

locks in current use shall be phased out and replaced with mortise lock sets and standard cylinders.

- c. Grand master-keying systems are not authorized.
- d. A master-keying system may be used only in housing units where detainees have individual room keys. The number of doors shall be kept to a minimum and the unit officer's key must override all functions of such locks.
- e. After removing the facility number and key cuts, the security key control officer shall cut up and dispose of worn or discarded keys and locks.
- f. Entrance/exit door locks of housing units, work areas, chapels, gyms and other areas with room capacity of 50 or more people shall meet the standards specified in the Occupational Safety and Environmental Health Manual (Chapter 3) and in the National Fire Protection Association Life Safety Code (#101). Specifically, the doors shall be equipped with prison type locking devices modified to function when pressure is applied from inside the room. Panic-hardware is an acceptable alternative to the prison-type-locking device.
- g. Individual doors to areas with room capacity of 50 or more people shall have no more than one lock each. Padlocks shall not be used on exit doors or intermediate doors along the exit route.
- h. Padlocks and/or chains may not be used on cell doors.
 - 1) *Padlocks and hasps may be used only where specified below:*
 - a) *fence-gates in areas without ceilings;*
 - b) *freezer-door interiors whose lock -release systems include panic-release device(s); and*
 - c) *vehicle roll-up door walk-through exit(s).*
 - 2) *Entrances and exits from the secured perimeter shall be controlled by sally ports, with all*

doors and gates interlocking electronically.

(Controls shall be set such that only one door can unlock at a time, canceling the electrical control of other doors until the unlocked door is returned to its secure position.)

- 3) *Under no circumstances may prison-type security keys and/or blanks—active, non-active, or discarded—be used or distributed for presentation purposes.*

5. Preventive Maintenance

The security key control officer, or designee, shall implement a preventive maintenance program.

The security key control officer shall perform preventive maintenance services, including but not limited to the following:

- 1) *adjust and service all cellblock-locking mechanisms in the Special Management Unit and in housing units with secure rooms, annually at a minimum;*
- 2) *adjust and service vehicle-gates for changing (i.e., hot/cold) weather conditions twice a year, in the spring and early fall;*
- 3) *adjust and service front-entrance and other gate operations at least once a year;*
- 4) *lubricate all other locks quarterly, per manufacturers' instructions;*
- 5) *perform maintenance checks on locks and locking systems, taking corrective action as necessary; and*
- 6) *once every five years, at least:*
 - a) *steam-clean vehicle-gates; and*
 - b) *clean locking mechanisms of front-entrance gates, other gates and cellblock locking mechanisms using steam or other means.*

The facility maintenance supervisor is responsible for door-hardware installation and maintenance (e.g., closures, hinges, pulls, kick plates, etc.), and for providing certain support

services (e.g., welding, electrical-work) to the security officer, as needed.

6. Preventive Maintenance Documentation

The security key control officer shall maintain all preventive maintenance records.

The security key control officer's preventive maintenance files shall include:

- a. date;*
- b. location of lock or locking mechanism;*
- c. type of maintenance performed;*
- d. rationale for changing key combination(s); and*
- e. signature of service provider.*

D. Key Cabinet

1. Location

An operational key cabinet large enough to accommodate all facility key rings, including keys in use, shall be located in a secure area.

This operational key cabinet shall be located in the control center. An electronic key control box may be placed outside the control center if in a secure unit.

2. Basic Construction

The key cabinet shall be constructed so that keys are visible only when being issued. Keys may never be seen by detainees or visitors.

Small, closet-type space in the control center may be used instead of a cabinet, as long as:

- a. access limitations are the same as for a key cabinet;*
- b. all other key/lock standards are met; and*
- c. the space is used solely for key control.*

In the key cabinet:

- a. keys in vertical rows shall be arranged in alphabetical order,*
- b. keys in horizontal rows shall be arranged in*

numerical order.

- c. the label identifying the letter or number of the key ring that belongs on a particular hook shall be visible even when the key ring is on the hook, and*
- d. any hook without an assigned key ring shall be tagged with a metal chit that indicates "hook not in use."*

3. Key Rings

The security officer shall implement procedures for identifying every key ring and every key on each key ring, and for preventing keys from being removed from key rings, once issued.

All key rings shall be heavy-gauge wire that has been welded or brazed to prevent removal of keys from the ring.

Two metal tags of unequal size shall be attached to each key ring:

- a. the larger tag shall identify the key ring with a number/letter corresponding to the hook number/letter; and*
- b. the smaller tag shall identify the number of keys on the key ring.*

4. Emergency Keys

Emergency keys shall be on hand for every area to or from which entry or exit might be necessary in an emergency.

- a. Emergency keys may be kept in a separate key cabinet or in a readily identified area of the regular-issue key cabinet. A separate key cabinet located in the control center is recommended for the emergency keys.*
- b. The emergency key cabinet shall contain a hook for each key ring. If an emergency key ring is kept outside the main emergency key cabinet (e.g., in a tower), a metal tag providing the key ring's location shall hang on the hook intended for that key ring in the main emergency key*

cabinet.

- c. *The emergency keys shall be cut precisely to manufacturer's specifications.*
- d. *Emergency keys shall not be rotated in and out of the lock shop.*

E. Issue of Key Rings

1. Chit System

Facilities shall use a chit system or other standard system for the issuance and accountability of key distribution. A key chit is a tag (usually metal) that identifies the person who has drawn a set of keys.

The chit shall be labeled with the officer's first initial and last name. All key rings shall be issued as needed (e.g., at the beginning of a shift, etc.) with the exchange of a chit for a key and with the chit placed on the hook from which the key was removed.

An employee who reports to work without chits must obtain temporary chits from the control room officer, which he/she can exchange for keys according to standard procedure.

- a. *The control room officer shall maintain accountability for the issued chits.*
- b. *At the end of the shift, the employee shall personally return the temporary chits to the control room officer.*

At shift rotation, to obtain keys from an officer on post, the relief officer must first exchange his/her key chit at the control room center for the key chit of the employee being relieved. The relief officer shall take his/her key chit to the employee being relieved and exchange the key chit for the appropriate ring of keys. The officer shall then count the keys on his/her ring, immediately reporting any discrepancies to the shift supervisor. If the relief officer needs to gain access to any location while heading from the control enter to his/her post, the control room officer may issue him/her a second set of keys. In such a case, the officer shall return the extra set of keys to the control room officer at the

end of the relief shift.

2. Restricted Keys

The facility administrator shall establish rules and procedures for authorizing use of restricted keys.

The control room officer must have authorization from the shift supervisor to issue a restricted key.

a. Pharmacy

Pharmacy keys shall be strictly controlled.

Ordinarily, such controls include:

- 1) maintaining pharmacy keys in a restricted keys cabinet in the control room, and issuing them only to authorized pharmacy staff; and
- 2) maintaining a second set of pharmacy keys in the lock shop.

In the event of a non-medical emergency that necessitates entry into the pharmacy by anyone other than authorized pharmacy staff, the highest-ranking supervisor on duty may authorize immediate entry to the pharmacy. The supervisor shall then document the reasons for entry and sign the authorization.

Such documentation shall not impede the immediate provision of emergency medical care to a detainee by medical staff.

b. ICE and EOIR Offices

Keys to ICE and the Executive Office for Immigration Review (EOIR) office and courtroom areas shall similarly be restricted and controlled. In the event that a key is authorized for emergency withdrawal, a copy of the restricted key form is to be provided to ICE.

3. 24-Hour Issue Keys

No key or key ring may be issued on a 24-hour basis without the facility administrator's written authorization.

A key chit identifying the borrower of the key ring shall be placed on the appropriate hook in the key cabinet, along with a metal tag marked "24-hour

issue.”

Individual authorizing record forms shall be used to record the following information about each set of 24-hour-issue keys: the key ring identifiers (number and title), the number of keys on the ring, the individual key numbers and the door each key unlocks. Each record must bear the signatures of the authorizing facility administrator, Chief of Security and the employee to whom the keys are issued.

4. Security Keys

Key rings used but not issued on a 24-hour basis because of the attached security keys shall be kept in a dedicated glass-front, lockable box in the control center. Identical boxes may be kept and used in different departments, provided staff members are authorized to receive 24-hour keys. The key to every such box shall be issued on a 24-hour basis.

The staff member removing keys from the box shall place his/her chit on the hook in place of the key ring, and shall return the keys and reclaiming the chit at the end of the shift. The individual to whom the keys were issued shall personally return the keys to the box, without exception.

Security keys may not be taken off facility property (except for bus, van and other authorized-vehicle keys). As a rule, security keys shall not be issued on a 24-hour basis.

5. Key Accountability

The facility administrator shall establish written policy and implementation procedures to ensure key accountability.

The control room officer shall conduct a key ring audit upon reporting for duty, accounting for each key ring in the control center logbook, and shall immediately report discrepancies in the record to the shift supervisor.

The control room officer shall also identify broken or bent keys. All keys (regular-issue and emergency) shall be checked and counted daily.

To ensure accountability, keys shall be issued only on the assigned key rings.

6. Request for Key Change

Key-change requests shall be submitted, in writing, to the facility administrator. Upon facility administrator approval, only the security officer may add or remove a key from a ring.

7. Split Key Ring

The splitting of key rings into separate rings is not authorized.

F. Gun-Locker Keys

Officers shall store all their weapons in individual lockers before entering the facility.

The facility administrator shall develop and implement site-specific procedures for controlling gun-locker access.

In all facilities, gun lockers shall:

1. be placed in locations where officers can continuously observe them, in person or on a video-monitor, and not in any area that has detainee or public access;
2. be used to store the weapons of all on-duty officers, except those whose assignments require them to carry weapons; and
3. not be used for long-term storage. (A staff member may arrange with the facility firearms control officer for long-term storage of a weapon in the armory.)

Chits and logbooks are useful for maintaining accountability for gun locker keys and gun locker use.

2.8 Population Counts

I. Purpose and Scope

This detention standard protects the community from harm and enhances facility security, safety and good order by requiring that each facility have an ongoing, effective system of population counts and accountability for detainees.

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 and CDFs. IGSA facilities must conform to these procedures or adopt, adapt or establish alternatives, provided they meet or exceed the intent represented by these procedures.

Various terms used in this standard may be defined in standard “7.5 Definitions.”

II. Expected Outcome

The expected outcomes of this detention standard are as follows (specific requirements are defined in “V. Expected Practices”).

Security, safety and orderly facility operations shall be maintained through an ongoing, effective system of population counts and accountability for detainees.

The facility shall provide communication assistance to detainees with disabilities and detainees who are limited in their English proficiency (LEP). The facility will provide detainees with disabilities with effective communication, which may include the provision of auxiliary aids, such as readers, materials

in Braille, audio recordings, telephone handset amplifiers, telephones compatible with hearing aids, telecommunications devices for deaf persons (TTYs), interpreters, and note-takers, as needed. The facility will also provide detainees who are LEP with language assistance, including bilingual staff or professional interpretation and translation services, to provide them with meaningful access to its programs and activities.

All written materials provided detainees shall generally be translated into Spanish. Where practicable, provisions for written translation shall be made for other significant segments of the population with limited English proficiency.

Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.

III. Standards Affected

This detention standard replaces “Population Counts” dated 12/2/2008.

IV. References

American Correctional Association, *Performance-based Standards for Adult Local Detention Facilities*, 4th Edition: 4-ALDF-2A-16, 2A-17.

ICE/ERO *Performance-based National Detention Standards 2011*:

- “2.9 Post Orders”; and
- “4.3 Medical Care.”

V. Expected Practices

A. Formal Counts

Formal counts are conducted in a predetermined manner at specific times of the day and night. A formal count shall be conducted at least once every eight hours, with a shift supervisor verifying its accuracy. Additional counts, at the discretion of the

facility, are encouraged.

1. *The formal count(s) shall be conducted at least once every eight hours (once per shift at minimum) at times determined by the Chief of Security. Counts shall be scheduled to achieve full accountability with minimal interference with daily work and activity schedules.*
2. *Count procedures must be strictly followed. If the accuracy of a count is in doubt, the officers shall do a recount and any other double-checking necessary. Officers performing the count shall never rely on a roll call.*
 - a. *An unaccompanied officer shall never perform a count in an open area (e.g., housing units, food service area). One officer shall count while a second officer observes all detainee movements, to ensure that no detainee is miscounted. Upon completing the first count, the officers shall change positions and count again.*
 - b. *The officers assigned the count shall have primary responsibility for the count accuracy, and shall be familiar with possible sources of error. The officers must know the specific manner of counting detainees in different types of locations (e.g., housing units, open-type areas, or work areas). A system for counting each detainee, including those who are outside the housing unit, shall be developed. The officers shall encourage detainees to accept the count as a facility necessity.*
 - c. *Prior to counting a detainee present, officers must make positive identification of the living body of the detainee and shall ascertain non-use of decoys (e.g., mannequins, replicas, dummies). Counting officers shall remain in the count area until the facility control center verifies and clears the count.*
 - d. *When making night counts, officers shall use*

flashlights judiciously, but with sufficient light to make a positive identification of a living body. The officer must not count a detainee based on a part or parts of clothing, hair, shoes, or the appearance of a human form.

3. *Officers shall encourage detainee cooperation; however, they shall not allow detainees to perform the count, nor participate in the preparation or documentation of the count process.*
4. *There shall be no movement of detainees during formal counts. All detainee movements into, out of and within the facility must cease before the count begins. Detainee movement shall not resume anywhere in the facility until the complete facility count has been cleared. If, while conducting a count, staff observe an unusual incident (e.g., medical emergency, criminal act), they shall cease the count and respond appropriately according to local procedures. Should an emergency arise during the count that necessitates the movement of detainees, a new count shall be conducted as soon as possible after the emergency subsides.*
5. *All detainee units/areas shall be counted simultaneously. Each detainee shall be counted at a specific location, and all movement of detainees shall cease before the count begins. Movement shall not resume until the total detainee population count is verified and cleared. The counting officer from each location shall report his/her count to the facility control officer, who is responsible for collecting and maintaining the count.*
 - a. *After the count is reported, a signed paper count slip shall be delivered to the control center. This count slip shall be used to verify the area count.*
 - b. *Count slips must be prepared and signed in indelible ink. The control center shall not accept an improperly prepared count slip or*

one that contains erasures or alterations of any kind.

- c. Both officers conducting the count must sign the count slip.*
 - d. The control officer shall take into account the current out-count in verifying the population count against the master count.*
- 6. As each area reports its count, the control officer shall indicate that count in the control log.*
 - a. If any area/unit reports an incorrect count, all areas/units shall be required to count again. If the count remains incorrect, the shift supervisor shall be notified and additional staff shall be dispatched to the count area to assist with a third count.*
 - b. No count shall be cleared until all counting errors have been corrected, or until the cause of error has been identified and corrective action taken.*
 - c. If a detainee is in the wrong count area, the detainee shall be escorted to the correct count area. If this occurs, officers in all count areas/units shall re-count, recall the earlier counts and deliver the new count slip to the control officer.*
 - 7. If all recounts fail to clear the count, the shift supervisor shall conduct a face-to-photo count, matching photos on facility identification cards with detainee faces, individual by individual. When the face-to-photo count has been completed, the control officer shall report that count to the shift supervisor responsible for accepting and clearing the count.*
 - 8. In the event that a detainee is unaccounted for after the face-to-photo count, the supervisor on duty shall institute the escape policy.*

B. Face-to-Photo Counts

Face-to-photo counts shall be conducted as necessary. Facilities shall conduct at least one face-to-

photo count daily.

