
El Paso, TX 79936
915-691-5000 (office)
210-523-7223 (cell)
[Redacted]ice.dhs.gov (Unclassified)
[Redacted]hs.gov (HSDN)
Hello,

Please see the preliminary report for ODO’s compliance inspection of the Torrance County Detention Facility, in ESTANCIA, NM, May 03-05, 2022 [here](#). This report includes our preliminary findings; a final report will follow.

Please let me know if you have any questions or concerns.

Thank you,

Section Chief

[ice.dhs.gov](http://ice.dhs.gov)
Good Morning,

I have a meeting with the FOD/DFOD and will get you the contract information shortly. I will be available later this morning if the inspectors need to speak with me.

V/R,

Management & Program Analyst / COR
El Paso Field Office
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
(915) 472-7799, Cell

From: (b)6), (b)7)(C)
Sent: Wednesday, February 2, 2022 9:31 AM
To: (b)6), (b)7)(C)
Cc: (b)6), (b)7)(C)
Subject: RE: OIG surprise inspection

One more question:

Past six months of Contract Discrepancy Reports involving the facility.

Supervisory Detention and Deportation Officer
El Paso Field Office, Albuquerque Sub-office
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
Office: (505) 452-7799.
Good Morning,
We have a surprise inspection at TCDF going on today. The auditors are requesting the following can you please help?

- Current contracts and contract amendments between the facility and ICE (e.g. Intergovernmental Service Agreements, etc.)

Thank you,

[Redacted]
Supervisory Detention and Deportation Officer
El Paso Field Office, Albuquerque Sub-office
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
Office: (505) 45 [Redacted]
AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT

1. CONTRACT ID CODE
   PO0014

3. EFFECTIVE DATE
   See Block 16C

4. REQUISITION/ PURCHASE REQ. NO
   70CDRC

5. PROJECT NO. (If applicable)
   TD0707

7. ADMINISTERED BY (If other than Item 6)
   ICE/DCR

ICE/ Detention Compliance & Removals
U.S. Immigration and Customs Enforcement
Office of Acquisition Management
801 I ST NW, Room 1402
Washington, DC 20536

8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, state and ZIP Code)
   TORRANCE COUNTY OF
   ATTACHments
   PO BOX 48
   ESTANCIA NM 870160048

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS
   ☑ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of offers
   ☑ is extended. ☐ is not extended.
   Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing
   ☑ items 6 and 15, and returning copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By
   ☑ separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT
   THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If
   ☑ virtue of this amendment you desire to change an offer already submitted, such changes may be made by telegram or letter, provided each telegram or letter makes
   ☑ reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required)
   See Schedule

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT ORDER NO. AS DESCRIBED IN ITEM 14.

☐ CHECK ONE
   ☑ A. THIS CHANGE ORDER IS ISSUED PURSUANT TO (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT
   ☑ ORDER NO. IN ITEM 10A.
   ☑ B. THE ABOVE NUMBERED CONTRACT ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office,
   ☑ appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.150(b).
   ☑ C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
   ☑ D. OTHER (Specify type of modification and authority)
   ☑ IAW the Terms and Conditions of 70CDRC19D1G000009

E. IMPORTANT: Contractor ☑ is not. ☑ is required to sign this document and return 1 copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)
   DUNS Number: 095746517
   COR: ☑ (d)(0), (d)(7)(C) ☑ (d)(9), (d)(7)(C) ☑ 915-856-202-23/915-856-202-23/Bice.dhs.gov
   ACOR: ☑ (d)(0), (d)(7)(C) ☑ (d)(9), (d)(7)(C) ☑ bice.dhs.gov
   Contract Specialist: ☑ (d)(0), (d)(7)(C) ☑ (d)(0), (d)(7)(C) ☑ bice.dhs.gov
   Contracting Officer: ☑ (d)(0), (d)(7)(C) ☑ (d)(0), (d)(7)(C) ☑ bice.dhs.gov

The purpose of this modification is to memorialize Contract Discrepancy Report (CDR) 12-21-2020 as attached. The invoice for December 2020 shall be deducted 10% of the total invoice amount. Subsequent monthly invoices shall be deducted 5% from the total invoice amount until the performance requirements detailed in the CDR are satisfied. The Government reserves the right, in accordance with the CDR, to increase the monthly invoice deduction
Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10 A, as hereinafter changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNED (Type or print)
   ☑ County Manager

16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)
   ☑ County Manager

15B. DATE SIGNED
   ☑ 3.3.2021

16B. UNITED STATES OF AMERICA
   ☑ 3.3.2021

16C. DATE SIGNED
   ☑ 3.3.2021

Digitally signed by
Date: 2021.03.04 17:08:25 -05’00’

STANDARD FORM 30 (REV. 10-83)
Prescribed by GSA
FAR (48 CFR) 52.243

Previous edition unusable
up to 10%.
Period of Performance: 05/15/2019 to 05/14/2024
ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

-------------
NOTHING FOLLOWS
## Attachment B – Contract Discrepancy Report

### CONTRACT DISCREPANCY REPORT

<table>
<thead>
<tr>
<th>Report Number:</th>
<th>CDR 12-21-2020</th>
<th>Date: 12/21/2020</th>
</tr>
</thead>
</table>

2. TO: (Contractor and Manager Name)
   Torrance County Detention Facility
   Torrance County
   Core Civic
   Michael Sedgwick - Warden

3. FROM: (Name of COTR)
   O(6); O(7)(C)
   Contract Officers Representative

### DATES

<table>
<thead>
<tr>
<th>CONTRACTOR NOTIFICATION</th>
<th>CONTRACTOR RESPONSE DUE</th>
<th>RETURNED BY CONTRACTOR</th>
<th>ACTION COMPLETE</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/21/2020</td>
<td>12/30/2021</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. DISCREPANCY OR PROBLEM
   (Describe in Detail: Include reference to IWS. Directive: Attach continuation sheet if necessary.)
   The Torrance County Detention Facility (TCDF) located in Estancia, NM has been identified as being in violation of the Performance Basic National Detention Standards 2011 (PBNS 2011) and the signed ICE/ERO contractual agreement 70CDCR19DIG0000009, which includes the standards of the IGSA articles, PWS, QCP, and QASP. It has been discovered that the facility medical staffing is not in line with the agreed upon contractual staffing plan and the facility has critical medical staffing shortages. It has also been discovered that the Chief Medical Officer has not been dedicated to the Torrance contract and has been supporting multiple facilities at the same time, which has resulted in very limited coverage. The following PBNS standards are in violation PBNS 4.3, Medical Care. The following IGSA Articles that are in violation are Article 8 - Medical Services, Article 20 - Incident Reporting, and Article 32 - QASP.

### SIGNATURE OF CONTRACTOR REPRESENTATIVE (COTR)

7. FROM: (Contractor)
   O(6); O(7)(C)
   Date: 12/29/2020
   Torrance County Detention Facility

8. CONTRACTOR RESPONSE AS TO CAUSE, CORRECTIVE ACTION AND ACTIONS TO PREVENT RECURRENCE. ATTACH CONTINUATION SHEET IF NECESSARY. (Cite applicable J.A program procedures or new A.W. procedures.)

   - Attached -

### GOVERNMENT EVALUATION OF CONTRACTOR RESPONSE/RESOLUTION PLAN:

10. DATE
   12/29/2020

11. The Government does not accept the CoreCivic response dated 12/29/2020 as a proper remedy to the medical staffing shortfalls and has provided a Rejection Notice response dated 01/28/2021 (See Attachment #2 Below).

12. GOVERNMENT ACTIONS: (Payment withholding, cure notice, show cause, other)
   In accordance with IGSA 70CDCR19DIG0000009, Attachment 7(a), Performance Requirements, p. 2 "Workforce Integrity," the Government shall deduct 10% from each monthly invoice beginning from December 2020 until a minimal staffing amount of 85% is achieved in accordance with the IGSA, Staffing Plan and until the Government is otherwise satisfied that the staffing requirements set forth in this CDR have been satisfactorily addressed, to include dedicated facility staffing.

### CLOSE OUT

<table>
<thead>
<tr>
<th>CONTRACTOR</th>
<th>NAME AND TITLE</th>
<th>SIGNATURE</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>NOTIFIED</td>
<td></td>
<td>(O(6); (O(7)(C)</td>
<td>2/10/2021</td>
</tr>
<tr>
<td>COTR</td>
<td></td>
<td>(O(6); (O(7)(C)</td>
<td>01/27/2021</td>
</tr>
<tr>
<td>CONTRACTING OFFICER</td>
<td></td>
<td>(O(6); (O(7)(C)</td>
<td></td>
</tr>
</tbody>
</table>
January 26, 2021

From: [Redacted] — COR
To: [Redacted] — Acting Warden, Torrance County Detention Facility

Subject: CDR Response Rejection Notice

CDR Report Number: 12-21-2020

On December 29, 2020, a response to CDR 12-21-2020 was submitted on behalf of CoreCivic and the Torrance County Detention Facilities (Tcdf) Acting Warden to the COR. The Contractor’s CDR response is rejected because it does not properly address the Medical staffing issue and concerns brought up in the CDR.

1. There is no explanation for the Chief Medical Officer, another Doctor, and a Nurse Practitioner providing part time medical service at the TCDF because of shared medical care/coverage at other ICE detention facilities.

2. The staffing information provided by CoreCivic does not show all the medical staffing shortfalls and the vacancy percentages are much higher than indicated. These shortages greatly affect the overall operational capability of the facility with any Detainee population increase. The average reported Detainee numbers and percentages are much lower than indicated in the CoreCivic response. ICE is paying for a guaranteed minimum with an associated level of staff support, not a reduced staff based on current population levels. Examples of these discrepancies are as follows:

   - There are 4.75 medical staffing position vacancies that are not listed in the CoreCivic response. The Psychiatrist, 2 each Mental Health Coordinators, and 2 each Mental Health Counselors. All services are provided through tele psych services.
   - The actual medical staffing level is around 44.92% and far less than 95% staffing levels indicated in the response.
   - The total medical staff positions are supposed to be 34.77 and not the listed 33.77.
   - The daily populations have been averaging below 20 and not 43 Detainees average in the response. Currently 14/714.
ICE clearance process. Although it is impossible to make guarantees when positions will be filled, CoreCivic is allocating additional human and financial resources to help fill the vacancies at TDCF, including over $20,000 in targeted recruiting advertisements, and we expect to fill the majority of the vacant positions within the next 90 days. In fact, one nurse practitioner started on February 1, 2021, and the Mental Health Coordinator, who has been on an approved leave of absence, is projected to return to work on February 8, 2021. In addition, candidates have accepted offers for five of the currently vacant medical positions, and they are expected to begin work upon completion of the clearance process. To help identify qualified candidates for the remaining positions, CoreCivic also is offering a referral bonus of $1,500 to existing staff.

Although CoreCivic acknowledges that TCDF has multiple vacancies in the Health Services department and is currently below the contractually required 95% staffing levels for all positions, we would like to clarify the contractual staffing requirements at TCDF. The rejection notification indicates that "the total medical staff positions are supposed to be 34.77 and not the listed 33.77." It appears that ICE may be referring to CoreCivic's internal staffing plan at TCDF (typically labeled as an "operational staffing plan"). In some instances, CoreCivic's operational staffing plan includes minor additions to the staffing levels beyond what is required under the contract staffing plan. However, CoreCivic is only contractually obligated to fill the positions included in the contract staffing plan. The current contract staffing plan for TCDF is included as Attachment 9 ICE CONTRACT STAFFING PATTERN (attached for your reference) to the original Intergovernmental Service Agreement (IGSA) dated May 15, 2019. As reflected in CoreCivic's original response, the contract staffing plan currently allocates 33.77 total positions to TCDF's Health Services department. In addition, the two Mental Health Counselor positions noted on the contract staffing plan are not included in the overall count of 33.77 total Health Services positions. Rather, they are noted as "PRN." PRN is an abbreviation of the Latin phrase "pro re nata," and is used as shorthand in the Health Services and pharmaceutical communities for "as needed" or "as the situation arises." As indicated on the contract staffing plan, the positions do not count towards (or against) TCDF's total staffing levels, as the positions are only filled if and when needed. With the current daily ICE population at TCDF averaging below 20 detainees, we do not believe these positions are currently needed.

In addition, our original response noted that 24.35 (or approximately 72%) of the 33.77 staff positions allocated to the Health Services Department were filled at the time we submitted the response. We believe that statement was accurate based on the contract staffing plan and the information above. Under the contract staffing plan, only one Mental Health Coordinator position is required. The Mental Health Coordinator position is filled, although the staff member currently is on approved leave pursuant to the federal Family Medical Leave Act (FMLA), with which we are contractually and statutorily required to comply. In addition, the part-time Psychiatrist position at TCDF is currently filled, and the associated psychiatric services are provided remotely via tele-health.

In summary, CoreCivic acknowledges and sincerely regrets that staffing levels at TCDF are below contractual requirements. CoreCivic is committed to filling the vacant positions as quickly as possible, and we remain committed to providing the ICE detainees in our care with appropriate levels of medical, mental, and dental care consistent with all PBHNDs and other applicable standards. We value our long-term partnership with ICE, and we appreciate the opportunity to respond to your concerns and for ICE's consideration of the information presented above. Based on our record of consistently providing appropriate levels of medical, mental health, and dental care to ICE detainees throughout the period of the vacancies, CoreCivic respectfully requests that the proposed deduction of the monthly invoice be reduced to 5%.

Sincerely,

[Redacted], Acting Warden
Torrance County Detention Facility
February 2, 2021

Contracting Officer Representative
U.S. Immigration and Customs Enforcement
U.S. Department of Homeland Security

RE: CDR Response Rejection Notice
Contract Discrepancy Report # CDR 12-21-2020
IGSA No. 70CDCR19D1G000009
Torrance County Detention Facility

On behalf of CoreCivic and the Torrance County Detention Facility (TCDF), I am writing in response to the U.S. Immigration and Customs Enforcement (ICE) Contract Discrepancy Report (CDR) 12-21-2020 rejection notice, dated January 26, 2021, regarding medical staff vacancies. We value our partnership with ICE, and we appreciate the opportunity to respond and supplement our original response to the CDR.

As noted in our original response, CoreCivic acknowledges and regrets that we have not been able to fill the Health Services vacancies at TCDF in a more timely manner. CoreCivic recognizes that it is contractually responsible for maintaining the staffing levels identified in the contract's staffing pattern and that we are subject to a deduction of up to 10% from our monthly invoice for failing to fill positions within 120 days if the overall staffing level at the facility is below 90%. Despite the vacancies, CoreCivic's Deputy Regional Director of Health Services recently reviewed TCDF's electronic medical record (EMR) and medical logs and confirmed that sick calls, physical exams, chronic care clinics, mental health evaluations, mental health clinics, and dental clinics are up to date, completed timely, and have not been behind. The facility has been able to continue to deliver quality medical services as a result of several actions taken by CoreCivic to ensure the continuity of care, including the assignment of Dr. Keith Ivens, CoreCivic's Chief Medical Officer, to the facility as the interim physician and medical director. Through Dr. Ivens' direct delivery of medical care, oversight of the nurse practitioner, availability evenings and weekends, and approval of telehealth services as needed, the ICE detainees have continued to receive high quality medical care, with no negative outcomes. As CoreCivic has provided appropriate levels of medical, mental health, and dental care for the ICE detainee population at TCDF throughout the period of the vacancies, CoreCivic respectfully requests that the proposed deduction of the monthly invoice be reduced to 5%.

In addition, CoreCivic has been working, and will continue to work, diligently to fill the vacant positions as quickly as possible. Human Resources staff at TDCF, along with support from talent acquisition staff at CoreCivic's Facility Support Center, continue to recruit applicants, conduct interviews, and assist selected candidates complete the

---

1 Article 2, Section D Staffing of the Intergovernmental Service Agreement (IGSA) dated May 15, 2019, states in part, "Failure to fill any individual position within 120 days of the vacancy may result in a deduction from the monthly invoice, if the vacancy in combination with other vacancies regardless of duration brings staffing levels below 95%." Further, IGSA Attachment 7(a) Performance Requirements Summary states in part, "Staffing Pattern Compliance within 10% of required (Contract) 4-ALDF-2A-14." Read together, we believe ICE may issue deductions of up to 10% of the monthly invoice when the overall staffing level at TCDF falls below 10% of the contract staffing pattern and one or more positions are not filled within 120 days of becoming vacant. Admittedly, TCDF currently falls below this threshold.
Subject: CDR Response Rejection Notice

Continuation

- Corporate medical staff have been floating between Torrance, Cibola, and other facilities. This practice of charging full price at each facility and providing part-time coverage at best leads to violations in PSU security procedures. I have been having problems with the same Corporate floating medical staff trying to come into the facility without any security clearance or a clearance assigned to another facility.

3. The pending PSU investigation are not an excuse for not filling key or any other position. The Health Services Administrator (HSA) is an example of a key medical position being cleared and granted EOD but could not come to final terms with CoreCivic. This individual was supposed to start training on January 4, 2021. This is time and effort that counts against CoreCivic for not filling this position. All CoreCivic employee PSU security screening requests are processed promptly upon receipt. Key staffing positions are processed with an expedited processing request to better support the facility operations. Multiple CoreCivic medical staff employees had successfully completed PSU processing, but declined the position after being cleared to work on the contract by PSU. The PSU screening delays come from employees starting and not finishing the process requirements or decide after the process has started, that they do not wish to continue with employment. This is a daily challenge to keep up with all the CoreCivic PSU security requests and in process status. The medical staff positions are not staffed in accordance with the contract staffing plan or currently capable of supporting the Detainee guaranteed minimum population level. The PBNDS audits do not verify staffing levels against the contract requirements and is not a valid measurement of success, which brings into question the true validity of the recent inspection results.

4. This CDR may be expanded to include other staffing areas that are currently showing critically shortages. The TCDF is not at 95% staffing levels across the board and a comprehensive plan needs to be developed to meet these shortages.
Subject: CDR Response Rejection Notice

Continuation

5. The ability of the TCDF to provide the contracted support is critical to the overall and integrated El Paso ICE Area of Responsibility requirements. The current medical staffing shortfalls places in question the TCDF operational capability.
January 5, 2021

From: COR

To: Acting Warden, Torrance County Detention Facility

Subject: CDR Response Rejection Notice

CDR Report Number: 12-21-2020

On December 29, 2020, a response to CDR 12-21-2020 was submitted on behalf of CoreCivic and the Torrance County Detention Facilities (TCDF) Acting Warden to the COR. The Contractor’s CDR response is rejected because it does not properly address the Medical staffing issue and concerns brought up in the CDR.
Subject: CDR Response Rejection Notice
Continuation

(b)(5)

(b)(6), (b)(7)(C)
COR
Attachment B – Contract Discrepancy Report

CONTRACT DISCREPANCY REPORT

1. CONTRACT NUMBER
70CDCR19DIG000009

Report Number: CDR-12-21-2020
Date: 12/21/2020

2. TO: (Contractor and Manager Name)
Torrance County Detention Facility
Torrance County
Core Civic
Michael Sadgwick - Warden

3. FROM: (Name of COTR)
(b)(6), (b)(7)(C)
Contract Officers Representative

DATES

CONTRACTOR NOTIFICATION
12/21/2020

CONTRACTOR RESPONSE DUE
BY 12/30/2021

RETURNED BY CONTRACTOR

ACTION COMPLETE

4. DISCREPANCY OR PROBLEM (Describe in Detail. Include reference to FWS. Director: Attach confirmation sheet if necessary.)
The Torrance County Detention Facility (TCCF) located in Estancia, NM has been identified as being in violation of the Performance Basic National Detention Standards 2011 (PBNS 2011) and the signed ICE/ERO contractual agreement 70CDCR19DIG000009, which includes the standards of the IGSA articles, PWS, BCP, and QASP. It has been discovered that the facility medical staffing is not in line with the agreed upon contractual staffing plan and the facility has critical medical staffing shortages. It has also been discovered that the Chief Medical Officer has not been dedicated to the Torrance contract and has been supporting multiple facilities at the same time, which has resulted in very limited coverage. The following PBNS standards are in violation PBNS 4.3, Medical Care. The following IGSA Articles that are in violation are Article 6 - Medical Services, Article 20 - Incident Reporting, and Article 32 - QASP.

5. SIGNATURE OF CONTRACTING OFFICER'S TECHNICAL REPRESENTATIVE (COTR)
(b)(6), (b)(7)(C)

7. FROM (Contractor)
(b)(6), (b)(7)(C)

Heting Winder
Torrance County Det. Facility

8. CONTRACTOR RESPONSE AS TO CAUSE CORRECTIVE ACTION AND ACTIONS TO PREVENT RECURRENCE ATTACH CONTINUATION SHEET IF NECESSARY. (“In applicable I.A. program procedures or new A.W. procedure.”)

- Attached -

9. SIGNATURE OF CONTRACTOR REPRESENTATIVE
(b)(6), (b)(7)(C)

10. DATE
12-31-2020

11. GOVERNMENT EVALUATION OF CONTRACTOR RESPONSE/RESOLUTION PLAN: (Acceptable response plan, partial acceptance of response plan, rejection: attach continuation sheet if necessary)

12. GOVERNMENT ACTIONS (Payment withholding, core notice, show cause, other)

CLOSE OUT

<table>
<thead>
<tr>
<th>CONTRACTOR NOTIFIED</th>
<th>NAME AND TITLE</th>
<th>SIGNATURE</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>COTR</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CONTRACTING OFFICER</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

B-I

2022-ICLI-00045 12372
VIA EMAIL

December 29, 2020

Contracting Officer Representative
U.S. Immigration and Customs Enforcement
U.S. Department of Homeland Security

RE: Contract Discrepancy Report # 12-21-20
IGSA No. 70CDCR19DIG000009
Torrance County Detention Facility

On behalf of CoreCivic and the Torrance County Detention Facility (TCDF), I am writing in response to the U.S. Immigration and Customs Enforcement (ICE) Contract Discrepancy Report number 12-21-20 (CDR), dated December 21, 2020, regarding the medical staff vacancies. We value our partnership with ICE, and we appreciate the opportunity to respond to your concerns and communicate how we are working to fill the vacancies noted in the CDR.

Attached is the current ICE Contract Staffing Pattern for TCDF, and below is a summary of the contract staffing pattern for the Health Services Department, along with the existing vacancies in Health Services (as of December 24, 2020) and the status on filling those positions.

<table>
<thead>
<tr>
<th>HEALTH SERVICES - 8 HR SHIFTS</th>
<th>Total Positions</th>
<th>Total Vacant</th>
<th>Days Vacant*</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>HEALTH SERVICES ADMINISTRATOR</td>
<td>D(7)(E)</td>
<td></td>
<td></td>
<td>Recent candidate declined job offer on 12/21/20 and the position has been reposted.</td>
</tr>
<tr>
<td>PHYSICIAN</td>
<td></td>
<td></td>
<td></td>
<td>Position is currently posted; CMO performing duties as interim physician until filled.</td>
</tr>
<tr>
<td>ARNP</td>
<td></td>
<td></td>
<td></td>
<td>Position is currently posted; One selected candidate is currently waiting for ICE clearance (pending issue resolution).</td>
</tr>
<tr>
<td>PSYCHIATRIST, P/T</td>
<td></td>
<td></td>
<td></td>
<td>Currently on FMLA leave.</td>
</tr>
<tr>
<td>MENTAL HEALTH COORDINATOR</td>
<td></td>
<td></td>
<td></td>
<td>Selected candidate is currently waiting for ICE clearance (pending issue resolution).</td>
</tr>
<tr>
<td>DENTIST, P/T</td>
<td></td>
<td></td>
<td></td>
<td>Selected candidate is currently waiting for ICE clearance (pending issue resolution).</td>
</tr>
<tr>
<td>DENTAL ASSISTANT</td>
<td></td>
<td></td>
<td></td>
<td>Selected candidate is currently waiting for ICE clearance (pending issue resolution).</td>
</tr>
<tr>
<td>CLINICAL SUPERVISOR</td>
<td></td>
<td></td>
<td></td>
<td>CONTRACT / PRN (2) - filled as needed.</td>
</tr>
<tr>
<td>RN - Infectious Disease / CQI</td>
<td></td>
<td></td>
<td></td>
<td>Current interviewing candidates for the vacant position.</td>
</tr>
<tr>
<td>RN - Chronic Care</td>
<td></td>
<td></td>
<td></td>
<td>Selected candidate is currently waiting for ICE clearance (pending issue resolution).</td>
</tr>
<tr>
<td>RN - Pharmacy</td>
<td></td>
<td></td>
<td></td>
<td>Selected candidate is currently waiting for ICE clearance (pending issue resolution).</td>
</tr>
<tr>
<td>MEDICAL TRANSLATOR</td>
<td></td>
<td></td>
<td></td>
<td>Selected candidate is currently waiting for ICE clearance (pending issue resolution).</td>
</tr>
<tr>
<td>MEDICAL RECORDS CLERK</td>
<td></td>
<td></td>
<td></td>
<td>Selected candidate is currently waiting for ICE clearance (pending issue resolution).</td>
</tr>
<tr>
<td>ADMINISTRATIVE CLERK</td>
<td></td>
<td></td>
<td></td>
<td>Selected candidate is currently waiting for ICE clearance (pending issue resolution).</td>
</tr>
<tr>
<td>MENTAL HEALTH COUNSELOR</td>
<td></td>
<td></td>
<td></td>
<td>CONTRACT / PRN (2) - filled as needed.</td>
</tr>
<tr>
<td>HEALTH SERVICES 12 HR SHIFTS</td>
<td></td>
<td></td>
<td></td>
<td>Current interviewing candidates for the vacant position.</td>
</tr>
<tr>
<td>RN</td>
<td></td>
<td></td>
<td></td>
<td>Selected candidate is currently waiting for ICE clearance (pending issue resolution).</td>
</tr>
<tr>
<td>LPN</td>
<td></td>
<td></td>
<td></td>
<td>Selected candidate is currently waiting for ICE clearance (pending issue resolution).</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td></td>
<td></td>
<td>Status</td>
</tr>
</tbody>
</table>

2022-ICLI-00045 12373
As indicated above, under the ICE Contract Staffing Pattern, 24.35 (or approximately 72%) of the 33.77 staff positions allocated to the Health Services Department are filled, with nine positions currently vacant. The status on filling each of the vacant positions is included in the chart above. Please note that CoreCivic's Chief Medical Officer (CMO) has been onsite at TCDF for at least 20 hours per week performing duties as the interim Physician since the Physician position became vacant, and as of December 21, 2020, the CMO will be onsite for at least 40 hours per week until the position is filled. In addition, the Clinical Supervisor will continue performing duties as the acting Health Services Administrator (HSA) until that position is filled.

We regret that we have been unable to fill the Health Services vacancies at TCDF in a more timely manner, but we are continuing to work diligently to fill the positions as quickly as possible. Three recent candidate selections were unable to obtain ICE clearances, and Human Resources staff at TDCF, along with support from talent acquisition staff at CoreCivic's Facility Support Center (headquarters), continue to actively recruit applicants to fill the vacant Health Services positions and complete the ICE clearance process. Recent recruiting activities for the Health Services positions at TDCF include:

- Utilizing top-rated and industry-leading Indeed for both sponsored (paid) and non-sponsored job postings
- Utilizing DirectEmployers to post our open positions to over 1,000 syndicated diversity, veteran, disability, and college/alumni search engines and local niche sites
- Utilizing CareerArc to post our open positions to a variety of social networks, including targeted postings through Facebook and expansive postings through LinkedIn
- Utilizing additional applicant recruiting and job posting agencies for targeted job postings, including Neuvoo, ZipRecruiter, ExperiencedRN, Facebook, Jobs2Careers, USA Today, Adzuna, Jobcase and Monster PPC
- Utilizing automated messaging to potential applicants who visit our CoreCivic Careers website (which is powered by SmashFly – an industry leading, fully featured, enterprise recruiting software system)
- Utilizing direct messaging (emails, texts, etc.) from our in-house medical recruiters to our network of internally identified potential applicants and candidate databases such as Indeed, CareerBuilder and Linkedin
- Utilizing non-digital sources -- Pandora, NM Nurse Newsletter, NM Board of Nursing, and Radio.com
- Utilizing RecruitFi, a crowdsourcing recruiting platform that provides employers a cost effective way to source talent by letting them select and post jobs privately to up to 250 expert recruiters
- Continuous outreach to larger markets such as Albuquerque, Santa Fe, and Clines Corners

In addition to actively recruiting to fill the vacant positions, please note that CoreCivic has continued to maintain appropriate levels of medical, mental, and dental care for the ICE detainee population at TCDF throughout the period of these vacancies. CoreCivic's Deputy Regional Director of Health Services recently reviewed TCDF's electronic medical record (EMR) and medical logs and confirmed that sick calls, physical exams, chronic care clinics, mental health evaluations, mental health clinics, and dental clinics are up to date, completed timely, and have not been behind. In addition, no medical grievances have been filed during this period. Moreover, we respectfully ask that ICE consider that over the past 90+ days, the average daily population of ICE detainees at TCDF has been approximately 43 detainees, which represents approximately 6% of the 714 total beds allocated to ICE at the facility.

Accordingly, even with the vacancies noted above, Health Services staff have been able to ensure that the ICE detainee population housed at TCDF continue to have access to a continuum of health care services, including screening, prevention, health education, diagnosis, and treatment, at a level that meets or exceeds the ICE 2011 Performance Based National Detention Standards (PBNDs), as well as other applicable healthcare standards and requirements. In fact, during TCDF's most recent annual PBNDS audit conducted in October 2020, the facility was found to be compliant with all applicable PBNDS medical care standards. Nevertheless, CoreCivic recognizes that
it is contractually responsible for maintaining the staffing levels identified in the contract's staffing pattern and that we are subject to a deduction from the monthly invoice for failing to fill any individual position within 120 days of the vacancy if the overall staffing level at the facility is below 95%.

In closing, we regret that we have not been able to fill the Health Services vacancies at TCDF in a more timely manner, but we are continuing to work diligently to fill the positions as quickly as possible. In the meantime, we remain committed to providing the ICE detainees in our care with appropriate levels of medical, mental, and dental care consistent with all PBNDS and other applicable standards. We appreciate the opportunity to review our Health Services operations and respond to the concerns identified in the CDR. We value our long-term partnership with ICE, and we will continue to take the steps necessary to provide the ICE detainees in our care with a safe, secure, and humane environment, which is consistent with ICE's expectations.

We welcome your feedback, so please contact me if you have questions or wish to see any additional actions taken.

Respectfully,

[Name]
Acting Warden
Torrance County Detention Facility
Good Afternoon

Please call me, so we can discuss the issuance of this CDR and the timeline for the response.

