| A. Type of Facility Reviewed | Estimated Man-days Per Year | | | | |
|---|---|------------|-----------|----------------|------------|
| ☐ ICE Service Processing Center | | | | | |
| ☐ ICE Contract Detention Facility | | | | | |
| ☐ ICE Intergovernmental Service Agreement | a | | | | |
| | G. Accreditation C | | | | |
| B. Current Inspection | List all State or Natio | nal Accre | editation | ı[s] receiv | ed: |
| Type of Inspection | ACA | 1:4 1 | | 1:404:04[0] | |
| Field Office HQ Inspection | Check box if faci | nty nas no | o accrec | manon[s] | |
| Date[s] of Facility Review 6/4/2019 to 6/6/2019 | U Droblems / Com | nlointa (| Conica | must be | attached) |
| 0/4/2019 to 0/0/2019 | H. Problems / Com The Facility is under | | | | |
| | Court Order | | | ction Ord | |
| C. Previous/Most Recent Facility Review | The Facility has Sign: | | | | CI |
| Date[s] of Last Facility Review | ☐ Major Litigation | | | ety Issues | ; |
| First Facility Inspection Previous Rating | Check if None. | <u>-</u> | 3110/201 | 15545. | , |
| ☐ Meets Standards ☐ Does Not Meet Standards | | | | | |
| Meets Standards Does Not Weet Standards | I. Facility History | | | | |
| D. Name and Location of Facility | Date Built | | | | |
| Name | | | | | |
| Folkston ICE Processing Center Annex | Date Last Remodeled | or Upgra | aded | | |
| Address (Street and Name) | | 10 | | | |
| 3424 Hwy. 252 E | Date New Construction | on / Beds | pace Ac | lded | |
| City, State and Zip Code | | | _ | | |
| Folkston, GA 31537 | Future Construction I | Planned | | | |
| County | □ Date | _ | | | |
| Charlton | Current Bedspace | | | | Beds only) |
| Name and Title of Facility Administrator | | Numbe | er: | Date: | |
| (Warden/OIC/Superintendent) | | | | | |
| | J. Total Facility Po | | | | |
| Telephone # (Include Area Code) | Total Facility Intake f | or previo | us 12 m | onths | |
| | To a Light Man 1 | ъ : | | .1 | |
| Field Office / Sub-Office (List Office with oversight | Total ICE Mandays for | or Previou | ıs 12 m | onths | |
| responsibilities) | | | | | |
| Atlanta | K. Classification L | ovol (ICI | E SDCa | and CDI | Ea Onles) |
| Distance from Field Office | K. Classification L | | | L-2 | |
| 289 miles | Adult Male | L-1 N/A | | N/A | L-3 N/A |
| E ICE Information | Adult Female | N/A | | N/A | N/A |
| E. ICE Information Name of Inspector (Last Name, Title and Duty Station) | Addit Pelliale | 11/1/ | 1 | 1 1/ /A | IN/A |
| / LCI/Detainee Rights SME / Nakamoto Group | L. Facility Capacit | v | | | |
| Name of Team Member / Title / Duty Location | | Rated | Opera | ational | Emergency |
| / Medical SME / Nakamoto Group | | uteu | Opere | | Emergency |
| Name of Team Member / Title / Duty Location | | | | | |
| / Safety SME / Nakamoto Group | | I | | ı | |
| Name of Team Member / Title / Duty Location | | | | | |
| / Security SME / Nakamoto Group | M. Average Daily P | opulation | n | | |
| Name of Team Member / Title / Duty Location | | ICE | C | USMS | Other |
| / Medical SME / Nakamoto Group | | | | | |
| | | | | | |
| F. CDF/IGSA Information Only | | | | | |
| Contract Number Date of Contract or IGSA | N. Facility Staffing | Level | | | |
| | Security: | | Suppo | rt: | |
| Basic Rates per Man-Day | | | | | |
| | | | | | |
| Other Charges: (If None, Indicate N/A) | | | | | |

