

A. Type of Facility Reviewed

<input type="checkbox"/>	ICE Service Processing Center
<input type="checkbox"/>	ICE Contract Detention Facility
<input checked="" type="checkbox"/>	ICE Intergovernmental Service Agreement

B. Current Inspection

Type of Inspection	
<input type="checkbox"/> Field Office	<input checked="" type="checkbox"/> HQ Inspection
Date[s] of Facility Review	
5/8/2018 - 5/10/2018	

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review	
3/28/2017 - 3/30/2017	
Previous Rating	
<input checked="" type="checkbox"/> Meets Standards	<input type="checkbox"/> Does Not Meet Standards

D. Name and Location of Facility

Name	Cibola County Correctional Center
Address (Street and Name)	2000 Cibola Loop
City, State and Zip Code	Milan, NM 87021
County	Cibola
Name and Title of Facility Administrator (Warden/OIC/Superintendent)	
Telephone # (Include Area Code)	
Field Office / Sub-Office (List Office with oversight responsibilities)	Albuquerque, New Mexico
Distance from Field Office	85 miles

E. ICE Information

Name of Inspector (Last Name, Title and Duty Station)	/ LCI/Detainee Rights SME / Nakamoto Group
Name of Team Member / Title / Duty Location	/ Medical SME / Nakamoto Group
Name of Team Member / Title / Duty Location	/ Safety SME / Nakamoto Group
Name of Team Member / Title / Duty Location	/ Security SME / Nakamoto Group
Name of Team Member / Title / Duty Location	/ Medical SME / Nakamoto Group

F. CDF/IGSA Information Only

Contract Number	Date of Contract or IGSA
Basic Rates per Man-Day	
Other Charges: (If None, Indicate N/A)	

Estimated Man-days Per Year

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G. Accreditation Certificates

List all State or National Accreditation[s] received:
<input checked="" type="checkbox"/> Check box if facility has no accreditation[s]

H. Problems / Complaints (Copies must be attached)

The Facility is under Court Order or Class Action Finding	
<input type="checkbox"/> Court Order	<input type="checkbox"/> Class Action Order
The Facility has Significant Litigation Pending	
<input type="checkbox"/> Major Litigation	<input type="checkbox"/> Life/Safety Issues
<input checked="" type="checkbox"/> Check if None.	

I. Facility History

Date Built	
Date Last Remodeled or Upgraded	
Date New Construction / Bedspace Added	
Future Construction Planned	
<input type="checkbox"/> Date:	
Current Bedspace	Future Bedspace (# New Beds only)
	Number: Date:

J. Total Facility Population

Total Facility Intake for previous 12 months
Total ICE Mandays for Previous 12 months

K. Classification Level (ICE SPCs and CDFs Only)

	L-1	L-2	L-3
Adult Male	N/A	N/A	N/A
Adult Female	N/A	N/A	N/A

L. Facility Capacity

	Rated	Operational	Emergency

M. Average Daily Population

	ICE	USMS	Other

N. Facility Staffing Level

Security:	Support:

Significant Incident Summary Worksheet

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

<i>Incidents</i>	<i>Description</i>	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault: Offenders on Offenders ¹	Types (Sexual ² , Physical, etc.)	N/A	Physical	Physical	Physical
	With Weapon	0	0	0	0
	Without Weapon	4	1	1	2
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	N/A	N/A	Physical	N/A
	With Weapon	0	0	0	0
	Without Weapon	0	0	1	0
Number of Forced Moves, incl. Forced Cell moves ³		0	0	2	0
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		0	0	0	0
Number of Times Special Reaction Team Deployed/Used		0	0	2	0
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	N/A	N/A	N/A	N/A
	Type (C=Chair, B=Bed, BB=Board, O=Other)	N/A	N/A	N/A	N/A
Number of Times Canines Used in Facility		0	0	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	0	0	0
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	23	4	17	44
	# Resolved in favor of Offender/Detainee	3	1	2	12
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	N/A	N/A	N/A	N/A
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	6	36	25	22
	# Psychiatric Cases referred for Outside Care	0	0	0	0

¹ Any attempted physical contact or physical contact that involves two or more offenders

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

³ Routine transportation of detainees/offenders is not considered "forced"

⁴ Any incident that involves four or more detainees/offenders, includes gang fights, organized multiple hunger strikes, work stoppages, hostage situations, major fires, or other large scale incidents.