V/R

Management & Program Analyst / COR
El Paso Field Office
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
(915) 472-Cell
Attachment B – Contract Discrepancy Report

**CONTRACT DISCREPANCY REPORT**

<table>
<thead>
<tr>
<th>Report Number:</th>
<th>Date:</th>
<th>1. CONTRACT NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>CDR 03-01-2022</td>
<td>03/01/2022</td>
<td>70CDCR19DIG000009</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TO: (Contractor and Manager Name)</th>
<th>FROM: (Name of COR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Torrance County Detention Facility</td>
<td>Corvus CoreCivic</td>
</tr>
<tr>
<td>Warden (b)(6), (b)(7)(C)</td>
<td>Contract Officers Representative (COR)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DATES</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONTRACTOR NOTIFICATION</td>
</tr>
<tr>
<td>03/01/2022</td>
</tr>
</tbody>
</table>

4. DISCREPANCY OR PROBLEM (Describe in Detail: Include reference in PWS / SOW or Directive; Attach continuation sheet if necessary.)

The Torrance County Detention Facility (TCDF) located in Estancia, NM has been repeatedly in violation of the 2011 Performance Basic National Detention Standards (PBNDs) and the signed ICE/EERO IGS (contractual agreement) 70CDCR19DIG000009. The continually short staffing plans are directly responsible for the breakdown in the overall operational capabilities of the TCDF. CoreCivic has not been able to demonstrate the ability to: provide a safe environment for staff and noncitizens; provide the necessary security for proper facility security and control measures; and care necessary to ensure proper facility maintenance, overall cleanliness, and personal hygiene needs described in the PBNDs standards. The Performance Requirements Summary areas of work force integrity, safety, security, and care are all at risk, have been ongoing violations, and do not meet contractual requirements. These continued violations seriously impact the El Paso Field Office’s ability to support the southwest border security mission.

5. SIGNATURE OF CONTRACTING OFFICER’S REPRESENTATIVE (COR)

6. TO:

7. FROM: (Contractor)

8. CONTRACTOR RESPONSE AS TO CAUSE, CORRECTIVE ACTION AND ACTIONS TO PREVENT RECURRENCE. ATTACH CONTINUATION SHEET IF NECESSARY. (Cite applicable QA program procedures or new A. W. procedures.)

9. SIGNATURE OF CONTRACTOR REPRESENTATIVE

10. DATE


12. GOVERNMENT ACTIONS (Payment withholding, cure notice, show cause, other:)

**CLOSE OUT**

<table>
<thead>
<tr>
<th>CONTRACTOR NOTIFIED</th>
<th>NAME AND TITLE</th>
<th>SIGNATURE</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>(b)(6), (b)(7)(C)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COR</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CONTRACTING OFFICER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

B-1

2022-ICLI-00045 12377
From: D(6); D(7)(C)
Sent: Fri, 8 Jul 2022 15:04:14 +0000
To: D(6); D(7)(C)
Subject: FW: Grievance log TCDF congressional visit 2/28/2022

Supervisory Detention and Deportation Officer
El Paso Field Office, Albuquerque Sub-office
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
Office: (505) 452-D(6)

From: D(6); D(7)(C)
Sent: Monday, February 28, 2022 1:31 PM
To: D(6); D(7)(C)@dhs.gov
Subject: Grievance log

CAUTION: This email originated from outside of DHS. DO NOT click links or open attachments unless you recognize and/or trust the sender. Please use the Cofense Report Phishing button to report. If the button is not present, you can click on report.

The congressional tour wanted to see the grievance log. I redacted the names and numbers and I’m asking if this is okay to send to them? P & TY!
<table>
<thead>
<tr>
<th>Grievance Number</th>
<th>Unit</th>
<th>Detainee Name</th>
<th>Detainee Number</th>
<th>In-Formal Attempt (Y/N)</th>
<th>Grievance Category</th>
<th>1st Dispc Date</th>
<th>1st App Date Received</th>
<th>1st App Dispc Code</th>
<th>2nd App Dispc Date</th>
<th>2nd App Date Received</th>
<th>2nd App Dispc Code</th>
<th>Copy to ICE</th>
<th>Copy to Detainee</th>
<th>5-1 Report</th>
<th>Brief Description</th>
<th>Resolution</th>
</tr>
</thead>
</table>
| 160 825 072 | 6 D 2-Feb-22 | N | 12 | 2 - Feb - 22 | 3 | 7 - Feb - 22 | 2 | N/a | N/a | 3 - Feb - 22 | 2 | 2 - Feb - 22 | N/A | Deta inee states that the food does not have tast e. | FSD b(6), b(7)(C) | states that she will monitor the food closely to ensure that the food has adequate flavoring.
<table>
<thead>
<tr>
<th>Date</th>
<th>Code</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>162 311 712</td>
<td>7 D</td>
<td>2-Feb-22</td>
</tr>
<tr>
<td>202 2-020 7-000 1</td>
<td>7 C</td>
<td>7-Feb-22</td>
</tr>
</tbody>
</table>

**Chief**

will be personally monitoring food to ensure it is up to par. Kitchen supervisors will check all meals for accuracy and ensure food is cooked thoroughly.

**Detailee** states that the food does not have taste.

**Detailee** states that he is having trouble contacting his wife.

**Talton** has resolved the issue. Phone credit has been added.
<table>
<thead>
<tr>
<th>Date</th>
<th>Action</th>
<th>Days</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>11-Feb-22</td>
<td>N/A</td>
<td>3</td>
<td>N/A</td>
</tr>
<tr>
<td>11-Feb-22</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>11-Feb-22</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Detainee has been put on wait list to work in the kitchen. He was also offered a porter job but denied. He was in medical which hindered his ability to hold a job.
(i) This e-mail and any files transmitted with it are confidential and intended solely for the use of the intended recipient(s). If you have received this e-mail in error, please notify the sender immediately and delete this e-mail and any associated files from your system. (ii) Views or opinions presented in this e-mail are solely those of the author and do not necessarily represent those of CoreCivic. (iii) The recipient should check this e-mail and any attachments for the presence of viruses. The company accepts no liability for errors or omissions caused by e-mail transmission or any damage caused by any virus transmitted by or with this e-mail. This email has been scanned for content and viruses by the Symantec Email Security.cloud service.
From: (b)(6), (b)(7)(C)
Sent: Fri, 8 Jul 2022 14:56:36 +0000
To: (b)(6), (b)(7)(C)
Subject: Congressional staff visit at TCDF 02/28/2022

(b)(6), (b)(7)(C)
Supervisory Detention and Deportation Officer
El Paso Field Office, Albuquerque Sub-office
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement Office: (505) 455-4(b)(6), (b)(7)(C)

From:(b)(6), (b)(7)(C) core civic com>
Sent: Thursday, February 17, 2022 7:50 PM
To: (b)(6), (b)(7)(C) ice.dhs.gov; (b)(6), (b)(7)(C) ice.dhs.gov; (b)(6), (b)(7)(C) core civic com; (b)(6), (b)(7)(C)
(b)(6), (b)(7)(C) core civic com>
Subject: Fwd: Congressional staff visit at TCDF

CAUTION: This email originated from outside of DHS. DO NOT click links or open attachments unless you recognize and/or trust the sender. Please use the Cofense Report Phishing button to report. If the button is not present, you can click on report.

(b)(6), (b)(7)(C) update on the Congressional tour if approved.

Sent from my iPhone

Begin forwarded message:

From: (b)(6), (b)(7)(C) mail.house.gov>
Date: February 17, 2022 at 7:37:23 PM MST
To: (b)(6), (b)(7)(C) core civic com>
Subject: RE: Congressional staff visit at TCDF

CAUTION: This email came from outside the organization. Attachments and links may contain viruses and other malicious software.

Hello Assistant Warden (b)(6),

I just wanted to confirm that February 28 will work for a Congressional staff visit. As a head’s up (b)(6), (b)(7)(C) will be visiting from Congresswoman Stansbury’s office, (b)(6), (b)(7)(C) will be
Thank you.

From: corecivic.com
Sent: Wednesday, February 16, 2022 12:33 PM
To: corecivic.com
Subject: RE: Congressional staff visit at TCDF

Thank you. I appreciate it.

From: corecivic.com
Sent: Wednesday, February 16, 2022 12:22 PM
To: mail.house.gov
Subject: Re: Congressional staff visit at TCDF

That can work. I emailed ICE and the AFOD is running it through HQ.

Sent from my iPhone

On Feb 16, 2022, at 11:18 AM, mail.house.gov wrote:

**CAUTION: This email came from outside the organization. Attachments and links may contain viruses and other malicious software.**

Hello Assistant Warden,

Thank you for helping our office coordinate a visit to TCDF. When we spoke on the phone yesterday, I mentioned we’d like to go next Wednesday, I’m emailing because we’d like to change that date to
Monday, February 28. Would you mind emailing us back to confirm and letting us know what paperwork and information we need to provide you with before arriving on that day.

Thanks very much.

Legislative Counsel
Congresswoman Melanie Stansbury (NM-01)
O: 202-225-7708 C: 202-875-3784
1421 Longworth HOB, Washington, D.C. 20515
https://stansbury.house.gov/

(i) This e-mail and any files transmitted with it are confidential and intended solely for the use of the intended recipient(s). If you have received this e-mail in error, please notify the sender immediately and delete this e-mail and any associated files from your system. (ii) Views or opinions presented in this e-mail are solely those of the author and do not necessarily represent those of CoreCivic. (iii) The recipient should check this e-mail and any attachments for the presence of viruses. The company accepts no liability for errors or omissions caused by e-mail transmission or any damage caused by any virus transmitted by or with this e-mail. This email has been scanned for content and viruses by the Symantec Email Security.cloud service.
Subject: FW: toilet pics

Attachments: IMG_0467.JPG, IMG_0465.JPG, IMG_0466.JPG

CAUTION: This email originated from outside of DHS. DO NOT click links or open attachments unless you recognize and/or trust the sender. Please use the Cofense Report Phishing button to report. If the button is not present, you can click on report.
(i) This e-mail and any files transmitted with it are confidential and intended solely for the use of the intended recipient(s). If you have received this e-mail in error, please notify the sender immediately and delete this e-mail and any associated files from your system. (ii) Views or opinions presented in this e-mail are solely those of the author and do not necessarily represent those of CoreCivic. (iii) The recipient should check this e-mail and any attachments for the presence of viruses. The company accepts no liability for errors or omissions caused by e-mail transmission or any damage caused by any virus transmitted by or with this e-mail. This email has been scanned for content and viruses by the Symantec Email Security.cloud service.
Good afternoon,

Need the following information from the facility and ICE for the last 30 days.

1. Detailed breakdown on the demographics and numbers.

2. Total number of detainees processed, nationalities, age ranges, and lengths of stay.

3. How many detainees were ultimately released, deported, or moved to other facilities within the ICE network.

4. Regarding medical treatment received by the detainees. (Numbers broken down below)
   - Total number of medical requests made.
   - Number medical visits carried out.
   - Wait times to be seen after a request is made.
   - How many—if any—detainees were transferred out for further medical care.

Need this back by COB tomorrow.

Respectfully,

Assistant Field Office Director
El Paso Field Office
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
Desk-505-458

2022-ICLI-00045 12398
Good afternoon,

Please see the below information as requested.

1. Detailed breakdown on the demographics and numbers.
   March 1, 2022 - Total pop

<table>
<thead>
<tr>
<th>NATIONALITIES</th>
<th>TOTAL: 91</th>
</tr>
</thead>
<tbody>
<tr>
<td>ARGENTINA</td>
<td>1</td>
</tr>
<tr>
<td>BANGLADESH</td>
<td>1</td>
</tr>
<tr>
<td>BRAZIL</td>
<td>6</td>
</tr>
<tr>
<td>COLOMBIA</td>
<td>2</td>
</tr>
<tr>
<td>CUBA</td>
<td>1</td>
</tr>
<tr>
<td>DOMINICAN REPUBLIC</td>
<td>1</td>
</tr>
<tr>
<td>ECUADOR</td>
<td>1</td>
</tr>
<tr>
<td>GUATEMALA</td>
<td>6</td>
</tr>
<tr>
<td>HAITI</td>
<td>4</td>
</tr>
<tr>
<td>NICARAGUA</td>
<td>2</td>
</tr>
<tr>
<td>PERU</td>
<td>3</td>
</tr>
<tr>
<td>RUSSIA</td>
<td>1</td>
</tr>
<tr>
<td>TURKEY</td>
<td>8</td>
</tr>
<tr>
<td>VENEZUELA</td>
<td>2</td>
</tr>
<tr>
<td>YEMEN</td>
<td>2</td>
</tr>
</tbody>
</table>

2. Total number of detainees processed, nationalities, age ranges, and lengths of stay.

   30 processed - (26 Turkish, 1 Russian, 1 Ecuador, 1 Peru)
   Age Range - 22 to 45
   Avg length of stay 22.79 days
3. How many detainees were ultimately released, deported, or moved to other facilities within the ICE network.

Released: 100
Transferred to interior: 35

4. Regarding medical treatment received by the detainees. (Numbers broken down below)

Total number of medical requests made: - 182
Number medical visits carried out: - 182
Wait times to be seen after a request is made. No more than 24 hours
How many—if any—detainees were transferred out for further medical care: 0

Respectfully,

From: (b)(6), (b)(7)(C)
Sent: Monday, February 28, 2022 4:12 PM
To: (b)(6), (b)(7)(C)
Cc: (b)(6), (b)(7)(C)
Subject: FW: RE: TCDF Visit February 28th, 2022

Can you please work with your staff and TCDF to obtain the answers to the below questions.

Thanks,

From (b)(6), (b)(7)(C)
Sent: Monday, February 28, 2022 4:00 PM
To: (b)(6), (b)(7)(C)
Subject: FW: RE: TCDF Visit February 28th, 2022
Thank you for hosting our office for today’s tour. I know how busy everyone is out there and we really appreciate you taking the time to show us around and answer our questions.

On the matter of future visits, we would like to make it a point to visit TCDF around once every 30 days moving forward. We would like to request that we be able to perform the next visit with 24 hours’ notice if possible. We will be requesting the same information on the follow up visits.

Thank you again for your time today and please let me know if you have any questions.

Director of Constituent Services
Congresswoman Melanie Stansbury (NM-01)

505-346-8210 | C: 505-218-5015
500 Central Ave SW, Suite 1300 East, Albuquerque, New Mexico 87102
https://stansbury.house.gov/
Good morning,

Attached is the DSCO weekly report from the Torrance County Detention Facility. Monitoring dates were between 2/28-3/4.

DFOD Torrance rented a lift for the cleaning of the ceiling air ducts. The lift should arrive at Torrance today and cleaning should be completed by mid-week.

Thanks,

[Name]
Standards Compliance Officer
Detention Oversight Unit – Central Region
Oversight, Compliance, and Acquisition Division
Custody Management Division
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
Cell: (520) 483-
Good morning,

Please see attached UCAP for Torrance inspection.

Please forward so the facility and begin working on it.

Respectfully,

Assistant Field Office Director
El Paso Field Office
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
Desk-505-452

Greetings El Paso.

The ODO follow-up review for the Torrance County Detention Facility, completed on November 18, 2021 in Estancia, NM, has been received. Attached, please find the final ODO report and Uniform Correction Action Plan (UCAP).

Using the attached UCAP, please record all corrective actions taken, to include projected completion dates. **Note: each corrective action must be accompanied by validating documentation. Please clearly**
label all documentation as to the cited deficiency it is intended to address. Failure to provide this information will result in the rejection of your UCAP.

Upon completion, please have an Assistant Field Office Director or higher sign and certify the UCAP is complete and accurate.

Your UCAP must be approved and closed out by DOU before sending it to ODO.

**Due date: 4/08/2022**

Respectfully,

Detention and Deportation Officer
Oversight, Compliance, and Acquisition Division
Detention Oversight Unit – Gulf
U.S. Immigration and Customs Enforcement
Enforcement and Removal Operations
500 12th St., SW
Washington, DC 20536
Desk: 202-732-4080  Cell: 410-952-4078

2022-ICLI-00045 12407
Office of Detention Oversight
Compliance Inspection

Enforcement and Removal Operations
ERO El Paso Field Office

Torrance County Detention Facility
Estancia, New Mexico

November 16-18, 2021
# COMPLIANCE INSPECTION
of the
TORRANCE COUNTY DETENTION FACILITY
Estancia, New Mexico

## TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>FACILITY OVERVIEW</td>
<td>4</td>
</tr>
<tr>
<td>COMPLIANCE INSPECTION PROCESS</td>
<td>5</td>
</tr>
<tr>
<td>FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (2013 ERRATA) MAJOR CATEGORIES</td>
<td>6</td>
</tr>
<tr>
<td>DETAINEE RELATIONS</td>
<td>7</td>
</tr>
<tr>
<td>COMPLIANCE INSPECTION FINDINGS</td>
<td>10</td>
</tr>
<tr>
<td>SECURITY</td>
<td>10</td>
</tr>
<tr>
<td>Admission and Release</td>
<td>10</td>
</tr>
<tr>
<td>Facility Security and Control</td>
<td>10</td>
</tr>
<tr>
<td>Funds and Personal Property</td>
<td>10</td>
</tr>
<tr>
<td>Post Orders</td>
<td>10</td>
</tr>
<tr>
<td>Sexual Abuse and Assault Prevention and Intervention</td>
<td>11</td>
</tr>
<tr>
<td>CARE</td>
<td>12</td>
</tr>
<tr>
<td>Medical Care</td>
<td>12</td>
</tr>
<tr>
<td>ACTIVITIES</td>
<td>12</td>
</tr>
<tr>
<td>Correspondence and Other Mail</td>
<td>12</td>
</tr>
<tr>
<td>ADMINISTRATION AND MANAGEMENT</td>
<td>14</td>
</tr>
<tr>
<td>Detainee Transfers</td>
<td>14</td>
</tr>
<tr>
<td>CONCLUSION</td>
<td>14</td>
</tr>
</tbody>
</table>
COMPLIANCE INSPECTION TEAM MEMBERS

Acting Team Lead
Inspections and Compliance Specialist
Inspections and Compliance Specialist
Contractor
Contractor
Contractor
Contractor
Contractor

ODO
ODO
ODO
Creative Corrections
Creative Corrections
Creative Corrections
Creative Corrections
FACILITY OVERVIEW

The U.S. Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a compliance inspection of the Torrance County Detention Facility (TCDF) in Estancia, New Mexico, from November 16 to 18, 2021.¹ The facility opened in 1990 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at the facility in August 2019 under the oversight of ERO’s Field Office Director (FOD) in El Paso (ERO El Paso). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (2013 Errata).

ERO has assigned deportation officers and a detention services manager to the facility. A facility warden handles daily facility operations and manages 136 support personnel. Trinity Food Service provides food services, and CoreCivic provides medical care and commissary services at the facility. The facility does not hold any accreditations from any outside entities.

<table>
<thead>
<tr>
<th>Capacity and Population Statistics</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICE Detainee Bed Capacity²</td>
<td>892</td>
</tr>
<tr>
<td>Average ICE Detainee Population³</td>
<td>157</td>
</tr>
<tr>
<td>Male Detainee Population (as of November 16, 2021)</td>
<td>244</td>
</tr>
<tr>
<td>Female Detainee Population (as of November 16, 2021)</td>
<td>N/A</td>
</tr>
</tbody>
</table>

During its last inspection, in Fiscal Year (FY) 2021, ODO found nine deficiencies in the following areas: Admission and Release (2); Custody Classification System (1); Food Service (2); Funds and Personal Property (3); and Medical Care (1).

¹ This facility holds male detainees with low, medium-low, medium-high, and high security classification levels for periods longer than 72 hours.
³ Ibid.
COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than 10, and where detainees are housed for longer than 72 hours, to assess compliance with ICE national detention standards. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being.⁴

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures as “deficiencies.” ODO also highlights instances in which the facility resolves deficiencies prior to completion of the ODO inspection. Where applicable, these corrective actions are annotated with “C” under the Compliance Inspection Findings section of this report.

Upon completion of each inspection, ODO conducts a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is shared with ERO management officials. Thereafter, ODO provides ICE leadership with a final compliance inspection report to: (i) assist ERO in developing and initiating corrective action plans; and (ii) provide senior executives with an independent assessment of facility operations. ODO’s findings inform ICE executive management in its decision-making to better allocate resources across the agency’s entire detention inventory.

⁴ ODO reviews the facility’s compliance with selected standards in their entirety.
## FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 (2013 ERRATA) MAJOR CATEGORIES

<table>
<thead>
<tr>
<th>PBNDS 2011 (2013 Errata) Standards Inspected&lt;sup&gt;5,6&lt;/sup&gt;</th>
<th>Deficiencies</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Part 1 – Safety</strong></td>
<td></td>
</tr>
<tr>
<td>Emergency Plans</td>
<td>0</td>
</tr>
<tr>
<td>Environmental Health and Safety</td>
<td>0</td>
</tr>
<tr>
<td><strong>Sub-Total</strong></td>
<td><strong>0</strong></td>
</tr>
<tr>
<td><strong>Part 2 – Security</strong></td>
<td></td>
</tr>
<tr>
<td>Admission and Release</td>
<td>1</td>
</tr>
<tr>
<td>Custody Classification System</td>
<td>0</td>
</tr>
<tr>
<td>Facility Security and Control</td>
<td>1</td>
</tr>
<tr>
<td>Funds and Personal Property</td>
<td>1</td>
</tr>
<tr>
<td>Post Orders</td>
<td>5</td>
</tr>
<tr>
<td>Searches of Detainees</td>
<td>0</td>
</tr>
<tr>
<td>Sexual Abuse and Assault Prevention and Intervention</td>
<td>2</td>
</tr>
<tr>
<td>Special Management Units</td>
<td>0</td>
</tr>
<tr>
<td>Use of Force and Restraints</td>
<td>0</td>
</tr>
<tr>
<td><strong>Sub-Total</strong></td>
<td><strong>10</strong></td>
</tr>
<tr>
<td><strong>Part 4 – Care</strong></td>
<td></td>
</tr>
<tr>
<td>Food Service</td>
<td>0</td>
</tr>
<tr>
<td>Hunger Strikes</td>
<td>0</td>
</tr>
<tr>
<td>Medical Care</td>
<td>2</td>
</tr>
<tr>
<td>Medical Care (Women)</td>
<td>0</td>
</tr>
<tr>
<td>Personal Hygiene</td>
<td>0</td>
</tr>
<tr>
<td>Significant Self-harm and Suicide Prevention and Intervention</td>
<td>0</td>
</tr>
<tr>
<td><strong>Sub-Total</strong></td>
<td><strong>2</strong></td>
</tr>
<tr>
<td><strong>Part 5 – Activities</strong></td>
<td></td>
</tr>
<tr>
<td>Correspondence and Other Mail</td>
<td>8</td>
</tr>
<tr>
<td>Marriage Requests</td>
<td>0</td>
</tr>
<tr>
<td>Trips for Non-Medical Emergencies</td>
<td>0</td>
</tr>
<tr>
<td>Voluntary Work Program</td>
<td>0</td>
</tr>
<tr>
<td><strong>Sub-Total</strong></td>
<td><strong>8</strong></td>
</tr>
</tbody>
</table>

<sup>5</sup> For greater detail on ODO’s findings, see the Compliance Inspection Findings section of this report.

<sup>6</sup> Beginning in FY 2021, ODO instituted a process of rotating all standards on a 3-year basis. As a result, some standard components may not be present in all standards.
DETAINEE RELATIONS

ODO interviewed 20 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. One detainee exhibited signs of mental health issues during the interview, and ODO immediately referred him to both ERO El Paso and the facility’s medical staff for follow-up. Most detainees reported satisfaction with facility services except for the concerns listed below.

Admission and Release: Eleven detainees stated they did not receive the ICE National Detainee Handbook nor the facility detainee handbook upon their admission to the facility.

- **Action Taken:** ODO reviewed the facility acknowledgement forms, signed by the detainees for receipt of the ICE National Detainee Handbook and the facility detainee handbook. On November 17, 2021, ODO confirmed the facility re-issued both handbooks to the detainees for which the detainees re-signed the facility acknowledgment forms. Additionally, the facility placed the forms in the detainees’ detention files.

Food Service: One detainee stated the facility provided only one cup of water at every meal since approximately November 11, 2021. The detainee said that no facility staff was present when he asked for more water.

- **Action Taken:** On November 16, 2021, ODO observed lunch in the housing unit where the detainees consumed all meals and found the food service staff provided a water cooler with the meal and observed a second water cooler in the housing unit. The food service director informed ODO the facility turned off the water fountains due to COVID-19 and provided water coolers, 24 hours a day to the housing unit. The food service department routinely cleaned and refilled the water coolers before returning them to each housing unit.

Medical Care: One detainee stated he believed he had an issue with his kidneys. On or about
November 8, 2021, the detainee reported he met with the facility medical staff to express his concern. The facility doctor examined the detainee, prescribed medication, and informed him to return if his condition worsened. On November 15, 2021, the detainee said he submitted a medical request; however, he has received no response from the medical staff.

- **Action Taken:** ODO interviewed the health services administrator (HSA) and found the detainee submitted a sick call request for testicular pain and painful urination on October 30, 2021. On October 31, 2021, a registered nurse (RN) evaluated the detainee and referred him to the facility’s nurse practitioner (NP). On the same day, the NP met with the detainee and prescribed injectable and oral antibiotics and ibuprofen for pain. On November 16, 2021, the medical staff met with the detainee for his kidney complaint and referred him to the NP. On November 17, 2021, the NP completed the detainee’s lab work, and scheduled him to review the lab work results on December 2, 2021. The detainee’s results did not indicate any abnormalities, and the NP advised him to submit a sick call request if any medical issues persisted.

**Medical Care:** One detainee stated he met with facility medical staff about a toothache. The facility medical staff provided an antibiotic to prevent any infection and pain medication for his toothache; however, facility medical staff had not addressed his lower back pain. The detainee stated he would like to have his tooth extracted as per the dentist’s recommendation.

- **Action Taken:** ODO interviewed the HSA and confirmed the detainee did not submit any sick call requests for lower back pain since his arrival to the facility. On November 3, 2021, the dentist examined the detainee’s tooth and recommended a tooth extraction. On that same day, after the detainee signed a consent form for the procedure, the dentist extracted the tooth. The dentist prescribed an oral antibiotic and ibuprofen for the pain and educated the detainee on the possible symptoms/pain following the procedure. Furthermore, the dentist instructed the detainee to submit a sick call request if the pain continued.

On November 18, 2021, the medical staff met with the detainee and prescribed pain medication for his back. On November 24, 2021, the NP met with the detainee for a follow-up appointment and adjusted the detainee’s medication. The NP instructed the detainee to submit a sick call request if the pain continued.

**Medical Care:** One detainee stated he needed a tooth removed due to possible decay. The facility medical staff provided antibiotics, and the detainee expressed his desire for a follow-up appointment with the dentist.

- **Action Taken:** ODO interviewed the HSA and found on November 17, 2021, the detainee met with the facility’s dentist about his tooth pain. The dentist examined the detainee, prescribed an oral antibiotic and ibuprofen for the pain, and recommended the detainee return after 10 days if the pain continued.

**Medical Care:** One detainee stated his frustration with the medical staff’s slow response time after he submitted sick call requests for a dental issue and insomnia.
• **Action Taken:** ODO interviewed the HSA and confirmed the detainee submitted two sick call requests since his arrival on October 16, 2021. On October 18, 2021, the detainee submitted the first sick call request for his dental issue and met with the facility medical staff on the same day. The facility dentist received the detainee’s request on October 19, 2021, but did not schedule an appointment due to the detainee’s cohort status. On November 4, 2021, the detainee submitted the second sick call request for insomnia, and the facility nurse examined him on the same day. On November 9, 2021, the detainee had cleared cohort status, and the facility dentist filled the detainee’s cavity and cleaned his teeth. The detainee did not submit any subsequent requests.

**Medical Care:** One detainee stated he received medication from the facility medical staff for his allergies, but he wanted to know what causes them.

• **Action Taken:** ODO interviewed the HSA and confirmed the facility’s RN met with the detainee to discuss his allergies on October 31, 2021. The detainee had no difficulty breathing, but he complained of itchy eyes and a runny nose. The RN prescribed the detainee Zyrtec, educated him on its use, and explained his allergies as seasonal. The detainee will meet with the facility provider for a follow-up visit on December 3, 2021.

**Significant Self-harm and Suicide Prevention and Intervention:** One detainee stated he wanted to harm himself while residing at the facility. ODO offered him the opportunity for mental health counseling, but the detainee stated he felt he would not receive adequate treatment.

• **Action Taken:** ODO immediately notified the facility leadership and informed ERO El Paso about the detainee’s self-harming ideations. The facility’s medical staff then evaluated the detainee and cleared him to return to the general population. On November 30, 2021, ERO El Paso informed ODO the detainee had a *Fraihat v. ICE* review on November 19, 2021, and granted the detainee’s release on the Order of Release on Recognizance. ERO El Paso scheduled the release of the detainee for November 30, 2021.

**Sexual Abuse and Assault Prevention and Intervention:** Nine male detainees stated female facility staff members do not announce their presence when entering the housing units.

• **Action Taken:** ODO reviewed the facility’s Sexual Abuse and Assault Prevention and Intervention (SAAPI) policy, interviewed the SAAPI coordinator, and found the facility requires staff members of the opposite gender to announce their presence when entering a housing unit. On November 17, 2021, the SAAPI coordinator emailed and advised all facility staff to announce, “Female on-site!” or “Male on-site!” before entering housing units of the opposite gender. In addition, the SAAPI coordinator informed ODO she emailed all supervisors to remind all staff members of their required protocols. On November 18, 2021, the SAAPI coordinator told ODO the unit managers and the shift supervisors reviewed the facility’s policy with staff. ODO noted this as an Area of Concern in the *Sexual Abuse and Assault Prevention and Intervention* section of the report.
COMPLIANCE INSPECTION FINDINGS

SECURITY

ADMISSION AND RELEASE (AR)

ODO reviewed the facility’s AR policy and the site-specific detainee handbook, interviewed the AR supervisor, observed the intake process, and found the facility did not issue each newly admitted detainee a copy of the facility’s detainee handbook, which fully describes all policies, procedures, and rules in effect at the facility. Specifically, the AR staff did not issue the current facility detainee handbook, dated August 6, 2021, to detainees upon admission (Deficiency AR-71\(^7\)).

FACILITY SECURITY AND CONTROL (FSC)

ODO reviewed the facility’s FSC program, interviewed the chief of security, and found the facility officers admitted vehicles on-site without checking the validity of insurance (Deficiency FSC-54\(^8\)).

Corrective Action: Prior to completion of the inspection, the facility initiated corrective action by updating the sally port entry log to ensure the validity of automobile insurance. Also, the chief of security emailed a memorandum to all staff to ensure officers admit vehicles only with valid automobile insurance (C-1).