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 ² , Physical, etc.) | 5 P | 2 S | 0 | 9 P |
| Offenders on Offenders ¹ | With Weapon | 0 | 0 | 0 | 0 |
| | Without Weapon | 5 | 2 | 0 | 9 |
| Assault: | Types (Sexual Physical, etc.) | 1 P | 0 | 1 P | 0 |
| Detainee on Staff | With Weapon | 0 | 0 | 0 | 0 |
| | Without Weapon | 1 | 0 | 1 | 0 |
| Number of Forced Moves, incl. Forced Cell moves ³ | | 0 | 0 | 0 | 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 | 0 | 0 |
| # Times Four/Five Point | Number/Reason (M=Medical, V=Violent Behavior, O=Other) | 0 | 0 | 0 | 0 |
| Restraints applied/used | Type (C=Chair, B=Bed, BB=Board, O=Other) | 0 | 0 | 0 | 0 |
| 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 | 87 | 12 | 45 | 106 |
| | # Resolved in favor of Offender/Detainee | 1 | 0 | 0 | 0 |
| Deaths | Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other) | 0 | 0 | 0 | 0 |
| | Number | 0 | 0 | 0 | 0 |
| Psychiatric / Medical Referrals | # Medical Cases referred for Outside Care | 18 | 0 | 5 | 19 |
| | # 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. I | Meets Standards 2. Does Not Meet Standards 3.Repeat Finding 4. Not Applicable | 1 | 2 | 3 | 4 |
| | RT 1 SAFETY | | | | |
| 1 | Emergency Plans | \boxtimes | | | |
| 2 | Environmental Health and Safety | \boxtimes | | | |
| 3 | Transportation (By Land) | \boxtimes | | | |
| | RT 2 SECURITY | | | | |
| 4 | Admission and Release | | | | |
| 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 | | | | |
| 10 | Key and Lock Control | | | | |
| 11 | Population Counts | | | | |
| 12 | | | <u> </u> | | |
| 13 | | | | | |
| 14 | Sexual Abuse and Assault Prevention and Intervention | | | | |
| | | | | | |
| 15 | Special Management Units | | | | |
| 16 | Staff-Detainee Communication | | | | |
| 17 | Tool Control | ₩ | | | |
| 18 | Use of Force and Restraints | | | | |
| | RT 3 ORDER | <u> </u> | | _ | |
| 19 | Disciplinary System | | | | |
| | RT 4 CARE | 5 7 | | | |
| 20 | Food Service | | Щ | | |
| 21 | Hunger Strikes | | | | |
| 22 | Medical Care | | | | |
| 23 | Personal Hygiene | | | | |
| 24 | Suicide Prevention and Intervention | | | | |
| 25 | Terminal Illness, Advance Directives, and Death | | | | |
| | RT 5 ACTIVITIES | | | | |
| 26 | Correspondence and Other Mail | \boxtimes | | | |
| 27 | Escorted Trips for Non-Medical Emergencies | | | | \boxtimes |
| 28 | Marriage Requests | \boxtimes | | | |
| 29 | Recreation | \boxtimes | | | |
| 30 | Religious Practices | \boxtimes | | | |
| 31 | Telephone Access | \boxtimes | | | |
| 32 | Visitation | \boxtimes | | | |
| 33 | Voluntary Work Program | \boxtimes | | | |
| PA | RT 6 JUSTICE | | | | |
| 34 | Detainee Handbook | \boxtimes | | | |
| 35 | Grievance System | \boxtimes | | | |
| 36 | Law Libraries and Legal Material | \boxtimes | | | |
| 37 | Legal Rights Group Presentations | \boxtimes | | | |
| | RT 7 ADMINISTRATION & MANAGEMENT | | | | |
| 38 | Detention Files | \boxtimes | | | |
| 39 | News Media Interviews and Tours | \boxtimes | | | |
| 40 | Staff Training | \boxtimes | | | |
| 41 | Transfer of Detainees | \boxtimes | | | |
| | | | | | |

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/ Detainee Rights SME, Nakamoto Group, Inc. | 6/6/2019 |
| | |
| Team Members | |

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

| Recommended Rating: | Meets Standards |
|---------------------|---------------------------|
| | ■ Does Not Meet Standards |

Comments: This inspection was conducted to determine overall compliance with the ICE Performance-Based National Detention Standards 2011(42 standards) which include the following additions/changes to the standards listed on page three:

- Medical Care (Women), a new standard, was rated Not Applicable;
- 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 Transfers.

There were no deaths or serious suicide attempts in the facility in the previous twelve months. ICE detainees are not charged a medical co-pay. There have been no escapes or serious attempts from the facility in the previous twelve months.

There have been two reported incidents of sexual assault or aggression on ICE detainees. On 4/23/2019, a male ICE detainee accused another male ICE detainee of inappropriate touching of his testicles. On 4/26/2019, a male ICE detainee accused another male ICE detainee of inappropriate touching of his testicles. Both cases are currently under investigation. All of the required notifications had been done promptly in both cases.

The use of chemical agents by trained certified personnel is authorized by policy. The facility does not have Tasers. The facility does not have a canine unit. The following acts and techniques are specifically prohibited when using non-deadly force: choke holds, carotid control holds, and other neck restraints; using a baton to apply choke or "come along" holds to the neck area; and intentional

baton strikes to the head, face, groin, solar plexus, neck, kidneys, or spinal column. Only ICE/ERO-approved restraint devices are authorized; deviations are prohibited.

During this inspection period there was one immediate use-of-force incident and there were no calculated use-of-force incidents. The immediate use-of-force incident occurred when two ICE detainees were observed to be having convulsions and a medical emergency was declared. Staff responded to the emergency and the detainees were taken to the medical department. When medical staff initiated their evaluation of the detainees, the detainees became non-compliant and aggressive towards staff. Consequently, officers were forced to place the detainees in restraints. Once the medical evaluation was completed, it was determined that the detainees should be transported to the local hospital for further evaluation. It is believed that the detainees' convulsions were a result of them ingesting artificial marijuana. A review of documentation confirmed that the use-of-force incident was conducted in accordance with policy. As a result of this immediate use-of-force incident, there were no detainee injuries and only a minor injury to a staff member was reported. As required by policy, the incident was reviewed by senior management.