Face-to-photo counting procedures are the same as the formal count procedures, except each detainee shall be matched with the photo on his/her I-385 card or facility equivalent photo-identification card.

C. Informal/Census Counts

Each officer shall make irregular, but frequent checks to verify the presence of all detainees in his/her charge.

These informal counts or checks occur between formal counts. For work crews, a count is made when the crew assembles for work, at frequent intervals during the work period and when the crew is dismissed at the end of the work period. An informal count is reported only if a detainee appears to be missing. In that case, an emergency (formal) count shall be taken.

D. Master Count

The facility control center shall maintain a master count.

The facility control officer maintains the master count record. He/she must be provided with up-to-the-minute information regarding detainee admissions, releases, housing changes, hospital admissions, outside work details and any other changes that may affect detainee accountability. An up-to-the-minute count record shall be maintained at all times in the control center. The master count shall take into account the current out-count.

E. Out-Counts

The control officer shall maintain an out-count record of the number and destination of all detainees who temporarily leave the facility.

This record must contain an accurate and up-to-the-minute listing of every temporary departure and return of a detainee. It must be updated regularly and used in any formal count.

F. Emergency Count

An emergency count shall be conducted when there is reason to believe a detainee is missing, or after a major disturbance has occurred.

An emergency count is a formal count taken in addition to, and at a different time, from the regularly scheduled formal counts. When a detainee is unaccounted for, or after a major disturbance has

ended, a count shall be taken to determine that no one has escaped or is in hiding. The facility control officer must always be prepared to produce an up-to-the-minute count for such use.

All detainees shall be returned to their housing units during emergency counts. An emergency count shall be conducted in the same manner as a formal count.

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

American Correctional Association, *Performance-based Standards for Adult Local Detention Facilities*, 4th Edition: 4-ALDF-2A-04.

ICE Interim Use of Force Policy (2004).

ICE Interim Firearms Policy (2004).

ICE/ERO *Performance-based National Detention Standards 2011*: “2.15 Use of Force and Restraints.”

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.

2.10 Searches of Detainees

I. Purpose and Scope

This detention standard protects detainees and staff and enhances facility security and good order by detecting, controlling and properly disposing of contraband.

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.

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. Detainees shall live and work in a safe and orderly environment.
2. Contraband shall be controlled.
3. Cross-gender pat-down searches of male detainees shall not be conducted unless, after reasonable diligence, staff of the same gender is not available at the time the pat-down search is required, or in other exigent circumstances.
4. Searches of detainees, housing and work areas shall be conducted without unnecessary force and in ways that preserve the dignity of detainees.
5. When body searches are conducted, the least intrusive practicable search method shall be employed, as indicated by the type of contraband and the method of suspected introduction or concealment.
6. Pat searches of detainees and metal detector screening shall be conducted routinely to control contraband.
7. A strip search shall be conducted only when properly authorized by a supervisor and only in the event that there is reasonable suspicion that contraband may be concealed on the person, or when an officer has reasonable suspicion that a good opportunity for concealment has occurred or as may be outlined in facility procedures for post contact visits as indicated in standard “5.7 Visitation.”
8. A body cavity search shall be conducted by designated health personnel only when authorized by the facility administrator on the basis of reasonable suspicion that contraband may be concealed in or on the detainee’s person.
9. “Dry cells” shall be used for contraband detection, with proper authorization and in accordance with required procedures, only when there is reasonable suspicion of concealment.
10. Contraband that may be evidence in connection with a violation of a criminal statute shall be preserved, inventoried, controlled and stored so as to maintain and document the chain of

custody.

11. Canine units (in facilities that have them) may be used for contraband detection when detainees are not present, but canine use for force, intimidation, control, or searches of detainees is prohibited.
12. As needed and on an individualized basis, the facility shall provide reasonable accommodations, and modify its policies, practices, or procedures relating to pat, strip, and body cavity searches of detainees with disabilities.
13. The facility shall provide communication assistance to detainees with disabilities and detainees who are limited in their English proficiency (LEP). The facility will provide detainees with disabilities with effective communication, which may include the provision of auxiliary aids, such as readers, materials in Braille, audio recordings, telephone handset amplifiers, telephones compatible with hearing aids, telecommunications devices for deaf persons (TTYs), interpreters, and note-takers, as needed. The facility will also provide detainees who are LEP with language assistance, including bilingual staff or professional interpretation and translation services, to provide them with meaningful access to its programs and activities.

All written materials provided to detainees shall generally be translated into Spanish. Where practicable, provisions for written translation shall be made for other significant segments of the population with limited English proficiency.

Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.

III. Standards Affected

This detention standard replaces “Searches of

Detainees” dated 12/2/2008.

IV. References

American Correctional Association, *Performance-based Standards for Adult Local Detention Facilities*, 4th Edition: 4-ALDF-2C-01, 2C-02, 2C-03, 2C-04, 2C-05, 2C-06, 2A-20, 6C-19.

Notice Admission and Release—National detention standard Strip Search Policy (10/15/2007).

This detention standard incorporates the restrictions on the use of canines originally communicated via a memorandum on ICE use of canines in support of ICE detention operations dated 11/18/2004 from the Acting Director of Enforcement and Removal Operations.

ICE/ERO *Performance-based National Detention Standards 2011*:

- “2.1 Admission and Release”;
- “2.3 Contraband”;
- “2.6 Hold Rooms in Detention Facilities”;
- “2.12 Special Management Units”; and
- “5.7 Visitation.”

“Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Confinement Facilities,” 79 Fed. Reg. 13100 (Mar. 7, 2014).

V. Expected Practices

A. Written Policy and Procedures Required

All facilities shall have written policy and procedures consistent with this standard for the following:

1. searches of detainee housing and work areas;
2. body searches, including pat searches (“pat downs”), strip searches, body cavity searches and x-rays;
3. close observation in “dry cells” to detect

contraband;

4. employing the least intrusive method of search practicable, as indicated by the type of suspected contraband and the method of suspected introduction or concealment;
5. avoiding unnecessary force during searches and preserving the dignity of the detainee being searched;
6. leaving a searched housing or work area and detainee's property in its original order, to the extent practicable;
7. handling of contraband;
8. use of canine units (in facilities that have them);
9. preservation of evidence; and
10. administration of medical treatment during "lock-downs."

B. Staff Training

All staff who conduct searches of housing, work areas or of a detainee's body shall receive initial training regarding search procedures prior to entering on duty, and shall receive annual training in authorized and effective techniques thereafter.

C. Search of Detainee Housing and Work Areas

Staff may search a detainee's housing and work area, and personal items contained within those areas, without notice to, or approval from, the detainee and in the detainee's absence.

Each facility shall establish procedures to ensure all housing units and work areas are searched routinely, but irregularly, as such inspections are primarily intended to:

1. detect and deter the introduction of contraband;
2. prevent escapes;
3. maintain sanitary standards; and
4. eliminate fire and safety hazards.

Staff shall maintain written documentation of each housing-unit search within the individual housing unit. Work areas shall be searched each workday by shop supervisors, and these inspections shall be supplemented with periodic searches by designated search teams. When property is taken during a housing search, a receipt shall be given to the detainee. The Chief of Security shall maintain documentation of search-team inspections.

Facilities shall have written procedures to provide for basic detention services (e.g., delivery of food services, toilet access, medication delivery) during lockdowns.

D. Body Searches of Detainees

1. Pat Search

a. Description

A pat search (or "pat down") is a sliding or patting of the hands over the clothed body of a detainee by staff to determine whether the individual possesses contraband.

A pat search does not require the detainee to remove clothing, although the inspection includes a search of the detainee's clothing and personal effects.

A hand-held and/or stationary metal detector, when available, may be used in conjunction with a pat search.

Staff shall conduct a pat search of a detainee on a routine or random basis to control contraband without a threshold level of suspicion.

All pat searches shall be conducted in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs, including consideration of officer safety.

Security staff shall be trained in proper procedures for conducting pat searches, including cross-gender pat searches and searches of transgender and intersex detainees.

b. Gender of Officer

Cross-gender pat-down searches of male detainees shall not be conducted unless, after reasonable diligence, staff of the same gender is not available at the time the pat-down search is required, or in exigent circumstances. Cross-gender pat-down searches of female detainees shall not be conducted unless in exigent circumstances.

All cross-gender pat-down searches shall be documented.

2. Strip search

a. Description

A strip search is a search that requires a person to remove or arrange some or all clothing so as to permit a visual inspection of the person's breasts, buttocks, or genitalia. Staff shall not routinely require a detainee to remove clothing or require a detainee to expose private parts of his/her body to search for contraband. To the extent reasonably possible, the inspector shall refrain from touching the skin surface of the detainee; however, the inspector may request that the detainee move parts of the body to permit visual inspection. A strip search is considered more intrusive than a pat search, and shall be conducted in a manner designed to ensure as much privacy to the detainee as practicable.

A strip search requires the removal or rearrangement of some or all of the detainee's clothing to examine the clothing and/or to permit the inspection of exterior skin surfaces of the body, including breasts and exterior anal and genital areas, as well as inside of the nose, ears and mouth. If items are discovered that protrude from a body cavity, the removal of those items is governed by the procedures applicable to body-cavity searches, addressed below.

The facility shall not search or physically examine a detainee for the sole purpose of determining the detainee's genital characteristics. If the detainee's

gender is unknown, it may be determined during conversations with the detainee, by reviewing medical records, or, if necessary, learning that information as part of a standard medical examination that all detainees must undergo as part of intake or other processing procedure conducted in private, by a medical practitioner.

All strip searches shall be documented.

Except in cases where strip searches are performed in accordance with a facility's post contact visitation procedure, whenever a strip search is conducted, the articulable facts supporting the conclusion that reasonable suspicion exists shall be documented on Form G-1025 (Record of Search) or the equivalent.

Unless there is specific and articulable suspicion that contraband has been transferred to a detainee, detainees shall not be subjected to a strip search after a visit by a consular representative, an attorney, a legal assistant working under the supervision of an attorney, or an accredited representative. Policy regarding post contact visitation searches can be found in "V. Expected Practices" of standard "5.7 Visitation."

b. Reasonable Suspicion

Officers must obtain supervisory approval before conducting strip searches. Staff may conduct a strip search where there is reasonable suspicion that contraband may be concealed on the person. "Reasonable suspicion" means suspicion based on specific and articulable facts that would lead a reasonable officer to believe that a specific detainee is in possession of contraband. It is a more permissive (lower) standard than probable cause, but it is more than a mere hunch. It must be based on specific and articulable facts—along with reasonable inferences that may be drawn from those facts—that the officer shall document in Form G-1025 or equivalent.

Reasonable suspicion is determined under the

totality of the circumstances. There is no simple, exact, or mathematical formula for reasonable suspicion. It may be based on one, or a combination, of the following factors:

- 1) observation of unusual, surreptitious, or suspicious appearance or behavior;
- 2) evasive or inconsistent responses to questions by law enforcement officers;
- 3) discovery of a weapon or other contraband during a pat search, metal detector scan, or other non-intrusive search;
- 4) the detainee's criminal history, particularly prior felony or misdemeanor for convictions of crimes involving violence, weapons, contraband, or illegal substances (convictions for minor or non-violent offenses shall not be the only basis for reasonable suspicion);
- 5) whether the detainee was detained concurrently with an arrest for a crime of violence; or whether the detainee was arrested in possession of a weapon, or in possession of contraband such as illegal drugs;
- 6) information from law enforcement databases or from other reliable sources suggesting that the detainee has affiliations with terrorist organizations, criminal gangs, or organized crime; or
- 7) the detainee's history during confinement, particularly of violence, or of possession of contraband.

The lack of identity documents alone does not ordinarily constitute reasonable suspicion.

Before strip-searching a detainee to search for contraband, an officer shall first attempt to resolve his/her suspicions through less intrusive means, such as a thorough examination of reasonably available ICE, CBP and other law enforcement records; a pat-down search; a detainee interview; or (where available) the use

of a magnetometer or Boss chair. The officer shall document the results of those other, less intrusive, search methods on Form G-1025 or equivalent.

In accordance with standard "5.7 Visitation," facilities may not adopt policies permitting strip searches after contact visits in the absence of reasonable suspicion unless detainees are provided the right to choose non-contact visitation instead of contact visitation and are fully informed of such right. Consistent with standard "5.7 Visitation," any such policies must be communicated to detainees in a language or manner that they understand.

c. Gender of Officer

An officer of the same gender as the detainee shall perform the search. Special care should be taken to ensure that transgender detainees are searched in private.

In the case of an emergency, a staff member of the same gender as the detainee shall be present to observe a strip search performed by an officer of the opposite gender.

When an officer of the opposite gender conducts a strip search which is observed by a staff member of the same gender as the detainee, staff shall document the reasons for the opposite-gender search in any logs used to record searches and in the detainee's detention file.

3. Body-cavity Searches

A body-cavity search is an inspection for contraband or any other foreign item, in a body cavity of a detainee, by use of fingers or simple instruments, such as an otoscope, tongue blade, short nasal speculum and simple forceps. A body-cavity search is considered the most intrusive type of search. A body cavity search must be performed by a medical professional and take place in an area that affords privacy from other detainees and from facility staff who are not involved in the search.

Before proceeding in cases of drawing blood for toxicology studies and DNA testing, written, informed consent must be granted by the detainee and recorded in the detainee's medical records before the blood sample is drawn (see also standard "4.3 Medical Care"). Requests for forensic studies shall be referred to the medical facility health services administrator (HSA) who is authorized to facilitate arrangement for these services off-site.

- a. A body-cavity search may only be conducted by authorized medical personnel, upon approval of the facility administrator or acting facility administrator, and only if that person has reasonable suspicion that contraband may be concealed in or on the detainee's person.
- b. The articulable facts supporting the conclusion that reasonable suspicion exists shall be documented.
- c. A body-cavity search may be advisable to protect the health and safety of a detainee.
- d. Only designated qualified health personnel (for example, physicians, physician assistants and nurses) may conduct a digital or simple instrument search in a licensed medical setting.
- e. The detainee's health and welfare shall be considered prior to performance of any digital or simple instrument search.
- f. Although a detainee's written consent should be obtained prior to conducting a digital or simple instrument search, such written consent is not required.
- g. Whenever possible, transgender detainees shall be permitted to choose the gender of the staff member conducting a body-cavity search.
- h. Staff, other than the designated qualified health personnel, of the opposite gender from the detainee may not observe a body cavity search.
- i. If located, the contraband or foreign item may be removed immediately by medical staff, if such

removal can easily be effected by use of fingers or simple medical instruments.

- j. IHSC staff is not authorized to collect or participate in the collection of specimens or other information that shall be used for forensic purposes, except for toxicology studies, rape kits and DNA testing.