FUNDS AND PERSONAL PROPERTY (FPP)

ODO reviewed the facility’s FPP program and found the facility detainee handbook does not notify detainees that they may request and ERO Chicago will provide an ICE/ERO-certified copy of any identity document ERO Chicago has possession of to the detainees (Deficiency FPP-16\(^9\)).

POST ORDERS (PO)

ODO reviewed the facility PO program and found the facility administrator did not approve, sign, nor date each post order on the last page. Additionally, not all other pages were initialed nor dated, specifically for the Suicide Precaution/Closed Observation and Housing Control post orders (Deficiency PO-9\(^10\)).

\(^7\) “In accordance with standard “6.1 Detainee Handbook,” every facility shall issue to each newly admitted detainee a copy of the ICE National Detainee Handbook (handbook) and local supplement that fully describes all policies, procedures and rules in effect at the facility.” See ICE PBNDS 2011 (2013 Errata), Standard, Admission & Release, Section (V)(G)(1).

\(^8\) “The officer may admit the vehicle only if the license and insurance are valid.” See ICE PBNDS 2011 (2013 Errata), Standard, Facility Security and Control, Section (V)(C)(2)(a).

\(^9\) “The detainee handbook or equivalent shall notify the detainees of facility policies and procedures related to personal property, including: that, upon request, they shall be provided an ICE/ERO-certified copy of any identity document (e.g., passport, birth certificate), which shall then be placed in their A-files.” See ICE PBNDS 2011 (2013 Errata), Standard, Funds and Personal Property, Section (V)(I).

\(^10\) “The facility administrator (or designee) shall:
ODO reviewed the facility PO program and found the Housing Control Post Order did not include a six-part classification folder, which included Section 1: Specific post orders, listing activities chronologically, with responsibilities clearly defined; Section 2: Special instructions, if any, relating to the specific post; and Section 3: General post order applicable to all posts (Deficiency PO-1011).

ODO reviewed the facility PO program and found the Housing Control Post Order did not include a six-part classification folder, which included Section 4: Memorandum changing or updating the orders; Section 5: ICE/ERO detention standards and policies and facility practices relevant to the post; and Section 6: Review and signature form, dated, and with officer’s name, printed and signed (Deficiency PO-1112).

ODO reviewed the facility PO program and found the shift supervisor did not consistently initial the post order log on each shift. Specifically, ODO visited two housing units and found in one out of two units a shift supervisor’s initials were not entered in the log (Deficiency PO-1313).

ODO reviewed the facility PO program and found the facility does not always keep the POs and logbooks secure (under lock and key). Additionally, the facility left the Food Service PO and logbooks in an area accessible to detainees (Deficiency PO-2314).

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)

ODO reviewed the facility’s SAAPI program and found the facility’s written policy does not include the requirement for coordinating with the ICE OPR for investigation nor referral of incidents of sexual assault to another investigative agency, discipline, and prosecution of assailants (Deficiency SAAPI-615).

1. approve, sign and date each Post Order on the last page of each section;
2. initial and date all other pages.”


11 “The post orders for each post shall be issued in a six-part classification folder and shall be organized as follows:
Section 1: Specific post orders, listing activities chronologically, with responsibilities clearly defined;
Section 2: Special instructions, if any, relating to the specific post;
Section 3: General post orders applicable to all posts.”

See ICE PBNDS 2011 (2013 Errata), Standard, Special Management Units, Section (V)(D)(1-3).

12 “The post orders for each post shall be issued in a six-part classification folder and shall be organized as follows:
Section 4: Memoranda changing or updating the post orders;
Section 5: ICE/ERO detention standards and policies and facility practices relevant to the post; and
Section 6: Review and signature form, dated and with the officer’s name printed and signed.”

See ICE PBNDS 2011 (2013 Errata), Standard, Special Management Units, Section (V)(D)(4-6).

13 “The shift supervisor shall visit each housing area and initial the log on each shift.” See ICE PBNDS 2011 (2013 Errata), Standard, Special Management Units, Section (V)(E).

14 “Post Orders and logbooks are confidential and must be kept secure (under lock and key) at all times, and shall never be left in an area accessible to detainees.” See ICE PBNDS 2011 (2013 Errata), Standard, Special Management Units, Section (V)(G)(1).

15 “Each facility administrator shall have written policy and procedures for a Sexual Abuse or Assault Prevention and Intervention Program that includes, at a minimum: the requirements for coordination with the ICE Office of Professional Responsibility (OPR) for investigation or referral of incidents of sexual assault to another investigative agency, and discipline and prosecution of assailants.” See ICE PBNDS 2011 (2013 Errata), Standard, Sexual Abuse and Assault Prevention and Intervention, Section (V)(A)(6).
ODO reviewed the facility’s SAAPI program and found the facility’s written policy does not include required reporting through the facility’s chain-of-command, from the reporting official to the highest facility official and the FOD (Deficiency SAAPI-7.16).

During the detainee interviews, nine male detainees informed ODO that female officers do not announce their presence when entering the housing unit. The SAAPI coordinator reminded all facility staff members to announce their presence when entering a housing unit of the opposite gender. Furthermore, the unit managers and the shift supervisors reviewed the facility’s policy with staff. ODO noted this as an Area of Concern.

CARE

MEDICAL CARE (MC)

ODO reviewed 25 detainee medical records and found in 9 out of 25 records, the facility did not screen the detainees for tuberculosis (TB) within 12 hours of their admission to the facility. The facility screened the detainees for TB between 3 and 9 days after the detainees’ arrival to the facility (Deficiency MC-29.17).

ODO reviewed 25 detainee medical records and found in 3 out of 25 records, the clinical medical authority did not review the comprehensive health assessments to determine the priority for treatment (Deficiency MC-133.18).

ACTIVITIES

CORRESPONDENCE AND OTHER MAIL (COM)

ODO reviewed the facility COM program and found the facility detainees’ handbook does not specify the facility shall open and inspect general correspondence addressed to the detainee in the detainee's presence unless the facility administrator authorizes inspection without the detainee's presence for security reasons (Deficiency COM-15.19).

ODO reviewed the facility COM program and found the facility detainees’ handbook does not include instructions on labeling special correspondence as “special correspondence” or “legal mail” (Deficiency COM-16.20).

16 “Each facility must have a policy and procedure for required reporting through the facility’s chain-of-command procedure, from the reporting official to the highest facility official as well as the Field Office Director.” See ICE PBNDS 2011 (2013 Errata), Standard, Sexual Abuse and Assault Prevention and Intervention, Section (V)(A).
17 “All new arrivals shall receive TB screening within 12 hours of intake and in accordance with CDC guidelines (www.cdc.gov/tb).” See ICE PBNDS 2011 (2013 Errata), Standard, Medical Care, Section (V)(C)(2).
18 “The CMA shall be responsible for review of all comprehensive health assessments to assess the priority for treatment.” See ICE PBNDS 2011 (2013 Errata), Standard, Medical Care, Section (V)(L).
19 “At a minimum, the notification shall specify: That general correspondence and other mail addressed to detainees shall be opened and inspected in the detainee’s presence, unless the facility administrator authorizes inspection without the detainee’s presence for security reasons.” See ICE PBNDS 2011 (2013 Errata), Standard, Correspondence and Other Mail, Section (V)(C)(3).
20 “At a minimum, the notification shall specify: The definition of special correspondence or legal mail, including
ODO reviewed the facility COM program and found the facility detainee handbook does not clearly state the detainee's responsibility to inform senders of the labeling requirement (Deficiency COM-17\textsuperscript{21}).

ODO reviewed the facility COM program and found the facility detainee handbook does not specify the facility may only open incoming special correspondence or legal mail in the detainee's presence (Deficiency COM-18\textsuperscript{22}).

ODO reviewed the facility COM program and found the facility detainee handbook does not specify facility staff shall not open nor inspect outgoing special correspondence and/or legal mail (Deficiency COM-19\textsuperscript{23}).

ODO reviewed the facility COM program and found the facility detainee handbook does not specify how to obtain approval to send or receive packages (Deficiency COM-20\textsuperscript{24}).

ODO reviewed the facility COM program and found the facility does not have detainees present when they inspect correspondence or other mail, including packages, unless otherwise authorized by the facility administrator (Deficiency COM-51\textsuperscript{25}).

ODO reviewed the facility COM program, the facility Prohibited Items form, and found the facility administrator does not always provide non-detainees with a written notice explaining when the facility rejects incoming or outgoing mail. The facility will only provide non-detainees a written notice, signed by the facility administrator, if a detainee requests their prohibited items be picked up by a visitor (Deficiency COM-61\textsuperscript{26}).

\textsuperscript{21} "At a minimum, the notification shall specify: the notification shall clearly state that it is the detainee’s responsibility to inform senders of the labeling requirement.” See ICE PBNDS 2011 (2013 Errata), Standard, Correspondence and Other Mail, Section (V)(C)(4).
\textsuperscript{22} "At a minimum, the notification shall specify: That incoming special correspondence or legal mail may only be opened in the detainee’s presence, and may be inspected for contraband, but not read, and that outgoing special correspondence or legal mail shall not be opened, inspected or read.” See ICE PBNDS 2011 (2013 Errata), Standard, Correspondence and Other Mail, Section (V)(C)(5).
\textsuperscript{23} "That incoming special correspondence or legal mail may only be opened in the detainee’s presence, and may be inspected for contraband, but not read, and that outgoing special correspondence or legal mail shall not be opened, inspected or read.” See ICE PBNDS 2011 (2013 Errata), Standard, Correspondence and Other Mail, Section (V)(C)(5).
\textsuperscript{24} "At a minimum, the notification shall specify: That packages may neither be sent nor received without advance arrangements approved by the facility administrator, as well as information regarding how to obtain such approval.” See ICE PBNDS 2011 (2013 Errata), Standard, Correspondence and Other Mail, Section (V)(C)(6).
\textsuperscript{25} "The detainee must be present when the correspondence or other mail, including packages, is inspected, unless otherwise authorized by the facility administrator.” See ICE PBNDS 2011 (2013 Errata), Standard, Correspondence and Other Mail, Section (V)(G)(1).
\textsuperscript{26} "Both sender and addressee shall be provided written notice, signed by the facility administrator, with explanation, when the facility rejects incoming or outgoing mail.” See ICE PBNDS 2011 (2013 Errata), Standard, Correspondence and Other Mail, Section (V)(H).
ADMINISTRATION AND MANAGEMENT

DETAINEE TRANSFERS (DT)

ODO reviewed the facility ICE Detainee Transfer Notification form, interviewed staff, and found the facility does not ensure a detainee acknowledges, in writing, he or she may place a domestic phone call, at no expense, upon admission into the receiving facility (Deficiency DT-1\textsuperscript{27}).

CONCLUSION

During this inspection, ODO assessed the facility’s compliance with 26 standards under PBNDS 2011 (2013 Errata) and found the facility in compliance with 18 of those standards. ODO found 21 deficiencies in the remaining 8 standards. ODO commends facility staff members for their responsiveness during this inspection and notes there was one instance where the facility’s staff initiated immediate corrective action during the inspection. ODO recommends ERO El Paso work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations. ODO has not received the uniform corrective action plan for ODO’s last inspection of TCDF in May 2021.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Standards Reviewed</td>
<td>11</td>
<td>26</td>
</tr>
<tr>
<td>Deficient Standards</td>
<td>5</td>
<td>8</td>
</tr>
<tr>
<td>Overall Number of Deficiencies</td>
<td>9</td>
<td>21</td>
</tr>
<tr>
<td>Repeat Deficiencies</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Areas of Concern</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Corrective Actions</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Facility Rating</td>
<td>N/A</td>
<td>Good</td>
</tr>
</tbody>
</table>

\textsuperscript{27} “The sending facility shall ensure that the detainee acknowledges, in writing, that: he or she may place a domestic phone call, at no expense to the detainee, upon admission into the receiving facility.” See ICE PBNDS 2011 (2013 Errata), Standard, Detainee Transfers, Section, (V)(B)(2)(c)(3)
ICE Uniform Corrective Action Plan (ODO Reviews)

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Torrance County Detention Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (Street and Name)</td>
<td>209 County Road 49</td>
</tr>
<tr>
<td>City, State and Zip Code</td>
<td>Estancia, NM 87016</td>
</tr>
<tr>
<td>County</td>
<td>Torrance</td>
</tr>
<tr>
<td>Date[s] of Facility Review</td>
<td>November 16-18, 2021</td>
</tr>
<tr>
<td>Complete and Return to ICE HQ No Later Than:</td>
<td>April 8, 2022</td>
</tr>
</tbody>
</table>

Facility Corrective Action Plan Assigned to (Signed by AFOD or Higher)

Date of Final Submission: INSERT DATE HERE

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)
Report produced on June 24, 2013
Instructions for Corrective Action Response

Provide a detailed description of the corrective action taken by the facility to address each of the deficiencies identified in the Office of Detention Oversight review. Please ensure that each corrective action corrects the noted deficiency to the fullest extent possible. In the event a deficiency cannot be corrected within the authorized timeline, an explanation is required in the “Corrections Made” column. The explanation should include a work around solution while pending final resolution, and an approximate completion date. If an extension is needed, the Field Office must contact the appropriate DMD staff member with this request in advance of the specified timelines for submission.

*Exceptions to this timeline may be granted for necessary construction and staffing requirements, but will require an estimated completion date and temporary “work around” as part of the approved UCAP. Serious life and safety issues must be corrected immediately.

<table>
<thead>
<tr>
<th>Standard</th>
<th>Deficiency</th>
<th>Corrections Made</th>
<th>Date Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>L. Admission and Release (AR)</td>
<td>ODO reviewed the facility’s AR policy and the site-specific detainee handbook, interviewed the AR supervisor, observed the intake process, and found the facility did not issue each newly admitted detainee a copy of the facility’s detainee handbook, which fully describes all policies, procedures, and rules in effect at the facility. Specifically, the AR staff did not issue the current facility detainee handbook, dated August 6, 2021, to detainees upon admission</td>
<td>INSERT TEXT HERE</td>
<td>INSERT DATE HERE</td>
</tr>
</tbody>
</table>
## 2. Facility Security and Control (FSC)

### (III)(E)

ODO reviewed the facility’s FSC program, interviewed the chief of security, and found the facility officers admitted vehicles on-site without checking the validity of insurance.

**Corrective Action:** Prior to completion of the inspection, the facility initiated corrective action by updating the sally port entry log to ensure the validity of automobile insurance. Also, the chief of security emailed a memorandum to all staff to ensure officers admit vehicles only with valid automobile insurance.

## 3. Funds and Personal Property

### (V)(I)

ODO reviewed the facility’s FPP program and found the facility detainee handbook does not notify detainees that they may request and ERO Chicago will provide an ICE/ERO-certified copy of any identity document. ERO Chicago has possession of to the detainees.

## 4. Post Orders (PO)

### (V)(C)(1-2)

ODO reviewed the facility PO program and found the facility administrator did not approve, sign, nor date each post order on the last page. Additionally, not all other pages were initialed nor dated, specifically for the Suicide Precaution/Close Observation and Housing Control post orders.

## 5. Post Orders (PO)

### (V)(D)(1-3)

ODO reviewed the facility PO program and found the Housing Control Post Order did not include a six-part classification folder, which included Section 1: Specific post orders, listing activities chronologically, with responsibilities clearly defined; Section 2: Special instructions, if any, relating to the specific post; and Section 3: General post order applicable to all posts.
<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Post Orders (PO)</td>
<td>ODO reviewed the facility PO program and found the Housing Control Post Order did not include a six-part classification folder, which included Section 4: Memorandum changing or updating the orders; Section 5: ICE/ERO detention standards and policies and facility practices relevant to the post; and Section 6: Review and signature form, dated, and with officer’s name, printed and signed</td>
<td>INSERT TEXT HERE</td>
</tr>
<tr>
<td>(V)(D)(4-6)</td>
<td></td>
<td>INSERT TEXT HERE</td>
</tr>
<tr>
<td>7. Post Orders (PO)</td>
<td>ODO reviewed the facility PO program and found the shift supervisor did not consistently initial the post order log on each shift. Specifically, ODO visited two housing units and found in one out of two units a shift supervisor’s initials were not entered in the log</td>
<td>INSERT TEXT HERE</td>
</tr>
<tr>
<td>(V)(E)</td>
<td></td>
<td>INSERT TEXT HERE</td>
</tr>
<tr>
<td>8. Post Orders (PO)</td>
<td>ODO reviewed the facility PO program and found the facility does not always keep the POs and logbooks secure (under lock and key). Additionally, the facility left the Food Service PO and logbooks in an area accessible to detainees</td>
<td>INSERT TEXT HERE</td>
</tr>
<tr>
<td>(V)(G)(1)</td>
<td></td>
<td>INSERT TEXT HERE</td>
</tr>
<tr>
<td>9. Sexual Abuse and Assault Prevention and Intervention (SAAPI)</td>
<td>ODO reviewed the facility’s SAAPI program and found the facility’s written policy does not include the requirement for coordinating with the ICE OPR for investigation nor referral of incidents of sexual assault to another investigative agency, discipline, and prosecution of assailants</td>
<td>INSERT TEXT HERE</td>
</tr>
<tr>
<td>(V)(A)(6)</td>
<td></td>
<td>INSERT TEXT HERE</td>
</tr>
<tr>
<td></td>
<td>Department of Homeland Security</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---------------------------------</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Immigration and Customs Enforcement</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Office of Enforcement and Removal Operations</td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>Sexual Abuse and Assault Prevention and Intervention (SAAPI)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(V)(A)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ODO reviewed the facility’s SAAPI program and found the facility’s written policy does not include required reporting through the facility’s chain-of-command, from the reporting official to the highest facility official and the FOD</td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>Medical Care (MC)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(V)(C)(2)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ODO reviewed 25 detainee medical records and found in 9 out of 25 records, the facility did not screen the detainees for tuberculosis (TB) within 12 hours of their admission to the facility. The facility screened the detainees for TB between 3 and 9 days after the detainees’ arrival to the facility</td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>Medical Care (MC)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(V)(I)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ODO reviewed 25 detainee medical records and found in 3 out of 25 records, the clinical medical authority did not review the comprehensive health assessments to determine the priority for treatment</td>
<td></td>
</tr>
<tr>
<td>13.</td>
<td>Correspondence and Other Mail (COM)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(V)(C)(3)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ODO reviewed the facility COM program and found the facility detainee handbook does not specify the facility shall open and inspect general correspondence addressed to the detainee in the detainee's presence unless the facility administrator authorizes inspection without the detainee's presence for security reasons</td>
<td></td>
</tr>
<tr>
<td>14.</td>
<td>Correspondence and Other Mail (COM)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ODO reviewed the facility COM program and found the facility detainee handbook does not include instructions on labeling special correspondence as “special correspondence” or “legal mail”</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Correspondence and Other Mail (COM)</td>
<td>ODO reviewed the facility COM program and found the facility detainee handbook does not clearly state the detainee's responsibility to inform senders of the labeling requirement</td>
</tr>
<tr>
<td>---</td>
<td>---------------------------------------------------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>15</td>
<td>(V)(C)(4)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Correspondence and Other Mail (COM)</td>
<td>ODO reviewed the facility COM program and found the facility detainee handbook does not specify the facility may only open incoming special correspondence or legal mail in the detainee's presence</td>
</tr>
<tr>
<td></td>
<td>(V)(C)(5)</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Correspondence and Other Mail (COM)</td>
<td>ODO reviewed the facility COM program and found the facility detainee handbook does not specify facility staff shall not open nor inspect outgoing special correspondence and/or legal mail</td>
</tr>
<tr>
<td></td>
<td>(V)(C)(5)</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Correspondence and Other Mail (COM)</td>
<td>ODO reviewed the facility COM program and found the facility detainee handbook does not specify how to obtain approval to send or receive packages</td>
</tr>
<tr>
<td></td>
<td>(V)(C)(6)</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Correspondence and Other Mail (COM)</td>
<td>ODO reviewed the facility COM program and found the facility does not have detainees present when they inspect correspondence or other mail, including packages, unless otherwise authorized by the facility administrator</td>
</tr>
<tr>
<td></td>
<td>(V)(G)(1)</td>
<td></td>
</tr>
<tr>
<td>20. Correspondence and Other Mail (COM)</td>
<td>ODO reviewed the facility COM program, the facility Prohibited Items form, and found the facility administrator does not always provide non-detainees with a written notice explaining when the facility rejects incoming or outgoing mail. The facility will only provide non-detainees a written notice, signed by the facility administrator, if a detainee requests their prohibited items be picked up by a visitor</td>
<td>INSERT TEXT HERE</td>
</tr>
<tr>
<td>21. Detainee Transfers (DT)</td>
<td>ODO reviewed the facility ICE Detainee Transfer Notification form, interviewed staff, and found the facility does not ensure a detainee acknowledges, in writing, he or she may place a domestic phone call, at no expense, upon admission into the receiving facility</td>
<td>INSERT TEXT HERE</td>
</tr>
<tr>
<td>Area of Concern Sexual Abuse and Assault Prevention and Intervention (SAAPI)</td>
<td>During the detainee interviews, nine male detainees informed ODO that female officers do not announce their presence when entering the housing unit. The SAAPI coordinator reminded all facility staff members to announce their presence when entering a housing unit of the opposite gender. Furthermore, the unit managers and the shift supervisors reviewed the facility’s policy with staff. ODO noted this as an Area of Concern</td>
<td>INSERT TEXT HERE</td>
</tr>
</tbody>
</table>
Good afternoon,

Please see attached as requested.

Respectfully,

[Redacted]
Assistant Field Office Director
El Paso Field Office
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
Desk-505-45

---

**CAUTION:** This email originated from outside of DHS. DO NOT click links or open attachments unless you recognize and/or trust the sender. Please use the Cofense Report Phishing button to report. If the button is not present, you can click on report.
Good afternoon Mr. [redacted].

Torrance County Detention Facility has adjusted the UCAP as suggested and submitted additional Exhibits as described. Please find all discussed documentation attached.

Thank you,

QAM, TCDF
Office: 505-384-

From: [redacted]@ice.dhs.gov
Sent: Thursday, April 7, 2022 8:54 AM
To: [redacted]; [redacted]; [redacted]; [redacted]; [redacted]; [redacted]
Cc: [redacted]; [redacted]; [redacted]
Subject: *** Quick Turn Around *** FW: The ODO follow-up review for the Torrance County Detention Facility, completed on November 18, 2021 in Estancia, NM, has been received - UCAP due 4/08/2022

CAUTION: This email came from outside the organization. Attachments and links may contain viruses and other malicious software.

Good morning,

Please see below email with requests for change or additional documentation.

I need this back by 12:00 noon today.

Respectfully,

[redacted]

Assistant Field Office Director
El Paso Field Office
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
Desk-505-45-

From: [redacted]@ice.dhs.gov
Sent: Thursday, April 7, 2022 8:45 AM
To: [redacted]; [redacted]
Subject: FW: The ODO follow-up review for the Torrance County Detention Facility, completed on November 18, 2021 in Estancia, NM, has been received - UCAP due 4/08/2022

Good morning sir,
As per DDO (b)(6), (b)(7)(C) Note: each corrective action must be accompanied by validating documentation. Please clearly label all documentation as to the cited deficiency it is intended to address. Failure to provide this information will result in the rejection of your UCAP.

After review, the documentation must be labeled ie ( replace exhibit 1 to (1) Admission and Release) and so forth.

Missing documentation for

1. Admission and Release

3. Funds and Personal Property

8. Post Orders (V)(G)(1)

12. Medical Care (MC) (V)(I)

15. Correspondence and other Mail (COM) (V)(C)(4)

Exhibit AOC for supporting documentation.

On 16-18, it explains that to see pg 19 of the exhibit. However, the exhibit provided only has pg 20-21. I believe it might be a typo.

Thank you,

SDDO, EPC CCU
El Paso Field Office, El Paso Processing Center
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
Cell: 210-880-1060

From: [redacted]@ice.dhs.gov
Sent: Wednesday, April 6, 2022 10:44 AM
To: [redacted]@ice.dhs.gov

Subject: FW: The ODO follow-up review for the Torrance County Detention Facility, completed on November 18, 2021 in Estancia, NM, has been received - UCAP due 4/08/2022

Good morning,

Please see attached documents for review and submission.

Respectfully,

[redacted]
Assistant Field Office Director
El Paso Field Office
Enforcement and Removal Operations
U.S. Immigration and Customs Enforcement
Desk-505-45
From: HQ-DOU-Taskings <[redacted]@ice.dhs.gov>
Sent: Wednesday, January 19, 2022 7:21 AM
To: ELP-Taskings <[redacted]@ice.dhs.gov>; [redacted]@ice.dhs.gov;
                 [redacted]@ice.dhs.gov
Cc: HQ-DOU-Taskings <[redacted]@ice.dhs.gov>; [redacted]@ice.dhs.gov;
                 [redacted]@ice.dhs.gov
Subject: The ODO follow-up review for the Torrance County Detention Facility, completed on November 18, 2021 in Estancia, NM, has been received - UCAP due 4/08/2022

Greetings El Paso.

The ODO follow-up review for the Torrance County Detention Facility, completed on November 18, 2021 in Estancia, NM, has been received. Attached, please find the final ODO report and Uniform Correction Action Plan (UCAP).

Using the attached UCAP, please record all corrective actions taken, to include projected completion dates. Note: each corrective action must be accompanied by validating documentation. Please clearly label all documentation as to the cited deficiency it is intended to address. Failure to provide this information will result in the rejection of your UCAP.

Upon completion, please have an Assistant Field Office Director or higher sign and certify the UCAP is complete and accurate.

Your UCAP must be approved and closed out by DOU before sending it to ODO.

Due date: 4/08/2022

Respectfully,

[redacted]

Detention and Deportation Officer
Oversight, Compliance, and Acquisition Division
Detention Oversight Unit – Gulf
U.S. Immigration and Customs Enforcement
Enforcement and Removal Operations
500 12th St., SW
Washington, DC 20536
Desk: 202-732- [redacted]; Cell: 410-952- [redacted]

(i) This e-mail and any files transmitted with it are confidential and intended solely for the use of the intended recipient(s). If you have received this e-mail in error, please notify the sender immediately and delete this e-mail and any associated files from your system. (ii) Views or opinions presented in this e-
mail are solely those of the author and do not necessarily represent those of CoreCivic. (iii) The recipient should check this e-mail and any attachments for the presence of viruses. The company accepts no liability for errors or omissions caused by e-mail transmission or any damage caused by any virus transmitted by or with this e-mail. This email has been scanned for content and viruses by the Symantec Email Security.cloud service.
### Uniform Corrective Action Plan

**ICE Uniform Corrective Action Plan (ODO Reviews)**

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Torrance County Detention Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (Street and Name)</td>
<td>209 County Road 49</td>
</tr>
<tr>
<td>City, State and Zip Code</td>
<td>Estancia, NM 87016</td>
</tr>
<tr>
<td>County</td>
<td>Torrance</td>
</tr>
<tr>
<td>Date[s] of Facility Review</td>
<td>November 16-18, 2021</td>
</tr>
<tr>
<td>Complete and Return to ICE HQ No Later Than:</td>
<td>April 8, 2022</td>
</tr>
</tbody>
</table>

Facility Corrective Action Plan Assigned to (Signed by AFOD or Higher)

Date of Final Submission:  
*INSERT DATE HERE*

---

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)  
Report produced on June 24, 2013
Instructions for Corrective Action Response

Provide a detailed description of the corrective action taken by the facility to address each of the deficiencies identified in the Office of Detention Oversight review. Please ensure that each corrective action corrects the noted deficiency to the fullest extent possible. In the event a deficiency cannot be corrected within the authorized timeline, an explanation is required in the “Corrections Made” column. The explanation should include a work around solution while pending final resolution, and an approximate completion date. If an extension is needed, the Field Office must contact the appropriate DMD staff member with this request in advance of the specified timelines for submission.

*Exceptions to this timeline may be granted for necessary construction and staffing requirements, but will require an estimated completion date and temporary “work around” as part of the approved UCAP. Serious life and safety issues must be corrected immediately.