DHS/ICE Detention Standards Review Summary Report

1. Meets Standards 2. Does Not Meet Standards 3.Repeat Finding 4. Not Applicable		1	2	3	4
PART 1 SAFETY					
1	Emergency Plans	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Environmental Health and Safety	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Transportation (By Land)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PART 2 SECURITY					
4	Admission and Release	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Classification System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Contraband	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Facility Security and Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Funds and Personal Property	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Hold Rooms in Detention Facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Key and Lock Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Population Counts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Post Orders	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	Searches of Detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	Sexual Abuse and Assault Prevention and Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	Special Management Units	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16	Staff-Detainee Communication	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17	Tool Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18	Use of Force and Restraints	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PART 3 ORDER					
19	Disciplinary System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PART 4 CARE					
20	Food Service	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21	Hunger Strikes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22	Medical Care	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23	Personal Hygiene	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24	Suicide Prevention and Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25	Terminal Illness, Advance Directives, and Death	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PART 5 ACTIVITIES					
26	Correspondence and Other Mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27	Escorted Trips for Non-Medical Emergencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
28	Marriage Requests	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29	Recreation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30	Religious Practices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31	Telephone Access	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32	Visitation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33	Voluntary Work Program	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PART 6 JUSTICE					
34	Detainee Handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35	Grievance System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36	Law Libraries and Legal Material	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37	Legal Rights Group Presentations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PART 7 ADMINISTRATION & MANAGEMENT					
38	Detention Files	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39	News Media Interviews and Tours	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40	Staff Training	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41	Transfer of Detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

LCI Review Assurance Statement

By signing below, the Lead Compliance Inspector (LCI) certifies that all findings of noncompliance with policy or inadequate controls contained in the Inspection Report are supported by evidence that is sufficient and reliable. Furthermore, findings of noteworthy accomplishments are supported by sufficient and reliable evidence. Within the scope of the review, the facility is operating in accordance with applicable law and policy, and property and resources are efficiently used and adequately safeguarded, except for the deficiencies noted in the report.

Lead Compliance Inspector: (Print Name)	Signature
Title & Duty Location	Date
Lead Compliance Inspector, The Nakamoto Group, Inc.	5/10/2018

Team Members

Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
Medical SME, The Nakamoto Group, Inc.	Safety SME, The Nakamoto Group, Inc.
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
Security SME, The Nakamoto Group, Inc.	Medical SME, The Nakamoto Group, Inc.

Recommended Rating:

☒ Meets Standards
☐ Does Not Meet Standards

Comments: This inspection was conducted to determine the overall compliance with the ICE Performance-Based National Detention Standards (PBNDS) 2011. The following are the PBNDS 2011 additions/changes to the standards listed on page three:

- Medical Care (Women), a new standard, was rated Not Applicable (N/A);
- Classification System is now titled Custody Classification System;
- Suicide Prevention and Intervention is now titled Significant Self-Harm and Suicide Prevention and Intervention;
- Escorted Trips for Non-Medical Emergencies is now titled Trips for Non-Medical Emergencies;
- News Media Interviews and Tours is now titled Interviews and Tours;
- Transfer of Detainees is now titled Detainee Transfers

There were three allegations of sexual assault during the inspection period. There was one allegation of detainee sexual assault involving penis/anal penetration. The allegation was made more than thirty days after the incident, was investigated and was determined to be unsubstantiated. There were two allegations of detainee on detainee assault involving inappropriate touching. Both allegations were investigated and determined to be unfounded. None of the allegations required forensic evidence gathering or examination. None of the allegations resulted in criminal investigations or prosecutions.

There have been no serious suicide attempts or suicides at the facility since the last inspection. There was one ICE detainee hunger strike during the inspection period. The review of the ICE detainee's medical record confirmed compliance with the standard.

Tasers are not authorized for use on ICE detainees. Oleoresin capicum/pepper spray is authorized for use by staff that are certified and properly trained. The facility does not use canines. There were two calculated use of force incidents and two immediate use of force incidents involving ICE detainees during this inspection period. The calculated use of force incidents involved detainees having to be removed from their cell for refusing to follow orders given by staff. In each calculated use of force incident, confrontation-

avoidance techniques were attempted before physical force was used. Medical staff were consulted prior to the calculated uses of force and both incidents were audio-visually recorded in their entirety from beginning to end. The two immediate use of force incidents resulted from a detainee refusing to be restrained and a detainee refusing to return to their assigned housing unit. Minimal physical force was used in both incidents and medical evaluations were completed on both detainees involved once they were brought under control. No significant injuries were reported or observed on staff or detainees involved in all four use of force incidents. After-action reviews, though not all completed timely, found that the amount of force used in all incidents was determined to be appropriate and justified.