Staff shall document all body cavity, digital, and simple instrument searches, the authorizations and the reasons for the searches in any logs used to record searches and in the detainee's detention file.

E. Close Observation in a "Dry Cell"

1. Description and Authorization

When an officer has reasonable suspicion to believe that a detainee may have ingested contraband or concealed contraband in a body cavity, and the methods of search specified above are inappropriate or likely to result in physical injury to the detainee, the facility administrator or designee may authorize that the detainee be placed in a room or cell to be closely observed by staff until the detainee has voided or passed the contraband or until sufficient time has elapsed to preclude the possibility that the detainee is concealing contraband.

Such placement is commonly referred to as "dry cell" status, which may be approved:

- a. during regular duty hours by the facility administrator or designee, or
- b. at other times by the shift supervisor.

2. Requirements for "Dry Cells"

It is recommended that one or more rooms or cells be identified as dry cells; such rooms must meet the following requirements:

- a. The room shall be free of hiding places and be equipped with only a bed.
- b. Doors shall have proper observation panels to protect staff and to allow unobstructed observation.

- c. Windows in the dry cell shall have a security screen to prevent loss of contraband.
- d. If the designated area is equipped with a toilet and/or sink, the water to the cell shall be shut off for the duration of the dry cell process and the toilet and sink removed prior to the detainee being allowed into the room.
- e. Prior to a detainee's placement in dry cell status, the room to be used shall be completely searched and determined to be free of contraband. Potential hiding places, if any, for contraband shall be noted

3. Advising the Detainee

The supervisor responsible for initiating the close observation watch shall advise the detainee of the conditions and what is expected, and shall document the notification on an Administrative Segregation Order. The detainee shall be advised of the reasons he/she is being placed in a dry cell, the purpose of this placement, the conditions he/she can expect and the means by which he/she can request items and services including, but not limited to, food and water, medical care, hygiene products and bedpans.

4. Conditions of "Dry Cell" Status

- a. For the detainee's safety, he/she shall be required to provide a urine sample within two hours of placement under close observation. A second urine sample shall be required prior to releasing the detainee from close observation.
- b. The light shall be kept on at all times.
- c. The detainee shall have regular access to potable water.
- d. The detainee shall be provided telephone access.
- e. The detainee may not be allowed to come in contact with another detainee.
- f. Ordinarily, the detainee may not be allowed personal property, except legal and personal mail and a reasonable amount of legal materials.

- g. Personal hygiene items shall be controlled by staff. When the detainee requests to shave, brush teeth, or perform other toiletry tasks, a wash pan and container of water shall be provided for use in the cell.
- h. When the detainee is lying on a bed, the detainee shall be required to lie on top of the mattress in full view, weather and room temperature permitting. When necessary for the detainee to use cover, hands must remain visible at all times so that staff can observe any attempt to move contraband.
- i. Because a detainee might attempt to remove and/or insert contraband from or into a body cavity, staff must observe the detainee's hands at all times.
- j. The detainee shall not be permitted to leave the cell or room, except in case of extreme emergency.
- k. The detainee shall be served the same meals as the general population, unless medically advised. All meals are to be inspected for contraband prior to delivery to the detainee, and any food remaining after the meal, as well as the utensils and tray, are to be thoroughly inspected before their return to food service.
- l. Only medications prescribed and administered directly to the detainee by medical personnel may be given to the detainee. No laxatives may be given, except natural ones (e.g., coffee, prune juice).
- m. When the detainee needs to urinate and/or defecate, he/she shall be furnished an empty hospital bedpan, which shall afterward be closely inspected to ascertain whether any contraband is present.
- n. Since the detainee is in administrative segregation status even if not actually housed in the Special Management Unit (SMU), the requirements for medical and supervisory and staff visits in

standard “2.12 Special Management Units” apply.

- o. Dry cells must be cleaned in accordance with standard “1.2 Environmental Health and Safety.”

5. Post Orders

The Chief of Security shall have post orders for closely observing a detainee in dry cell status. A video camera shall be used whenever possible and as appropriate.

6. Requirements for Close Observation

The detainee shall be constantly observed and supervised by a staff member of the same gender.

It is the observer’s responsibility to ensure the detainee does not dispose of any concealed item, and to prevent activity which would allow the detainee access to it, thereby jeopardizing the security and good order of the facility, staff and detainees. Any questions, emergency, or other situation that arises shall immediately be brought to the attention of the shift supervisor.

Under no circumstances shall the detainee be allowed freedom to move around unsupervised, or be given an opportunity to dispose of any objects he/she may be concealing.

- a. The observing staff member shall be issued a portable radio or telephone and flashlight, so that he/she does not have to interrupt constant observation to communicate with other staff (such as for watch calls).
- b. Detainees shall be monitored by medical staff for changes in medical and mental health status.
- c. A daily log and SMU record shall be maintained on each detainee in dry cell status.
- d. The shift supervisor shall ensure observers have reviewed the post orders.
- e. The shift supervisor shall provide periodic staff relief to the observer and at any other time the observer must leave the area. The detainee must not be left unattended.

- f. Trash may not be allowed to accumulate, and each item shall be thoroughly searched before final disposal.

- g. Periodic searches shall be conducted as follows:

- 1) a strip search of the detainee when he/she is placed in the dry cell after which the detainee shall be issued a jump suit (or other suitable loose-fitting clothing);
- 2) a strip search of the detainee at least once each shift, if necessary; and
- 3) a search of the dry cell at least once each shift.

Searches shall be conducted so as not to reveal to the detainee a predictable pattern. Prior to each search, the shift supervisor must be notified and a second staff member provided to ensure continual close observation and supervision of the detainee. Each search must be documented on Form G-1025 or equivalent.

- h. Staff shall notify the shift supervisor when contraband is found, secure the contraband in a properly documented evidence bag, and maintain the chain of evidence.

7. Length of Observation

The length of close-observation status must be determined on an individual basis. Ordinarily, the Chief of Security during regular work hours or the shift supervisor, at other times, in consultation with qualified health personnel, shall determine when termination is appropriate.

- a. Three Days

The status of a detainee under close observation for as long as three days must be reviewed by medical staff and the administrative segregation review official in accordance with standard “2.12 Special Management Units” (irrespective of whether the observation actually occurs in the SMU).

- b. Seven Days

Since it is unlikely that the objective of dry cell

status will not be achieved within seven days, maintaining a detainee under close observation beyond seven days requires prior approval of the facility administrator and medical staff.

F. X-Ray

1. Medical

The facility physician may authorize use of an x-ray for medical reasons and only with the consent of the detainee.

2. Security

Only the facility administrator, upon approval by the respective Field Office Director (or persons officially acting in that capacity) may authorize the facility physician to order a non-repetitive x-ray examination for the purpose of determining whether contraband is concealed in or on the detainee (for example: in a cast or body cavity).

Such approval and authorization shall be based on the facility administrator and physician's determination that:

- a. An x-ray examination is necessary for the security, safety, good order, or discipline of the facility;
- b. No reasonable alternative exists; and
- c. The examination is not likely to result in serious or lasting medical injury or harm to the detainee, based on the determination of qualified medical staff.

Staff shall place documentation of the examination, the authorizations and the reasons for the examination in the detainee's detention file and medical file.

An x-ray examination may not be performed on a detainee without the detainee's consent. Staff shall solicit the detainee's consent and cooperation prior to the x-ray examination. Force may not be used to gain consent and cooperation. If the detainee does not provide consent and fails to cooperate, x-ray examination should not be performed

3. Objects

The facility administrator may direct x-rays of inanimate objects where the detainee is not exposed.

G. Major Instrument, Fluoroscope, or Surgical Intrusion

Only a physician may authorize use of a fluoroscope, major instrument (including anoscope or vaginal speculum), or surgical intrusion for medical reasons only and only with the detainee's consent.

H. Preservation of Evidence

Contraband that may be evidence in connection with a violation of a criminal statute shall be preserved, inventoried, controlled and stored so as to maintain and document the chain of custody, and shall be reported to the appropriate law enforcement authority for action and possible seizure and prosecution.

2.11 Sexual Abuse and Assault Prevention and Intervention

I. Purpose and Scope

This detention standard requires that facilities that house ICE/ERO detainees act affirmatively to prevent sexual abuse and assaults on detainees; provide prompt and effective intervention and treatment for victims of sexual abuse and assault; and control, discipline and prosecute the perpetrators of sexual abuse and assault.

This detention standard applies to the following types of facilities housing ERO detainees:

- Service Processing Centers (SPCs);
- Contract Detention Facilities (CDFs); and
- State or local government facilities used by ERO through Intergovernmental Service Agreements (IGSAs).

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.

Various terms used in this standard may be defined in standard “7.5 Definitions.”

II. Expected Outcomes

Specific requirements are defined in “V. Expected Practices.” The expected outcomes of this detention standard are as follows:

1. The facility shall articulate and adhere to a written zero tolerance policy for sexual abuse or assault, outlining the facility’s approach to preventing, detecting, and responding to such conduct.
2. A designated Prevention of Sexual Assault Compliance Manager (PSA Compliance Manager) will assist in ensuring facility compliance with sexual abuse and assault prevention and intervention policies and procedures.
3. Staff shall receive training on their responsibilities under the facility’s Sexual Abuse and Assault Prevention and Intervention Program.
4. Detainees shall be informed about the facility’s Sexual Abuse and Assault Prevention and Intervention Program.
5. The facility will take appropriate steps to ensure that detainees with disabilities or limited English proficiency have an equal opportunity to participate in or benefit from all aspects of the facility’s Sexual Abuse and Assault Prevention and Intervention Program.
6. The facility will utilize available community resources to provide victim services and other appropriate support to the fullest extent possible following incidents of sexual abuse or assault.
7. Staff shall be alert to potential risks or signs of sexual abuse or assault, and take appropriate action to mitigate any identified risks or protect a detainee as necessary.
8. Detainees shall be screened upon intake for risk of sexual victimization or abusiveness, and housed accordingly.
9. The facility will use a coordinated, multidisciplinary team approach to effectively respond to all incidents of sexual abuse or assault and address any safety, medical, or mental health needs.
10. Staff shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or assault, retaliation against individuals who reported an incident,

or any staff neglect or violation of responsibilities which may have contributed to an incident or retaliation.

11. All allegations of sexual abuse or assault shall be immediately reported to ICE/ERO, and any other required entities based on the nature of the allegation.
12. Alleged victims shall be promptly referred for medical or mental health services, as appropriate, and receive any necessary emergency or ongoing care related to the incident.
13. Staff suspected of perpetrating sexual abuse or assault shall be removed from all duties requiring detainee contact pending the outcome of the investigation.
14. The facility shall ensure that each allegation of sexual abuse or assault is investigated by an appropriate criminal or administrative investigative entity, and shall cooperate with all investigative efforts to ensure a thorough and objective investigation.
15. Staff or detainee perpetrators will be appropriately disciplined for any confirmed acts of sexual abuse or assault.
16. The facility shall conduct a review following every investigation of sexual abuse or assault, and on an annual basis, to assess whether changes to facility policy or practice could better prevent, detect, or respond to sexual abuse and assault.
17. The facility shall maintain all records associated with incidents of sexual abuse or assault in appropriately secure files and locations.
18. The facility shall provide communication assistance to detainees with disabilities and detainees who are limited in their English proficiency (LEP). The facility will provide detainees with disabilities with effective communication, which may include the

provision of auxiliary aids, such as readers, materials in Braille, audio recordings, telephone handset amplifiers, telephones compatible with hearing aids, telecommunications devices for deaf persons (TTYs), interpreters, and note-takers, as needed. The facility will also provide detainees who are LEP with language assistance, including bilingual staff or professional interpretation and translation services, to provide them with meaningful access to its programs and activities.

All written materials provided to detainees shall generally be translated into Spanish. Where practicable, provisions for written translation shall be made for other significant segments of the population with limited English proficiency.

Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.

III. Standards Affected

This detention standard replaces “Sexual Abuse and Assault Prevention and Intervention” dated 12/2/2008.

IV. References

National Commission on Correctional Health Care, *Standards for Health Services in Jails (2014)*.

ICE/ERO *Performance-based National Detention Standards 2011*:

- “2.1 Admission and Release”;
- “2.2 Custody Classification System”;
- “2.4 Facility Security and Control”;
- “2.6 Hold Rooms in Detention Facilities”;
- “2.10 Searches of Detainees”;
- “2.12 Special Management Units”;
- “3.1 Disciplinary System”;

“4.3 Medical Care”;
 “4.4 Medical Care (Women)”;
 “4.5 Personal Hygiene”;
 “6.2 Grievance System”; and
 “7.1 Detention Files”.

“Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Confinement Facilities,” 79 Fed. Reg. 13100 (Mar. 7, 2014).

V. Expected Practices

A. Written Policy and Procedures Required

Each facility’s policy and procedures shall reflect the unique characteristics of each facility, based on factors such as the availability of specialized community-based services, including rape crisis/trauma units in local medical centers, clinics and hospitals.

Each facility shall have written policy and procedures for a Sexual Abuse or Assault Prevention and Intervention Program. This policy must mandate zero tolerance toward all forms of sexual abuse or assault, outline the facility’s approach to preventing, detecting, and responding to such conduct and include, at a minimum:

1. procedures on preventing sexual abuse and assault, including:
 - a) procedures for assessing all detainees for their risk of sexual abusiveness or victimization;
 - b) procedures for housing detainees in accordance with their classification assessment;
 - c) training of all employees, contractors, and volunteers on the agency’s and facility’s zero tolerance policies and their responsibilities under those policies; and
 - d) notification to detainees of the facility’s Sexual

Abuse and Assault Prevention and Intervention Program.

2. procedures for immediate reporting of sexual abuse allegations, including:
 - a) procedures for immediate reporting of sexual abuse allegations through the facility’s chain of command, from the reporting official to the highest facility official as well as the Field Office Director, as well as a method by which staff can report outside the chain of command;
 - b) responsibility of all staff to report allegations or suspicions of sexual assault;
 - c) referrals to law enforcement agencies;
 - d) written documentation requirements to ensure that each allegation or suspicion is properly reported and addressed;
 - e) a method to receive third-party reports of sexual abuse in its facility, with information made available to the public regarding how to report sexual abuse on behalf of a detainee.
3. procedures for prompt and effective intervention to address the safety and treatment needs of detainee victims if an alleged assault occurs, including:
 - a) procedures for offering immediate protection, including prevention of retaliation and medical and mental health referrals;
 - b) plan to coordinate actions taken by staff first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse;
 - c) methods for addressing the alleged victim’s future safety, medical, and mental health needs;
4. procedures to include victim advocate services in sexual abuse or assault prevention and intervention programs, if such resources are available;
5. procedures for investigation and discipline of

assailants, including:

- a) coordinating with ICE and other appropriate investigative agencies to ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse;
 - b) following a uniform evidence protocol, including access to a forensic medical exam, which maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions;
 - c) procedures for coordination of internal administrative investigations with the assigned criminal investigative entity to ensure non-interference with criminal investigations, as well as coordination with the ICE Office of Professional Responsibility (OPR);
 - d) disciplinary sanctions for staff, up to and including termination when there is a substantiated allegation of sexual abuse, or when staff has violated agency sexual abuse policies
6. procedures for data collection and reporting; and the facility's requirement to cooperate with all ICE audits and monitoring of facility compliance with sexual abuse and assault policies and standards.