<table>
<thead>
<tr>
<th>ICE Uniform Corrective Action Plan</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard</td>
<td>Deficiency</td>
<td>Corrections Made</td>
<td>Date Corrected</td>
</tr>
<tr>
<td>Folkston Immigration Processing Center and Annex</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)
Report produced on June 24, 2013
| L. Admission and Release (AR) | ODO reviewed the facility’s AR policy and the site-specific detainee handbook, interviewed the AR supervisor, observed the intake process, and found the facility did not issue each newly admitted detainee a copy of the facility’s detainee handbook, which fully describes all policies, procedures, and rules in effect at the facility. Specifically, the AR staff did not issue the current facility detainee handbook, dated August 6, 2021, to detainees upon admission. |
| Corrective action was initiated at the time of the inspection, all new intakes were provided a copy of the current handbook. Detainees signed a copy of the intake checklist verifying receipt. Additionally, the Booking Lieutenant removed all previous versions of the handbook from the intake area and replaced with the current version. Please see attachment (1) Admission and Release for supporting documentation. | 11/18/21 |
|   | 2. Facility Security and Control (FSC) | ODO reviewed the facility’s FSC program, interviewed the chief of security, and found the facility officers admitted vehicles on-site without checking the validity of insurance  
**Corrective Action:** Prior to completion of the inspection, the facility initiated corrective action by updating the sally port entry log to ensure the validity of automobile insurance. Also, the chief of security emailed a memorandum to all staff to ensure officers admit vehicles only with valid automobile insurance | As noted in the report, prior to completion of the inspection, the sally port entry log was updated to include a column to document validity of insurance. Additionally, the Chief of Security emailed a memorandum to all staff directing them to ensure only vehicles with valid automobile insurance are admitted into the facility.  
Please see attachment (2) Facility Security and Control for supporting documentation. | 11/17/21 |
|   | 3. Funds and Personal Property (V)(l) | ODO reviewed the facility’s FPP program and found the facility detainee handbook does not notify detainees that they may request and ERO Chicago will provide an ICE/ERO-certified copy of any identity document ERO Chicago has possession of to the detainees | By February 16, 2022, a committee met to review the current Detainee Handbook and findings noted during this inspection. A Detainee Handbook Addendum will be developed to include these procedures and distributed to the detainee population by March 21, 2022, and placed in intake | 03/21/22 |
| for issuance to new arrivals. |
| Please see attachment (3) Funds and Personal Property for supporting documentation. |
|   | Post Orders (PO) (V)(C)(1-2) | ODO reviewed the facility PO program and found the facility administrator did not approve, sign, nor date each post order on the last page. Additionally, not all other pages were initialed nor dated, specifically for the Suicide Precaution/Close Observation and Housing Control post orders | As of February 7, 2022, all post orders have been replaced with copies from the master binder that have been signed and dated on each page. On March 3, 2022, the Quality Assurance Manager sent an email reminder to all staff that all post orders must contain the warden's initial and date on each page and that is there is a need to replace a post order to contact the Chief of Security to obtain a signed/dated copy. Beginning February 2022, the Chief of Security and Security Clerk will conduct rounds of each post on a monthly basis to verify post orders are present (with warden’s initials and date), properly assembled, and all documentation is current. This will be documented and any | 03/03/22 |
|                | issues noted while conducting rounds will be noted and corrected. This process will be in addition to Shift Supervisors reviewing when conducting daily rounds. Please see attachment (4) Post Orders for supporting documentation. |
| 5. Post Orders (PO) | ODO reviewed the facility PO program and found the Housing Control Post Order did not include a six-part classification folder, which included Section 1: Specific post orders, listing activities chronologically, with responsibilities clearly defined; Section 2: Special instructions, if any, relating to the specific post; and Section 3: General post order applicable to all posts | Beginning February 2022, the Chief of Security and Security Clerk will conduct rounds of each post on a monthly basis to verify post orders are present (with warden's initials and date), properly assembled, and all documentation is current. This will be documented and any issues noted while conducting rounds will be noted and corrected. This process will be in addition to Shift Supervisors reviewing when conducting daily rounds. Please see attachment (5) Post Orders for supporting documentation. | 02/28/22 |

| 6. Post Orders (PO) | ODO reviewed the facility PO program and found the Housing Control Post Order did not include a six-part classification folder, which included Section 4: Memorandum changing or updating the orders; Section 5: ICE/ERO detention standards and policies and facility practices relevant to the post; and Section 6: Review and signature form, dated, and with officer’s name, printed and signed | Beginning February 2022, the Chief of Security and Security Clerk will conduct rounds of each post on a monthly basis to verify post orders are present (with warden's initials and date), properly assembled, and all documentation is current. This will be documented and any issues noted while conducting rounds will be noted and corrected. This process will be in addition to Shift Supervisors reviewing when conducting daily rounds. Please see attachment (5) Post Orders for supporting documentation. | 02/28/22 |
Department of Homeland Security  
Immigration and Customs Enforcement  
Office of Enforcement and Removal Operations

<table>
<thead>
<tr>
<th>current. This will be documented and any issues noted while conducting rounds will be noted and corrected. This process will be in addition to Shift Supervisors reviewing when conducting daily rounds.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please see attachment (6) Post Orders for supporting documentation.</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>7.</td>
</tr>
<tr>
<td>8.</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>----------------</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>
| 9. Sexual Abuse and Assault Prevention and Intervention (SAAPI) | ODO reviewed the facility’s SAAPI program and found the facility’s written policy does not include the requirement for coordinating with the ICE OPR for investigation nor referral of incidents of sexual assault to another investigative agency, discipline, and prosecution of assailants | We respectfully disagree with this finding. The facility’s policy includes the following:  
- **Page 19 section M10a:** "When a detainee, of the facility in which an alleged detainee victim is housed, is alleged to be the perpetrator of detainee sexual abuse, the facility shall ensure that the incident is promptly reported to the Joint Intake Center, the ICE Office of Professional Responsibility or the DHS Office of Inspector General, as well as the appropriate ICE Field Office Director/designee. (115.22 (e))"  
- **Page 19 M9:** "All allegations of sexual abuse shall be promptly reported to a law enforcement agency with the legal authority to conduct criminal

| (V)(A)(6) |  | 11/18/21 |
investigations unless the allegation does not involve potentially criminal behavior. (115.22 (d)) The highest ranking authority on site or the Shift Supervisor shall notify law enforcement." The Policy has an ATF section with the name and address of the Estancia NM Police Department."

- **Page 22 O1b:**
  "Administrative investigations shall be conducted after consultation with the appropriate investigative office within ICE/DHS, and the assigned criminal investigative entity."

- **Page 25 section P2e:**
  Under Employee Discipline states "The facility shall also report all such incidents of Substantiated abuse, removals, or
resignations in lieu of removal to the ICE Field Office Director, regardless of whether the activity was criminal, and shall make reasonable efforts to report such information to any relevant licensing bodies, to the extent known."

Please see attachment (9) Sexual Abuse and Assault Prevention and Intervention for supporting documentation.
| 10. Sexual Abuse and Assault Prevention and Intervention (SAAPI) | ODO reviewed the facility’s SAAPI program and found the facility’s written policy does not include required reporting through the facility’s chain-of-command, from the reporting official to the highest facility official and the FOD | We respectfully disagree with this finding. The facility's policy includes the following:  
- **Page 16 K7b:** The facility shall require all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse that occurred in a facility, retaliation against detainees or staff who reported or participated in an investigation about such an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. (115.61 (a))  
- **Page 16 K7c:** Employees shall take all allegations of sexual abuse and assault seriously, including verbal, anonymous and | 11/18/21 |
|第三方报告，处理时应将此类举报视为可信。工作人员应彻底记录任何口头报告。
|第18 M7: 回应人员应立即通知最高级别的管理部门并现场。现场的PSA合
|在管理，设施管理员和/或行政主任（ADO）应立即通知案件的举报人和最
|第19 M10a: 当拘留人员，如果涉嫌犯罪的拘留人员受害者在内，被
|拘留者，有虐待的拘留人员受害者被拘留在拘留中心，相关机构应即
|report produced on June 24, 2013

2022-ICLI-00045 12450
| | Please see attachment (10) Sexual Abuse and Assault Prevention and Intervention for supporting documentation. |
11. Medical Care (MC)  

(V)(C)(2)  

| ODO reviewed 25 detainee medical records and found in 9 out of 25 records, the facility did not screen the detainees for tuberculosis (TB) within 12 hours of their admission to the facility. The facility screened the detainees for TB between 3 and 9 days after the detainees’ arrival to the facility. |
| On February 14, 2022, the Health Services Administrator conducted refresher training with all nursing staff regarding procedures for intake TB screening. The training was documented on a 4-2A Training/Activity Attendance Roster. |
| From November 30, 2021 through January 30, 2022, a 60 day CQI study was initiated to assess compliance with intake TB screening procedures (i.e., TB's being planted/reviewed during the time of intake, and read within 48-72 hour). Results of the study were provided to the Health Services Administrator and additional corrective action taken, as needed. |
| Please see attachment (11) Medical Care for supporting documentation. |

| 02/14/22 |
| 12. Medical Care (MC) (V)(l) | ODO reviewed 25 detainee medical records and found in 3 out of 25 records, the clinical medical authority did not review the comprehensive health assessments to determine the priority for treatment | This issue had been identified previously and expectations reviewed with the Nurse Practitioner. As a result, the responsible Nurse Practitioner is no longer with the company as of January 13, 2022. Recruitment efforts are underway to fill this vacancy. Please see attachment (12) Medical Care for supporting documentation. | 01/13/22 |
| 13. Correspondence and Other Mail (COM) (V)(C)(3) | ODO reviewed the facility COM program and found the facility detainee handbook does not specify the facility shall open and inspect general correspondence addressed to the detainee in the detainee’s presence unless the facility administrator authorizes inspection without the detainee’s presence for security reasons | We respectfully disagree with this finding. The facility's detainee handbook includes the following on page 19: All incoming and outgoing packages will be opened in your presence (unless otherwise authorized by the Warden) and inspected for contraband. Please see attachment (13) Correspondence and | 11/18/21 |
| Other Mail for supporting documentation. |

---

**FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)**

Report produced on June 24, 2013

---

21
<p>| 14. Correspondence and Other Mail (COM) | ODO reviewed the facility COM program and found the facility detainee handbook does not include instructions on labeling special correspondence as “special correspondence” or “legal mail” | We respectfully disagree with this finding. The facility's detainee handbook includes the following on page 19: Correspondence will only be treated as “special” if the title and office of the sender or addressee are clearly identified on the envelope, indicating without a doubt that the correspondence is “special” as defined above. Please see attachment (14) Correspondence and Other Mail for supporting documentation. | 11/18/21 |
| 15. Correspondence and Other Mail (COM) | ODO reviewed the facility COM program and found the facility detainee handbook does not clearly state the detainee's responsibility to inform senders of the labeling requirement | On March 8, 2022, the detainee handbook was updated to include this information on page 23 and distributed to the detainee population. Please see attachment (15) Correspondence and Other Mail for supporting documentation. | 03/08/22 |</p>
<table>
<thead>
<tr>
<th>16. Correspondence and Other Mail (COM)</th>
<th>ODO reviewed the facility COM program and found the facility detainee handbook does not specify the facility may only open incoming special correspondence or legal mail in the detainee's presence</th>
<th>We respectfully disagree with this finding. The facility's detainee handbook includes the following on page 21: Incoming and outgoing mail, with the exception of special correspondence or legal mail, shall be opened and inspected for contraband, and to intercept cash, checks, and money orders. Please see attachment (16) Correspondence and Other Mail for supporting documentation.</th>
<th>11/18/21</th>
</tr>
</thead>
<tbody>
<tr>
<td>17. Correspondence and Other Mail (COM)</td>
<td>ODO reviewed the facility COM program and found the facility detainee handbook does not specify facility staff shall not open nor inspect outgoing special correspondence and/or legal mail</td>
<td>We respectfully disagree with this finding. The facility's detainee handbook includes the following on page 21: All incoming and outgoing packages will be opened in your presence (unless otherwise authorized by the Warden) and inspected for contraband.</td>
<td>11/18/21</td>
</tr>
<tr>
<td></td>
<td>Please see attachment (17) Correspondence and Other Mail for supporting documentation.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Correspondence and Other Mail (COM)</td>
<td>ODO reviewed the facility COM program and found the facility detainee handbook does not specify how to obtain approval to send or receive packages</td>
<td>We respectfully disagree with this finding. The facility's detainee handbook includes the following on page 20: You will not be allowed to receive or send packages without advance arrangements and prior approval from the Chief of Security. Please see attachment (18) Correspondence and Other Mail for supporting documentation.</td>
<td>11/18/21</td>
</tr>
<tr>
<td>(V)(C)(6)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Correspondence and Other Mail (COM)</td>
<td>ODO reviewed the facility COM program and found the facility does not have detainees present when they inspect correspondence or other mail, including packages, unless otherwise authorized by the facility administrator</td>
<td>On November 17, 2021, a Memo from the Warden authorizing mail to be inspected without detainees present was posted in the housing units. On January 26, 2022, the memo was revised to include Spanish and Turkish translation. On January 31, 2022, the memo was signed by the Warden and provided to</td>
<td>01/31/22</td>
</tr>
<tr>
<td></td>
<td>unit management to post in the ICE units. Unit management and Commissary staff will verify weekly that the memo remains posted. Please see attachment (19) Correspondence and Other Mail for supporting documentation.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Correspondence and Other Mail (COM) (V)(H)</td>
<td>ODO reviewed the facility COM program, the facility Prohibited Items form, and found the facility administrator does not always provide non-detainees with a written notice explaining when the facility rejects incoming or outgoing mail. The facility will only provide non-detainees a written notice, signed by the facility administrator, if a detainee requests their prohibited items be picked up by a visitor.</td>
<td>By March 15, 2022, the 16-1F Prohibited items form was revised and implemented to include the Warden's signature for all prohibited items. Please see attachment (20) Correspondence and Other Mail for supporting documentation.</td>
<td>03/15/22</td>
</tr>
<tr>
<td>21. Detainee Transfers (DT) (V)(B)(2)(c)(3)</td>
<td>ODO reviewed the facility ICE Detainee Transfer Notification form, interviewed staff, and found the facility does not ensure a detainee acknowledges, in writing, he or she may place a domestic phone call, at no expense, upon admission into the receiving facility.</td>
<td>We respectfully disagree with this finding. Facility procedures include allowing a phone call upon admission, at no expense to the detainee. The detainee signs an R&amp;D Checklist to document a call was offered. Please see attachment (21) Detainee Transfers for supporting documentation.</td>
<td>11/18/21</td>
</tr>
<tr>
<td>Area of Concern</td>
<td>During the detainee interviews, nine male detainees informed ODO that female officers do not announce their presence when entering the housing unit. The SAAPI coordinator reminded all facility staff members to announce their presence when entering a housing unit of the opposite gender. Furthermore, the unit managers and the shift</td>
<td>During the inspection, additional &quot;Opposite Gender Must Announce&quot; signs were placed on pod doors.</td>
<td>11/18/21</td>
</tr>
<tr>
<td>Sexual Abuse and Assault Prevention and Intervention (SAAPI)</td>
<td>Shift Supervisors and Unit Managers continue to remind staff (to include temporarily assigned staff), at shift briefings, to announce opposite gender. Please see attachment (AOC) Sexual Abuse and Assault Prevention and Intervention for supporting documentation.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td></td>
<td></td>
</tr>
<tr>
<td>supervisors reviewed the facility's policy with staff. ODO noted this as an Area of Concern</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Torrance County Detention Center
RECEIVING & DISCHARGE CHECKLIST

Inmate/Resident Name: [Redacted]
Inmate/Resident #: [Redacted]

RECEIVING CHECKLIST:

1. Verification of Commitment Papers
2. Searched at intake
3. Offered Opportunity to Shower in Intake
4. Issue of Clean, laundered clothing
5. Disposition of all monies at intake
6. Medical, dental, mental health screening
7. Assignment of Corecivic Number
8. Personal Property Inventoried (copy given to inmate/resident)
9. PREAD Pamphlet and SAAP Pamphlet
10. Assignment to a Housing Unit
11. Photograph/l.d. Card
12. Classification Booking Sheet
13. Hygiene Items Issued
14. Explanation of Mail and Visiting Procedures
15. Issue of Lock (if applicable)
16. Assignment of Corecivic Number
17. Telephone Calls
18. Other:

[Redacted]

TCDF Detainee Handbook Acknowledgment: By signing below, I acknowledge receiving a TCDF Detainee Handbook on this date.

[Redacted]

Voluntary Work Release

As a pre-trial or un-sentenced detainee, I understand that I may not be compelled to work other than to perform housekeeping tasks in my own cell and the community living area. I would like to volunteer for work assignments in addition to my housekeeping tasks. I am aware that I will be working with inmates/residents who are serving a sentence for convictions of crimes. By signing below I am volunteering to participate in work assignments.

[Redacted]

Liberación Voluntaria de Trabajo

Como un detenido antes de prueba o sin sentencia, yo entiendo que no puedo ser obligado a trabajar en ninguna área nada más que sea la limpieza de mi propia celda y el área común. Me gustaría ser voluntario para asignaciones de trabajo junto a mi tarea de limpieza de mi celda. Yo estaría trabajando con presos que están cumpliendo su sentencia por convicciones de crimen. Por mi firma abajo yo de voluntario quiero participar en asignaciones de trabajo.

[Redacted]

Discharge Checklist:

1. Verification of identity of inmate resident
2. Return of all inmate resident personal property (if any)
3. Completion of all pending actions with Corecivic
4. Property of Corecivic
5. Assignment of Corecivic
6. Discharge of inmate/resident funds (if any)

[Redacted]

Discharging Officer (Signature)

[Redacted]

Inmate/Resident (Signature)/Firma del Detenido

Verification of proper release authority
Return of all Corecivic issue Property
Inmate/resident received all release paperwork
Other: COMMUNITY RELEASE

[Redacted]

Date/Fecha

Revised: 11/20/2005

Page 4 of 16

2022-ICLI-00045-12463
RECEIVING CHECKLIST:

- Verification of Commitment Papers
- Searched at intake
- Offered Opportunity to Shower in Intake
- Issue of Clean, laundered clothing
- Disposition of all monies at intake
- Medical, dental, mental health screening
- Assignment of Corecivic Number
- Personal Property Inventarioed (copy given to inmate/resident)
- PREA Pamphlet and SAAP Pamphlet

L TCF DETAINEE HANDBOOK ACKNOWLEDGMENT: BY SIGNING BELOW, I ACKNOWLEDGE RECEIVING A TCF DETAINEE HANDBOOK ON THIS DATE.

LACUSE DE RECIIBO MANUAL POR DETENIDOS: POR MI FIRMA, YO RECIBO UN MANUAL POR DETENIDOS EN ESTE DIA.

NATIONAL DETAINEE HANDBOOK ACKNOWLEDGMENT: BY SIGNING BELOW, I ACKNOWLEDGE RECEIVING A NATIONAL DETAINEE HANDBOOK

Date/Fecha

VOLUNTARY WORK RELEASE
As a pre-trial or un-sentenced detainee, I understand that I may not be compelled to work other than to perform housekeeping tasks in my own cell and the community living area. I would like to volunteer for work assignments in addition to my housekeeping tasks. I am aware that I will be working with inmates/residents who are serving a sentence for convictions of crimes. By signing below I am volunteering to participate in work assignments.

LIBERACION VOLUNTARIA DE TRABAJO
Como un detenido antes de prueba o sin sentencia, yo entiendo que no puedo ser obligado a trabajar en ninguna area nada mas que sea la limpieza de mi propia celda y el área comun. Me gustaria ser voluntario para asignaciones de trabajo junto de mi tarea de limpieza de mi celda. Yo estara trabajando con presos que estan cumpliendo su sentencia por convicciones de crimen. Por mi firma abajo yo de voluntario quiero participar en asignaciones de trabajo.

Date/Fecha

DISCHARGE CHECKLIST:

- Verification of identity of inmate resident
- Return of all inmate resident personal property (if any)
- Completion of all pending actions with Corecivic
- Return of all inmate/resident funds (if any)

Inmate/Resident (Signature)

Date/Fecha

Property of Corecivic

Revised: 11/29/2005
RECEIVING CHECKLIST:

- Verification of Commitment Papers
- Searched at intake
- Offered Opportunity to Shower in Intake
- Issue of Clean, laundered clothing
- Disposition of all money at intake
- Medical, dental, mental health screening
- Assignment of Corecivic Number
- Personal Property inventoried (copy given to inmate/resident)
- PREA Pamphlet and SAAPI Pamphlet

I, [INMATE/RESIDENT NAME], hereby acknowledge receiving the above.

INMATE/RESIDENT Signature

Receiving Officer (Signature)

Date/Fecha: 11/18/2021

VOLUNTARY WORK RELEASE

As a pre-trial or un-sentenced detainee, I understand that I may not be compelled to work other than to perform housekeeping tasks in my own cell and the community living area. I would like to volunteer for work assignments in addition to my housekeeping tasks. I am aware that I will be working with inmates/residents who are serving a sentence for convictions of crimes. By signing below I am volunteering to participate in work assignments.

LIBERACION VOLUNTARIA DE TRABAJO

Como un detenido antes de prueba o sin sentencia, yo entiendo que no puedo ser obligado a trabajar en ninguna area nada mas que sea la limpieza de mi propia celda y el area comun. Me gustaria ser voluntario para asignaciones de trabajo junto de mi tarea de limpieza de mi celda. Yo estar trabajo con presos que estan cumpliendo su sentencia por convicciones de crimenes. Por mi firma en abajo, quiero participar en asignaciones de trabajo.

INMATE/RESIDENT Signature

Date/Fecha: 11/18/2021

DISCHARGE CHECKLIST:

- Verification of identity of inmate resident
- Return of inmate resident personal property (if any)
- Completion of all pending actions with Corecivic
- Return of all inmate/resident funds (if any)
- Verification of proper release authority
- Return of all Corecivic issued property
- Inmate/resident received all release paperwork
- Other: COMMUNITY RELEASE PREVIEW

Discharging Officer (Signature)

INMATE/RESIDENT Signature

Date/Fecha: 11/18/2021

Property of Corecivic

Revised: 11/29/2005
**RECEIVING CHECKLIST:**

- Verification of Commitment Papers
- Searched at intake
- Offered Opportunity to Shower in Intake
- Issue of Clean, laundered clothing
- Disposition of all monies at intake
- Medical, dental, mental health screening
- Assignment of Corecivic Number
- Personal Property inventoried (copy given to inmate/resident)
- PREA Pamphlet and SAAPI Pamphlet

**TDCJ DETAINEE HANDBOOK ACKNOWLEDGMENT:** BY SIGNING BELOW, I ACKNOWLEDGE RECEIVING A TDCJ DETAINEE HANDBOOK ON THIS DATE.

**NATIONAL DETAINEE HANDBOOK ACKNOWLEDGMENT:** BY SIGNING BELOW, I ACKNOWLEDGE RECEIVING A NATIONAL DETAINEE HANDBOOK ON THIS DATE.

[Signature]  
11-17-21

**Date/Fecha**

**REceiving Officer (Sign):**

---

**VOLUNTARY WORK RELEASE**

As a pre-trial or un-sentenced detainee, I understand that I may not be compelled to work other than to perform housekeeping tasks in my own cell and the community living area. I would like to volunteer for work assignments in addition to my housekeeping tasks. I am aware that I will be working with inmates/residents who are serving a sentence for convictions of crimes. By signing below I am volunteering to participate in work assignments.

**LIBERACION VOLUNTARIA DE TRABAJO**

Como un detenido antes de prueba o sin sentencia, yo entiendo que no puedo ser obligado a trabajar en ninguna área nada más que sea la limpieza de mi propia celda y el área común. Me gustaría ser voluntario para asignaciones de trabajo junto a mí tarea de limpieza de mi celda. Yo estaría trabajando con presos que estén cumpliendo su sentencia por convicciones de crímenes. Por mi voluntarismo quiero participar en asignaciones de trabajo.

[Signature]  
11/17/2021

**Date/Fecha**

---

**DISCHARGE CHECKLIST:**

- Verification of identity of inmate resident
- Return of All inmate resident personal property (if any)
- Completion of all pending actions with Corecivic
- Return of all inmate/resident funds (if any)

[Signature]  
1/9/21

**Date/Fecha**

---

**Property of Corecivic**

Revised: 11/29/2005

---

**Page 4 of 10**
TORRANCE COUNTY DETENTION CENTER
RECEIVING & DISCHARGE CHECKLIST

Inmate/Resident Name: ____________________________
Nombre del Detenido: ____________________________

Inmate/Resident #: ________________________________
Numero del Detenido: ________________________________

RECEIVING CHECKLIST:

☐ Verification of Commitment Papers
☐ Search at intake
☐ Offered Opportunity to Shower in Intake
☐ Issue of Clean, laundered clothing
☐ Disposition of all monies at intake
☐ Medical, dental, mental health screening
☐ Assignment of Coreivic Number
☐ Personal Property Inventoryed (copy given to inmate/resident)
☐ PREA Pamphlet and SAAPI Pamphlet

☐ Assignment to a Housing unit
☐ Photograph/I.D. Card
☐ Classification Booking Sheet
☐ Hygiene items Issued
☐ Explanation of Mail and Visiting Procedures
☐ Issue of Lock (if applicable)
☐ Assignment of Coreivic Number
☐ Telephone Calls
☐ Other: ________________________________

☐ TCDF DETAINEE HANDBOOK ACKNOWLEDGMENT: BY SIGNING BELOW, I ACKNOWLEDGE RECEIVING A TCDF DETAINEE HANDBOOK ON THIS DATE.
☐ LACUSE DE RECIÉN MANUAL POR DETENIDOS: POR MI FIRMA, YO RECIBO UN MANUAL POR DETENIDOS EN ESTE DÍA.
☐ LACUSE DE NACIONAL DETAINEE HANDBOOK ACKNOWLEDGMENT: BY SIGNING BELOW, I ACKNOWLEDGE RECEIVING A NATIONAL DETAINEE HANDBOOK ON THIS DATE.

Inmate/Resident Signature/Firma del Detenido

Date/Fecha: ____________________________

VOLUNTARY WORK RELEASE

As a pre-trial or un-sentenced detainee, I understand that I may not be compelled to work other than to perform housekeeping tasks in my own cell and the community living area. I would like to volunteer for work assignments in addition to my housekeeping tasks. I am aware that I will be working with inmates/residents who are serving a sentence for convictions of crimes. By signing below I am volunteering to participate in work assignments.

LIBERACIÓN VOLUNTARIA DE TRABAJO

Como un detenido antes de prueba o sin sentencia, yo entiendo que no puedo ser obligado a trabajar en ninguna área nada más que sea la limpieza de mi propia celda y el área común. Me gustaría ser voluntario para asignaciones de trabajo junto a mi tarea de limpieza de mi celda. Yo estaría trabajando con presos que están cumpliendo su sentencia por convicciones de crimen. Por mi firma abajo yo de voluntario quiero participar en asignaciones de trabajo.

Inmate/Resident Signature/Firma del Detenido

Date/Fecha: ____________________________

DISCHARGE CHECKLIST:

☐ ✓ Verification of identity of inmate resident
☐ ✓ Return of all inmate resident personal property (if any)
☐ ✓ Completion of all pending actions with Coreivic
☐ ✓ Return of all inmate/resident funds (if any)

Discharging Officer (Signature)

Date/Fecha: ____________________________

Inmate/Resident Signature/Firma del Detenido

Date/Fecha: ____________________________

Property of Coreivic

Revised: 11/29/2005
TORRANCE COUNTY DETENTION CENTER  
RECEIVING & DISCHARGE CHECKLIST  

Inmate/Resident Name:  
Nombre del Detenido:  

Inmate/Resident #:  
Numero del Detenido:  

RECEIVING CHECKLIST:  

- Verification of Commitment Papers  
- Searched at intake  
- Offered Opportunity to Shower in Intake  
- Issue of Clean, laundered clothing  
- Disposition of all monies at intake  
- Medical, dental, mental health screening  
- Assignment of Corevic Number  
- Personal Property Inventoried (copy given to inmate/resident)  
- PREA Pamphlet and SAAPI Pamphlet  

- Assignment to a Housing unit  
- Photograph of, M.D. Card  
- Classification Booking Sheet  
- Hygiene items Issued  
- Explanation of Mail and Visiting Procedures  
- Issue of Lock (if applicable)  
- Assignment of Corevic Number  
- Telephone Calls  
- Other:  

TCDF DETAINEE HANDBOOK ACKNOWLEDGMENT: BY SIGNING BELOW, I ACKNOWLEDGE RECEIVING A TCDF DETAINEE HANDBOOK ON THIS DATE.  

DATE OF RECEIPT MANUAL POR DETENIDOS: POR MI FIRMA YO RECIBO UN MANUAL POR DETENIDOS EN ESTE DIA.  

DATE OF RECEIVING A NATIONAL DETAINEE HANDBOOK ON THIS DATE:  

Inmate/Resident/Firma del Detenido:  

Receiving Officer (Signature):  

VOLUNTARY WORK RELEASE  
As a pre-trial or un-sentenced detainee, I understand that I may not be compelled to work other than to perform housekeeping tasks in my own cell and the community living area. I would like to volunteer for work assignments in addition to my housekeeping tasks. I am aware that I will be working with inmates/residents who are serving a sentence for convictions of crimes. By signing below I am volunteering to participate in work assignments.  

LIBERACION VOLUNTARIA DE TRABAJO  
Como un detenido antes de prueba o sin sentencia, yo entiendo que no puedo ser obligado a trabajar en ninguna área nada más que sea la limpieza de mi propia celda y el área comunitaria. Me gustaría ser voluntario para asignaciones de trabajo junto a mi tarea de limpieza de mi celda. Yo estaría trabajando con prisiones que están cumpliendo su sentencia por convicciones de crimen. Por mi firma abajo yo estoy voluntaria para participar en asignaciones de trabajo.  

