A. Type of Facility Reviewed	Estimated Man-days	Per Year			
ICE Service Processing Center					
☐ ICE Contract Detention Facility					
<b>ICE Intergovernmental Service Agreement</b>					
	G. Accreditation (				
B. Current Inspection	List all State or Natio	onal Accre	editation	n[s] receiv	ved:
Type of Inspection	NCCHC, PREA, AC				
Field Office HQ Inspection	Check box if fac	ility has n	o accre	ditation[s	]
Date[s] of Facility Review					
1/23/2019 - 1/25/2019	H. Problems / Con	nplaints	(Copies	must be	attached)
	The Facility is under				
C. Previous/Most Recent Facility Review	Court Order			ction Ord	
Date[s] of Last Facility Review	The Facility has Sign	nificant Li	tigation	Pending	
9/18/2019-9/20/2019	☐ Major Litigation		Life/Sa	fety Issue	es
Previous Rating	Check if None.				
Meets Standards Does Not Meet Standards					
	I. Facility History	7			
D. Name and Location of Facility	Date Built				
Name					
Tulsa County Jail (David L. Moss Criminal Justice Center)	Date Last Remodele	d or Upgr	aded		
Address (Street and Name)		10			
300 N. Denver Ave.	Date New Construct	ion / Beds	space A	dded	
City, State and Zip Code			•		
Tulsa, OK 74103	Future Construction	Planned			
County	☐ ■ Dat	e:			
Tulsa	Current Bedspace	Future	Bedspa	ce (# Nev	w Beds only)
Name and Title of Facility Administrator		Numbe		Date:	•
(Warden/OIC/Superintendent)		_			
(Warden of or Superintendent)	J. Total Facility P	opulation	1		
Telephone # (Include Area Code)	Total Facility Intake			nonths	
Telephone ii (merade i med ecode)		•			
Field Office / Sub-Office (List Office with oversight	Total ICE Mandays	for Previo	us 12 m	onths	
responsibilities)					
Dallas/Tulsa					
Distance from Field Office	K. Classification L	evel (IC	E SPCs	and CD	Fs Only)
250		L-1 L-2		L-3	
	Adult Male	N/A	4	N/A	N/A
E. ICE Information	Adult Female	N/A		N/A	N/A
Name of Inspector (Last Name, Title and Duty Station)					J.
/ LCI/Detainee Rights SME / Nakamoto Group	L. Facility Capaci	tv			
Name of Team Member / Title / Duty Location		Rated	Oper	ational	Emergency
/ 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	M. Average Daily	Populatio	n		
Name of Team Member / Title / Duty Location		ICI		USMS	Other
/ Medical SME / Nakamoto Group					
/ Medical Sivil / Manamete Group				1	
F. CDF/IGSA Information Only					
Contract Number Date of Contract or IGSA	N. Facility Staffing	Level			
Date of Contract of 100A	Security:	,	Suppo	ort:	
Basic Rates per Man-Day			= appe		
Busic Rules per main buy	L.				
Other Charges: (If None, Indicate N/A)					
other charges. (If from, indicate first)					

## Significant Incident Summary Worksheet

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

Incidents	Description	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault:	Types (Sexual <sup>2</sup> , Physical, etc.)	N/A	N/A	N/A	Physical
Offenders on Offenders 1	With Weapon	0	0	0	0
	Without Weapon	0	0	0	3
Assault:	Types (Sexual Physical, etc.)	N/A	N/A	N/A	N/A
Detainee on Staff	With Weapon	0	0	0	0
	Without Weapon	0	0	0	0
Number of Forced Moves, incl. Forced Cell moves <sup>3</sup>		0	0	0	0
Disturbances <sup>4</sup>		0	0	0	0
Number of Times Chemical Agents Used		0	0	0	0
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
Restraints applied/used	Type (C=Chair, B=Bed, BB=Board, O=Other)	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	0	N/A	N/A	26
	# Resolved in favor of Offender/Detainee	0	N/A	N/A	2
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	0	N/A	N/A	8
	# Psychiatric Cases referred for Outside Care	0	0	0	0

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

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

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

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

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

## **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.	1/25/2019

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

<b>Recommended Rating:</b>	☐ Meets Standards
	Does Not Meet Standards

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

- Medical Care (Women), a new standard, was rated Meets Standard;
- 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, and;
- Transfer of Detainees is now titled Detainee Transfer.

There were no deaths or serious suicide attempts during the inspection period.

The facility does not have a canine unit for contraband detection. Tasers are authorized for personnel who have been trained in their use. The only chemical agent approved for use is oleoresin capsicum/pepper spray (OC). However, unit officers are not permitted to carry Tasers or OC in the housing units. Responding personnel, when called for assistance, may bring them into the unit to control the situation. The use of unsafe types of force such as choke holds, carotid control holds and neck restraints are not authorized.

There were no Uses of Force or SAAPI allegations involving an ICE detainee since the T.A.R. in September 2018.

The numbers reported on the Significant Incident Summary Worksheet on page 2 pertain only to ICE detainees.