"Appendix 2.11.A: Sample Sexual Abuse Prevention and Intervention Protocols" in this standard offers sample protocols as guidelines for the development of written policies and procedures.

The facility's written policy and procedures require the review and approval of the Field Office Director.

The facility administrator shall ensure that, within 90 days of the adoption of this detention standard, written policy and procedures are in place and that the facility is in full compliance with its requirements and guidelines. The facility must meet all other requirements in this standard on the date the standard is adopted.

Each facility shall also post its protocols on its website, if it has one, or otherwise make the protocol

available to the public.

B. Acts of Sexual Abuse and/or Assault

For the purposes of this standard, the following definitions apply:

1. Detainee-on-detainee Sexual Abuse and/or Assault

Sexual abuse of a detainee by another detainee includes any of the following acts by one or more detainees who, by force, coercion, or intimidation, or if the victim did not consent or was unable to consent or refuse, engages in or attempts to engage in:

- a. contact between the penis and the vagina or anus and, for purposes of this subparagraph, contact involving the penis upon penetration, however slight;
- b. contact between the mouth and the penis, vagina or anus;
- c. penetration, however slight, of the anal or genital opening of another person by a hand or finger or by any object;
- d. touching of the genitalia, anus, groin, breast, inner thighs or buttocks, either directly or through the clothing, with an intent to abuse, humiliate, harass, degrade or arouse or gratify the sexual desire of any person; or
- e. threats, intimidation, or other actions or communications by one or more detainees aimed at coercing or pressuring another detainee to engage in a sexual act.

2. Staff-on-detainee Sexual Abuse and/or Assault

Sexual abuse of a detainee by a staff member, contractor, or volunteer includes any of the following acts, if engaged in by one or more staff members, volunteers, or contract personnel who, with or without the consent of the detainee, engages in or attempts to engage in:

- a. contact between the penis and the vagina or anus and, for purposes of this subparagraph, contact involving the penis upon penetration, however slight;
- b. contact between the mouth and the penis, vagina or anus;
- c. penetration, however slight, of the anal or genital opening of another person by a hand or finger or by any object that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- d. intentional touching of the genitalia, anus, groin, breast, inner thighs or buttocks, either directly or through the clothing, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- e. threats, intimidation, harassment, indecent, profane or abusive language, or other actions or communications aimed at coercing or pressuring a detainee to engage in a sexual act;
- f. repeated verbal statements or comments of a sexual nature to a detainee;
- g. any display of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate, detainee, or resident, or;
- h. voyeurism, which is defined as the inappropriate visual surveillance of a detainee for reasons unrelated to official duties. Where not conducted for reasons relating to official duties, the following are examples of voyeurism: staring at a detainee who is using a toilet in his or her cell to perform bodily functions; requiring an inmate detainee to expose his or her buttocks, genitals, or breasts; or taking images of all or part of a detainee's naked body or of a detainee performing bodily functions.

C. Compliance Manager

The facility administrator shall designate a Prevention of Sexual Assault Compliance Manager (PSA Compliance Manager) who shall serve as the facility point of contact for the ICE PSA Coordinator and who has sufficient time and authority to oversee facility efforts to comply with facility sexual abuse prevention and intervention policies and procedures. The Compliance Manager shall:

1. assist with the development of written policies and procedures for the Sexual Abuse and Assault Prevention and Intervention Program, as specified above in this standard, and with keeping them current;
2. assist with the development of initial and ongoing training protocols;
3. serve as a liaison with other agencies;
4. coordinate the gathering of statistics and reports on incidents of sexual abuse or assault, as detailed in "O. Data Collection" in this standard;
5. review the results of every investigation of sexual abuse and assist in conducting an annual review of all investigations in compliance with the Privacy Act to assess and improve prevention and response efforts; and
6. review facility practices to ensure required levels of confidentiality are maintained.

D. Sexual Conduct between Detainees Prohibited

In addition to the forms of sexual abuse and/or assault defined above, all other sexual conduct – including consensual sexual conduct – between detainees is prohibited and subject to disciplinary sanctions. However, staff should be sensitive to the possibility that seemingly consensual behavior may have involved coercion by either person involved.

Consensual sexual conduct between detainees and staff, volunteers, or contract personnel is included within the definition of staff-on-detainee sexual abuse and/or assault above.

E. Staff Training

Training on the facility's Sexual Abuse or Assault Prevention and Intervention Program shall be included in training for all employees, and shall also be included in annual refresher training thereafter.

Employee training shall ensure facility staff are able to fulfill their responsibilities under this standard, and shall include:

1. The facility's zero-tolerance policies for all forms of sexual abuse;
2. definitions and examples of prohibited and illegal sexual behavior;
3. the right of detainees and staff to be free from sexual abuse, and from retaliation for reporting sexual abuse;
4. instruction that sexual abuse and/or assault is never an acceptable consequence of detention;
5. recognition of situations where sexual abuse and/or assault may occur;
6. how to avoid inappropriate relationships with detainees;
7. working with vulnerable populations and addressing their potential vulnerability in the general population;
8. recognition of the physical, behavioral and emotional signs of sexual abuse and/or assault and ways to prevent and respond to such occurrences;
9. the requirement to limit reporting of sexual abuse and assault to personnel with a need-to-know in order to make decisions concerning the detainee-victim's welfare, and for law enforcement/investigative purposes;
10. the investigation process and how to ensure that evidence is not destroyed;
11. prevention, recognition and appropriate response to allegations or suspicions of sexual assault involving detainees with mental or

physical disabilities;

12. how to communicate effectively and professionally with detainees, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming detainees;
13. instruction on reporting knowledge or suspicion of sexual abuse and/or assault; and
14. instruction on documentation and referral procedures of all allegations or suspicion of sexual abuse and/or assault.

The facility shall ensure that all volunteers and other contractors who have contact with detainees have been trained on their responsibilities under the facility's sexual abuse prevention, detection, intervention and response policies and procedures. The level and type of training for volunteers and contractors will be based on the services they provide and their level of contact with detainees; however, all volunteers and contractors who have any contact with detainees must be notified of the facility's zero-tolerance policy and informed how to report such incidents. In this paragraph "other contractor" means a person who provides services on a non-recurring basis to the facility pursuant to a contractual agreement with the agency or facility.

The facility must maintain written documentation verifying employee, volunteer and contractor training. In addition to the general training provided to all facility employees, the facility shall provide specialized training on sexual abuse and effective cross-agency coordination to facility investigators who conduct investigations into allegations of sexual abuse at immigration detention facilities. This training must cover, at a minimum, interviewing sexual abuse and assault victims, sexual abuse and assault evidence collection in confinement settings, the criteria and evidence required for administrative action or prosecutorial referral, and information about effective cross-agency coordination in the investigation process. The facility must maintain written documentation

verifying specialized training provided to investigators pursuant to this paragraph.

Facility medical staff shall be trained in procedures for examining and treating victims of sexual abuse, in facilities where medical staff may be assigned these activities. This training shall be subject to the review and approval of the Field Office Director or other designated ICE official.

F. Detainee Notification, Orientation and Instruction

The facility administrator shall ensure that the orientation program, required by standard “2.1 Admission and Release,” and the detainee handbook required by standard “6.1 Detainee Handbook,” notify and inform detainees about the agency’s and the facility’s zero tolerance policies for all forms of sexual abuse and assault.

Following the intake process, the facility shall provide instruction to detainees on the facility’s Sexual Abuse and Assault Prevention and Intervention Program and ensure that such instruction includes (at a minimum):

1. the facility’s zero-tolerance policy for all forms of sexual abuse or assault;
2. prevention and intervention strategies;
3. definitions and examples of detainee-on-detainee sexual abuse, staff-on-detainee sexual abuse and coercive sexual activity;
4. explanation of methods for reporting sexual abuse or assault, including one or more staff members other than an immediate point-of-contact line officer, the Detention and Reporting Information Line (DRIL), the DHS/OIG and the ICE/OPR investigation processes;
5. information about self-protection and indicators of sexual abuse;
6. prohibition against retaliation, including an explanation that reporting an assault shall not

negatively impact the detainee’s immigration proceedings; and

7. right of a detainee who has been subjected to sexual abuse to receive treatment and counseling.

Detainee notification, orientation and instruction must be in a language or manner that the detainee understands, including for those who are limited English proficient, deaf, visually impaired or otherwise disabled, as well as to detainees who have limited reading skills. The facility shall maintain documentation of detainee participation in the instruction session.

The facility shall develop policies and procedures to ensure that detainees have multiple ways to privately report sexual abuse, retaliation for reporting sexual abuse, or staff neglect or violations of responsibilities that may have contributed to such incidents:

1. Each facility’s sexual abuse or assault prevention and intervention program shall provide detainees who are victims of sexual abuse or assault the option to report the incident or situation to a designated staff member other than an immediate point-of-contact line officer (e.g., the program coordinator or a mental health specialist). The facility shall provide detainees with the name of the program coordinator or designated staff member and information on how to contact him or her. Detainees will also be informed that they can report any incident or situation regarding sexual abuse, assault or intimidation to any staff member (as outlined above), the DHS Office of Inspector General, and the Joint Intake Center.
2. The facility shall provide instructions on how detainees may contact their consular official, the DHS Office of Inspector General, or as appropriate, another designated office, to confidentially and, if desired, anonymously report these incidents.
3. The facility shall inform the detainees of at least one way for detainees to report sexual abuse to a public or private entity or office that is not part of

the agency, and that is able to receive and immediately forward detainee reports of sexual abuse to agency officials, allowing the detainee to remain anonymous upon request. As cited earlier under “III. Standards Affected,” ICE/ERO has provided a sexual assault awareness notice to be posted on all housing-unit bulletin boards, as well as a “Sexual Assault Awareness Information” pamphlet to be distributed (see “Appendix 2.11.B: Sexual Abuse and Assault Awareness Brochure” in this standard). The facility shall post with this notice the name of the PSA Compliance Manager and information about local organizations that can assist detainees who have been victims of sexual assault, including mailing addresses and telephone numbers (including toll-free hotline numbers where available). If no such local organizations exist, the facility shall make available the same information about national organizations. This information will be provided in English and Spanish, and to other segments of the detainee population with limited English proficiency, through translations or oral interpretation.

G. Accommodating Detainees with Disabilities or Limited English Proficiency

Each facility shall take appropriate steps to ensure that detainees with disabilities (including, for example, detainees who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from all aspects of the facility’s efforts to prevent, detect, and respond to sexual abuse. Such steps shall include, when necessary to ensure effective communication with detainees who are deaf or hard of hearing, or detainees who have intellectual, psychiatric, or speech disabilities, limited reading skills, or who are blind or have low vision,

- a) providing access to in-person, telephonic, or

video interpretive services that enable effective, accurate, and impartial interpretation, both receptively and expressively, using any necessary specialized vocabulary.

- b) providing access to written materials related to sexual abuse in formats or through methods that ensure effective communication.

Each facility shall take steps to ensure meaningful access to all aspects of the facility’s efforts to prevent, detect, and respond to sexual abuse to detainees who are limited English proficient, including steps to provide in-person or telephonic interpretive services that enable effective, accurate, and impartial interpretation, both receptively and expressively, using any necessary specialized vocabulary.

In matters relating to allegations of sexual abuse, each facility shall employ effective expressive and receptive verbal communication techniques while communicating with detainees with disabilities in accordance with professionally accepted standards of care. Each facility shall provide detainees with disabilities and detainees with Limited English Proficiency with in-person or telephonic interpretation services that enable effective, accurate, and impartial interpretation, both receptively and expressively, using any necessary specialized vocabulary. Interpretation services shall be provided by someone other than another detainee, unless the detainee expresses a preference for another detainee to provide interpretation and the agency determines that such interpretation is appropriate and consistent with DHS policy. The provision of interpreter services by minors, alleged abusers, detainees who witnessed the alleged abuse, and detainees who have a significant relationship with the alleged abuser is not appropriate in matters relating to allegations of sexual abuse.

Where practicable, provisions for written translation of materials related to sexual abuse or assault shall be made for other significant segments of the population with limited English proficiency. Oral

interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.

H. Victim Advocate Services

Each facility shall utilize available community resources and services to provide valuable expertise and support in the areas of crisis intervention, counseling, investigation and the prosecution of sexual abuse perpetrators to most appropriately address victims' needs. Each facility administrator shall establish procedures to make available, to the full extent possible, outside victim services following incidents of sexual abuse. The facility shall also attempt to make available such victim services for any individuals identified as having experienced sexual victimization prior to entering DHS custody.

The facility administrator shall maintain or attempt to enter into memoranda of understanding (MOU) or other agreements with community service providers or, if local providers are not available, with national organizations that provide legal advocacy and confidential emotional support services for immigrant victims of crime. The facility shall enable reasonable communication between detainees and these organizations and agencies, in as confidential a manner as possible. The facility shall also inform detainees, prior to giving them access to outside resources, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.

I. Prevention

All staff and detainees are responsible for being alert to signs of potential situations in which sexual assaults might occur, and for making reports and intervention referrals as appropriate. If a facility staff member has a reasonable belief that a detainee is subject to a substantial risk of imminent sexual

abuse, he or she shall take immediate action to protect the detainee.

1. Classification and Screening

In accordance with standards "2.1 Admission and Release" and "2.2 Custody Classification System", the facility shall assess all detainees on intake to identify those likely to be sexual aggressors or sexual abuse victims and shall house detainees to prevent sexual abuse, taking necessary steps to mitigate any such danger. The facility shall also use the information to inform assignment of detainees to recreation and other activities, and voluntary work.

Each new arrival shall be kept separate from the general population until he/she is classified and may be housed accordingly.

The facility shall consider, to the extent that the information is available, the following criteria to assess detainees for risk of sexual victimization:

- (a) Whether the detainee has a mental, physical, or developmental disability;
- (b) The age of the detainee;
- (c) The physical build and appearance of the detainee;
- (d) Whether the detainee has previously been incarcerated or detained;
- (e) The nature of the detainee's criminal history;
- (f) Whether the detainee has any convictions for sex offenses against an adult or child;
- (g) Whether the detainee has self-identified as gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- (h) Whether the detainee has self-identified as having previously experienced sexual victimization; and
- (i) The detainee's own concerns about his or her physical safety. The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional

violence or sexual abuse, as known to the facility, in assessing detainees for risk of being sexually abusive.

Detainees shall not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to items (a), (g), (h), or (i) above. The facility shall implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this screening in order to ensure that sensitive information is not exploited to the detainee's detriment by staff or other detainees or inmates. Detainees who are considered at risk shall be placed in the least restrictive housing that is available and appropriate. Such detainees should be assigned to administrative segregation for protective custody only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.

2. Transportation

Detainees identified as being "at risk" for sexual victimization shall be transported in accordance with that special safety concern. The section on "Count, Identification and Seating," found in standard "1.3 Transportation (by Land)," requires that transportation staff seat each detainee in accordance with written procedures from the facility administrator, with particular attention to detainees who may need to be afforded closer observation for their own safety.