Date/Fecha: 11/17/2021  

DISCHARGE CHECKLIST:  

- Verification of identity of inmate resident  
- Return of all inmate resident personal property (if any)  
- Completion of all pending actions with Corevic  
- Return of all inmate/resident funds (if any)  

- Verification of proper release authority  
- Return of all Corevic issue Property  
- Inmate/resident received all release paperwork  
- Other:  

Date/Fecha:  

Property of Corevic:  

Revised: 11/29/2005
<table>
<thead>
<tr>
<th>Date</th>
<th>Time of Entry</th>
<th>Name of Carrier</th>
<th>Type of Cargo</th>
<th>Reason for Access</th>
<th>Time of Departure</th>
<th>Drivers Name</th>
<th>Ins. Checked</th>
<th>D.L. Checked</th>
<th>License Plate #</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-24-22</td>
<td>0830</td>
<td>N/A</td>
<td>Tools</td>
<td>repairs</td>
<td>1327</td>
<td>(D)(6), (D)(7)(C)</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>01-24-22</td>
<td>1130</td>
<td>N/A</td>
<td>N/A</td>
<td>moving pallets</td>
<td>1148</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>01-24-22</td>
<td>1442</td>
<td>N/A</td>
<td>N/A</td>
<td>pick up</td>
<td>N/A</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>01-25-22</td>
<td>1019</td>
<td>N/A</td>
<td>01 pallet</td>
<td>delivery</td>
<td>1034</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>01-25-22</td>
<td>1230</td>
<td>N/A</td>
<td>01 pallet</td>
<td>delivery</td>
<td>1248</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>01-25-22</td>
<td>1405</td>
<td>N/A</td>
<td>02 Stacks</td>
<td>delivery</td>
<td>1419</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>01-26-22</td>
<td>0803</td>
<td>O2 passengers</td>
<td>Pick Up</td>
<td>0827</td>
<td></td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>01-26-22</td>
<td>1005</td>
<td>O2 passengers</td>
<td>Pick Up</td>
<td>1030</td>
<td></td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>01-26-22</td>
<td>1208</td>
<td>O2 passengers</td>
<td>Pick Up</td>
<td>1226</td>
<td></td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>01-27-22</td>
<td>0838</td>
<td>O2 passengers</td>
<td>Pick Up</td>
<td>0902</td>
<td></td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>01-27-22</td>
<td>0902</td>
<td>O4 pallets</td>
<td>delivery</td>
<td>0921</td>
<td></td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>01-28-22</td>
<td>0745</td>
<td>Pick Up</td>
<td>00 passengers</td>
<td></td>
<td>0745</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>01-28-22</td>
<td>0804</td>
<td>00 passengers</td>
<td>Pick Up</td>
<td>0840</td>
<td></td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>01-29-22</td>
<td>1103</td>
<td>00 passengers</td>
<td>Pick Up</td>
<td>1130</td>
<td></td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
</tbody>
</table>

To be turned into the Chief of Security Clerk Sunday's or when completely filled out.
<table>
<thead>
<tr>
<th>Date</th>
<th>Time of Entry</th>
<th>Name of Carrier</th>
<th>Type of Cargo</th>
<th>Reason for Access</th>
<th>Time of Departure</th>
<th>Ins. Checked</th>
<th>D.L. Checked</th>
<th>License Plate #</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-28-22</td>
<td>1:33</td>
<td></td>
<td>01 pallet</td>
<td>delivery</td>
<td>11:51</td>
<td></td>
<td></td>
<td>(b)(6), (b)(7)(C)</td>
</tr>
<tr>
<td>01-28-22</td>
<td>1:34</td>
<td></td>
<td>16 passengers</td>
<td>drop off</td>
<td>13:08</td>
<td></td>
<td></td>
<td>(b)(6), (b)(7)(C)</td>
</tr>
<tr>
<td>01-28-22</td>
<td>1:32</td>
<td></td>
<td>01 pallet</td>
<td>delivery</td>
<td>13:26</td>
<td></td>
<td></td>
<td>(b)(6), (b)(7)(C)</td>
</tr>
<tr>
<td>01-31-22</td>
<td>0:28</td>
<td></td>
<td>00 passengers</td>
<td>pick up</td>
<td>08:00</td>
<td></td>
<td></td>
<td>(b)(6), (b)(7)(C)</td>
</tr>
<tr>
<td>01-31-22</td>
<td>1:55</td>
<td></td>
<td>02 pallets</td>
<td>delivery</td>
<td>12:22</td>
<td></td>
<td></td>
<td>(b)(6), (b)(7)(C)</td>
</tr>
<tr>
<td>02-01-22</td>
<td>08:37</td>
<td></td>
<td>01 pallet</td>
<td>delivery</td>
<td>08:50</td>
<td></td>
<td></td>
<td>(b)(6), (b)(7)(C)</td>
</tr>
<tr>
<td>02-01-22</td>
<td>08:54</td>
<td></td>
<td>01 passenger</td>
<td>drop off</td>
<td>09:27</td>
<td></td>
<td></td>
<td>(b)(6), (b)(7)(C)</td>
</tr>
<tr>
<td>02-01-22</td>
<td>1:16</td>
<td></td>
<td>01 pallet</td>
<td>delivery</td>
<td>10:24</td>
<td></td>
<td></td>
<td>(b)(6), (b)(7)(C)</td>
</tr>
<tr>
<td>02-02-22</td>
<td>12:22</td>
<td></td>
<td>00 passengers</td>
<td>pick up</td>
<td>12:49</td>
<td></td>
<td></td>
<td>(b)(6), (b)(7)(C)</td>
</tr>
<tr>
<td>02-04-22</td>
<td>N/A</td>
<td></td>
<td>00 passengers</td>
<td>pick up</td>
<td>08:23</td>
<td></td>
<td></td>
<td>(b)(6), (b)(7)(C)</td>
</tr>
<tr>
<td>02-04-22</td>
<td>N/A</td>
<td></td>
<td>00 passengers</td>
<td>pick up</td>
<td>08:23</td>
<td></td>
<td></td>
<td>(b)(6), (b)(7)(C)</td>
</tr>
<tr>
<td>02-06-22</td>
<td>10:10</td>
<td></td>
<td>01 pallet</td>
<td>delivery</td>
<td>10:17</td>
<td></td>
<td></td>
<td>(b)(6), (b)(7)(C)</td>
</tr>
<tr>
<td>02-06-22</td>
<td>13:50</td>
<td></td>
<td>replacement compactor</td>
<td>delivery</td>
<td>14:10</td>
<td></td>
<td></td>
<td>(b)(6), (b)(7)(C)</td>
</tr>
<tr>
<td>02-06-22</td>
<td>09:59</td>
<td></td>
<td>00 passenger</td>
<td>pick up</td>
<td>10:34</td>
<td></td>
<td></td>
<td>(b)(6), (b)(7)(C)</td>
</tr>
</tbody>
</table>

To be turned into the Chief of Security Clerk Sunday's or when completely filled out.
Check all TCDF post orders. Make sure they have:

- Post Order Appendix
- Section I – POST ORDER (COMPANY OR FACILITY SPECIFIC);
- Section II – SPECIAL INSTRUCTIONS, IF ANY, RELATING TO SPECIFIC POST;
- Section III – GENERAL POST ORDER;
- Section IV – OPERATIONS MEMORANDUMS, AS APPLICABLE (E.G. NEW OR REVISED OPERATIONAL PROCEDURES SPECIFIC TO THE FACILITY);
- Section V – STANDARDS, POLICIES, AND FACILITY PRACTICES RELEVANT TO THE POST; AND
- Section VI – ACKNOWLEDGEMENT DOCUMENT.

Post Orders to check

- Shift Supervisor
- Assistant Shift Supervisor
- Senior Correctional Officer - Transportation
- Central Control
- Food Service
- Front Entrance
- Housing Unit Officer 1
- Housing Unit Officer 2
- Housing Unit Officer 3
- Housing Unit Officer 4
- Housing Unit Officer 5
- Housing Unit Officer 6
- Housing Unit Officer 7
- Housing Unit Officer 8
- Housing Control Room 1
- Housing Control Room 2
- Housing Control Room 3
- Housing Control Room 4
- Housing Control Room 5
- Housing Control Room 6
- Housing Control Room 7
- Housing Control Room 8
- Laundry
- Off-Site Hospital
- Off-Site Hospital
- Perimeter Patrol
- Recreation
- Transportation Officer
- Vehicle Gate
- Suicide Watch/Close Observation

Restricted Housing Unit
Dry Cell Watch
Video Teleconference Officer
Armory Key Control
Medical
Property
Intake-Release
Utility, Search and Escort
Visitation Officer
Work Detail

Signature: [Signature]
Date: 07-07-22
Check all TCDF post orders.
Make sure they have:

Post Order Appendix

Section I – POST ORDER (COMPANY OR FACILITY SPECIFIC);

Section II – SPECIAL INSTRUCTIONS, IF ANY, RELATING TO SPECIFIC POST;

Section III – GENERAL POST ORDER;

Section IV – OPERATIONS MEMORANDUMS, AS APPLICABLE (E.G. NEW OR REVISED
OPERATIONAL PROCEDURES SPECIFIC TO THE FACILITY);

Section V – STANDARDS, POLICIES, AND FACILITY PRACTICES RELEVANT TO THE POST; AND
Section VI – ACKNOWLEDGEMENT DOCUMENT.

Post Orders to check

Shift Supervisor
Assistant Shift Supervisor
Senior Correctional Officer - Transportation
Central Control
Food Service
Front Entrance
Housing Unit Officer 1
Housing Unit Officer 2
Housing Unit Officer 3
Housing Unit Officer 4
Housing Unit Officer 5
Housing Unit Officer 6
Housing Unit Officer 7
Housing Unit Officer 8
Housing Control Room 1
Housing Control Room 2
Housing Control Room 3
Housing Control Room 4
Housing Control Room 5
Housing Control Room 6
Housing Control Room 7
Housing Control Room 8
Laundry
Off-Site Hospital
Off-Site Hospital
Perimeter Patrol
Recreation
Transportation Officer
Vehicle Gate
Suicide Watch/Close Observation

Restricted Housing Unit
Dry Cell Watch
Video Teleconference Officer
Armory Key Control
Medical
Property
Intake-Release
Utility, Search and Escort
Visitation Officer
Work Detail

Signature: ____________________________
Signature: ____________________________
Date: 7-7-22
From: [Redacted]
Sent: Thursday, March 3, 2022 12:34 PM
To: Torrance County DF Everyone
Subject: Post Order requirement
Attachments: 2.9 Post Orders.pdf

All,

All post orders must contain the Warden's signature and date on the last page of each section. All post orders must contain the Warden's initials and date on all other pages of the post order.

If there is a need to replace a post order or section of a post order, please contact the Chief of Security to obtain a signed/dated copy.

Thank you,
[Redacted]

QAM, TCDF
Office: 505-384-[Redacted]
Check all TCDF post orders.
Make sure they have:

- Post Order Appendix
- Section I – POST ORDER (COMPANY OR FACILITY SPECIFIC);
- Section II – SPECIAL INSTRUCTIONS, IF ANY, RELATING TO SPECIFIC POST;
- Section III – GENERAL POST ORDER;
- Section IV – OPERATIONS MEMORANDUMS, AS APPLICABLE (E.G. NEW OR REVISED OPERATIONAL PROCEDURES SPECIFIC TO THE FACILITY);
- Section V – STANDARDS, POLICIES, AND FACILITY PRACTICES RELEVANT TO THE POST; AND
- Section VI – ACKNOWLEDGEMENT DOCUMENT.

Post Orders to check

- Shift Supervisor
- Assistant Shift Supervisor
- Senior Correctional Officer - Transportation
- Central Control
- Food Service
- Front Entrance
- Housing Unit Officer 1
- Housing Unit Officer 2
- Housing Unit Officer 3
- Housing Unit Officer 4
- Housing Unit Officer 5
- Housing Unit Officer 6
- Housing Unit Officer 7
- Housing Unit Officer 8
- Housing Control Room 1
- Housing Control Room 2
- Housing Control Room 3
- Housing Control Room 4
- Housing Control Room 5
- Housing Control Room 6
- Housing Control Room 7
- Housing Control Room 8
- Laundry
- Off-Site Hospital
- Off-Site Hospital
- Perimeter Patrol
- Recreation
- Transportation Officer
- Vehicle Gate
- Suicide Watch/Close Observation

Restricted Housing Unit
Dry Cell Watch
Video Teleconference Officer
Armory Key Control
Medical
Property
Intake-Release
Utility, Search and Escort
Visitation Officer
Work Detail

Signature: __________________________
Date: 07-22-22
Check all TCDF post orders.

Make sure they have:

- Post Order Appendix

Section I – POST ORDER (COMPANY OR FACILITY SPECIFIC);

Section II – SPECIAL INSTRUCTIONS, IF ANY, RELATING TO SPECIFIC POST;

Section III – GENERAL POST ORDER;

Section IV – OPERATIONS MEMORANDUMS, AS APPLICABLE (E.G. NEW OR REVISED OPERATIONAL PROCEDURES SPECIFIC TO THE FACILITY);

Section V – STANDARDS, POLICIES, AND FACILITY PRACTICES RELEVANT TO THE POST; AND

Section VI – ACKNOWLEDGEMENT DOCUMENT.

Post Orders to check

<table>
<thead>
<tr>
<th>Shift Supervisor</th>
<th>Restricted Housing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assistant Shift Supervisor</td>
<td>Dry Cell Watch</td>
</tr>
<tr>
<td>Senior Correctional Officer - Transportation</td>
<td>Video Teleconference Officer</td>
</tr>
<tr>
<td>Central Control</td>
<td>Armory Key Control</td>
</tr>
<tr>
<td>Food Service</td>
<td>Medical</td>
</tr>
<tr>
<td>Front Entrance</td>
<td>Property</td>
</tr>
<tr>
<td>Housing Unit Officer 1</td>
<td>Intake-Release</td>
</tr>
<tr>
<td>Housing Unit Officer 2</td>
<td>Utility, Search and Escort</td>
</tr>
<tr>
<td>Housing Unit Officer 3</td>
<td>Visitation Officer</td>
</tr>
<tr>
<td>Housing Unit Officer 4</td>
<td>Work Detail</td>
</tr>
<tr>
<td>Housing Unit Officer 5</td>
<td></td>
</tr>
<tr>
<td>Housing Unit Officer 6</td>
<td></td>
</tr>
<tr>
<td>Housing Unit Officer 7</td>
<td></td>
</tr>
<tr>
<td>Housing Unit Officer 8</td>
<td></td>
</tr>
<tr>
<td>Housing Control Room 1</td>
<td></td>
</tr>
<tr>
<td>Housing Control Room 2</td>
<td></td>
</tr>
<tr>
<td>Housing Control Room 3</td>
<td></td>
</tr>
<tr>
<td>Housing Control Room 4</td>
<td></td>
</tr>
<tr>
<td>Housing Control Room 5</td>
<td></td>
</tr>
<tr>
<td>Housing Control Room 6</td>
<td></td>
</tr>
<tr>
<td>Housing Control Room 7</td>
<td></td>
</tr>
<tr>
<td>Housing Control Room 8</td>
<td></td>
</tr>
<tr>
<td>Laundry</td>
<td></td>
</tr>
<tr>
<td>Off-Site Hospital</td>
<td></td>
</tr>
<tr>
<td>Off-Site Hospital</td>
<td></td>
</tr>
<tr>
<td>Perimeter Patrol</td>
<td></td>
</tr>
<tr>
<td>Recreation</td>
<td></td>
</tr>
<tr>
<td>Transportation Officer</td>
<td></td>
</tr>
<tr>
<td>Vehicle Gate</td>
<td></td>
</tr>
<tr>
<td>Suicide Watch/Close Observation</td>
<td></td>
</tr>
</tbody>
</table>

Signature: ____________________________

Signature: ____________________________

Date: 7-7-22
Check all TCDF post orders.
Make sure they have:

- Post Order Appendix
- Section I – POST ORDER (COMPANY OR FACILITY SPECIFIC);
- Section II – SPECIAL INSTRUCTIONS, IF ANY, RELATING TO SPECIFIC POST;
- Section III – GENERAL POST ORDER;
- Section IV – OPERATIONS MEMORANDUMS, AS APPLICABLE (E.G. NEW OR REVISED OPERATIONAL PROCEDURES SPECIFIC TO THE FACILITY);
- Section V – STANDARDS, POLICIES, AND FACILITY PRACTICES RELEVANT TO THE POST; AND
- Section VI – ACKNOWLEDGEMENT DOCUMENT.

**Post Orders to check**

- Shift Supervisor
- Assistant Shift Supervisor
- Senior Correctional Officer - Transportation
- Central Control
- Food Service
- Front Entrance
- Housing Unit Officer 1
- Housing Unit Officer 2
- Housing Unit Officer 3
- Housing Unit Officer 4
- Housing Unit Officer 5
- Housing Unit Officer 6
- Housing Unit Officer 7
- Housing Unit Officer 8
- Housing Control Room 1
- Housing Control Room 2
- Housing Control Room 3
- Housing Control Room 4
- Housing Control Room 5
- Housing Control Room 6
- Housing Control Room 7
- Housing Control Room 8
- Laundry
- Off-Site Hospital
- Off-Site Hospital
- Perimeter Patrol
- Recreation
- Transportation Officer
- Vehicle Gate
- Suicide Watch/Close Observation

---

Signature: ____________________________

Signature: ____________________________

Date: 07-07-22
Check all TCDF post orders.
Make sure they have:

Post Order Appendix

Section I – POST ORDER (COMPANY OR FACILITY SPECIFIC);

Section II – SPECIAL INSTRUCTIONS, IF ANY, RELATING TO SPECIFIC POST;

Section III – GENERAL POST ORDER;

Section IV – OPERATIONS MEMORANDUMS, AS APPLICABLE (E.G. NEW OR REVISED OPERATIONAL PROCEDURES SPECIFIC TO THE FACILITY);

Section V – STANDARDS, POLICIES, AND FACILITY PRACTICES RELEVANT TO THE POST; AND

Section VI – ACKNOWLEDGEMENT DOCUMENT.

Post Orders to check

Shift Supervisor
Assistant Shift Supervisor
Senior Correctional Officer - Transportation
Central Control
Food Service
Front Entrance
Housing Unit Officer 1
Housing Unit Officer 2
Housing Unit Officer 3
Housing Unit Officer 4
Housing Unit Officer 5
Housing Unit Officer 6
Housing Unit Officer 7
Housing Unit Officer 8
Housing Control Room 1
Housing Control Room 2
Housing Control Room 3
Housing Control Room 4
Housing Control Room 5
Housing Control Room 6
Housing Control Room 7
Housing Control Room 8
Laundry
Off-Site Hospital
Off-Site Hospital
Perimeter Patrol
Recreation
Transportation Officer
Vehicle Gate
Suicide Watch/Close Observation

Restricted Housing Unit
Dry Cell Watch
Video Teleconference Officer
Armory Key Control
Medical
Property
Intake-Release
Utility, Search and Escort
Visitation Officer
Work Detail

Signature
Signature
Date: 7-22-22
2.9 Post Orders

I. Purpose and Scope

This detention standard protects detainees and staff and enhances facility security and good order by ensuring that each officer assigned to a security post knows the procedures, duties and responsibilities of that post.

This detention standard applies to the following types of facilities housing ICE/ERO detainees:

- Service Processing Centers (SPCs);
- Contract Detention Facilities (CDFs); and
- State or local government facilities used by ERO through Intergovernmental Service Agreements (IGSAs) to hold detainees for more than 72 hours.

Procedures in italics are specifically required for SPCs, CDFs, and Dedicated IGSA facilities. Non-dedicated IGSA facilities must conform to these procedures or adopt, adapt or establish alternatives, provided they meet or exceed the intent represented by these procedures.

For all types of facilities, procedures that appear in italics with a marked (***) on the page indicate optimum levels of compliance for this standard.

Various terms used in this standard may be defined in standard “7.5 Definitions.”

II. Expected Outcomes

The expected outcomes of this detention standard are as follows (specific requirements are defined in “V. Expected Practices”).

1. Each officer shall have current written post orders that specifically apply to the assigned post, with step-by-step procedures written in sufficient detail to guide an officer assigned to that post for the first time.

2. Signed and dated records shall be maintained to show that assigned officers acknowledge that they have read and understood the post orders.

3. Post orders shall be formally reviewed annually, and updated as needed.

III. Standards Affected

This detention standard replaces “Post Orders” dated 12/2/2008.

IV. References


ICE Interim Firearms Policy (2004).


V. Expected Practices

A. Post Orders Required

The facility administrator shall ensure that:

1. there are written post orders for each security post;

2. copies are available to all employees;

3. written facility policy and procedures exist, which:
   a. provide official on-duty time for officers to read the applicable post orders when assigned to a post, and
   b. ensure that officers read those applicable post orders prior to assuming their posts; and

4. as needed, post orders for non-permanent assignments (e.g., details, temporary housing units, emergencies) are developed in advance, or as soon as possible after the need arises.
B. Reading and Understanding of Post Orders

Officers and supervisors shall use the post orders to familiarize themselves with the duties for which they are responsible and to remain situationally aware of changes that occur in the operation and duties of that post. Even in the event that an officer has worked a post in the past, he/she shall assume the post orders have changed, and shall be required to read and comprehend all Post Order documents upon assuming their posts.

Supervisors shall ensure that officers understand the post orders, regardless of whether the assignment is temporary, permanent, or due to an emergency.

C. Preparation of Post Orders

The chief security officer shall supervise the preparation of all post orders, which shall:

1. be based on ICE/ERO detention standards, ICE/ERO policies and facility practices and policies; and

2. specifically state the duty hours for each post.

The facility administrator (or designee) shall:

1. approve, sign and date each Post Order on the last page of each section;

2. initial and date all other pages and

3. initial and date any subsequent changes to the Post Order.

D. Format of Post Orders

The post orders for each post shall be issued in a six-part classification folder and shall be organized as follows:

Section 1: Specific post orders, listing activities chronologically, with responsibilities clearly defined;

Section 2: Special instructions, if any, relating to the specific post;

Section 3: General post orders applicable to all posts;

Section 4: Memoranda changing or updating the post orders;

Section 5: ICE/ERO detention standards and policies and facility practices relevant to the post; and

Section 6: Review and signature form, dated and with the officer’s name printed and signed.

E. Housing Unit Post Orders

In addition to the above requirements for all post orders, housing unit post orders shall follow the event schedule format (e.g., “0515—Lights on”) and shall direct the assigned officer to maintain a unit log of pertinent information regarding detainee activity.

The shift supervisor shall visit each housing area and initial the log on each shift.

F. Armed and Perimeter-Access Post Assignments

In addition to the above requirements for all post orders, post orders for armed and perimeter-access post assignments shall describe and explain:

1. the proper care and safe handling of firearms; and

2. circumstances and conditions under which use of firearms is authorized.

Any officer assigned to an armed post must be qualified to use the firearms assigned to that post. With the exception of emergencies, armed employees shall be assigned only to transportation details, mobile patrols, or other posts inaccessible to detainees.

Post Orders for armed posts, and for posts that control access to the institution perimeter, shall clearly state that:

1. any staff member who is taken hostage is considered to be under duress; and

2. any order issued by such a person, regardless of his/her position of authority, is to be disregarded.
Specific instructions for escape attempts shall be included in the post orders for armed posts.

The post orders shall be based on and consistent with standard "2.15 Use of Force and Restraints" and the ICE/ERO Interim Use of Force Policy.

G. Maintenance of Post Orders

Post Orders shall be kept current at all times. Post orders shall be formally reviewed annually, at a minimum, and updated as needed. Should staff members become aware that any part of a folder containing post orders is out of date, or in need of repair or replacement, they shall immediately notify the shift supervisor.

1. Post Orders and logbooks are confidential and must be kept secure (under lock and key) at all times, and shall never be left in an area accessible to detainees.

2. The Chief of Security shall determine whether post orders require updates during any period between annual reviews. Any time the Chief of Security determines a page is too difficult to read, it shall be removed and replaced by a clean copy.

3. Two weeks before the annual review, supervisory staff shall solicit written suggestions for changes or additions to post orders from ICE/ERO staff, contract staff and other affected staff.

The security supervisor or equivalent shall review and comment on all suggested changes prior to submitting them to the Chief of Security for review and possible inclusion in post orders. All submissions shall be retained in a historical file for two years.

The Chief of Security shall forward the updated post orders to the facility administrator for approval.

4. Emergency changes may be made by memorandum, and immediately placed in the post orders with an immediate notification made to the union, when required. During each review, post orders must be revised to incorporate or delete emergency changes, at which time any emergency memoranda are to be removed.

5. A post orders master file shall be maintained in the office of the Chief of Security, and shall be made available to all staff. Copies of the applicable post orders may be retained at the post, only if secure from detainee access.

6. The Chief of Security shall ensure that all post orders are transcribed on a computer and that all back-up disks are properly accounted for and maintained in a secure location.
<table>
<thead>
<tr>
<th>Step</th>
<th>Instruction</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Obtain a list of patients who are in segregation</td>
</tr>
<tr>
<td>2</td>
<td>Using the number of patients on the above list at your facility as your population, choose the number of charts as directed</td>
</tr>
<tr>
<td>3</td>
<td>Review the charts based on the questions listed on the Survey Question Sheet.</td>
</tr>
<tr>
<td>4</td>
<td>Record the yes / no answers on the review tool using the number 1.</td>
</tr>
<tr>
<td>5</td>
<td>Compliance percentage for each criterion will automatically be scored on the Summary Sheet.</td>
</tr>
<tr>
<td>6</td>
<td>Overall compliance percentage will automatically be scored on the evaluation graph on the Summary Sheet. This percentage is based on the total yes answers divided by the total yes and no answers.</td>
</tr>
<tr>
<td>7</td>
<td>Only shaded areas on the Summary Sheet need to be filled in.</td>
</tr>
<tr>
<td>8</td>
<td>Any criteria indicator that does not meet the 90% Threshold, must be addressed on the Improvement Plan Sheet.</td>
</tr>
<tr>
<td>9</td>
<td>A completed copy of this study must be printed off and placed in the site's CQI Binder for discussion at the monthly CQI Meeting</td>
</tr>
</tbody>
</table>
**CQI Screen Name:** Timely Evaluation of Identified Detainees

<table>
<thead>
<tr>
<th># of Charts</th>
<th>Patient ID #</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td></td>
<td>19</td>
<td>1</td>
<td>0</td>
<td>19</td>
<td>1</td>
<td>0</td>
<td>18</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Comments: ___________
CQI Screen Name: *Timely Evaluation of Identified Detainees*

<table>
<thead>
<tr>
<th># of Charts</th>
<th>Patient ID #</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>(b)(6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

20 Totals: 0 0 0 0 0 0 0 0 0 0 0 0 0

Comments: ____________________________________________

Continent 4 - Clinical Operations Management

2022 ICLY000145 12/184
## CQI Screen Name: Timely Evaluation of Identified Detainees

<table>
<thead>
<tr>
<th># of Charts</th>
<th>Patient ID #</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Comments: ____________________________

________________________

2022 ICY 0004524685
**CQI Screen:**

**Timely Evaluation of Identified Detainees**

**Facility Name:** Torrance County Detention Center

**Reviewers Name:** [Names]

**Data Range for collection of information**

- 5/30/22
- 5/1/2022
- Data Reported (CQI Meeting)
- Data Collected and reported by [Names]

**EVALUATION**

**Screen Results**

![Screen Results Diagram]

**CRITERIA**

<table>
<thead>
<tr>
<th>CRITERIA</th>
<th>Yes</th>
<th>No</th>
<th>NA</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Did the detainee had T3 screening within 1/2 hours of arrival?</td>
<td>19</td>
<td>1</td>
<td>0</td>
<td>99%</td>
</tr>
<tr>
<td>2. Did the detainee have a PPD started or make it? If not, did they already have a TCell review?</td>
<td>19</td>
<td>1</td>
<td>0</td>
<td>99%</td>
</tr>
<tr>
<td>3. Was the PPD read within 48-72 hours?</td>
<td>18</td>
<td>1</td>
<td>1</td>
<td>99%</td>
</tr>
<tr>
<td>4.</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>13.</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>14.</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>15.</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

**Overall Compliance**

99%
## Timely Evaluation of Identified Detainees

### Improvement Plan Initiated

<table>
<thead>
<tr>
<th>Issue/Deficiency</th>
<th>Goal (targeted change)</th>
<th>Action Steps</th>
<th>Responsible Party</th>
<th>Target Date</th>
<th>Date Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Facility:  
Reviewer Name:
### Training/Activity Attendance Roster

**Training Location:** Torrance County Detention Facility  
**Curriculum:** Monthly Health Services Meeting

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>LMS Course Code</th>
<th>Instructor</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>2/14/2022</td>
<td>Training for PPD and intake and reading within 48-72 hours</td>
<td>(D)(6); (D)(7)(C)</td>
<td></td>
<td>0600  1800</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Emp #</th>
<th>Title</th>
<th>Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>RN</td>
<td>TCDF</td>
</tr>
<tr>
<td></td>
<td>RN</td>
<td>TCDF</td>
</tr>
<tr>
<td></td>
<td>RN</td>
<td>TCDF</td>
</tr>
<tr>
<td></td>
<td>RN</td>
<td>TCDF</td>
</tr>
<tr>
<td></td>
<td>RN</td>
<td>TCDF</td>
</tr>
<tr>
<td></td>
<td>RN</td>
<td>TCDF</td>
</tr>
</tbody>
</table>

**Instructor Signature (BLUE INK ONLY)**

**Instructor (Print Name)**

Signature of person entering data into LMS

Learning and Development Manager’s Signature

Comments: ____________________________
PPP'S AT INTAKE

- PPP'S must be planted at time of intake, if they refuse please leave a note in the intake form. If a chest xray needs to be ordered it must be ordered within 72 hours of the intake being completed.

- A PPD report must be pulled daily and the results entered into the chart. All ppds should be read within 48-72 hours of being planted. If it is positive need to put the order for a chest xray in allscripts and trident.
LBMC Employment Partners/CCA Medical & Dental Network Employees
EMPLOYEE INFORMATION FORM

PC Name: 8421 CCA Health Service, LLC
Contractor Only: __________

New Employee/Re-hire/Change/Termination
(Please circle one)

Facility Location: Torrance

Effective Date: 2-5-22

Company Code: __________
Employee ID: __________

Name: ___________________________ SSN or FEIN(contractor): __________
Last: ___________ First: ___________ MI

Name Change: ____________________
Maiden Name: ___________________________ New Name: ___________________________

NOTE: You must include a copy of your new social security card and submit a new W-4 if you wish to change your withholding allowance.

Address: ___________________________ Apt: ___________ City: ___________ State: ___________ Zip Code: ___________

Home Phone: ___________ E-mail Address: ___________________________ Date Birth: ___________

Marital Status (circle one): Single Married Divorced Widowed Gender (circle one): Male Female

Ethnic Group: (For EEOC-1 Reporting Only, circle one category) White Black and African American Hispanic or Latino Native Hawaiian or Other Pacific Islander Asian American Indian or Alaska Native Two or more races

Emergency Contact Name: ___________________________ Relationship: ___________ Phone Number: ___________

Employee Signature: ___________________________ Date: ___________

THIS SECTION TO BE COMPLETED BY MEMBER OF CLIENT MANAGEMENT

Department: ___________________________ Job Category/Title: ___________________________ Hire Date: ___________

Worker’s Compensation Code: ____________ Pay Frequency (circle one): Weekly Bi-weekly Semi-monthly Monthly

Effective Date (if this is a Change): ____________ Employment Status (circle one): Full-time Part-time Temporary

Pay Type (circle one): Non-Exempt Exempt

Scheduled/Standard Hours Per Week: ____________ Regular Work Days: ____________ EEO Code: ____________

Compensation Rate:
Pay 1 $ ____________ Per Hour Weekly Bi-weekly Semi-Monthly Monthly Annual

Pay 2 $ ____________ Per Hour Weekly Bi-weekly Semi-Monthly Monthly Annual

Termination Information:
Last Day Worked: 2-4-22 Reason for Separation: Retired

Separation (circle one): Voluntary Involuntary Employee is eligible for re-hire (circle one): Yes No

LBMC Employment Partners Representative: ___________________________ Date: ___________

Date: __________

2022-ICLI-00045 12490
## Training/Activity Attendance Roster

**Training Location:** TCFD

**Curriculum:** Comprehensive Health Assessment

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>LMS Course Code</th>
<th>Instructor</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>8/12</td>
<td>Comprehensive Health Assessment</td>
<td>(b)(6), (b)(7)(C)</td>
<td></td>
<td>9:00 - 10:00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Print Name</th>
<th>Signature</th>
<th>Emp #</th>
<th>Title</th>
<th>Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gerey Dupree</td>
<td></td>
<td></td>
<td>TCFD</td>
</tr>
<tr>
<td>2</td>
<td>Marilyn Niller Schultz</td>
<td></td>
<td>Physician</td>
<td>TCFD</td>
</tr>
</tbody>
</table>

Signature of person entering data into LMS

Comments:

(continue comments on reverse, if needed)
# Training/Activity Attendance Roster

**Training Location:** Torrance  

---

**Curriculum:** Health Assessment Signage to CMA required for NP's  

---

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>LMS Course Code</th>
<th>Instructor</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>5/20/21</td>
<td>Health Assessment Sign to CMA required for NP's</td>
<td>MR0 (b)(7)(C)</td>
<td>1000</td>
<td>1030</td>
</tr>
</tbody>
</table>

---

<table>
<thead>
<tr>
<th>Print Name</th>
<th>Signature</th>
<th>Emp #</th>
<th>Title</th>
<th>Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

**Signature of person entering data into LMS**

**Learning and Development Manager's Signature**

**Comments:**

---

---

---

---

---
# Training/Activity Attendance Roster

**Training Location:** Torrance County Detention Facility  
**Curriculum:** Health Assessment Signage to CMA required for NP's  
(Facility or Site)  
(Orientation, Custody, In-Service, Specialized)

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>LMS Course Code</th>
<th>Instructor</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/5/2022</td>
<td>Health Assessment Signage to CMA required for NP's</td>
<td>(b)(6), (b)(7)(C)</td>
<td>1000 - 1030</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Print Name</th>
<th>Signature</th>
<th>Emp #</th>
<th>Title</th>
<th>Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Instructor Signature (BLUE INK ONLY)  
Instructor (Print Name)

Signature of person entering data into LMS  
Learning and Development Manager's Signature

Comments:
A list of *pro bono* (free) legal organizations will be posted in all detainee housing areas and other appropriate areas. If you wish to see a representative or paralegal from that organization, it is your responsibility to contact them for an appointment.

You may contact them by mail or phone to request their assistance.

If you have questions concerning the status of your case call #222 from the housing unit phones or submit a Request form to ICE, place it in the ICE mailbox.

**GROUP RIGHTS PRESENTATIONS**

- "Know Your Rights" (KRY) / "Legal Orientation Programs" (LOP) are given by volunteer legal representatives. You will be given the opportunity to attend one of these presentations once you have been assigned housing. Attendance is voluntary and only limited by space available and security concerns of the facility.
- Presentations shall occur in the facility visitation room
- Detainees in Special Management Unit (SMU) shall be given notification of scheduled presentations
- Notification of scheduled presentations shall be posted in your unit at least 48 hours prior to occurrence. You must indicate your interest in attending by signing up on the posted sign-up sheets in your unit.
- These presentations cover general information and are not intended to give specific legal advice.

**MARRIAGE**

- Request for marriage must be sent to the Warden. If denied, the request will be reviewed by ICE officials who may uphold or reverse the Warden’s denial. You must be able to provide documentation of the following:
  1. You are legally eligible to marry in this state; and
  2. Your intended spouse has affirmed, in writing, his/her intent to marry you. (This must accompany your request.)

**CORRESPONDENCE**

- Mail will be picked up and delivered Monday – Friday (excluding holidays).
- You may send or receive mail from anyone you know personally. You may place your unsealed outgoing letters in the box in your housing unit marked “MAIL”.
- All incoming and outgoing mail must be properly addressed and include your name, Immigration A# and housing unit/bed number. If all information is not included, mail will be returned.
- Drawing on the front of your outgoing envelopes is prohibited due to postal regulations.
- "Special correspondence" is defined as written communication to or from private attorneys and other legal representatives, government attorneys, judges, courts, embassies and consulates, the President and Vice President of the United States, members of Congress, the Department of Justice, including the Office of the Inspector General, the Department of Homeland Security, U.S. Immigration and Customs Enforcement, ICE Health Services Corps, the Office of Enforcement and Removal Operations, the DHS Office for Civil Rights and Civil Liberties, and the DHS Office of the Inspector, grievance officers, outside healthcare professionals, and news media representatives. If you receive incoming special correspondence, it will be opened in your presence (unless otherwise authorized by the Warden) and inspected for physical contraband. Staff will neither read nor copy special correspondence. If you do not accept the letter or permit the letter to be inspected, in your presence, it will be returned to the sender. Correspondence will only be treated as "special" if the title and office of the sender or addressee are clearly identified on the envelope, indicating without a doubt that the correspondence is "special" as defined above.
- You will not be allowed to receive or send packages without advance arrangements and prior approval from the Chief of Security. The postage for sending packages and oversized or overweight mail will be your responsibility.

Updated August 6, 2021
Incoming and outgoing mail, with the exception of special correspondence or legal mail, shall be opened and inspected for contraband, and to intercept cash, checks, and money orders. In accordance with PBNDS 2011 2.5 Funds and Personal Property, this facility has an automated funds system and does not accept funds through the mail. Any funds received through the mail will be returned to sender.

All envelopes containing outgoing regular mail should be sent to the mailroom unsealed and ready for inspection.

All incoming and outgoing packages will be opened in your presence (unless otherwise authorized by the Warden) and inspected for contraband. Contraband includes, but is not limited to the following: materials that depict, describe or encourage activities that could lead to physical violence such as materials dealing with the subjects of self-defense or survival, weaponry, armaments, explosives, or incendiary devices; information regarding escape plots, plans to commit illegal activities or to violate ICE rules or facility guidelines; information regarding the production of drugs or alcohol; sexually explicit material; threats, extortion, obscenity, or gratuitous profanity; a code; stamps, envelopes and blank paper; phone cards; photos larger than 5x7; books and magazines (if approved, they must be received directly from the publisher); or other contraband as outlined in this handbook. A package received without prior approval is considered contraband.

Identity documents such as passports, birth certificates, etc., are contraband and may be used by ICE as evidence or as otherwise appropriate. You are not allowed to keep an identity document in your possession. You will be provided a copy of the document, certified by an ICE officer to be a true and correct copy.

When correspondence or packages are rejected, you will receive a written notice explaining the reasons for rejection.

When you are released from the facility, your incoming mail will be sent to the forwarding address you provide to the officers during your intake/release. If you do not provide a forwarding address, your mail will be endorsed, “No Forwarding Address, Return to Sender”. All such mail will be returned to the Post Office.

To obtain paper, writing implements and envelopes for your personal use, submit an Inmate/Detainee Request form to the Unit Team.

Postage stamps may be purchased from the commissary for outgoing mail. Indigent detainees will be allowed postage to mail an unlimited amount of special correspondence or legal mail, within reason; three pieces of general correspondence; and/or packages deemed necessary by ICE. **To be considered indigent you must have maintained a balance of $15.00 or less on your CoreCivic/TCDF account for the past 10 days.**

**NOTARY, COPIES AND RELEASE OF FUNDS**

- **NOTARY** - Notary assistance may be obtained by sending a request to the Unit Team. You will be contacted as soon as possible to accomplish the task.

- **COPIES** - Request for copies of legal material should be forwarded to the Unit Team.

- **RELEASE OF FUNDS** - Request for Release of Funds Form (2-5A) should be submitted to the Unit Management Team for approval. You will not be allowed to send or transfer money from your account to other detainees account within CoreCivic/TCDF.

**DETAINEE DISCIPLINE**

In a facility where many individuals live together in a relatively small amount of space, it is extremely important that order and discipline be maintained. Discipline and order are not only for the benefit of the staff, but also for the safety and welfare of you and all other detainees. While many problems can be solved informally through counseling, disciplinary measures must occasionally be imposed.

Disciplinary Severity Scale and Prohibited Acts:

**Appendix 3.1.A: Offense Categories**

Updated August 6, 2021
• A list of pro bono (free) legal organizations will be posted in all detainee housing areas and other appropriate areas. If you wish to see a representative or paralegal from that organization, it is your responsibility to contact them for an appointment.
• You may contact them by mail or phone to request their assistance.
• If you have questions concerning the status of your case call #222 from the housing unit phones or submit a Request form to ICE, place it in the ICE mailbox.

GROUP RIGHTS PRESENTATIONS
• “Know Your Rights” (KYR) / "Legal Orientation Programs" (LOP) are given by volunteer legal representatives. You will be given the opportunity to attend one of these presentations once you have been assigned housing. Attendance is voluntary and only limited by space available and security concerns of the facility.
• Presentations shall occur in the facility visitation room
• Detainees in Special Management Unit (SMU) shall be given notification of scheduled presentations
• Notification of scheduled presentations shall be posted in your unit at least 48 hours prior to occurrence. You must indicate your interest in attending by signing up on the posted sign-up sheets in your unit.
• These presentations cover general information and are not intended to give specific legal advice.

MARRIAGE
• Request for marriage must be sent to the Warden. If denied, the request will be reviewed by ICE officials who may uphold or reverse the Warden’s denial. You must be able to provide documentation of the following:
  1. You are legally eligible to marry in this state; and
  2. Your intended spouse has affirmed, in writing, his/her intent to marry you. (This must accompany your request.)

CORRESPONDENCE
• Mail will be picked up and delivered Monday – Friday (excluding holidays).
• You may send or receive mail from anyone you know personally. You may place your unsealed outgoing letters in the box in your housing unit marked "MAIL".
• All incoming and outgoing mail must be properly addressed and include your name, Immigration A# and housing unit/bed number. If all information is not included, mail will be returned.
• Drawing on the front of your outgoing envelopes is prohibited due to postal regulations.
• “Special correspondence” is defined as written communication to or from private attorneys and other legal representatives, government attorneys, judges, courts, embassies and consulates, the President and Vice President of the United States, members of Congress, the Department of Justice, including the Office of the Inspector General, the Department of Homeland Security, U.S. Immigration and Customs Enforcement, ICE Health Services Corps, the Office of Enforcement and Removal Operations, the DHS Office for Civil Rights and Civil Liberties, and the DHS Office of the Inspector, grievance officers, outside healthcare professionals, and news media representatives. If you receive incoming special correspondence, it will be opened in your presence (unless otherwise authorized by the Warden) and inspected for physical contraband. Staff will neither read nor copy special correspondence. If you do not accept the letter or permit the letter to be inspected, in your presence, it will be returned to the sender. Correspondence will only be treated as “special” if the title and office of the sender or addressee are clearly identified on the envelope, indicating without a doubt that the correspondence is “special” as defined above.
• You will not be allowed to receive or send packages without advance arrangements and prior approval from the Chief of Security. The postage for sending packages and oversized or overweight mail will be your responsibility.

Updated August 6, 2021
incoming and outgoing mail, with the exception of special correspondence or legal mail, shall be opened and inspected for contraband, and to intercept cash, checks, and money orders. in accordance with pbnid 2011 2.5 funds and personal property, this facility has an automated funds system and does not accept funds through the mail. any funds received through the mail will be returned to sender.

all envelopes containing outgoing regular mail should be sent to the mailroom unsealed and ready for inspection.

all incoming and outgoing packages will be opened in your presence (unless otherwise authorized by the warden) and inspected for contraband. contraband includes, but is not limited to the following: materials that depict, describe or encourage activities that could lead to physical violence such as materials dealing with the subjects of self-defense or survival, weapons, ammaments, explosives, or incendiary devices; information regarding escape plots, plans to commit illegal activities or to violate ice rules or facility guidelines; information regarding the production of drugs or alcohol; sexually explicit material; threats, extortion, obscenity, or gratuitous profanity; a code; stamps, envelopes and blank paper; phone cards; photos larger than 5x7; books and magazines (if approved, they must be received directly from the publisher); or other contraband as outlined in this handbook. a package received without prior approval is considered contraband.

identity documents such as passports, birth certificates, etc., are contraband and may be used by ice as evidence or as otherwise appropriate. you are not allowed to keep an identity document in your possession. you will be provided a copy of the document, certified by an ice officer to be a true and correct copy.

when correspondence or packages are rejected, you will receive a written notice explaining the reasons for rejection.

when you are released from the facility, your incoming mail will be sent to the forwarding address you provide to the officers during your intake/release. if you do not provide a forwarding address, your mail will be endorsed, “no forwarding address, return to sender”. all such mail will be returned to the post office.

to obtain paper, writing implements and envelopes for your personal use, submit an inmate/detainee request form to the unit team.

postage stamps may be purchased from the commissary for outgoing mail. indigent detainees will be allowed postage to mail an unlimited amount of special correspondence or legal mail, within reason; three pieces of general correspondence; and/or packages deemed necessary by ice. to be considered indigent you must have maintained a balance of $15.00 or less on your corecivic/tcdf account for the past 10 days.

notary, copies and release of funds

notary - notary assistance may be obtained by sending a request to the unit team. you will be contacted as soon as possible to accomplish the task.

copies - request for copies of legal material should be forwarded to the unit team.

release of funds - request for release of funds form (2-sa) should be submitted to the unit management team for approval. you will not be allowed to send or transfer money from your account to other detainees account within corecivic/tcdf.

detainee discipline

in a facility where many individuals live together in a relatively small amount of space, it is extremely important that order and discipline be maintained. discipline and order are not only for the benefit of the staff, but also for the safety and welfare of you and all other detainees. while many problems can be solved informally through counseling, disciplinary measures must occasionally be imposed.

disciplinary severity scale and prohibited acts:

appendix 3.1.a: offense categories

updated august 6, 2021
TCDF
DETAINEE HANDBOOK

Updated March 8, 2022
TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction/Mission</td>
<td>3</td>
</tr>
<tr>
<td>Detainees with Disabilities</td>
<td>3</td>
</tr>
<tr>
<td>Purpose</td>
<td>3</td>
</tr>
<tr>
<td>Basic Detainee Responsibilities</td>
<td>3</td>
</tr>
<tr>
<td>Facility Rules</td>
<td>4</td>
</tr>
<tr>
<td>Non-Smoking Policy</td>
<td>5</td>
</tr>
<tr>
<td>PREA/Victim Advocate (SAAPI)</td>
<td>5</td>
</tr>
<tr>
<td>Initial Admission</td>
<td>6</td>
</tr>
<tr>
<td>Funds and Personal Property</td>
<td>7</td>
</tr>
<tr>
<td>Finances</td>
<td>8</td>
</tr>
<tr>
<td>Classification</td>
<td>9</td>
</tr>
<tr>
<td>Laundry</td>
<td>11</td>
</tr>
<tr>
<td>Clothing</td>
<td>12</td>
</tr>
<tr>
<td>Personal Hygiene</td>
<td>12</td>
</tr>
<tr>
<td>Barbering Services</td>
<td>12</td>
</tr>
<tr>
<td>Dress Code</td>
<td>13</td>
</tr>
<tr>
<td>Inspection of Persons/Property</td>
<td>13</td>
</tr>
<tr>
<td>Contraband</td>
<td>14</td>
</tr>
<tr>
<td>Living Conditions</td>
<td>15</td>
</tr>
<tr>
<td>Sleeping Area/Sanitation</td>
<td>15</td>
</tr>
<tr>
<td>Safety/Evacuation Drills</td>
<td>15</td>
</tr>
<tr>
<td>Official Counts</td>
<td>16</td>
</tr>
<tr>
<td>Meals</td>
<td>16</td>
</tr>
<tr>
<td>Access to Telephones</td>
<td>17</td>
</tr>
<tr>
<td>Religious Services</td>
<td>18</td>
</tr>
<tr>
<td>Commissary</td>
<td>18</td>
</tr>
<tr>
<td>Voluntary Work Program</td>
<td>19</td>
</tr>
<tr>
<td>Library/Law Library</td>
<td>19</td>
</tr>
<tr>
<td>Visitation</td>
<td>20</td>
</tr>
<tr>
<td>Attorney Visitation</td>
<td>20</td>
</tr>
<tr>
<td>Group Legal Rights Presentation</td>
<td>21</td>
</tr>
<tr>
<td>Marriage Requests</td>
<td>21</td>
</tr>
<tr>
<td>Correspondence and Other Mail</td>
<td>21</td>
</tr>
<tr>
<td>Special Correspondence/Legal Mail</td>
<td>22</td>
</tr>
<tr>
<td>Contacting ICE</td>
<td>23</td>
</tr>
<tr>
<td>Notary, Copies &amp; Money Orders</td>
<td>24</td>
</tr>
<tr>
<td>Detainee Disciplinary</td>
<td>24</td>
</tr>
<tr>
<td>Grievance Procedures</td>
<td>31</td>
</tr>
<tr>
<td>Segregation/Short Stay Unit</td>
<td>32</td>
</tr>
<tr>
<td>Sick Call</td>
<td>33</td>
</tr>
<tr>
<td>Access to Medical Services</td>
<td>34</td>
</tr>
<tr>
<td>Pill Line</td>
<td>34</td>
</tr>
<tr>
<td>Recreation</td>
<td>35</td>
</tr>
<tr>
<td>Detention Files</td>
<td>36</td>
</tr>
<tr>
<td>Rights and Responsibilities</td>
<td>36</td>
</tr>
<tr>
<td>Additional ICE Contact Information</td>
<td>37</td>
</tr>
</tbody>
</table>

Updated March 8, 2022
INTRODUCTION / MISSION

- CoreCivic/Torrance County Detention Facility (TCDF) is a private company contracted by U.S. Immigration and Customs Enforcement (ICE). The mission of TCDF is to provide a detention facility that is safe, secure and sanitary for detainees awaiting processing of their administrative hearing.
- ICE is responsible for addressing questions about the status of your case, travel and/or immigration documentation. TCDF is not a part of ICE and neither has knowledge of your case nor control of your custody status.

PURPOSE

- The purpose of this handbook is to explain to you the specific rules, regulations, policies and procedures that must be followed while in custody at this facility. The handbook will also hold you accountable for your actions while in custody at this facility. Therefore, it is your responsibility to become familiar with the contents of this handbook.
- A copy of this handbook will be issued to each detainee upon intake and certain sections are posted on the bulletin boards in each housing area, as well as on other bulletin boards throughout the facility. You are required to acknowledge by signature, receipt of this handbook. If you have any questions, please ask the officer stationed at your housing area or send a written “Inmate Request” (not to be used for sending requests for information to ICE Staff) to the appropriate departments as listed throughout this handbook and on the bulletin board in your housing unit.

DETAINEE WITH DISABILITIES

- Policy 14-101 (Disability, Identification, Assessment and Accommodation) outlines the necessary processes to ensure that you will have an equal opportunity to participate in, access, and enjoy the benefits of the facility’s programs, services, and activities. Such participation will be accomplished in the least restrictive and most integrated setting possible, through the provision of reasonable accommodations, modifications, and/or auxiliary aids and services, as necessary, and in a facility that is physically accessible.
- Procedures include reasonable timelines for reviewing requests for accommodations related to a disability and for providing accommodations (including interim accommodations), modifications, and reassessments.
- You may submit a formal or informal (i.e. verbal or written) request for accommodations or assistance to the Disability Compliance Manager. Written requests will be submitted on a Detainee/Inmate Request or Sick Call Request Form.

BASIC DETAINEE RESPONSIBILITIES

- It is the policy of the TDCF and ICE to treat detainees with dignity and respect while maintaining a safe, secure, and sanitary detention facility. It is expected that staff will receive your full cooperation while waiting the processing of your case. In the simplest terms, you are expected to:
  1. Follow and obey rules, laws, policies and procedures;
  2. Obey all orders as given by staff members and contract security personnel;
  3. Respect staff and other detainees at all times;
  4. Respect TDCF and government property and the property of others;
  5. Keep yourself, your clothing and living area clean at all times; and
  6. Obey all safety, security, and sanitation rules, policies and procedures.

- If you observe and comply with the above guidelines, you should have no problems while living at this facility. When addressing staff, you should not refer to them by first name or nickname. You must refer to staff by their rank/title and last name (i.e.; Detention Officer, Shift Supervisor, Dr., Nurse, Mr., and Mrs. Ms). Staff members
will address you in the same manner if they know your name. It is unreasonable to expect an officer to know all detainees within the facility by name. However, the officer or staff member will address you in an appropriate manner.

- At TCDF, detainees are not subjected to personal abuse, corporal punishment, personal injury, disease, property damage, or harassment. Inmate property is protected. Detainees cannot supervise, have control over or be in charge of other detainees.

- The following regulations pertain to specific expectations of each detainee to ensure the safety, health and security of each person assigned to this facility. These regulations are not separated from the posted rules of discipline; therefore, any violation may result in sanctions imposed against you. The purpose for separating these rules is to provide you with the opportunity to be aware of specific rules imposed relating to the activities, program and procedures related to living in the housing unit.

**FACILITY RULES**

1. **TABLES**
   Do not sit on table tops.

2. **THEFT**
   No unauthorized taking of an item of any kind that belongs to someone else, including CoreCivic/TCDF property.

3. **FIGHTING**
   Fighting is not allowed. Sparring, boxing, wrestling and play-fighting is not permitted.

4. **BEDTIME**
   Regular bedtime will be at 10:00pm every night including weekends. You must be in your bed at this time. You will not be allowed to visit with each other after lights are out and must stay in your own bed. No one will be allowed in the dayroom after bedtime except pod orderlies while cleaning. No games of any kind are allowed in the bed area after bedtime.

5. **RESTRICTED AREAS**
   You are not allowed to make physical contact with the bars, doors, glass window area of the dormitories/housing units or the fence in the outside recreation areas.

6. **GAMBLING**
   No gambling of any kind is permitted.

7. **SELLING or GIVING AWAY OF PERSONAL ARTICLES IS PROHIBITED**
   No black-market activities shall take place. Running a “store” is prohibited (i.e., selling candy, food, clothing radios, etc.)

8. **VERBAL AND PHYSICAL ABUSE**
   Verbal and physical abuse toward staff, detainees or other persons is prohibited and will not be tolerated.

9. **DESTRUCTION OF CoreCivic/TCDF PROPERTY**
   Destruction, alteration, graffiti, unauthorized use or wasting of property belonging to CoreCivic/TCDF or another person is not permitted.

10. **RADIOS**
    Radios played without earphones will be confiscated as contraband.

11. **RULES AND REGULATIONS**
    You must follow all orders, either written or verbal, given by CoreCivic staff.

12. **COVERING/BLOCKING WINDOWS/LIGHTS**
    Windows/lights of any kind are not to be covered and/or blocked at any time.
NON-SMOKING POLICY

This is a non-smoking facility. No cigarettes, including e-cigarettes, tobacco, chewing tobacco, smokeless tobacco or smoking paraphernalia of any kind is permitted inside the TCDF. Detainees who violate these rules will face disciplinary action.

PRISON RAPE ELIMINATION ACT (PREA) – SAAPI (Sexual Abuse and Assault Prevention and Intervention)

Engaging in or pressuring others to engage in sexual activities is not allowed. Criminal or Disciplinary Charges will be filed. Educational materials regarding these acts are provided upon entry to the facility and are posted in each dormitory/housing unit. Contact any staff member to report activities of this nature. While you are detained, no one has the right to pressure you to engage in sexual acts. Rape and sexual assault are violent acts. Regardless of your age, race, size, ethnicity, or sexual orientation, detainees should have the opportunity to serve their detention with dignity. TORRANCE COUNTY DETENTION FACILITY HAS A ZERO TOLERANCE FOR ALL FORMS OF SEXUAL ABUSE AND ASSAULT.

You do not have to tolerate sexual pressure, harassment, manipulation, or assault. Every detainee has a responsibility to eliminate sexual assault and sexual activity. If you are approached, pressured, or assaulted—report it immediately. You have several ways in which you can report sexual abuse:

1. Verbally telling any staff member you trust, to include detention officers, deportation officers, chaplains, medical staff or supervisors, the DHS Office of Inspector General, and the Joint Intake Center. Staff member will keep your information confidential and only discuss it with the appropriate officials on a need to know basis.
2. Writing a letter to the Warden/Administrator, sealing and marking it "CONFIDENTIAL".
3. Calling or writing someone outside the facility who can notify facility administrative staff.
4. Call at no expense to you the DHS Office of Inspector General (OIG) at the phone number 202-254-4100 or 1-800-323-8603 / 1-844-889-4357-TTY
5. Contacting your counselor official.
6. Writing the Office of DHS Office of Inspector General MAIL STOP 0305 at the following address:
   Department of Homeland Security
   245 Murray Lane, SW
   Washington, D.C. 20530-0305

7. Contacting the ICE Detention Reporting and Information Line: 1-888-351-4024 or 9116# Language assistance is available.
8. Writing letter to Security or Unit Management Staff, sealing and marking it "CONFIDENTIAL".
9. Writing to the Managing Director, Facility Operations at the following address:

   CoreCivic Managing Director
   5501 Virginia Way
   Brentwood, Tennessee, 37027

To ensure that your environment is safe, if you are aware of another detainee being sexually assaulted or involved in sexual behavior, report it immediately. Consensual sexual conduct between detainees, between detainees and staff, volunteers, or contract personnel is prohibited. Deliberate false allegations can result in disciplinary action and/or prosecution.
You will not be subjected to retaliation, reprisal, harassment, or disciplinary for truthfully reporting abuse or signs of abuse observed. The Rape Crisis Center of Central New Mexico located at: 9741 Candelaria Rd. NE Albuquerque, NM 87112. Telephone number: 505-266-7711

INITIAL ADMISSION

- You are subject to a search upon admission into the facility and when there is reasonable cause to believe you may have contraband concealed on your person.
- TCDF must obtain specific information to ensure that records of your entry are adequately documented. This information will also be utilized so we may classify you to the living area most suited to your individual needs. Such information will include previous residence, nationality, race, sex, medical history and criminal history.
- Identity documents such as passports, birth certificates, etc. will be inventoried and given to ICE for placement in your file. Upon request, you shall be provided an ICE-certified copy of any identity document.
- Upon arrival, your clothes, personal property, valuables and funds will be searched and retained by the processing officer for safekeeping. Itemized receipts will be issued to you and one (1) will be placed in your file for all your clothing, personal property, valuables and funds.
- All personal property and valuables that you bring with you will be accounted for and inventoried. A receipt will be issued to you for these items.
- U.S. currency in your possession upon arrival at the TCDF will be inventoried, a receipt issued and then deposited in an account for your use at the commissary.
- Personal checks in your possession upon arrival to the TCDF will be placed in your property. You will not need money during your stay. If you are found with any money in your possession, it will be confiscated as contraband and you may be subject to disciplinary action.
- Upon your discharge from this facility, you are required to turn in all TCDF property to the officer assigned to the Receiving and Discharge area. After you have confirmed that all items have been accounted for, you will be required to make restitution for lost or damaged property. This includes clothing, bedding and any recreation/leisure time equipment (i.e. games and library books).
- Your property and any funds that you have on your accounts will be returned to you prior to your departure. You must sign for these items.
- Any property that you are not authorized to keep with you will be placed in an appropriate bag assigned to you and locked in a secure storage area. Excess personal property should be mailed out.
- Clean linens are provided for each person entering the facility to include:
  - Two (2) sheets,
  - One (1) towel,
  - One (1) pillowcase,
  - One (1) blanket, and
  - One (1) laundry bag.
- You will be issued a hygiene kit and will be required to take a shower and change into clean uniforms. Your initial issue of clothing/linens shall be limited to include (personal items of clothing, including undergarments and shoes are not permitted).
  - Three (3) uniforms sets (pants and shirts)
  - One (1) pair of shoes (personal shoes are not allowed unless medically authorized)
  - Three (3) t-shirts
  - Three (3) pairs of underwear
  - Three (3) pairs of socks
Any items over these amounts will be considered contraband. Quantities of clothing items include items purchased in the commissary.

INITIAL INTAKE SCREENING

a. Each detainee entering the facility will receive an initial medical and mental health screening by the clinical staff. At that time, you should discuss any medications that you are taking and disclose any health problems that you are experiencing. Some medications such as heart or diabetic medications will be continued when you arrive.

b. All new arrivals shall receive tuberculosis (TB) screening by PPD (mantoux method) or chest x-ray. The PPD shall be the primary screening method unless this diagnostic test is contraindicated, then a chest x-ray is obtained.

c. All female detainees will be given a pregnancy test as part of the initial intake screening.

d. A full medical examination will be conducted by a member of Health Services within fourteen (14) days of your arrival.

FUNDS AND PERSONAL PROPERTY

You will only be allowed to obtain personal property as authorized in accordance with CoreCivic Policy 14-6AA, Allowable Personal Property Inventory List. Personal clothing not allowed by policy will be collected, inventoried, placed in a laundry bag provided, and forwarded to the Laundry Department to be cleaned and returned back to the Property Room for storage. Personal property may be mailed out on a "case by case" basis. A forwarding address shall be obtained from every detainee for use in the event that personal property is lost or forgotten in the facility after the detainee's release, transfer, or removal. If you refuse to cooperate by providing an appropriate mailing address, or are financially able but unwilling to pay the postage, the Warden may dispose of the property in accordance with PBNDS 2.3, Contraband, after providing the detainee with written notice. However; if your failure to specify a shipping address is because an appropriate mailing address does not exist, the facility may make accommodations to store the property until your removal or release. Ordinarily, the amount of stored property may not exceed 40 pounds.

Detainees/inmates may retain some personal property in their housing units, including:

- Legal documents, legal papers, and legal information, within reason. Large amounts of legal work will be stored in the property room; you may only keep legal work and/or documents of the current case you are working on. You may request your additional documentation by submitting a facility request to the Receiving and Discharge Supervisor.
- Photos of family, friends and associates, (i.e. not more than ten (10) photos in your possession, (5) x (7) or smaller, (may only be placed in designed areas of your assigned sleeping area.
- Medical prostheses, (i.e. eyeglasses, dentures, etc.),
- Personal reference materials, (i.e. address/phone book and/or list of relatives, friends and/or other correspondents.
- Radios must be used with earphones at all times, limit one (1) radio per person. No plug in radios are permitted. Radios played without earphones will be confiscated and placed in your property. No radios or earphones are allowed outside of your dormitory/housing unit. Your radio must have your Alien number etched on it or it will be considered contraband.
- A wedding band and a small religious item (including religious jewelry, will be authorized to remain in your possession during your stay here. All other jewelry will be inventoried and placed in a safe for storage until your release. A receipt will be issued to you for your valuables.
Magazines, books, religious and secular reading material (softbound), and other literature are limited to any combination of five (5) to ensure accumulations do not produce and/or effect fire safety standards. Items may only be received directly from a book store or publisher. No pornographic materials are allowed.

All food items must be consumed upon being opened to ensure sanitation standards are met. You are allowed to purchase and have in your possession two (2) bowls, one (1) spork and one (1) cup.

Additional personal property allowed to be retained by detainees must be approved by the Chief of Security or Chief of Unit Management prior to purchase/possession to ensure acceptable sanitation is appropriately maintained.

All personal items that you are allowed to keep must be stored in your storage bag. No items are to be attached to the bunk, wall, windows or left on windowsills. All items must be stored in their original container.

You are responsible for the loss of personal items not safeguarded or stored by the TCDF.

CLAIM OF PROPERTY UPON TRANSFER, REMOVAL OR RELEASE
Prior to your release from custody, a complete inventory of your personal property will be conducted by a designated employee. The inventory should be completed in your presence. You will sign the Allowable Personal Property Inventory/Receipt and be given a copy. The original will be maintained by the facility in the permanent property file. All personal property, to include stored property (if any), will be returned to you at the time of release. Prescribed health care appliances shall be retained and maintained by you upon release. Staff will ensure that all facility property has been confiscated and does not leave the facility. Your trust fund account will be balanced and any available funds will be provided to you at the time of release. The facility may allow family members to mail in one (1) set of clothing for use on the day of release. There is no restriction regarding the source of clothing received from family members for this purpose. Release clothing may be mailed to the facility within fourteen (14) calendar days of the release. Inmates/residents that do not have release clothing in storage or mailed in by a family member, shall be provided appropriate clothing for release.