3. Upgrades to Facilities and Technologies

When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the facility shall consider the effect of the design, acquisition, expansion, or modification upon its ability to protect detainees from sexual abuse.

When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology in a facility, the facility shall

consider how such technology may enhance its ability to protect detainees from sexual abuse.

J. Prompt and Effective Intervention

Staff sensitivity toward detainees who are victims of sexual abuse and/or assault is critical.

Staff shall take seriously all statements from detainees claiming to be victims of sexual assaults, and shall respond supportively and non-judgmentally. Any detainee who alleges that he/she has been sexually assaulted shall be offered immediate protection and separation from the assailant and shall be referred for a medical examination and/or clinical assessment for potential negative symptoms. Staff members who become aware of an alleged assault shall immediately follow the reporting requirements set forth in the written policies and procedures.

If a victim is transferred between detention facilities, the sending facility shall, as permitted by law, inform the receiving facility of the incident and the victim's potential need for medical or social services (unless, in the case of transfer to a non-ICE facility, the victim requests otherwise). If the receiving facility is unknown to the sending facility, the sending facility shall notify the Field Office Director, so that he or she can notify the receiving facility.

Facilities should use a coordinated, multidisciplinary team approach to responding to sexual abuse, such as a sexual assault response team (SART), which in accordance with community practices, includes a medical practitioner, a mental health practitioner, a security staff member and an investigator from the assigned investigative entity, as well as representatives from outside entities that provide relevant services and expertise. The facility shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, ICE will provide these services by making available a qualified staff member from a community-based organization, or a qualified agency staff member. A qualified agency

staff member or a qualified community-based staff member means an individual who has received education concerning sexual assault and forensic examination issues in general. The outside or internal victim advocate shall provide emotional support, crisis intervention, information, and referrals.

Care shall be taken to place the detainee in a supportive environment that represents the least restrictive housing option possible (e.g. in a different housing unit, transfer to another facility, medical housing, or protective custody), and that takes into account any ongoing medical and mental health needs of the alleged victim.

Victims shall not be held for longer than five days in any type of administrative segregation, except in highly unusual circumstances or at the request of the detainee. A detainee victim who is in protective custody after having been subjected to sexual abuse shall not be returned to the general population until completion of a proper re-assessment, taking into consideration any increased vulnerability of the detainee as a result of the sexual abuse.

Where an alleged victim of sexual abuse or assault that occurred elsewhere in ICE custody is subsequently transferred to the facility, the facility shall comply with all applicable response and intervention requirements in this standard, as appropriate based on the nature and status of the case.

K. Protection Against Retaliation

Staff, contractors, volunteers, and detainees shall not retaliate against any person, including a detainee, who reports, complains about, or participates in an investigation into an allegation of sexual abuse, or for participating in sexual abuse as a result of force, coercion, threats, or fear of force.

The facility shall employ multiple protection measures, such as housing changes, removal of alleged staff or detainee abusers from contact with

victims, and emotional support services for detainees or staff who fear retaliation for reporting sexual abuse or for cooperating with investigations.

For at least 90 days following a report of sexual abuse, the facility shall monitor to see if there are facts that may suggest possible retaliation by detainees or staff, and shall act promptly to remedy any such retaliation. Items the facility should monitor include any detainee disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The facility shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

L. Reporting, Notifications and Confidentiality

Each 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 such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Staff members who become aware of alleged sexual abuse shall immediately follow the reporting requirements set forth in the facility's written policies and procedures.

Apart from such reporting, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary to help protect the safety of the victim or prevent further victimization of other detainees or staff in the facility, make medical treatment, investigation, law enforcement, or other security and management decisions.

If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the facility shall report that information to the Field Office Director so that the agency can report the allegation to the designated

State or local services agency under applicable mandatory reporting laws.

Staff shall accept reports made verbally, in writing, anonymously, and from third parties, and promptly document any verbal reports.

Each facility shall establish a method to receive third-party reports of sexual abuse in its facility and shall make available to the public information on how to report sexual abuse on behalf of a detainee.

1. Alleged Detainee Perpetrator

When a detainee(s) is alleged to be the perpetrator, it is the facility administrator's responsibility to ensure that the incident is promptly referred to the appropriate law enforcement agency having jurisdiction for investigation (if the incident is potentially criminal) and reported to the Field Office Director, who shall report it to the OPR Joint Intake Center.

2. Alleged Staff Perpetrator

When an employee, contractor or volunteer is alleged to be the perpetrator of detainee sexual abuse and/or assault, it is the facility administrator's responsibility to ensure that the incident is promptly referred to the appropriate law enforcement agency having jurisdiction for investigation (if the incident is potentially criminal) and reported to the Field Office Director, who shall report it to the OPR Joint Intake Center. The local government entity or contractor that owns or operates the facility shall also be notified.

Staff, contractors, and volunteers suspected of perpetrating sexual abuse or assault shall be removed from all duties requiring detainee contact pending the outcome of an investigation.

Upon receiving an allegation that a detainee was sexually abused while confined at another facility, the facility whose staff received the allegation shall notify the Field Office Director and the appropriate

administrator of the facility where the alleged abuse occurred. The notification provided in this section shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The facility shall document that it has provided such notification. The facility where the alleged abuse occurred shall then ensure the allegation is referred for investigation and reported to the appropriate Field Office Director in accordance with this standard.

M. Investigation, Discipline and Incident Reviews

If a detainee alleges sexual assault, a sensitive and coordinated response is necessary. The facility shall coordinate with ICE and other appropriate investigative agencies to ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse.

All investigations into alleged sexual assault must be prompt, thorough, objective, fair and conducted by specially trained, qualified investigators.

Where an alleged victim of sexual abuse or assault that occurred elsewhere is subsequently transferred to the detention facility, the facility shall cooperate with any administrative or criminal investigative efforts arising from the incident.

1. Preservation of Evidence

The first security staff member to respond to a report of sexual abuse, or his or her supervisor, shall preserve and protect, to the greatest extent possible, any crime scene until appropriate steps can be taken to collect any evidence. If the abuse occurred within a time period that still allows for the collection of physical evidence, the responder shall request the alleged victim not to take any actions, and shall ensure that the alleged abuser does not take any actions, that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. If the first staff responder is not

a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and then notify security staff.

2. Forensic Examinations

Where evidentiarily or medically appropriate, at no cost to the detainee, and only with the detainee's consent, the facility administrator shall arrange for an alleged victim to undergo a forensic medical examination by qualified health care personnel, including a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) where practicable. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified health care personnel.

As requested by a victim, the presence of his or her outside or internal victim advocate, including any available victim advocacy services offered by a hospital conducting a forensic exam, shall be allowed for support during a forensic exam and investigatory interviews.

The results of the physical examination and all collected physical evidence are to be provided to the investigative entity. Part of the investigative process may also include an examination and collection of physical evidence from the suspected assailant(s).

In the event the investigation is being conducted by a non-federal investigating agency, the facility shall request that the investigating agency follow the applicable requirements of this standard, including subsections 1 and 2 of this section.

3. Procedures for Administrative Investigations

Upon conclusion of a criminal investigation where the allegation was substantiated, or in instances where no criminal investigation has been completed, an administrative investigation shall be conducted. Upon conclusion of a criminal investigation where the allegation was unsubstantiated, the facility shall review any available completed criminal investigation reports to determine whether an

administrative investigation is necessary or appropriate. Substantiated allegation means an allegation that was investigated and determined to have occurred. Unsubstantiated allegation means an allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred.

Administrative investigations shall be conducted after consultation with the appropriate investigative office within DHS, and the assigned criminal investigative entity. The ICE Office of Professional Responsibility will typically be the appropriate investigative office within DHS, as well as the DHS OIG in cases where the DHS OIG is conducting an investigation.

The facility shall develop written procedures for administrative investigations, including provisions requiring:

- (a) Preservation of direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data;
- (b) Interviewing alleged victims, suspected perpetrators, and witnesses;
- (c) Reviewing prior complaints and reports of sexual abuse involving the suspected perpetrator;
- (d) Assessment of the credibility of an alleged victim, suspect, or witness, without regard to the individual's status as detainee, staff, or employee, and without requiring any detainee who alleges sexual abuse to submit to a polygraph;
- (e) An effort to determine whether actions or failures to act at the facility contributed to the abuse;
- (f) Documentation of each investigation by written report, which shall include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and

investigative facts and findings; and

(g) Retention of such reports for as long as the alleged abuser is detained or employed by the agency or facility, plus five years.

Such procedures shall govern the coordination and sequencing of administrative and criminal investigations, in accordance with the first paragraph of this section, to ensure that the criminal investigation is not compromised by an internal administrative investigation.

The departure of the alleged abuser or victim from the employment or control of the facility shall not provide a basis for terminating an investigation.

When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

Following an investigation conducted by the facility into a detainee's allegation of sexual abuse, the facility shall notify the Field Office Director of the results of the investigation and any responsive actions taken so that the information can be reported to ICE headquarters and to the detainee.

4. Discipline

(a) Disciplinary sanctions for staff

Staff shall be subject to disciplinary or adverse action up to and including removal from their position for substantiated allegations of sexual abuse or for violating agency or facility sexual abuse rules, policies or standards. Removal from their position is the presumptive disciplinary sanction for staff who have engaged in or attempted or threatened to engage in those acts of sexual abuse defined in paragraphs (a)-(d) and (g)-(h) of "Staff on Detainee Sexual Abuse and/or Assault" in "B. Acts of Sexual Abuse and/or Assault" in this standard.

The facility shall report all incidents of substantiated sexual abuse by staff, and all removals of staff, or resignations in lieu of removal for violations of

agency or facility sexual abuse policies, to appropriate law enforcement agencies unless the activity was clearly not criminal.

The facility shall also report all such incidents of substantiated abuse, removals or resignations in lieu of removal to the 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.

(b) Corrective action for contractors and volunteers

Any contractor or volunteer who has engaged in sexual abuse shall be prohibited from contact with detainees. The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with detainees by contractors or volunteers who have not engaged in sexual abuse, but have violated other provisions within these standards.

Incidents of substantiated sexual abuse by a contractor or volunteer shall be reported to law enforcement agencies, unless the activity was clearly not criminal. The facility shall also report such incidents to the Field Office Director regardless of whether the activity was criminal, and shall make reasonable efforts to report such incidents to any relevant licensing bodies, to the extent known.

(c) Disciplinary sanctions for detainees

Detainees shall be subjected to disciplinary sanctions pursuant to a formal disciplinary process following an administrative or criminal finding that the detainee engaged in sexual abuse, consistent with the requirements of Standard 3.1 "Disciplinary System." The facility shall not discipline a detainee for sexual contact with staff unless there is a finding that the staff member did not consent to such contact. For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

5. Sexual Abuse Incident Reviews

Each facility shall conduct a sexual abuse incident review at the conclusion of every investigation of sexual abuse and, where the allegation was not determined to be unfounded, prepare a written report within 30 days of the conclusion of the investigation recommending whether the allegation or investigation indicates that a change in policy or practice could better prevent, detect, or respond to sexual abuse. Unfounded allegation means an allegation that was investigated and determined not to have occurred. The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so in a written response. Both the report and response shall be forwarded to the Field Office Director or his or her designee, for transmission to the ICE PSA Coordinator. The facility shall also provide any further information regarding such incident reviews as requested by the ICE PSA Coordinator.

The review team shall consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility.

Each facility shall conduct an annual review of all sexual abuse investigations and resulting incident reviews to assess and improve sexual abuse intervention, prevention and response efforts. If the facility has not had any reports of sexual abuse during the annual reporting period, then the facility shall prepare a negative report. The results and findings of the annual review shall be provided to the facility administrator, Field Office Director or his or her designee, for transmission to the ICE PSA Coordinator.

N. Medical and Mental Health Care

Detainee victims of sexual abuse shall be provided emergency medical and mental health services and ongoing care. All treatment services, both emergency and ongoing, shall be provided to the

victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

1. Access to emergency medical and mental health services

- (a) Detainee victims of sexual abuse and assault shall have timely, unimpeded access to emergency medical treatment and crisis intervention services, including emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care.
- (b) Where evidentiary or medically appropriate, the facility administrator shall arrange for an alleged victim to undergo a forensic medical examination, in accordance with the requirements of “M. Investigation, Discipline and Incident Reviews” of this standard.
- (c) Transportation of an alleged victim for emergency care or other services provided off-site shall be arranged in a manner that takes into account the special needs of victimized detainees.

2. Ongoing medical and mental health care for sexual abuse victims and abusers

- (a) Each facility shall offer medical and mental health evaluation and, as appropriate, treatment to all detainees who have been victimized by sexual abuse while in immigration detention.
- (b) The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.
- (c) The facility shall provide such victims with medical and mental health services consistent with the community level of care.

- (d) Detainee victims of sexually abusive vaginal penetration by a male abuser while incarcerated shall be offered pregnancy tests. If pregnancy results from an instance of sexual abuse, the victim shall receive timely and comprehensive information about lawful pregnancy-related medical services and timely access to all lawful pregnancy-related medical services.
- (e) Detainee victims of sexual abuse while detained shall be offered tests for sexually transmitted infections as medically appropriate.
- (f) The facility shall attempt to conduct a mental health evaluation of all known detainee-on-detainee abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

O. Data Collection

Each facility shall maintain in a secure area all case records associated with claims of sexual abuse, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment, if necessary, and/or counseling shall be maintained in appropriate files in accordance with these detention standards and applicable policies, and retained in accordance with established schedules.

Particularly applicable to the storage, confidentiality and release of case records are the requirements of the “Confidentiality and Release of Medical Records” section of standard “4.3 Medical Care” and the requirements of standard “7.1 Detention Files,” especially in regard to the Privacy Act of 1974. Because of the very sensitive nature of information about victims and their medical condition, including infectious disease testing, staff must be particularly vigilant about maintaining confidentiality and releasing information only for legitimate need-to-

know reasons.

Monitoring and evaluation are essential for assessing both the rate of occurrence of sexual assault and agency effectiveness in reducing sexually abusive behavior. Accordingly, the facility administrator must maintain two types of files of sexual abuse and assault incidents which include the following minimum information:

1. General files include:

- a. the victim(s) and assailant(s) of a sexual assault;
- b. the date, time, location, and nature of the incident;
- c. the demographic background of the victim and perpetrator (including citizenship, age, gender, and whether either has self-identified as gay, lesbian, bisexual, transgender, intersex, or gender nonconforming);
- d. detailed reporting timeline, including the names of the individuals who reported the incident and received the report of sexual assault, date and time the report was received, and steps taken to communicate the report up the chain of command;
- e. any injuries sustained by the victim;
- f. all formal and/or informal action taken, including all post-report follow up response taken by the facility (e.g. housing placement/custody classification, medical examination, mental health counseling, etc.);
- g. all reports;
- h. medical forms or other relevant medical information;
- i. supporting memos and videotapes, if any;
- j. any sanctions imposed on the perpetrator; and
- k. any other evidentiary materials pertaining to the allegation.

The facility administrator shall maintain these files chronologically in a secure location.

In addition, the facility administrator shall maintain a listing of the names of sexual assault victims and assailants, along with the dates and locations of all sexual assault incidents occurring within the facility, on his/her computerized incident reporting system. Such information shall be maintained on a need-to-know basis in accordance with the standards “4.3 Medical Care” and “7.1 Detention Files,” which includes protection of electronic files from unauthorized access. At no time may law enforcement sensitive documents or evidence be stored at the facility. Access to this designation shall be limited to those staff involved in the treatment of the victim or the investigation of the incident. The authorized designation shall allow appropriate staff to track the detainee victim or assailant of sexual assault across the system.

On an ongoing basis, the facility PSA Compliance Manager and facility administrator must work with the Field Office and ICE PSA Coordinator to share data regarding sexual abuse incidents and response.

P. Facility Audits

Facilities shall cooperate with all DHS audits of the facility’s compliance with this standard, including by making available relevant documents, records, and other information as requested (including available videotapes and other electronically available data). Upon request, facilities shall also provide to DHS the results of any audits conducted of the facility against the DOJ “National Standards to Prevent, Detect, and Respond to Prison Rape.”

Facilities shall permit auditors access to all areas of the facility, and shall make available space suitable for interviews of detainees and staff. Detainees shall be permitted to have private interviews with auditors, and to send confidential information or correspondence to the auditor.

Appendix 2.11.A: Sample Sexual Abuse and Assault Prevention and Intervention Program Policy¹

I. Zero Tolerance Policy

[FACILITY] maintains a zero-tolerance policy for all forms of sexual abuse or assault. It is the policy of [FACILITY] to provide a safe and secure environment for all detainees, employees, contractors, and volunteers, free from the threat of sexual abuse or assault, by maintaining a Sexual Abuse and Assault Prevention and Intervention (SAAPI) Program that ensures effective procedures for preventing, reporting, responding to, investigating, and tracking incidents or allegations of sexual abuse or assault.

Sexual abuse or assault of detainees by other detainees or by employees, contractors, or volunteers is prohibited and subject to administrative, disciplinary, and criminal sanctions.

II. Definitions

For the purposes of this policy, the following definitions apply:

Sexual abuse of a detainee by another detainee includes any of the following acts by one or more

¹ This document represents a template Sexual Abuse and Assault Prevention and Intervention Program policy, as required by Standard 2.11 “Sexual Abuse and Assault Prevention and Intervention” of the ICE 2011 Performance-Based National Detention Standards (PBNDS 2011). Facilities may choose to use this format as a manner of fulfilling the requirements for a written policy detailed in “A. Written Policies and Procedures” of Standard 2.11.

COLOR KEY:

Provisions indicated in black font comprehensively incorporate the requirements in Standard 2.11 and DHS PREA standards.

Text indicated in **red bold font** identifies sections where facility-specific information must be included to satisfy the requirements.

detainees who, by force, coercion, or intimidation, or if the victim did not consent or was unable to consent or refuse, engages in or attempts to engage in:

- a. Contact between the penis and the vulva or anus and, for purposes of this subparagraph, contact involving the penis upon penetration, however slight;
- b. Contact between the mouth and the penis, vagina, or anus;
- c. Penetration, however slight, of the anal or genital opening of another person by a hand or finger or by any object;
- d. Touching of the genitalia, anus, groin, breast, inner thighs or buttocks, either directly or through the clothing, with an intent to abuse, humiliate, harass, degrade or arouse or gratify the sexual desire of any person; or
- e. Threats, intimidation, or other actions or communications by one or more detainees aimed at coercing or pressuring another detainee to engage in a sexual act.

Sexual abuse of a detainee by a staff member, contractor, or volunteer includes any of the following acts, if engaged in by one or more staff members, volunteers, or contract personnel who, with or without the consent of the detainee, engages in or attempts to engage in:

- a. Contact between the penis and the vulva or anus and, for purposes of this subparagraph, contact involving the penis upon penetration, however slight;
- b. Contact between the mouth and the penis, vagina, or anus;
- c. Penetration, however slight, of the anal or genital opening of another person by a hand or finger or by any object that is unrelated to official duties or where the staff member,

contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;

- d. Intentional touching of the genitalia, anus, groin, breast, inner thighs or buttocks, either directly or through the clothing, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- e. Threats, intimidation, harassment, indecent, profane or abusive language, or other actions or communications aimed at coercing or pressuring a detainee to engage in a sexual act;
- f. Repeated verbal statements or comments of a sexual nature to a detainee;
- g. Any display of his or her uncovered genitalia, buttocks, or breast in the presence of a detainee; or
- h. Voyeurism, which is defined as the inappropriate visual surveillance of a detainee for reasons unrelated to official duties. Where not conducted for reasons relating to official duties, the following are examples of voyeurism: staring at a detainee who is using a toilet in his or her cell to perform bodily functions; requiring a detainee to expose his or her buttocks, genitals, or breasts; or taking images of all or part of a detainee's naked body or of a detainee performing bodily functions.

Staff and detainee perpetrators of sexual abuse, as well as detainees who engage in consensual sexual conduct, are subject to administrative and disciplinary sanctions. The facility shall not discipline a detainee for sexual contact with staff unless there is a finding that the staff member did not consent to such contact.

Contractor: A person who or entity that provides services on a recurring basis pursuant to a contractual agreement with the facility.

Volunteer: An individual who donates time and effort on a recurring basis to enhance the activities and programs of the facility.

III. Compliance Manager

The facility shall designate a Prevention of Sexual Assault (PSA) Compliance Manager who shall serve as the facility point of contact for the local field office and ICE PSA Coordinator. The PSA Compliance Manager must have sufficient time and authority to oversee facility efforts to comply with facility sexual abuse and assault prevention and intervention policies and procedures. The Compliance Manager shall:

1. Assist with the development of written policies and procedures for the SA-API Program, and with keeping them current;
2. Assist with the development of initial and ongoing training protocols;
3. Serve as a liaison with other agencies;
4. Coordinate the gathering of statistics and reports on allegations of sexual abuse or assault;
5. Review the results of every investigation of sexual abuse and assist in conducting an annual review of all investigations to assess and improve prevention and response efforts; and
6. Review facility practices to ensure required levels of confidentiality are maintained.

[INSERT ANY ADDITIONAL DUTIES OF THE COMPLIANCE MANAGER AT THIS FACILITY RELATED TO SEXUAL ABUSE PREVENTION OR INTERVENTION]

IV. Prevention

All staff (employees, volunteers, and contractors) are responsible for being alert to signs of potential sexual abuse or assault, and to situations in which sexual abuses or assaults might occur. If a facility staff member has a reasonable belief that a detainee is subject to a substantial risk of imminent sexual

abuse, he or she shall take immediate action to protect the detainee.

A. Screening and Classification

1. Screening and Classification Requirements

- a. All detainees shall be screened upon arrival at the facility for potential risk of sexual victimization or sexually abusive behavior, and shall be housed to prevent sexual abuse or assault, taking necessary steps to mitigate any such danger.
- b. Each new detainee shall be kept separate from the general population until he/she has been classified and may be housed accordingly.
- c. The initial classification process and initial housing assignment should be completed within twelve hours of admission to the facility.
- d. The facility shall consider, to the extent that the information is available, the following criteria to assess detainees for risk of sexual victimization:
 - 1) Whether the detainee has a mental, physical, or developmental disability;
 - 2) The age of the detainee;
 - 3) The physical build and appearance of the detainee;
 - 4) Whether the detainee has previously been incarcerated or detained;
 - 5) The nature of the detainee's criminal history;
 - 6) Whether the detainee has any convictions for sex offenses against an adult or child;
 - 7) Whether the detainee has self-identified as gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;

8) Whether the detainee has self-identified as having previously experienced sexual victimization; and

9) The detainee's own concerns about his or her physical safety.

Detainees shall not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to items (1), (7), (8), or (9) above.

- e. The initial screening shall consider prior acts of sexual abuse or assault, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse or assault, as known to the facility, in assessing detainees for risk of being sexually abusive.
- f. The facility shall implement appropriate protections on responses to questions asked pursuant to this screening, limiting dissemination, and ensuring that sensitive information is not exploited to the detainee's detriment by staff or other detainees or inmates.
- g. If screening indicates that a detainee has experienced prior sexual victimization or perpetrated sexual abuse, staff shall, as appropriate, ensure that the detainee is immediately referred to a qualified medical or mental health practitioner for medical and/or mental health follow-up as appropriate. When a referral for medical follow-up is initiated, the detainee shall receive a health evaluation no later than two working days from the date of assessment. When a referral for mental health follow-up is initiated, the detainee shall receive a mental health evaluation no later than 72 hours after the referral.
- h. Detainees considered at risk for sexual victimization shall be placed in the least restrictive housing that is available and appropriate. If appropriate custodial options

are not available at the facility, the facility will consult with the ICE Field Office Director to determine if ICE can provide additional assistance. Such detainees may be assigned to administrative segregation for protective custody only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.

- i. The facility shall reassess each detainee's risk of victimization or abusiveness between 60 and 90 days from the date of the initial assessment, and at any other time when warranted based upon the receipt of additional, relevant information or following an incident of abuse or victimization.
- j. When making assessment and housing decisions for a transgender or intersex detainee, the facility shall consider the detainee's gender self-identification and an assessment of the effects of placement on the detainee's health and safety. The facility shall consult a medical or mental health professional as soon as practicable on this assessment. The facility should not base placement decisions of transgender or intersex detainees solely on the identity documents or physical anatomy of the detainee; a detainee's self-identification of his/her gender and self-assessment of safety needs shall always be taken into consideration as well. The facility's placement of a transgender or intersex detainee shall be consistent with the safety and security considerations of the facility, and placement and programming assignments for each transgender or intersex detainee shall be reassessed at least twice each year to review any threats to safety experienced by the detainee.
- k. When operationally feasible, transgender and intersex detainees shall be given the

opportunity to shower separately from other detainees.

2. *Screening and Classification Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING, E.G.:

- REFERENCES TO SPECIFIC SCREENING FORMS OR DOCUMENTS USED BY THE FACILITY
- REFERENCES TO SPECIFIC SOURCES OF INFORMATION AT THE FACILITY RELATED TO SCREENING CRITERIA
- PROCEDURES TO PROTECT SCREENING INFORMATION
- RELEVANT PROCEDURES FOR REFERRAL FOR MEDICAL OR MENTAL HEALTH FOLLOW-UP
- RELEVANT STANDARDS AND REQUIREMENTS ON THE MANAGEMENT OF ADMINISTRATIVE SEGREGATION
- SPECIFIC HOUSING OPTIONS TO BE CONSIDERED FOR DIFFERENT DETAINEES OF VARYING RISK LEVELS INCLUDING VULNERABLE DETAINEES
- PROCEDURES FOR CLASSIFICATION REVIEW
- PROCESS FOR CLASSIFICATION AND HOUSING OF TRANSGENDER AND INTERSEX DETAINEES]

B. *Staff Training*

1. *Staff Training Requirements*

- a. Training on the facility's SA-API Program shall be included in initial and annual refresher training for all employees.
- b. Training shall include:

- 1) The facility's zero-tolerance policies for all forms of sexual abuse;
 - 2) Definitions and examples of prohibited and illegal sexual behavior;
 - 3) The right of detainees and staff to be free from sexual abuse, and from retaliation from reporting sexual abuse;
 - 4) Instruction that sexual abuse and/or assault is never an acceptable consequence of detention;
 - 5) Recognition of situations where sexual abuse and/or assault may occur;
 - 6) How to avoid inappropriate relationships with detainees;
 - 7) Working with vulnerable populations and addressing their potential vulnerability in the general population;
 - 8) Recognition of the physical, behavioral, and emotional signs of sexual abuse and/or assault and ways to prevent and respond to such occurrences;
 - 9) The requirement to limit reporting of sexual abuse and assault to personnel with a need-to-know in order to make decisions concerning the detainee-victim's welfare, and for law enforcement/investigative purposes;
 - 10) The investigation process and how to ensure that evidence is not destroyed;
 - 11) Prevention, recognition and appropriate response to allegations or suspicions of sexual assault involving detainees with mental or physical disabilities;
 - 12) How to communicate effectively and professionally with detainees, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming detainees;
 - 13) Instruction on reporting knowledge or suspicion of sexual abuse and/or assault; and
 - 14) Instruction on documentation and referral procedures of all allegations or suspicion of sexual abuse and/or assault.
- c. All volunteers and other contractors² who have contact with detainees shall be trained on their responsibilities under the facility's sexual abuse prevention, detection, intervention and response policies and procedures. The level and type of training for volunteers and contractors will be based on the services they provide and their level of contact with detainees; however, all volunteers and contractors who have any contact with detainees must be notified of ICE and the facility's zero-tolerance policy and informed how to report such incidents.
 - d. In addition to the general training, all facility staff responsible for conducting sexual abuse or assault investigations shall receive specialized training that covers, at a minimum, interviewing sexual abuse and assault victims, sexual abuse and assault evidence collection in confinement settings, the criteria and evidence required for administrative action or prosecutorial referral, and information about effective cross-agency coordination in the investigation process. The facility must maintain written documentation verifying specialized training provided to investigators pursuant to this requirement.
 - e. Facility medical staff shall be trained in procedures for examining and treating victims of sexual abuse, in facilities where medical staff may be assigned these activities.

² In this section, the term *other contractor* means a person who provides services on a non-recurring basis to the facility pursuant to a contractual agreement with the facility.

Such specialized training shall include detecting and assessing signs of sexual abuse and assault, preserving physical evidence of sexual abuse, responding effectively to victims of sexual abuse and assault, and how and to whom to report allegations or suspicions of sexual abuse or assault.

- f. The facility shall maintain documentation verifying employee, volunteer and contractor training.

2. *Staff Training Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING, E.G.:

- **MORE SPECIFIC DESCRIPTION OF GENERAL AND/OR SPECIALIZED TRAINING CONTENT MEETING MINIMUM ELEMENTS ABOVE**
- **DESCRIPTION OF HOW TRAINING RECORDS ARE DOCUMENTED AT THE FACILITY**
- **PROCEDURES FOR TRAINING OTHER CONTRACTORS AND VOLUNTEERS]**

C. **Detainee Education**

1. *Detainee Education Requirements*

- a. Upon admission to [FACILITY], all detainees shall be notified of the facility's zero-tolerance policy for all forms of sexual abuse and assault through the orientation program and detainee handbook, and provided with information about the facility's SAAP Program. Such information shall include, at a minimum:
 - 1) the facility's zero tolerance policy for all forms of sexual abuse or assault;
 - 2) the name of the facility PSA Compliance Manager, and information about how to contact him/her;
 - 3) prevention and intervention strategies;

- 4) definitions and examples of detainee-on-detainee sexual abuse and assault, staff-on-detainee sexual abuse and assault and coercive sexual activity;
 - 5) explanation of methods for reporting sexual abuse or assault, including one or more staff members other than an immediate point-of-contact line officer, the DHS/OIG and the ICE/OPR investigation processes;
 - 6) information about self-protection and indicators of sexual abuse and assault;
 - 7) prohibition against retaliation, including an explanation that reporting an assault shall not negatively impact the detainee's immigration proceedings; and
 - 8) the right of a detainee who has been subjected to sexual abuse to receive treatment and counseling.
- b. The facility shall provide the detainee notification, orientation, or instruction in formats accessible to all detainees, including those who are limited English proficient, deaf, visually impaired or otherwise disabled, as well as to detainees who have limited reading skills.
 - c. The facility shall maintain documentation of detainee participation in the instruction session.
 - d. The facility shall post on all housing unit bulletin boards the following notices:
 - 1) The DHS-prescribed sexual abuse and assault awareness notice;
 - 2) The name of the PSA Compliance Manager; and
 - 3) Information about local organization(s) that can assist detainees who have been victims of sexual abuse or assault, including mailing addresses and

telephone numbers (incl. toll-free hotline numbers where available). If no such local organizations exist, the facility shall make available the same information about national organizations.