LOST OR DAMAGED PROPERTY:
Property that has been lost or damaged due to CoreCivic employee negligence will be eligible for claim investigation. If you wish to request an investigation of property that has been lost or damaged due to CoreCivic employee negligence, you must complete Page 1 of the 14-6D Lost/Damaged/Stolen Property Claim and forward it to the Property Officer. All claims must be submitted within seven (7) calendar days of the incident. Verification of proof of ownership and value must occur immediately upon investigation. A copy of this policy will be available in the library.

ICE DETAINES ONLY In accordance with PBNDS 2011, 2.5 Funds and Personal Property, this facility has an automated funds system and does not accept funds through the mail. Any funds received through the mail will be returned to sender. Non-U.S. Currency will be seized, inventoried and placed into your property. You will be issued a receipt.

FINANCES
Within a reasonable time after your arrival, the Business Office initiates an account for you. Your alien number (A-number) will be your account number. If you have U.S. currency in your possession when you arrive, you will be given a receipt and the money will be placed in your account the next business day. Currency, of any type, found in your possession after the intake process is complete will be considered contraband. The currency will be confiscated and disciplinary action may be taken. No currency will be accepted through the mail. Any currency received will be returned to the addressee. No currency will be accepted through visitation. To send money, submit an "Authorization to Release Funds" form to your Unit Management Team and a check will be issued from your account for the amount authorized, if funds are available. All forms can be obtained from your assigned detention officer.
❖ All transactions have to be verified before being posted to your account. This process can take up to 24 hours, Monday-Thursday, excluding weekends and holidays.

❖ If you receive money in the mail, the mail officer will return the money to the sender. No money will be accepted for county inmates at this facility.

❖ To send money, contact unit management staff to make arrangements to prepare a release of funds. You may be allowed access to personal funds to pay for legal services. Contact unit management staff if you have any questions.

❖ Sending money to another resident’s contacts or account is forbidden and may result in disciplinary action.

❖ Funds from your account may be used to pay for legal services. If this is required, contact a member of your unit team.

CLASSIFICATION

All detainees are classified before being admitted into the general population. The classification system assigns detainees to the least restrictive housing unit consistent with facility safety and security. The classification system ensures that you are placed in the appropriate category and physically separated from detainees in other categories. Your classification level may be changed (reclassified) based on your institutional behavior, additional charges or information received, attempted escape or upon release from segregation status. You will be protected from harm, as you will be assigned housing with persons of similar backgrounds and criminal history. You will be housed according to your classification level and issued color-appropriate identification and uniforms.

Low Custody Detainees:

Low custody detainees may not be co-mingled with high custody detainees.

May not include any detainee with an arrest or conviction that included an act of physical violence, or any detainee with a history of assaultive behavior.

May not include any detainee with a felony conviction for an offense that is listed under the “High” or “Highest” section of the severity of offense scale below.

May include detainees with minor criminal histories and non-violent felony charges and convictions.

Medium Custody Detainees:

Medium custody detainees may not ordinarily be co-mingled with high or low custody detainees, except as specified below.

May not include a detainee whose most recent conviction was for any offense listed under the “Highest” section of the severity of offense scale.

May not include any detainee with a history or pattern of violent assaults.

May not include a detainee convicted for assault on a correctional officer while in custody or where a previous institutional record suggests a pattern of assaults while in custody.
High Custody Detainees:

Medium-high and high custody detainees are those with a history of violent or assaultive charges, convictions, institutional misconduct, or those with a gang affiliation. High custody detainees are considered high-risk, require medium-to maximum-security housing, are always monitored and escorted, and may not be co-mingled with low custody detainees. In addition, high custody detainees shall not be assigned work duties outside their assigned living area.

Severity of Offense Scale:

I. HIGHEST

Aiding Escape
Aggravated
Battery with Deadly Weapon
Armed Robbery (Multiple with injury)
Burglary with Assault
Escape (Secure Facility)
Inciting Riot
Kidnapping
Murder (1st, 2nd degree)
Sexual Battery (with violence upon a minor)

II. HIGH

Aggravated Assault
Aggravated Battery
Aggravated Child Abuse
Arson
Battery Law Enforcement Officer
Burglary (Armed)
Extortion
False Imprisonment
False Report of Bombings
Controlled Substances (Importation, Trafficking)
Introduction of Contraband into Detention Facility
 Manufacture of Explosives
Robbery (armed, strong armed)
Sexual Battery (other than capital or life felony)

III. MODERATE

Armed Trespass
Burglary
Carrying Concealed Firearm
Forgery
Grand Theft
Manslaughter
Sale, Delivery, Possession of Controlled Substance
Tampering with Witness
Worthless Checks (felony)
Welfare Fraud (felony)
Escape (Non-secure Facility)

IV. LOW

Driving under the Influence
Leaving the scene of Accident
Battery (Simple Assault)
Carrying Concealed Weapon (other than firearm)
Disorderly Conduct
Gambling
Offering to Commit Prostitution
Possession Marijuana (misdemeanor)
Possession Drug Paraphernalia
Petit Theft
Trespass
Worthless Check (misdemeanor)

The basic uniform for detainees shall be distinctive in appearance in order to identify detainees according to their custody level. At CoreCivic/TCDF, the uniform colors are as follows:

- Low Custody – Dark Green
- Medium Low – Brown
- Medium/High – Blue

- Housing Restrictions: Low and Medium Low detainees may be housed together (unless there is a history of assaultive or combative behavior). Medium and Medium/High detainees may be housed together. Low and Medium/High detainees are never housed together.
- Medium/High will be escorted outside the housing area and may only be in specified common areas with other classifications of detainees.
- All housing, work assignments and programmatic activities will be decided by the level of classification received.
- After your initial classification, your first review will be within sixty (60) days to ninety (90) days from your arrival date. Thereafter, assessment reviews will be conducted ninety (90) days to one hundred twenty (120) day intervals from your original arrival date.
- APPEALS: All new arrivals classified as Medium/High or High may appeal their classification designation by submitting their appeal on an ICE request to the ICE Staff as outlined in the grievance procedures on page 29 of this handbook. All other classification appeals should be forwarded to the Chief of Unit Management or Classification Supervisor for review. Written notification of the outcome of the appeal will be made within (5) business days.

LAUNDRY

In order to insure an adequate supply for all detainees, the hoarding of clothing is prohibited. Generally, detainees are not permitted to wash clothing, bedding or other items in their housing unit. Laundry must be turned in to the in-pod laundry worker by 6:00am. If you must leave the housing unit it is your responsibility to ensure that your laundry is turned in. It will be returned to you before the end of each day. (NOTE: Do not overfill your laundry bag. Ensure that the bags are tightly tied. Leave enough room in the bag for soap and
water to flow through as well as heat from the dryer.) Clothing/laundering for male and female detainees will be conducted according to the schedule posted in the dormitory/housing unit bulletin boards. All clothing is required to be sent to be cleaned according to the posted schedule.

CLOTHING

All issued clothing and I.D.'s will be worn as specified in the following instructions and in no other manner. These requirements are essential to ensure compliance of security, hygiene and conduct within the realm of property for all people.

1. Facility-issued identification must be worn at all times. If your identification becomes torn, notify the officer in your unit that you need a new one or speak to one of the Classification Officers.
2. Clothing must be clean and not torn when worn.
3. The wearing of mixed colored uniforms is not authorized.
4. Undergarments may be worn without outer garments only while inside the sleeping quarters or in the restroom/shower areas. NO EXCEPTIONS!
5. Shower shoes may be worn only while inside the housing units.
6. CoreCivic/TCDF issued shoes will be worn at all times when outside the housing units. Personal shoes are not allowed unless medically required or authorized by the Chief of Security/Chief of Unit Management.
7. Hats or other head covers will not be authorized for the general population. Designated detainee workers will be issued the proper head cover when required to be worn only while performing work related duties.
8. Detainees will wear a complete uniform (shirts, pants, shoes) at all times while outside the dormitory/housing unit.
9. Pants will be worn at a point about the waist that prevents the crease of the buttocks from showing despite the length of the shirt.
10. You are not to walk about the facility with your hands inside the waistband of your pants regardless of weather conditions.
11. No article of clothing will be worn in a manner not normally intended for that item (using a shirt as a head band or head cover, etc.)

PERSONAL HYGIENE

You will be living in a housing unit with other individuals, so personal hygiene is essential. You are expected to bathe daily and to keep your hair clean. Personal hygiene items such as soap, toothpaste, toothbrushes, combs, shampoo, skin lotion, and other items will be issued to you upon admission. If you should run out of an item, see your housing officer for an empty container exchange of the same item. Disposable razors will be provided on a daily basis. Razors will be checked out on an as needed basis and returned when you have finished shaving. Disposable razors will not be used by more than one (1) detainee for health and safety reasons meant to protect the detainees and staff. Personal hygiene products will be replenished on an as needed basis. Contact your detention officer when needing hygiene product replacement.

Detainees scheduled for court will be allowed to shave prior to departing the facility.

BARBERING SERVICE

General population and eligible RHU detainees will receive access to the barber shop, opening at 8a.m. to 4p.m. Monday through Sunday, according to the schedule posted on the bulletin boards in your housing area. The officer
stationed in your housing area will call for detainees who wish to have a haircut. For sanitary reasons, the cutting of hair in the dormitory/housing unit is strictly prohibited. Barbers or beauticians shall not provide service to any detainee when the skin of the detainee’s face, neck or scalp is inflamed, or when there is scaling, pus or other skin eruptions, unless service of such detainee is performed in accordance with the specific authorization of the chief medical officer. No person who is infested with head lice shall be served. It is also prohibited to possess cut hair or clippings, either your own or others.

**DETAINEE DRESS CODE**

- You are required to keep yourself clean and wear proper clothing/footwear during all activities.
- You are reminded that poor hygiene, poor sanitation and not wearing proper clothing and footwear can cause potential conflict with your peers and others and can have a negative impact upon your health and safety as well as that of those around you.
- Failure to comply with the dress code and grooming standards will ultimately become an issue that requires staff intervention in the form of appropriate disciplinary action to correct the situation.
- The dress code for daily living and work assignments is the same.
- Ordinarily, detainees may wear any hairstyle with the following exceptions:
  - For safety and hygiene reasons Detainee workers operating machinery will keep their hair in a neat, clean and in a commonly acceptable style.
    1. Hairstyles will not interfere with the safety and hygiene requirements.
    2. Ordinarily, facial hair may be grown without restriction with the following exceptions;
      - For safety reasons, detainee workers operating machinery may be expected to be clean shaven at all times. These restrictions are a requirement for employment in the above described work assignments and accepting a job in these areas denotes acceptance of the grooming standards for the above described work assignments.

**There will be no exceptions to these requirements, even for medical reasons.**

- Complete uniforms (pants, shirts, shoes and facility identification) are required to be worn when outside the housing unit.
- T-shirts and shower shoes are allowed in the dayroom areas after 5pm and on weekends/holidays.
- T-shirts are allowed on the recreation yard.
- Headwear is not allowed outside the bed area unless authorized by the proper approving authority.
- Religious apparel may only be worn as approved by the Chaplain.
- No towels, sheets or blankets will be permitted as clothing and are not to be used for cleaning unless designated by staff as such.
- Intentional or neglectful damage to CoreCivic/TCDF property (altered, torn, lost ripped, or graffiti) will result in disciplinary action and restitution.

**INSPECTIONS OF PERSONS AND PROPERTY (Searches)**

Routine unscheduled searches of the facility, a detainee’s persons and property will be conducted as deemed necessary.

- Searches are conducted of persons when:
  1. Entering or exiting the housing units;
  2. Leaving the visit area after a visit; and
  3. Entering or exiting other buildings or areas.
- Searches are conducted for the purposes of:
  1. Detecting and preventing the introduction of contraband (i.e. weapons, drugs, unauthorized clothing items, etc.);
2. Ensuring that safe and sanitary conditions exist within the facility;
3. Recovering lost, missing or stolen property; and
4. Preventing escapes and other disturbances.

- Searches will be conducted in a manner that avoids unnecessary force, embarrassment or indignity to the detainee and is not intended to be punitive in nature.

- Types of Searches Performed at TDCF:
  1. Visual Inspection: A search of a detainee or an area for contraband without physical contact.
  2. Frisk or Pat Search: A search conducted by placement of hands on the detainee’s clothing to feel for weapons/contraband. A thorough search is done of all pockets, collar, jackets waistbands and shoes. Shoes are removed to check socks and bottom of feet.
  3. Shakedown: A physical or visual search of a specific area of the facility.

- TCDF will conduct mandatory urinalysis testing under the following conditions:
  1. When security staff have reasonable suspicion that a detainee has used or is under the influence of drugs or intoxicants;
  2. When a detainee is found to be in possession of suspected unauthorized drugs or intoxicants or when suspected unauthorized drugs or intoxicants are detected or found in the area controlled, occupied or inhabited by a detainee;
  3. When the detainee is observed to be in possession of or using unauthorized drugs or intoxicants, but staff are unable to obtain a sample of the substance;
  4. On a random basis, utilizing an appropriate random testing procedure or on a routine basis when detainees return from an outside work detail; or
  5. Pursuant to an appropriate random testing procedure, the entire detainee population of the facility, any identifiable program area or any identifiable classification of detainees may be tested.
  6. The random testing program will not be used for the purpose or have the effect of harassing or intimidating any individual or group of detainees.
  7. Refusal to submit to urinalysis testing will result in severe disciplinary penalties.

**CONTRABAND**

Items which are considered to be detrimental to the safe and orderly operation of the facility are prohibited. Contraband items include, but are not limited to:

1. Any dangerous drug, narcotic drug, marijuana, intoxicating liquor of any kind, deadly weapons, dangerous instruments, explosives or any other article that, if used or possessed, would endanger the preservation of order in the facility;
2. Any item which could be used as an aide to escape;
3. Any item which could be used to disguise or alter the appearance of a detainee;
4. Any article of clothing or item for personal use or consumption which has not been cleared first through the Warden or purchased by a detainee from the commissary;
5. Cameras, video, audio, or related equipment that can be used to make unauthorized photographs or audio, or audio/video recordings of detainees, staff or government property;
6. Cigarettes, tobacco, e-cigarettes, or smoking paraphernalia, alcoholic beverages, cardboard boxes and excessive magazines;
7. Pictures of any kind that have been placed on dormitory/housing unit walls; and
8. Any item not purchased through authorized channels (commissary).
9. Possession and/or use of another resident's PIN number is also considered possession of contraband. Do not lend or borrow your personal PIN number.
LIVING CONDITIONS – General Population

You are temporally being held at the TCDF. You will stay at the facility until ICE determines it is time to transfer you to another facility. The TCDF cannot make the any determinations regarding your release or transfer.

The TCDF houses an additional contract that includes Torrance County Sheriff’s Office (TCSO). At no time will ICE detainees comingle with TCSO inmates.

The facility is divided into twenty-four (24) housing units, not including medical observation. Each celled housing unit can hold two detainees in each room, up to 40 detainees in each pod. There are two dormitories that have been designed to house multiple detainees in an open type setting; these can house up to 75 detainees in each area.

- Detainees are required to keep their assigned living areas clean at all times. Your bed must be made immediately upon waking and remain made when not in use and all personal property must be and organized. It is in your best interest to maintain a clean living area and avoid many of the problems associated with unsanitary living conditions.
- Padlocks are available at no charge for indigent detainees, and sold to non-indigent detainees through the facility Warehouse Manager. If you would like a padlock, submit a written request to the Unit Manager or Warehouse Manager.
- Each housing unit has sufficient areas for showers, toilet facilities, dining, dayrooms that allow indoor recreation and are in conformance with American Correctional Association (ACA) requirements. Because of this type of living arrangement, we expect your cooperation by showing other detainees the respect you wish to receive and respecting the property of others. You are also asked to respect the need to share common equipment such as telephones, tables, televisions, recreational games and equipment.

SLEEPING AREA/SANITATION

- You are required to keep your bed and immediate area clean and neat. You are also required to make your bed daily before reporting to your work assignment or when you begin your daily routine. When your bed is not in use, it must be made! The hanging of sheets, towels, blankets or clothing from sash bars, homemade clotheslines, overhead lights or beds is not permitted.
- Personal effects, including hygiene items, are to be stored in your property bin. Do not place items on windowsills, windows, bunks, lockers, under a mattress, etc. These items will be confiscated as contraband and removed when left in unauthorized areas. It will be your responsibility to identify and reclaim the items through the appropriate supervisor.
- To ensure cleanliness is maintained, you will be asked to participate in cleaning the dormitories/housing unit areas to include dayroom areas, sleeping areas, restroom area and shower area in cooperation with the housing unit orderlies. While we realize your stay at this facility is temporary, it is your home during this time and we expect your cooperation to keep it safe and clean.
- The housing units are cleaned as needed or as directed by a staff member, including after each meal, to ensure proper sanitation and safety. A staff member will issue all equipment, supplies and instructions.
- It is your responsibility to ensure that the area around your bed is clean.
- A significant number of showers are provided in each housing unit to allow each detainee an opportunity to shower daily. Please respect the other detainees by cleaning up after you have finished in the area.
- All cleaning supplies will be placed in appropriate storage locations when not in use.

SAFETY REGULATIONS/EMERGENCY PROCEDURES

The staff at the TCDF will make every effort to help ensure your safety while you are here. You must assume some responsibility for helping to make this facility safe. Signs are available to mark hazardous areas wherever they occur.
If you spill something, please clean it up. If you encounter a possible hazard, tell the officer in your area. Don’t assume that problems have been reported. Pay attention to warning signs and use reasonable care in potentially hazardous situations such as wet floors.

1. Detainees must follow all safety regulations, signs, instructions, directions, labels and any training provided.
2. All detainees must attend all safety/emergency training. Detainees must be trained before doing any hazardous task.
3. Detainees must wear personal protective equipment when handling cleaning or other chemicals.
4. Detainees cannot alter items or use an item for other than its intended purpose. Altered items are contraband and will be confiscated.
5. Do not remove the blade from disposable razors.
6. Detainees must immediately clean up any liquid spilled or stay clear of the area until it can be cleaned up.
7. Detainees injured in the housing unit, on the recreation yard, or anywhere else in the facility, must immediately report the injury to the employee on duty in that area.
8. Detainees will not tamper with, prop open, block, or disable any locking device and/or door.
9. Detainees will not hang shirts on the Recreation Yard.
10. Detainees will not reach in the razor wire for any reason.
11. Detainees will not climb any fence for any reason.
12. Drills are conducted throughout the facility including the living areas. In the event of an emergency or drill detainees are responsible for following all instructions given by staff. Failure to comply will be considered interfering/hindering with facility safety regulations.
13. There is an Evacuation Plan/Map posted in every housing unit that shows the emergency evacuation route in case of fire. Do not remove these plans.

OFFICIAL COUNTS

In order to maintain proper accountability of detainees at this facility, official counts are conducted at the following times:

1. **Formal counts** are conducted at the following times; 3:00a.m., 6:30a.m., 9:15a.m., 3:00p.m., 7:00p.m., 10:00p.m. (Picture ID/Roster count – Stand-Up Count), 12:00 a.m.
2. **Informal counts** are conducted at irregular, unannounced times.

Detainees are expected to cooperate during each count. The televisions will be turned off and no movement is allowed while the count is being conducted. When officers are counting, you must return to and remain seated on your bunk until cleared for movement. During counts no talking is permitted. Disruptions during counts may result in a lock-down being initiated. Detainees must stand during emergency counts.

MEALS

- All meals are nutritionally balanced, pork free, dietician approved, properly prepared and attractively served in wholesome, clean and safe surroundings. To obtain a special diet for religious purposes, send a request stating the religion and the special diet requirements to the Chaplain. Special diets are subject to monitoring for compliance. The use of food, (i.e., withholding of or variation from the standard menu) as a disciplinary measure or reward is prohibited. You will be issued appropriate eating and drinking utensil(s). Menus are posted on the bulletin board in your housing unit.
- For those detainees who require a special diet due to medical reasons, the diet may be requested through Health Services. To be considered, submit a sick call form to Health Services. The nurse will then make an appointment for you to see a medical provider who will evaluate your request.
- The TCDF will provide you with three (3) meals per day; breakfast at 5:00am, lunch at 11:00am and dinner at 5:00pm. These are approximate times. Meals and a beverage are served in each housing unit. You are to follow
the rules of the detention officers. You’re facility issued identification must be shown to collect your meal. Cutting the line, grabbing trays or taking trays to the bed area is not permitted. You are only allowed one (1) tray per meal; detainees are not permitted to pick up another detainees meal tray. Each detainee is required to pick up their own meal tray.

1. All food is to be eaten at the tables provided in the housing unit.
2. You are to eat at the designated time and immediately return your tray to the cart provided.
3. No outside food will be permitted in the housing unit other than that provided through the kitchen and commissary facilities, unless ordered through "food night" (you must have money in your account to purchase).

4. **MEALS ARE NOT TO BE EATEN IN THE BED AREA.**
5. DO NOT put meal trays or foil in the microwaves.
6. Microwaves are to be cleaned after each use.
7. You will have a total of twenty (20) minutes to eat each meal.
8. No food from meals will be stored in lockers or locker boxes.

**ACCESS TO TELEPHONES**

- The housing units have been equipped with telephones. These telephones have been provided so you can communicate with friends and/or relatives.
- Upon your arrival, the Processing Officer will issue you a PIN number; this will allow you a one-time, free three minute phone call. This pin number is unique to you and will be active throughout your stay at the facility. You are required to set up a voice password prior to completing their first phone call. This system is designed to make sure that no other detainee can access your pre-paid account. Pre-paid accounts are your responsibility; you must protect your Voice Biometrics in order to receive your funds. The telephone calls can be made collect or you may elect to participate in the prepaid calling system. This system allows you to purchase phone minutes through the commissary.
- Your family or friends may also deposit money to your phone account by calling Talton Customer Service at 1-866-348-6231; the Talton website at [www.Talton.com](http://www.Talton.com); or through the lobby kiosk (cash or credit). See your unit bulletin board for current calling rates.
- To increase the volume on the telephones, press the star (*) button, or volume, while you are talking.
- **Incoming calls will not be received on these telephones, nor is three (3)-way calling available.**
- To respect the privacy of others, we ask that you quietly wait your turn, as the telephones will be used on a first-come-first-serve basis. If you need assistance, ask the officer assigned to your area.
- **All phone calls are subject to monitoring and/or recording.** To obtain an unmonitored call to a court, a legal representative or for the purposes of obtaining legal representation, submit a Detainee/Inmate Request form to your Detention Counselor. Procedures for making an anonymous call are posted in the housing unit.
- The telephone numbers to inquire about the status of your case as well as the numbers to a majority of consulates have been made available to you at no charge (Pro Bono). (Consult your housing unit bulletin board for a list of numbers). To dial free/Pro Bono calls:
  1. Press 1 for English;
  2. Enter PIN followed by the # sign;
  3. Press 6 for Pro Bono calls
  4. Enter speed dial number corresponding to the entity who you would like to call.
- In the event that you are unable to contact your attorney or consulate using the housing unit phones, you may submit a request form to any of your Unit Management Team for alternative telephone access.
- TDD telephone machines are available for the hearing impaired.
- When telephone demand is high, you are expected to limit your telephone calls to twenty (20) minutes in order to permit others the same telephone privileges. You are permitted to continue your call beyond 20 minutes should the demand allow.
The telephones are available for your use from wake-up time until bed time; phones will be off turned during count times.

When facility staff receives an emergency telephone call for a detainee, the caller's name and telephone number shall be obtained and promptly given to you.

You will be permitted to promptly return an emergency call within the constraints of security and safety of the facility.

Phone calls in which attempts to have outside contacts send or introduce drugs/contraband into the facility may result in the outside person's number being blocked.

**TALTON TABLET INSTRUCTIONS:**

1. Leave tablets on charging station when not in use;
2. Use the top right button on the side of the case to turn on tablet;
3. Select English, Spanish, or French from the dropdown box on the top right of the screen;
4. Use your Telephone PIN and put your face in the box on the screen to log in; and
5. You will be asked to set up a second PIN number (please choose a number different from your phone PIN).

**NOTE:** The Tablet will log you out after five minutes of inactivity. You will continue being charged as long as you are logged into the Tablet.

**RELIGIOUS SERVICES**

All detainees will have access to religious resources, services, instructions and counseling on a voluntary basis. All detainees will be extended the amount of freedom and opportunity necessary for pursuing any legitimate religious belief or practice within the constraints of security and safety conditions.

- Religious services are provided through the Chaplaincy Office and through services provided by community volunteers. These services may include individual counseling, group prayer, bible study and various religious organizational church/worship services. Times may begin from 8:30a.m. to 8:30p.m., a schedule of the days and times of each regularly scheduled service is posted on the bulletin board in your housing unit. These services are open to all who wish to attend with regard to space limitations and security concerns.
- Religion-based educational programs and special activities are also available according to the activity schedule posted on the bulletin board in your housing unit.
- Religious materials from various faiths are available upon request.

**COMMISSARY**

- Commissary will be open for your use Monday through Friday according to posted schedules in your housing unit, except on commissary inventory days.
- Commissary orders are to be completed and placed in the mailbox located in each housing unit. The order form must be properly completed in ink, with your name, housing unit number and Alien number, in order to receive commissary on that day. (WRITE LEGIBLY). All order forms must be received by 7:30am on the day of commissary.
- There will be no refunds for wrong items purchased. It is your responsibility to properly fill out the order form. Prior to opening your commissary bag, you must verify all items. If you feel there is a problem with the order one of the commissary staff will verify the items in the bag with you prior to it being opened. Once you have opened the bag, the order is complete. There will not be any exchanges, refunds or replacement of missing items.
Commissary items are subject to limitations and/or changes without notification.

**VOLUNTARY WORK PROGRAM**
Detainees may have opportunities to work to earn money while confined, subject to the number of opportunities available and within the constraints of the safety, security and good order of the Facility. Detainees shall be able to volunteer for work assignments, but otherwise shall not be required to work, except to do personal housekeeping. High custody detainees are not permitted to work outside of their housing areas.

- Every effort will be made to provide you with an opportunity to participate in the voluntary work program.
- Detainees will receive compensation for work completed.
- You will not be permitted to work in excess of eight (8) hours daily, or forty (40) hours weekly.
- You will be required to sign a voluntary work program statement and receive necessary training.
- Detainees that participate in the volunteer work program are required to work according to an assigned work schedule and unexcused absence from work or unsatisfactory work performance could result in removal from the voluntary work program. No detainee will have supervision/control over any other detainee.
- You are asked to perform tasks associated with the daily operation of the facility. Such tasks may include general sanitation, as well as other tasks. Under no circumstances will you be forced to take part in the work program.
- Your eligibility to work will be determined by ICE and TCDF staff. If you desire to be placed on a work program, send an Inmate Request Form to the responsible shift supervisor or department head who will forward your name for consideration. Please remember that there are not enough job assignments for each person; therefore, we ask for your patience and cooperation.
- **If you are given an assignment that is outside their scope of duties, report the information to a staff member or staff supervisor.**

**LIBRARY / LAW LIBRARY**

- The library at this facility contains standard library materials found in a school or community library. The needs, interest and abilities of the majority of detainees is carefully considered, and the library collection was developed accordingly. The library books are available by completing a request and selecting from a provided list of available books. Once submitted, the library staff will deliver the requested book(s) to you no later than the following day, Monday through Friday, excluding weekends and holidays. Requests submitted on the weekends will be processed the following business day.
- One (1) general reading book may be checked out for a total of seven (7) days. The item must be returned before checking out additional material. It is important that you take care of the books and return them timely so other detainees have the opportunity to read and enjoy them. All books must be returned before your release from the facility, and in the same condition they were received.
- Personal reading time will be given Monday through Sunday in the program room. Reading time will be offered for an hour each day to ensure all detainees have the opportunity to read quietly. You may not request an extended time due to other programs offered. Days and times for reading hour will be posted in your assigned housing area.
- **Reference materials, legal materials and magazines are not to be taken out of the library.**
- The law library is available for all detainees to use during their housing units' scheduled time. A schedule is posted in each of the housing units. When more time is needed, a written request may be submitted to the library staff. The request will be answered in a timely manner, usually by the next business day. The law library contains legal reference materials that ICE has determined to be essential in providing you with information relevant to immigration law and proceedings. This information is accessible on the computers in the library in the Lexis/Nexis Program. The instructions for accessing the Lexis/Nexis Program are posted above the computers in the Law Library.
If you need additional reference materials not maintained in the law library, you may submit a request to the library, stating the name and type of material needed. Your request will be forwarded to ICE for approval.

If you find library material missing or damaged, notify the library coordinator by submitting a request to the recreation department.

The Law Library hours begin at 7:30a.m. to 2:45p.m., according to the posted schedule on the bulletin board in the housing units. Extra law library time (beyond the five-hours-per-week) is available by submitting a request to the Librarian and/or the Library Aide. Detainees with court deadlines will be given priority.

All detainees will sign in and out of the library.

Computers are available in the law library for preparation of legal documents **ONLY**. Violators will be subject to disciplinary actions. Printers will be provided during your law library session to print legal documents for the preparation of your case. Thumb drives are available to store your legal papers.

Detainees with disabilities, LEP detainees and illiterate detainees who wish to pursue a legal claim related to their immigration proceedings or detention, and who require assistance in pursuing their legal claim must request such assistance from their unit staff.

Detainees housed in the Restrictive Housing Unit (RHU) have access to the law library, including the same legal resources and materials as detainees in general population.

**VISITATION**

TCDF provides an opportunity for you to have one (1) visit per week (Sunday through Tuesday and Thursday through Saturday, and during holidays) for up to one two-hour contact visit with family and friends. Times will vary according to the schedule. If there are more visitors than can be accommodated in the visiting room, it may be necessary to limit visits to lesser periods of time. Visiting times can also be shortened due to security risks, count, or other unanticipated events.

For approval for visits on days that are not scheduled for your housing unit or for extended visits due to long distance travel or other extenuating circumstances, submit a Special Visit Form to the Chief of Unit Management.

If visitor(s) bring children (eighteen (18) years of age or under), they are expected to remain under the direct supervision of the adult visitor(s), so they will not disturb others who have visitors. Only two (2) adults and two (2) minor children (ages eighteen (18) and under) will be allowed to visit at a time, as space is limited.

You should discourage visitors from bringing large quantities of hand carried items. The visitor(s) may be required to leave certain items in a locker or in their vehicle. All visitors and items are subject to search.

You will need to notify visitors of these hours and procedures and advise them that they must bring a government-issued picture identification (for ages eighteen (18) and up) in order to be allowed to visit.

Visitors must be in appropriate and socially acceptable attire. The following clothing is PROHIBITED: Shorts, above the knee mini-skirt, short dresses, tank tops, sleeveless shirts, see-through clothing, open toe shoes, or heels higher than 2 inches.

Visitation schedules, as well as rules for visitation are posted in your housing unit.

Visitors are not allowed to give you any items, money, or paperwork.