- a. The facility shall make available and distribute the DHS-prescribed "Sexual Assault Awareness Information" pamphlet.

2. *Detainee Education Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING, E.G.:

- **SPECIFIC METHOD OF ORIENTATION AT THE FACILITY (E.G. IN-PERSON SESSION, VIDEO)**
- **SPECIFIC CONTENT OF DETAINEE ORIENTATION PROGRAMS AS RELATED TO SEXUAL ABUSE**
- **SPECIFIC PROCEDURES FOR LEP DETAINEES, DETAINEES WITH DISABILITIES, AND DETAINEES WHO HAVE LIMITED LITERACY**
- **LOCAL ORGANIZATION INFORMATION TO BE PROVIDED**
- **MORE SPECIFIC DESCRIPTION OF HOW DETAINEE PARTICIPATION IS TO BE DOCUMENTED AT THE FACILITY]**

D. Limits to Cross-Gender Viewing and Searches

1. *Viewing and Searches Requirements for Detainees of the Opposite Gender*

- a. Pat-down searches of male detainees by female staff shall not be conducted unless, after reasonable diligence, staff of the same gender is not available at the time the pat-down search is required or in exigent circumstances.

- b. Pat-down searches of female detainees by male staff shall not be conducted unless in exigent circumstances.
- c. All pat-down searches by staff of the opposite gender shall be documented.
- d. Strip searches or visual body cavity searches by staff of the opposite gender shall not be conducted except in exigent circumstances, including consideration of officer safety, or when performed by medical practitioners. Staff shall not conduct visual body cavity searches of juveniles and, instead, shall refer all such body cavity searches of juveniles to a medical practitioner.
- e. All strip searches and visual body cavity searches shall be documented.
- f. Detainees shall be able to 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. Staff of the opposite gender shall announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing.
- g. The facility shall not search or physically examine a detainee for the sole purpose of determine the detainee's genital characteristics. If the detainee's gender is unknown, it may be determined during conversations with the detainee, by reviewing medical records, or, if necessary, learning that information as part of a medical examination that all detainees must undergo as part of intake or other processing procedure conducted in private, by a medical practitioner.

- h. All pat-down searches shall be conducted in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs and policy, including officer safety.

2. *Viewing and Searches Procedures for Detainees of the Opposite Gender*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- **PROTOCOLS FOR CONDUCTING PROFESSIONAL AND RESPECTFUL BODY SEARCHES**
- **PROCEDURES FOR ASCERTAINING WHETHER STAFF OF THE SAME GENDER IS AVAILABLE TO CONDUCT A PAT SEARCH**
- **SPECIFIC METHOD OR LOCATION FOR SEARCH DOCUMENTATION AT THE FACILITY]**

E. Detainee Supervision

1. *Detainee Supervision Requirements*

- a. The facility shall ensure that it maintains sufficient supervision of detainees, including through appropriate staffing levels and, where applicable, video monitoring, to protect detainees against sexual abuse.
- b. The facility administrator shall determine security needs based on a comprehensive staffing analysis and a documented comprehensive supervision guideline that is reviewed and updated at least annually.
- c. In determining adequate levels of detainee supervision and determining the need for video monitoring, the facility shall take into consideration generally accepted detention and correctional practices, any judicial findings of inadequacy, the physical layout of each facility, the composition of the detainee population, the prevalence of substantiated

and unsubstantiated incidents of sexual abuse as well as other incidents reflecting on facility security and detainee safety, the findings and recommendations of sexual abuse incident review reports or other findings reflecting on facility security and detainee safety, the length of time detainees spend in agency custody, and any other relevant factors.

- d. Frequent unannounced security inspections shall be conducted to identify and deter sexual abuse of detainees. Inspections will occur on night as well as day shifts. Staff are prohibited from alerting others that these security inspections are occurring, unless such announcement is related to the legitimate operational functions of the facility.

2. *Detainee Supervision Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- **ELEMENTS OF THE COMPREHENSIVE SUPERVISION GUIDELINE**
- **PROCEDURE FOR ANNUAL REVIEWS**
- **PROCEDURES FOR CONDUCTING FREQUENT UNANNOUNCED SECURITY INSPECTIONS]**

F. Transportation

1. *Transportation Requirements*

- a. Detainees identified as being “at risk” for sexual victimization shall be transported in accordance with that special safety concern.
- b. Transportation staff shall seat each detainee in accordance with written procedures from the facility administrator, with particular attention to detainees who may need to be

afforded closer observation for their own safety.

2. *Transportation Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- **SPECIFIC INSTRUCTIONS FOR SEATING DETAINEES WHO MAY NEED CLOSER OBSERVATION]**

G. Upgrades to Facilities and Technologies

1. *Requirements for Upgrades to Facilities and Technologies*

- a. When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the facility shall consider the effect of the design, acquisition, expansion, or modification upon its ability to protect detainees from sexual abuse.
- b. When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology in a facility, the facility shall consider how such technology may enhance its ability to protect detainees from sexual abuse.

2. *Upgrades to Facilities and Technology Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- **FACTORS THE FACILITY SHOULD TAKE INTO CONSIDERATION IN ASSESSING HOW UPGRADE PLANS CAN HELP BETTER PROTECT AGAINST ABUSE – E.G. EFFECTS ON BLIND SPOTS IN PHYSICAL LAYOUT, ETC.]**

V. Accommodating Detainees with Disabilities or Limited English Proficiency

A. Accommodation Requirements

1. The facility shall take appropriate steps to ensure that detainees with disabilities (including, for example, detainees who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse. Such steps shall include, when necessary to ensure effective communication with detainees who are deaf or hard of hearing, or detainees who have intellectual, psychiatric, or speech disabilities, limited reading skills, or who are blind or have low vision, by:
 - a. Providing access to in-person, telephonic, or video interpretive services that enable effective, accurate, and impartial interpretation, both receptively and expressively, using any necessary specialized vocabulary.
 - b. Providing access to written materials related to sexual abuse in formats or through methods that ensure effective communication.
2. The facility shall take steps to ensure meaningful access to all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse to detainees who are limited English proficient, including steps to provide in-person or telephonic interpretive services that enable effective, accurate, and impartial interpretation, both receptively and expressively, using any necessary specialized vocabulary.
3. In matters relating to allegations of sexual abuse, the facility shall employ effective expressive and receptive verbal communication techniques while communicating with detainees with disabilities in accordance with professionally accepted standards of care. The facility shall provide detainees with disabilities and detainees

with limited English proficiency with in-person or telephonic interpretation services that enable effective, accurate, and impartial interpretation, both receptively and expressively, using any necessary specialized vocabulary. Interpretation services shall be provided by someone other than another detainee, unless the detainee expresses a preference for another detainee to provide interpretation and ICE determines that such interpretation is appropriate and consistent with DHS policy. The provision of interpreter services by minors, alleged abusers, detainees who witnessed the alleged abuse, and detainees who have a significant relationship with the alleged abuser is not appropriate in matters relating to allegations of sexual abuse.

4. Where practicable, provisions for written translation of materials related to sexual abuse or assault shall be made for any significant segments of the population with limited English proficiency. Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.

B. Accommodation Procedures

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- **SPECIFIC METHODS AT THE FACILITY FOR ARRANGING IN-PERSON, TELEPHONIC, AND/OR VIDEO INTERPRETIVE SERVICES (DESIGNATED STAFF AND PROFESSIONAL INTERPRETATION SERVICES AVAILABLE AT THE FACILITY)**
- **INSTRUCTIONS FOR USING FACILITY TELEPHONIC INTERPRETER LINE OR REQUESTING WRITTEN TRANSLATIONS**
- **INSTRUCTIONS FOR WORKING WITH DETAINEES WITH DISABILITIES AND PROCURING ANY NECESSARY ACCOMMODATIONS**

- **PROCEDURES FOR OBTAINING APPROVAL BY AN ICE OFFICIAL FOR THE USE OF ANOTHER DETAINEE TO PROVIDE INTERPRETATION**
- **ANY APPLICABLE CROSS-REFERENCES TO THE FACILITY'S LEP PLAN OR PROCEDURES]**

VI. Detainee Reporting Procedures

A. Detainee Reporting Requirements

1. Detainees shall have multiple ways to privately, and if desired, anonymously, report signs or incidents of sexual abuse and assault, retaliation for reporting sexual abuse, or staff neglect or violations of responsibilities that may have contributed to such incidents, and will not be punished for reporting.
2. Staff shall take seriously all statements from detainees claiming to be victims of sexual abuse or assault, and shall respond supportively and non-judgmentally.
3. Any detainee may report acts of sexual abuse or assault to any employee, contractor, or volunteer.
4. If a detainee is not comfortable with making the report to immediate point-of-contact line staff, he/she shall be allowed to make the report to a staff person with whom he/she is comfortable in speaking about the allegations.
5. The facility shall provide instruction on how detainees may contact their consular official or the DHS Office of the Inspector General, to confidentially and if desired, anonymously, report these incidents.
6. Reporting Through Grievance System
 - a. Formal grievances related to sexual abuse and assault may be filed at any time during, after, or in lieu of lodging an informal grievance or

complaint and with no time limit imposed on when a grievance may be submitted.

- b. Written procedures must be implemented for identifying and handling time-sensitive grievances that involve an immediate threat to detainee health, safety, or welfare related to sexual abuse or assault. Decisions on grievances shall be issued within five days of receipt and appeals shall be responded to within 30 days.
- c. Detainees may obtain assistance from another detainee, the housing officer or other facility staff, family members, or legal representatives. Staff shall take reasonable steps to expedite requests for assistance from these other parties
- d. All grievances related to sexual abuse and the facility's decision on any such grievance must be forwarded to the Field Office Director.

B. Detainee Reporting Procedures

Detainee reports of sexual abuse or assault, retaliation for reporting sexual abuse or assault, and/or staff neglect or violations of responsibilities that may have contributed to such incidents may be made using any available methods of communication, including but not limited to:

Reports to the Facility:

- a. Verbal reports to any staff member (including the PSA Compliance Manager or medical staff)
- b. Written informal or formal requests or grievances to the facility
- c. Sick call requests

Reports to Family Members, Friends, or Other Outside Entities:

- d. Reports to an individual or organization outside the facility who can contact facility staff

Reports to DHS/ICE:

- e. Written informal or formal requests or grievances (including emergency grievances) to the ICE Field Office
- f. Telephone calls or written reports to the DHS/OIG, ICE/OPR, or ICE/DRIL

Reports to Consulates:

- g. Telephone calls or written reports to consular officials

[INSERT SPECIFIC METHODS FOR WRITTEN COMMUNICATION WITH FACILITY STAFF, INCLUDING:

- **PROCESS FOR HANDLING DETAINEE GRIEVANCES RELATED TO SEXUAL ASSAULT**
- **PROCESS FOR FORWARDING GRIEVANCES RELATED TO SEXUAL ABUSE TO THE ICE FOD**
- **ANY ADDITIONAL METHODS AT THE FACILITY FOR DETAINEES TO MAKE PRIVATE REPORTS]**

VII. Staff Notification and Reporting

A. Staff Notification and Reporting Requirements

1. All staff must immediately report:
 - a. Any knowledge, suspicion, or information regarding an incident or allegation of sexual abuse occurring at the facility;
 - b. Any retaliation against detainees or staff who reported or participated in an investigation about sexual abuse or assault; and

- c. Any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.
2. Staff must also be able to report the above outside of the chain of command.
3. Staff shall accept reports made verbally, in writing, anonymously, and from third parties, and promptly document any verbal reports.
4. The facility shall establish a method to receive third-party reports of sexual abuse in its facility, and shall make available to the public information on how to report sexual abuse on behalf of a detainee.
5. The facility administrator shall promptly report the incident to the ICE Field Office Director, and refer all cases that appear potentially to support criminal prosecution to the appropriate law enforcement agency having jurisdiction for investigation.
6. If an employee, contractor, or volunteer is alleged to be the perpetrator of detainee sexual abuse or assault, the facility administrator shall also notify the local government entity or contractor that operates the facility.
7. If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the facility shall report that information to the Field Office Director so that ICE can report the allegation to the designated State or local services agency under applicable mandatory reporting laws.
8. Information concerning the identity of a detainee victim reporting a sexual assault, and the facts of the report itself, shall be limited to those who have a need-to-know in order to make decisions concerning the victim's welfare, and for law enforcement/investigative purposes. Apart from such reporting, staff shall not reveal any information related to a sexual abuse and assault report to anyone other than to the extent

necessary to help protect the safety of the victim or prevent further victimization of other detainees or staff in the facility, or to make medical treatment, investigation, law enforcement, or other security and management decisions.

9. Upon receiving an allegation that a detainee was sexually abused or assaulted while confined at another facility, the facility administrator shall notify the Field Office Director and the appropriate administrator of the facility where the alleged abuse occurred as soon as possible, but no later than 72 hours after receiving the allegation. The facility administrator shall notify the detainee in advance of such reporting. The facility shall document that it has provided such notification. A facility receiving such notification shall ensure the allegation is referred for investigation and reported to the Field Office Director.

B. Staff Notification and Reporting Procedures

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- **FACILITY CHAIN-OF-COMMAND REPORTING STRUCTURE AND PROCEDURES/FORMS FOR DOCUMENTING IN WRITING ALL REPORTED ALLEGATIONS OR SUSPICIONS**
- **METHOD(S) FOR STAFF TO REPORT OUTSIDE THE CHAIN-OF-COMMAND**
- **METHOD FOR FACILITY TO RECEIVE THIRD-PARTY REPORTS OF SEXUAL ABUSE**
- **METHOD BY WHICH FACILITY MAKES AVAILABLE TO THE PUBLIC INFORMATION ON HOW TO REPORT SEXUAL ABUSE ON BEHALF OF A DETAINEE**
- **FACILITY PROCEDURES FOR REFERRAL TO APPROPRIATE LAW ENFORCEMENT AGENCIES**

- **METHOD OF FACILITY REPORTING TO ICE**
- **FACILITY REPORTING TO OTHER CONFINEMENT FACILITIES]**

VIII. Response

A. First Response

1. First Response Requirements

- Staff shall take immediate action to separate any detainee who alleges that he/she has been sexually abused or assaulted from the alleged assailant, and shall refer the detainee for a medical examination and/or clinical assessment for potential negative symptoms.
- Staff suspected of perpetrating sexual abuse or assault shall be removed from all duties requiring detainee contact pending the outcome of an investigation.
- The first security staff member to respond to a report of sexual abuse, or his or her supervisor, shall preserve and protect, to the greatest extent possible, any crime scene until appropriate steps can be taken to collect any evidence.
- If the abuse occurred within a time period that still allows for the collection of physical evidence, the first responder shall:
 - Request the alleged victim not to take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and
 - Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

- If the first staff responder is not a security staff member, the responder shall request that the alleged victim not take any actions that could destroy physical evidence and then notify security staff.