Directions are available to visitors and/or attorneys by calling 505-384-2711.

**ATTORNEY VISITS**

General attorney visitation hours are Monday through Friday, 8a.m. to 4p.m., and are available Saturday, Sunday and holidays for a minimum of four hours, if needed.

If necessary, you will be given the option to meet with your legal representative during meal hours and you will be provided with a meal tray or a sack meal.
You are allowed to receive legal documents only from your attorney once approved by appropriate supervisory personnel.

If you have made an appointment to meet with an attorney, legal representative or paralegal from an organization, legal firm or other association or company, it is your responsibility to cancel the appointment if you do not intend to keep the appointment. Appointment cancellations will not be accomplished on your behalf by or through an officer or another.

A list of pro bono (free) legal organizations is posted in all detainee housing areas and other appropriate areas. If you wish to see a representative or paralegal from that organization, it is your responsibility to contact them for an appointment.

You may contact them by mail or phone to request their assistance.

If you have questions concerning the status of your case call #222 from the housing unit phones or submit a Detainee Request Form to ICE and place it in the ICE mailbox.

GROUP LEGAL RIGHTS PRESENTATIONS

“Know Your Rights” (KYR) / "Legal Orientation Programs" (LOP) are given by volunteer legal representatives. You will be given the opportunity to attend one of these presentations once you have been assigned housing. Attendance is voluntary and only limited by space available and security concerns of the facility.

Presentations shall occur in the facility visitation room.

Detainees in RHU shall be given notification of scheduled presentations.

Notification of scheduled presentations will be posted in your unit at least 48 hours prior to occurrence. You must indicate your interest in attending by signing up on the posted sign-up sheets in your unit.

These presentations cover general information and are not intended to give specific legal advice.

MARRIAGE REQUESTS

Request for marriage must be sent to the Warden. If denied, the request will be reviewed by ICE officials who may uphold or reverse the Warden’s denial. You must be able to provide documentation of the following:

1. You are legally eligible to marry in this state; and
2. Your intended spouse has affirmed, in writing, his/her intent to marry you. (This must accompany your request.)

CORRESPONDENCE AND OTHER MAIL

Mail will be picked up and delivered within 24 hours of receipt Monday through Friday (excluding holidays).

You may send or receive mail from anyone you know personally. You may place your unsealed outgoing letters in the box in your housing unit marked “MAIL”.

All incoming and outgoing mail must be properly addressed and include your name, Immigration A# and housing unit/bed number. If all information is not included, mail will be returned. See below example:
At a minimum, the following information should be included on any incoming correspondence:

Sender's Name  
Sender's Address

Place Stamp

John Doe #0000000000  
CoreCivic/TCDF  
P.O. Box 837  
Estancia, New Mexico 87016

- Drawing on the front of your outgoing envelopes is prohibited due to postal regulations.

**SPECIAL CORRESPONDENCE/LEGAL MAIL**

“Special correspondence” is defined as written communication to or from the President and the Vice President of the United States; the U.S. Department of Justice; U.S. Public of Health Service; Secretaries of the Army, Navy, or Air Force; U.S. Courts (including probation offices); Members of Congress; embassies and consulates; State governors; State Attorney General, prosecuting attorneys; director of state departments of corrections; state parole offices; state legislatures; state courts; state probation officers; other federal and state law enforcement offices; personal attorneys; representatives of the news media; Department of Homeland Security (DHS); U.S. Immigration and Customs Enforcement (ICE); ICE Health Service Corps (IHSC); DHS Civil Rights and Civil Liberties (CRCL); DHS Office of the Inspector General (OIG); outside health care providers; and administrators of grievance systems.

- If you receive incoming special correspondence, it will be opened in your presence (unless otherwise authorized by the Warden) and inspected for physical contraband. Staff will neither read nor copy special correspondence. If you do not accept the letter or permit the letter to be inspected in your presence, it will be returned to the sender. Correspondence will only be treated as special correspondence or legal mail if the title and office of the sender or addressee are clearly identified on the envelope, and the envelope is marked as “special
correspondence” or "legal mail," as defined above. It is your responsibility to inform the sender of the labeling requirements for "special correspondence" or "legal mail."

❖ Outgoing "legal mail" and "special correspondence" will not be opened, inspected or read.
❖ You will not be allowed to receive or send packages without advance arrangements and prior approval from the Chief of Security. The postage for sending packages and oversized or overweight mail will be your responsibility. See the Detention Counselor for an approval form for incoming packages.
❖ Incoming and outgoing mail, with the exception of special correspondence or legal mail, shall be opened in your presence and inspected for contraband.
❖ In accordance with PBNDS 2011 2.5 Funds and Personal Property, this facility has an automated funds system and does not accept funds through the mail. Any funds received through the mail will be returned to sender.
❖ All envelopes containing outgoing general correspondence should be sent to the mailroom unsealed and ready for inspection.
❖ General correspondence shall be read or rejected only to protect the safe, secure and orderly operation of the facility, and detainees shall be notified in writing when correspondence is withheld in part or in full.
❖ All incoming and outgoing packages will be opened in your presence (unless otherwise authorized by the Warden where certain circumstances exist) and inspected for contraband. Contraband includes, but is not limited to the following: materials that depict, describe or encourage activities that could lead to physical violence such as materials dealing with the subjects of self-defense or survival, weaponry, armaments, explosives, or incendiary devices; information regarding escape plots, plans to commit illegal activities or to violate ICE rules or facility guidelines; information regarding the production of drugs or alcohol; sexually explicit material; threats, extortion, obscenity, or gratuitous profanity; a code; stamps, envelopes and blank paper; phone cards; photos larger than 5x7; books and magazines (if approved, they must be received directly from the publisher); or other contraband as outlined in this handbook. A package received without prior approval is considered contraband.
❖ Identity documents such as passports, birth certificates, etc. will be secured and provided to ICE. You are not allowed to keep an identity document in your possession. Upon your request to ICE/ERO you will be provided a certified copy of the document.
❖ When correspondence or packages are rejected, you and the sender will receive a written notice explaining the reasons for rejection.
❖ When you are released from the facility, your incoming mail will be sent to the forwarding address you provided to the officers during your intake/release. If you do not provide a forwarding address, your mail will be endorsed, “No Forwarding Address, Return to Sender.” All such mail will be returned to the U.S. Postal Service.
❖ To obtain paper, writing implements and envelopes for your personal use, submit an Inmate/Detainee Request form to the Unit Team.
❖ Postage stamps may be purchased from the commissary for outgoing mail. Indigent detainees will be allowed postage to mail an unlimited amount of special correspondence or legal mail, within reason; three pieces of general correspondence; and/or packages deemed necessary by ICE. To be considered indigent, you must have maintained a balance of $15.00 or less on your CoreCivic/TCDF account for the past 10 days.)

CONTACTING ICE STAFF

❖ Scheduled hours and days that ICE staff will be available to you in your unit are Tuesdays and Thursdays between the hours of 09:00am-3:00 pm. Any changes to this schedule shall be posted in your housing unit. The local ICE office address is U.S. Immigration and Customs Enforcement, 5441 Watson Drive, Albuquerque, NM 87106. Phone: (505) 452-4771. You may call the local ICE office Monday thru Friday, from 0800 to 1600 hours.
❖ The ICE Officer in Charge (OIC), the Assistant Officer in Charge (AOIC) and designated department heads will conduct weekly unannounced (not scheduled) visits to your housing area. The purpose of these visits is to address your personal concerns and observe your living and working conditions. You have the opportunity to submit written questions, requests or concerns to ICE staff utilizing the ICE Special Correspondence form. The
ICE Special Correspondence Form should be placed in the mailbox labeled “ICE” in your housing area. You may obtain assistance from another detainee, detention housing officer or other facility staff in preparing your request form. The ICE staff receiving your request form will respond as soon as possible but not later than within 72 hours from receiving your request. This procedure is not to be used for submitting formal grievances. (See “Grievance” section.)

- ICE staff will have the keys for the ICE mailboxes, located in the housing unit. ICE staff will pick up the requests, facility staff do not have access to these boxes.
- For additional contact information, please reference the last page of this handbook.

**Torrance County Detention Facility Address:**

CoreCivic/TCDF  
P.O. Box 837  
Estancia, New Mexico 87016

To write to the local ICE office, please utilize the following address:

U.S. Immigration and Customs Enforcement, ERO  
5441 Watson Drive  
Albuquerque, NM 87106

To write to the ICE El Paso Field Office, please utilize the following address:

U.S. Immigration and Customs Enforcement,  
El Paso Field Office  
11541 Montana Ave., Suite E  
El Paso, TX 79936

Please mark your envelope as referenced above.

**NOTARY, COPIES AND RELEASE OF FUNDS**

- **NOTARY** - Notary assistance may be obtained by sending a request to the Unit Team. You will be contacted as soon as possible to accomplish the task.
- **COPIES** - Request for copies of legal material should be forwarded to the Unit Team.
- **RELEASE OF FUNDS** – Request for Release of Funds Form (2-5A) should be submitted to the Unit Management Team for approval. You may be allowed access to personal funds to pay for legal services. Contact your unit management staff if you have any questions. **You will not be allowed to send or transfer money from your account to other detainees account within CoreCivic/TCDF.**

**DETAINEE DISCIPLINE**

In a facility where many individuals live together in a relatively small amount of space, it is extremely important that order and discipline be maintained. Discipline and order are not only for the benefit of the staff, but also for the safety and welfare of you and all other detainees. While many problems can be solved informally through counseling, disciplinary measures must occasionally be imposed.
Rules of Conduct/ Disciplinary Procedures

You are expected to abide by established rules and facility schedules during your time at the TCDF. These rules are posted in each housing unit and should be thoroughly reviewed immediately upon housing unit assignment.

A list of offenses and sanctions is included in the rules of conduct (see below). There will be an informal and formal discipline program. The informal procedure addresses minor infractions. The formal process will handle more serious offenses. If you are involved in an incident that results in formal charges being placed on you, an investigation will normally be initiated within 24 hours of staff becoming aware of the incident. Upon completion of the investigation (normally within 24 hours, but up to 72 hours), you will be provided written notice of the charges against you and advised of your due process rights.

If you are charged with violating a prohibited act in a High Moderate (300) or Low Moderate (400) category, a hearing will normally be conducted and resolved by the Unit Disciplinary Committee (UDC). During this process, you have the right to remain silent, may call witnesses, as long as it does not endanger institutional safety, and present documentary evidence.

The UDC may refer the incident to the Institutional Disciplinary Panel (IDP) or the Disciplinary Hearing Officer (DHO) at their discretion. All Greatest (100) and High (200) category offenses must be referred to the IDP or the DHO. The investigating officer or the UDC hearing will normally hold the IDP/DHO hearing within 48 hours of referral, unless waived by you, or you request more time to prepare. You will receive translation or interpretation services throughout the investigative, disciplinary and appeals process, as needed.

Disciplinary Severity Scale and Prohibited Acts

Appendix 3.1.A: Offense Categories

I. “Greatest” Offense Category

A. Prohibited Acts

100 Killing

101 Assaulting any person (includes sexual assault)

102 Escape from escort; escape from a secure facility

103 Setting a fire (charged with this act in this category only when found to pose a threat to life or a threat of serious bodily harm or in furtherance of a prohibited act of greatest severity [e.g., a riot or an escape]; otherwise the charge is classified as Code 222, 223 or 322))

104 Possession or introduction of a gun, firearm, weapon, sharpened instrument, knife, dangerous chemical, explosive, escape tool, device or ammunition

105 Rioting

106 Inciting others to riot

107 Hostage-taking

108 Assaulting a staff member or any law enforcement officer

25
109 Threatening a staff member or any law enforcement office with bodily harm

B. Sanctions
1. Initiate criminal proceedings
2. Disciplinary transfer (recommend)
3. Disciplinary segregation (up to 60 days)
4. Make monetary restitution, if funds are available
5. Loss of privileges (e.g., commissary, vending machines, movies, recreation, etc.)

II. “High” Offense Category
A. Prohibited Acts

200 Escape from unescorted activities open or secure facility, proceeding without violence
201 Fighting, boxing, wrestling, sparring and any other form of physical encounter, including horseplay that causes or could cause injury to another person, except when part of an approved recreational or athletic activity
202 Possession or introduction of an unauthorized tool
203 Loss, misplacement or damage of any restricted tool
204 Threatening another with bodily harm
205 Extortion, blackmail, protection and demanding or receiving money or anything of value in return for protection against others, avoiding bodily harm or avoiding a threat of being informed against
206 Engaging in sexual acts
207 Making sexual proposals or threats
208 Wearing a disguise or mask
209 Tampering with or blocking any lock device
210 Adulterating of food or drink
211 Possessing, introducing, or using narcotics, narcotic paraphernalia or drugs not prescribed for the individual by the medical staff
212 Possessing an officer’s or staff member’s clothing
213 Engaging in or inciting a group demonstration
214 Encouraging others to participate in a work stoppage or to refuse to work
215 Refusing to provide a urine sample or otherwise cooperate in a drug test
216 Introducing alcohol into the facility
217 Giving or offering an official or staff member a bribe or anything of value
218 Giving money to, or receiving money from, any person for an illegal or prohibited purpose (e.g., introducing/conveying contraband)
219 Destroying, altering, or damaging property (government or another person’s) worth more than $100

220 Being found guilty of any combination of three or more high moderate or low moderate offenses within 90 days

222 Possessing or introducing an incendiary device (e.g., matches, lighter, etc.)

223 Engaging in any act that could endanger person(s) and/or property

B. Sanctions
1. Initiate criminal proceedings
2. Disciplinary transfer (recommend)
3. Disciplinary segregation (up to 30 days)
4. Make monetary restitution, if funds are available
5. Loss of privileges (e.g., commissary, vending machines, movies, recreation, etc.)
6. Change housing
7. Remove from program and/or group activity
8. Loss of job
9. Impound and store detainee’s personal property
10. Confiscate contraband
11. Restrict to housing
12. Warning

III. “High Moderate” Offense Category
A. Prohibited Acts
   300 Indecent exposure
   301 Stealing (theft)
   302 Misusing authorized medication
   303 Loss, misplacement or damage of a less restricted tool
   304 Lending property or other item of value for profit/increased return
   305 Possessing item(s) not authorized for receipt or retention and not issued through regular channels
   306 Refusing to clean assigned living area
   307 Refusing to obey the order of a staff member or officer (may be categorized and charged as a greater or lesser offense, depending on the kind of disobedience: continuing to riot is Code 105—Rioting; continuing to fight Code 201—Fighting; refusing to provide a urine sample, Code 215—Refusing to provide a urine sample or otherwise cooperate in a drug test).
   308 Insolence toward a staff member
   309 Lying or providing false statement to staff
310 Counterfeiting, forging or other unauthorized reproduction of money proceedings or other official document or item (e.g., security document, identification card, etc.); may be categorized as greater or lesser offense, depending on the nature and purpose of the reproduction (e.g., counterfeiting release papers to effect escape—Code 102 or 200).

311 Participating in an unauthorized meeting or gathering

312 Being in an unauthorized area

313 Failing to stand count

314 Interfering with count

315 Making, possessing, or using intoxicant(s)

316 Refusing a breathalyzer test or other test of alcohol consumption

317 Gambling

318 Preparing or conducting a gambling pool

319 Possessing gambling paraphernalia

320 Unauthorized contact with the public

321 Giving money or another item of value to, or accepting money or another item of value from, anyone, including another detainee, without staff authorization

322 Destroying, altering, or damaging property (government or another person’s) worth equal to or less than $100

323 Signing, preparing, circulating, or soliciting support for group petitions that threaten the security or damaging property (government or another person’s) worth equal to or less than $100

323 Signing, preparing, circulating, or soliciting support for group petitions that threaten the security or orderly operation of the facility.

B. Sanctions

1. Initiate criminal proceedings
2. Disciplinary transfer (recommend)
3. Disciplinary segregation (up to 72 hours)
4. Make monetary restitution, if funds are available
5. Loss of privileges (e.g. commissary, vending machines, movies, recreation, etc.)
6. Change housing
7. Remove from program and/or group activity
8. Loss of job
9. Impound and store detainee’s personal property
10. Confiscate contraband
11. Restrict to housing unit
12. Reprimand
13. Warning

IV. "Low Moderate" Offense Category

A. Prohibited Acts

400 Possessing property belonging to another person
401 Possessing unauthorized clothing
402 Malingering; feigning illness
403 Smoking where prohibited
404 Using abusive or obscene language
405 Tattooing, body piercing or self-mutilation
406 Unauthorized use of mail or telephone (with restriction or temporary suspension of the abused privileges often the appropriate sanction)
407 Conduct with a visitor in violation of rules and regulations (with restriction or temporary suspension of visiting privileges often the appropriate sanction)
408 Conducting a business
409 Possessing money or currency, unless specifically authorized
410 Failing to follow safety or sanitation regulations
411 Unauthorized use of equipment or machinery
412 Using equipment or machinery contrary to posted safety standards
413 Being unsanitary or untidy; failing to keep self and living area in accordance with posted standards

B. Sanctions

1. Loss of privileges, commissary, vending machines, movies, recreation, etc.
2. Change housing
3. Remove from program and/or group activity
4. Loss of job
5. Impound and store detainee’s personal property
6. Confiscate contraband
7. Restrict to housing unit
8. Reprimand
9. Warning

Institution Disciplinary Panel (IDP)

- Shall conduct formal hearing on Incident Reports referred from investigations or UDCs and may impose higher level sanctions for "greatest" and "high" level prohibited acts.
As a detainee charged with a prohibited act(s), if referred to IDP for disposition, you will have the following rights:

1. The right to have a written copy of the charge(s) against you at least 24 hours prior to appearing before the IDP.
2. Upon request, or automatically if the detainee is illiterate, has limited English language skills or otherwise needs special assistance, the right to have a full time member of staff who is reasonably available to assist you before the IDP.
3. The right to call witnesses and present documentary evidence on your behalf, provided institutional safety would not be jeopardized.
4. The right to remain silent. Your silence may be used to draw an adverse inference against you. However, your silence alone may not be used to support a finding that you committed a prohibited act.
5. The right to be present throughout the IDP decision, except during committee deliberations and where institutional safety would be in jeopardy.
6. The right to be advised of the IDP decision in writing and the facts supporting the panel’s decision, except where institutional safety would be jeopardized.
7. The right to appeal the decision of the IDP by means of the detainee grievance procedure to the Warden.

Staff Representation for the IDP

The Warden shall upon the detainee’s request, assign a staff representative to help prepare a defense prior to the commencement of the IDP. This help shall be automatically provided for detainees who are illiterate, have limited English-language skills, or who are without means of collecting and presenting essential evidence. Detainees shall also have the option of receiving assistance from other detainees of their selection, subject to approval from the Warden.

Unit Disciplinary Committee (UDC)

The UDC will conduct hearings and, to the best extent possible, shall informally resolve cases involving high moderate or low moderate charges in accordance with the list of charges and related sanctions.

The UDC will offer the detainee the right to due process, which includes the rights to:

1. Remain silent at any stage of the disciplinary process;
2. Have a UDC hearing within 24 hours after the conclusion of the investigations, unless the detainee:
   i. Waives the notification period and requests an immediate hearing, or
   ii. Requests more time to gather evidence or otherwise to prepare a defense;
3. Attend the entire hearing (excluding committee deliberations) or waive the right to appear.
4. Present statements and evidence, including witness testimony on his/her own behalf; and
5. Appeal the committee's determination through the detainee grievance process

The detainee will receive copies of:

- The UDC decision which will contain the reason for the disposition and sanctions imposed;
- Written notification of charges and hearing before the IDP; and
- A copy of the report at the conclusion of the disciplinary hearing.

CONFIDENTIAL INFORMANTS – The UDC or IDP shall disclose as much confidential information as may be disclosed without jeopardizing the safety and security of facility staff and other persons, and shall include in the hearing record the factual basis for finding the information reliable.
SANCTIONS – Range from the withholding of privilege(s) to segregation.

- While a detainee may be charged with multiple prohibited acts and may receive multiple sanctions for one incident, sanctions arising from a single incident shall run concurrently.

APPEAL – Detainees can appeal disciplinary decisions through the formal grievance process.

EXPUNGEMENT - If a detainee is found not guilty of an offense, major or minor, either after the hearing or the appeal, all reference to that offense will be removed from their file.

CRIMINAL MISCONDUCT – The TCD, in coordination with the ICE Field Office Director, shall work with prosecutors and other law enforcement officials to ensure that detainees who engage in serious criminal activity, including violence against staff and other detainees, face criminal prosecutions when appropriate.

GRIEVANCE PROCEDURES

- The TCDF provides a means for all detainees to address complaints regarding facility conditions, treatment, medical care and policies and procedures. Most matters can and should be resolved directly and promptly between the detainee and staff.

- **MEDICAL GRIEVANCES:** Medical grievances must be placed in the box marked "medical" or "sick call". All detainees have access to an informal resolution process to resolve their complaints. At any time the informal resolution process has not provided successful resolution of the complaint or in the event of an emergency grievance, detainees may use the formal grievance process. All complaints will be assessed in a fair and impartial manner. Resolution in the best interest of the detainee and the facility is the primary goal.

- You can invoke the grievance process regardless of disciplinary, classification, or other administrative decisions to which you may be subject.

- You may not submit a grievance on behalf of another detainee; however, assistance from a staff member or another detainee may be provided when necessary to communicate the problem on the grievance form. Grievances are considered special correspondence.

- You will not be subject to retaliation, reprisal, harassment, or discipline for use or participation in the informal resolution process or grievance process. Any allegations of this nature will be thoroughly investigated by the Warden.

- If it is determined by the Warden that you are deliberately abusing the grievance system through excessive filing of grievances and/or repeated refusal to follow procedures, the Warden may suspend your right to file additional grievances until all pending grievances have been resolved. Continued abuse may result in an adverse action initiated against you.

- With the exception of emergency grievances, you should utilize the informal resolution process concerning questions, disputes, or complaints prior to the submission of a formal grievance. You may orally present your complaint to any staff member at any time of the event or submit the CoreCivic form, 14-5A Informal Resolution Form, to the housing officer or unit staff.

- While you are free to bypass or terminate the informal grievance process and proceed directly to the formal grievance stage, you are encouraged to utilize the informal process and allow the complaint to be resolved at the lowest level. Complaints should be, whenever possible, resolved through direct contact with the staff responsible for the particular issue and via two-way communication encouraged between staff and detainees.
  - If you are not satisfied with the results of the informal resolution process, you may submit a 14-5B ICE Detainee Grievance Form to the Grievance Officer by placing it in the box marked "grievance" in the housing unit. The Grievance Officer will check the grievance mail boxes daily, excluding weekends and holidays. The appropriate department head will act on the grievance within five (5) working days through informal or formal resolution and provide you with a written response.

- When filing a grievance, if a detainee needs assistance in preparing a grievance or needs assistance due to impairments or disabilities, or interpretation/translation services, detainees with limited English proficiency (LEP) and assistance with limited literacy, he or she may request assistance from a staff member.
If you do not accept the grievance decision, you may file an appeal and indicate so on your grievance response and place it in the grievance box. The Grievance Appeals Board (GAB) will convene to study the grievance within five (5) working days of your appeal. Within five (5) working days of reaching a decision, the GAB will provide you with a response to the grievance in writing.

- If you disagree with the Grievance Appeals Board (GAB), you may appeal to the Warden.
- The Warden, and in some cases the ICE Field Office Director (and/or designee), shall review the finding of the Grievance Appeals Board (GAB) will provide you with a written decision within five (5) days of receiving the appeal.

A copy of all grievances will be maintained in your detention file.

If you submit a grievance for review and you are released/deported, efforts to resolve the grievance will normally continue. It is your responsibility to notify the Grievance Officer of your release/deportation and provide a forwarding address and any other pertinent information.

**EMERGENCY GRIEVANCES** – Detainees may file an emergency grievance for incidents that involve an immediate threat to health, safety, or welfare, and will receive a written response in a timely manner.

There is no time limit on when you may submit a grievance regarding an allegation of sexual abuse.

At any point, you have the right to file a complaint directly to the Department of Homeland Security (DHS) OIG about staff misconduct, physical or sexual abuse or civil rights violations; complaints may be filed by calling the DHS OIG Hotline at 1-800-323-8603, or you may write to:

Department of Homeland Security  
Washington, D.C. 20528  
Attn: Office of the Inspector General

**NON-GRIEVABLE MATTERS** - The following matters are not grievable by detainees through the grievance process:
1. State and federal court decisions;
2. State and federal laws and regulations;
3. Final decisions on grievances;
4. Contracting agency (ICE) policies, procedures, decisions or matters (i.e., institutional transfers, release/deportations decisions, etc.);
5. No grievance may be submitted on behalf of another detainee.

**SEGREGATION/SHORT STAY UNIT**

**Administrative Segregation**

1. Intended for detainees with special housing requirements;
2. Pending investigation/hearing of prohibited acts(s);
3. Medical observation;
4. Pending a transfer or release within twenty-four (24) hours;
5. Security risk; or
6. Protective custody.

**Disciplinary Segregation**

1. Special housing unit for detainees who are a serious disruption to general population;
2. Require additional physical confines; or
3. Have received a sanction by the IDP.
Programs and Services

1. Programs and services as offered to general population are available to administrative segregation.

2. Detainees in Administrative Segregation will be offered at least one hour of recreation or exercise opportunities per day, seven (7) days a week. Detainees in Disciplinary Segregation will be offered one (1) hour of recreation or exercise opportunity per day, five days a week.

3. The law library is available while in RHU. If there is a security concern, a mobile LexisNexis computer will be taken to the RHU for detainees to use during their scheduled time. If more time is needed, submit a written request to the library staff. Photocopies, notary services, and all other law library needs are available to detainees by request to library or unit team staff.

4. The general library is available on a weekly basis.

5. Medical care/sick call for RHU detainees will be provided by Health Services staff through daily rounds.

6. The TCDF provides an opportunity for you to have one (1) visit per week (Monday through Sunday) for up to one (1) hour of contact visitation with family and friends. Disruptive conduct by either party will result in the termination of the visit and may have an adverse affect on future visits.

7. Detainees in RHU will be allowed to attend religious services if security is not compromised. If necessary, the Chaplain will minister to detainees in RHU or, upon special request and considering security concerns, arrangements can be made for religious volunteers of your faith to conduct one-on-one services.

8. Personal hygiene items are available upon request from the RHU staff. Showers are available on Mondays, Wednesdays and Fridays between the hours between 8:00 am and 4:00 pm.

9. Mail will be picked up from RHU by 8:30am Monday through Friday, except on holidays. Mail will handled for RHU detainees in the same manner as general population detainees.

10. Detainees in RHU will be allowed to attend Group Legal Rights Presentations, if security is not compromised. If it becomes necessary, presentations may be made to individuals in RHU, pending agreement with the presenter and security can be maintained. If a detainee in RHU cannot attend for this reason, and both he/she and the presenter(s) so request, alternative arrangements will be made.

11. Prior to being released from RHU, detainees will be re-evaluated/reclassified to ensure that they have been properly classified and are housed in an appropriate housing unit.

12. Laundry will be picked up, washed and returned to RHU according to the same schedule as set for general population.

13. All other services not specifically mentioned in this section regarding RHU will be subject to the same access procedures as outlined for general population detainees.

MEDICAL CARE

Health Services provides medical care to detainees at this facility. If you are ill or in need of medical attention, you must submit a sick call form. Ask any staff member for a form, describe your medical issue, keep completed sick call form with you and hand to the nurse when you are called to the sick call clinic. Do not place in a box or hand to non-medical staff. If it is an emergency, you must notify your housing unit officer, who will contact the medical staff.

SICK CALL

- Sick call at the TCDF is provided by Health Services staff to all detainees, from the time of admission to the time of release, in order to provide continuous medical care.
Clinic Hours - The clinic will be open and nursing staff available twenty-four (24) hours a day. The facility health care providers schedule appointments Monday through Friday and may schedule appointments on weekends/holidays. Sick call hours are per posted schedules, seven (7) days per week.

ACCESS TO MEDICAL SERVICES

Routine Medical Services - If you are experiencing non-emergency medical problems, submit a sick call form – request a form from a staff member. If the need exists, medical will schedule you to see medical personnel. Appointments are scheduled according to medical necessity.

Emergency Medical Services - If you are experiencing an emergency medical problem, notify the officer stationed in your area. The nursing staff will be notified and appropriate action will be taken by them to immediately resolve your medical problems. Trained staff is available to administer emergency first aid and life saving techniques. Nursing staff and doctors are always available through on-call services.

Chronic Care Services - The clinic provides chronic care services to those detainees who require medication renewals, treatments and follow-up care for specific illnesses (i.e. high blood pressure, diabetes, heart conditions, asthma, etc.). These services are provided on a regular basis.

Living wills are available through Health Services upon request.

DO NOT come to the clinic without prior permission. The detention officer in your housing unit must call the clinic first to obtain prior approval for you to visit the clinic.

Mental Health Services - If you are experiencing mental health problems, follow the procedures outlined above under routine/emergency services. You will be seen by a health care provider who will determine if a mental health referral is needed.

Dental Services - If you are experiencing dental health problems, follow the procedures outlined above under routine/emergency medical services. You will be seen by the health care provider who will determine if a dental referral is needed. Provisions will be made for emergency dental needs.

Medication

1. KOP (Keep on Person) medications are medications that detainees are allowed to keep in their possession. KOP medication must be stored and secured in your locker. Medications found in your locker or property that was not prescribed to you will be confiscated as contraband and disciplinary action will be taken. Detainees found not taking their medications as instructed, or sharing your medication, will be taken off KOP status and will receive their medications under supervision of the nursing staff. Medication removed from the KOP package will be confiscated as contraband. KOP pill line is Monday, Tuesday, Thursday, and Friday afternoons.

2. Non-KOP medications are dispensed at pill call daily at the following times: 8:00am and 8:00pm.

AIDS/HIV Education/Testing - Testing for AIDS/HIV are available and education services are provided to all detainees. You may request these services from the medical staff at sick call sign-up.

Pill Line (Med-Line) - The location is the Medical Department Window, between C-20 and C-30 Slider. However, location of med-line may change due to the needs of the facility.

- Inmates are responsible to report to med-line when called. Staff will announce med-Line in the housing unit. You will be given a few minutes to be ready by the door, to be searched. You must be in full uniform, shirt tucked in, with your identification badge.
- If you are not prescribed medication, you cannot go to med-Line. This is not a time to roam the halls or request to see the nurse or request sick call.
- You must present your identification badge in order to receive your medications. All medications will be taken in front of the nurse and/or a security staff member, who will inspect your mouth and hands to ensure you have swallowed your medication.
- A disciplinary report may be issued to anyone hiding or taking another inmate/detainee's medication.