2. First Response Procedures

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- **INSTITUTIONAL PLAN TO COORDINATE STAFF FIRST RESPONDERS, MEDICAL AND MENTAL HEALTH PRACTITIONERS, INVESTIGATORS, AND FACILITY LEADERSHIP RESPONSE**
- **REMOVING STAFF SUSPECTED OF PERPETRATING SEXUAL ABUSE FROM DETAINEE CONTACT**
- **WHERE APPLICABLE, FACILITY UNIFORM EVIDENCE PROTOCOL, WHICH MAXIMIZES THE POTENTIAL FOR OBTAINING USABLE PHYSICAL EVIDENCE FOR ADMINISTRATIVE PROCEEDINGS AND CRIMINAL PROSECUTIONS]**

B. Specialized Response and Victim Services

1. Specialized Response and Victim Services Requirements

- The facility must use a coordinated, multidisciplinary team approach to responding to sexual abuse, such as a sexual assault response team (SART), which includes a medical practitioner, a mental health practitioner, a security staff member, and an investigator from the assigned investigative entity, as well as representatives from outside entities that provide relevant services and expertise.
- Staff shall utilize available community resources and services to provide valuable expertise and support in areas of crisis intervention, counseling, investigation and

the prosecution of sexual abuse and assault perpetrators to most appropriately address victims' needs.

- c. The facility shall attempt to enter into memoranda of understanding or other agreements with community service providers or, if local providers are not available, national organizations that provide legal advocacy and confidential emotional support services for immigrant victims of crime.
- d. The facility administrator shall establish procedures to make available to detainees information about local organizations that can assist detainees who have been victims of sexual abuse, including mailing addresses and telephone numbers (including toll-free hotline numbers where available). If no such local organizations exist, the facility shall make available the same information about national organizations.
- e. Following an allegation of sexual abuse, the facility administrator shall also establish procedures to make available, to the full extent possible, additional outside victim services.
- f. The facility shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available, the facility shall work with ICE to provide these services from a qualified staff member from a community-based organization, or a qualified ICE staff member.³ The victim advocate shall be able to provide emotional support, crisis intervention, information, and referrals.
- g. The facility shall enable reasonable communication between detainees and these

organizations or agencies, in as confidential a manner as possible.

- h. Staff shall inform detainees, prior to giving them access to outside resources, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.
- i. If a victim is transferred between detention facilities, the sending facility shall, as permitted by law, inform the receiving facility of the incident and the victim's potential need for medical or social services (unless the victim requests otherwise in the case of transfer to a non-ICE facility). If the receiving facility is unknown to the sending facility, the sending facility shall notify the Field Office Director, so that he or she can notify the receiving facility.
- j. Where an alleged victim of sexual abuse or assault that occurred elsewhere in ICE custody is subsequently transferred to the detention facility, the facility shall comply with all response and intervention requirements outlined by this policy, as appropriate based on the nature and status of the case.
- k. If any of these requirements cannot be met, the facility will consult with the ICE Field Office Director to determine if ICE can provide additional assistance.

2. *Specialized Response and Victim Services Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- **FACILITY PLAN TO COORDINATE ACTIONS TAKEN BY STAFF FIRST RESPONDERS, MEDICAL AND MENTAL HEALTH**

³ A qualified ICE staff member or a qualified community-based staff member is an individual with training on sexual assault and forensic examination issues in general.

PRACTITIONERS, INVESTIGATORS, AND FACILITY LEADERSHIP

- **REFERENCES TO ANY MEMORANDA OF UNDERSTANDING (MOU) OR OTHER FACILITY AGREEMENTS WITH COMMUNITY SERVICE PROVIDERS TO PROVIDE SUPPORT SERVICES FOR VICTIMS**
- **CONTACTS FOR AVAILABLE COMMUNITY SERVICE PROVIDERS IN THE AREA (INCLUDING ANY RAPE CRISIS CENTERS), AND PROCEDURES FOR CONTACTING THEM**
- **FACILITY PROCESSES TO INVOLVE AVAILABLE OUTSIDE COMMUNITY RESOURCES AND SERVICES, INCLUDING NATIONAL ORGANIZATIONS IF LOCAL ORGANIZATIONS ARE NOT AVAILABLE]**

C. Housing and Protection for Victims

1. Housing and Protection Requirements

- a. Victims and vulnerable detainees shall be housed in a supportive environment that represents the least restrictive housing option possible (e.g. in a different housing unit, transfer to another facility, medical housing, or protective custody), and that will, to the extent possible, permit the victim the same level of privileges he/she was permitted immediately prior to the sexual assault. This placement should take into account any ongoing medical or mental health needs of the victim.
- b. Victims may not be held for longer than five days in any type of administrative segregation for protective purposes, except in highly unusual circumstances or at the request of the victim. The facility shall notify the appropriate ICE Field Office Director whenever a detainee victim, or detainee placed due to vulnerability to sexual abuse or

assault, has been held in administrative segregation for 72 hours.

- c. A detainee victim who is in protective custody after having been subjected to sexual abuse shall not be returned to the general population until completion of a proper re-assessment, taking into consideration any increased vulnerability of the detainee as a result of the sexual abuse or assault.
- d. Staff, contractors, and volunteers shall not retaliate against any person, including a detainee, who reports, complains about, or participates in an investigation into an allegation of sexual abuse, or for participating in sexual abuse as a result of force, coercion, threats, or fear of force.
- e. The facility shall employ multiple protection measures, such as housing changes, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for detainees or staff who fear retaliation for reporting sexual abuse or for cooperating with investigations.
- f. For at least 90 days following a report of sexual abuse or assault, the facility, in concert with ICE, shall monitor to see if there are facts that may suggest possible retaliation by detainees or staff, and facility shall monitor to see if there are facts that may suggest possible retaliation by detainees or staff, and shall act promptly to remedy any such retaliation. Items the facility should monitor include any detainee disciplinary reports, housing, or program changes, or negative performance reviews or reassignments by staff. The facility shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.
- g. If any of these requirements cannot be met, the facility will consult with the ICE Field

Office Director to determine if ICE can provide additional assistance.

2. *Housing and Protection Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- **SPECIFIC FACILITY HOUSING OPTIONS TO BE CONSIDERED FOR VICTIMS AND ASSAILANTS OF VARIOUS SECURITY CLASSIFICATION LEVELS**
- **SPECIFIC PROTECTION MEASURES THE FACILITY MAY TAKE FOR DETAINEES OR STAFF FEARING RETALIATION**
- **ANY ADDITIONAL ITEMS TO BE MONITORED FOR SIGN OF POSSIBLE RETALIATION AGAINST VICTIMS OR INDIVIDUALS WHO REPORT SEXUAL ABUSE]**

IX. Health Care Services

A. Health Care Services Requirements

1. Detainee victims of sexual abuse and assault shall have timely, unimpeded access to emergency medical treatment and crisis intervention services, including emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care.
2. Transportation of an alleged victim for emergency care or other services provided off-site shall be arranged in a manner that takes into account the special needs of victimized detainees.
3. The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all detainees who have been victimized by sexual abuse while in immigration detention.
4. The evaluation and treatment of such victims shall include, as appropriate, follow-up

services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.

5. Detainee victims of sexually abusive vaginal penetration by a male abuser while incarcerated shall be offered pregnancy tests. If pregnancy results from an instance of sexual abuse, the victim shall receive timely and comprehensive information about lawful pregnancy-related medical services and timely access to all lawful pregnancy-related medical services.
6. Detainee victims of sexual abuse while detained shall be offered tests for sexually transmitted infections as medically appropriate.
7. The facility shall attempt to conduct a mental health evaluation of all known detainee-on-detainee abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.
8. All treatment services, both emergency and ongoing, shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The facility shall provide such victims with medical and mental health services consistent with the community level of care.

B. Health Care Services Procedures

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- **PROCEDURES FOR COORDINATING WITH AVAILABLE OFF-SITE SERVICE PROVIDERS, AS NECESSARY]**

X. Investigation

A. Investigation Requirements

1. The facility to establish a protocol, to ensure that each allegation of sexual abuse is investigated by facility, or referred to an appropriate investigative authority. This protocol shall be posted on the facility website, or otherwise made available to the public.
2. The facility shall coordinate with ICE and other appropriate investigative entities to ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse. All investigations must be prompt, thorough, objective, fair, and conducted by specially trained, qualified investigators.
3. Where evidentiarily or medically appropriate, at no cost to the detainee, and only with the detainee's consent, the facility administrator shall arrange for an alleged victim to undergo a forensic medical examination by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE), where practicable. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified health care personnel.
4. As requested by a victim, the presence of his or her outside or internal victim advocate, including any available victim advocacy services offered by a hospital conducting a forensic exam, shall be allowed for support during a forensic exam and investigatory interviews.
5. The results of the physical examination and all collected physical evidence are to be provided to the investigative entity.
6. In the event the investigation is being conducted by a non-federal investigating agency, the facility shall request that the

investigating agency follow the applicable requirements of this policy, including requirements related to evidence preservation and forensic examinations.

7. Upon conclusion of a criminal investigation where the allegation was substantiated, an administrative investigation shall be conducted. Upon conclusion of a criminal investigation where the allegation was unsubstantiated, the facility shall review any available completed criminal investigation reports to determine whether an administrative investigation is necessary or appropriate. Administrative investigations shall be conducted after consultation with the appropriate investigative office within DHS, and the assigned criminal investigative entity.
8. Administrative investigations procedures include:
 - a. Preservation of direct and circumstantial evidence, including any available physical DNA evidence and any available electronic monitoring data;
 - b. Interviewing alleged victims, suspected perpetrators, and witnesses;
 - c. Reviewing prior complaints and reports of sexual abuse or assault involving the suspected perpetrator;
 - d. Assessment of the credibility of an alleged victim, suspect, or witness, without regard to the individual's status as detainee, staff, or employee and without requiring any detainee who alleged sexual abuse or assault to submit to a polygraph;
 - e. An effort to determine whether actions or failures to act at the facility contributed to the abuse;
 - f. Documentation of each investigation by written report, which shall include a

description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings;

- g. Retention of such reports for as long as the alleged abuser is detained or employed by the agency or facility, plus five years; and
 - h. Coordination and sequencing of administrative and criminal investigations to ensure that a criminal investigation is not compromised by an internal administrative investigation.
9. The facility uses no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse are substantiated.
10. The departure of the alleged abuser or victim from the employment or control of the facility shall not provide a basis for terminating an investigation.
11. When outside agencies investigate sexual abuse and assault, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation. Where an alleged victim of sexual abuse or assault that occurred elsewhere in ICE custody is subsequently transferred to the facility, the facility shall also cooperate with any administrative or criminal investigative efforts arising from the incident.
12. Following an investigation conducted by the facility into a detainee's allegation of sexual abuse, the facility shall notify the Field Office Director of the results of the investigation and any responsive actions taken so that the information can be reported to ICE headquarters and to the detainee.

B. Investigation Procedures

2.11 | Sexual Abuse and Assault Prevention and Intervention

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[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- ADDITIONAL OR MORE SPECIFIC FACILITY PROCESSES FOR CONDUCTING INTERNAL ADMINISTRATIVE INVESTIGATIONS (E.G. EVIDENCE PROCESSING PROTOCOLS, INTERVIEWING PROTOCOLS, ETC.)
- FACILITY PROCEDURES FOR ARRANGING FORENSIC EXAMS, AND FOR ATTEMPTING TO PROCURE A SAFE OR SANE
- SPECIFIC FACILITY PROCEDURES FOR COORDINATION AND SEQUENCING OF INTERNAL ADMINISTRATIVE INVESTIGATIONS AND CRIMINAL INVESTIGATIONS
- GUIDELINES FOR DETERMINING WHEN AN ADMINISTRATIVE INVESTIGATION WILL BE NECESSARY OR APPROPRIATE FOLLOWING A CRIMINAL INVESTIGATION'S FINDING OF UNSUBSTANTIATION
- MEANS BY WHICH THE FACILITY POLICY IS MADE PUBLICALLY AVAILABLE]

XI. Disciplinary Sanctions

A. Staff Discipline

1. Staff Discipline Requirements

- a. Staff shall be subject to disciplinary or adverse action, up to and including removal from their position, for substantiated allegations of sexual abuse or for violating ICE or facility sexual abuse rules, policies, or standards.
- b. Removal from their position is the presumptive disciplinary sanction for staff who have engaged in, attempted, or threatened to engage in sexual abuse, as defined under the definition of staff-on-detainee abuse in Section II, paragraphs (a)-(d) and (g)-(h).

PBND 2011
(Revised December 2016)

- c. The facility shall report all incidents of substantiated sexual abuse by staff, and all removals of staff, or resignations in lieu of removal for violations of sexual abuse policies, to appropriate law enforcement agencies unless the activity was clearly not criminal. The facility shall also report all such incidents of substantiated abuse, removals, or resignations in lieu of removal to the 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.
- d. Contractors suspected of perpetrating sexual abuse or assault shall be removed from all duties requiring detainee contact pending the outcome of an investigation.
- e. Any contractor or volunteer who has engaged in sexual abuse or assault shall be prohibited from contact with detainees. The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with detainees by contractors or volunteers who have not engaged in sexual abuse or assault, but have violated other sexual abuse policies.
- f. Incidents of substantiated sexual abuse by a contractor or volunteer shall be reported to law enforcement agencies, unless the activity was clearly not criminal. The facility shall also report such incidents to the Field Office Director regardless of whether the activity was criminal, and shall make reasonable efforts to report such incidents to any relevant licensing bodies, to the extent known.

2. *Staff Discipline Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- FACILITY DISCIPLINARY PROCESSES AND SANCTIONS FOR STAFF, CONTRACTOR OR VOLUNTEER OFFENSES RELATING TO SEXUAL ABUSE
- PROCEDURES FOR IDENTIFYING AND REPORTING TO RELEVANT LICENSING BODIES]

B. *Detainee Discipline*

1. *Detainee Discipline Requirements*

- a. Detainees shall be subjected to disciplinary sanctions pursuant to a formal disciplinary process following an administrative or criminal finding that the detainee engaged in sexual abuse or assault.
- b. The facility shall not discipline a detainee for sexual contact with staff unless there is a finding that the staff member did not consent to such contact.
- c. For the purpose of disciplinary action, a report of sexual abuse or assault made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.
- d. If a detainee is mentally disabled or mentally ill but competent, the disciplinary process shall consider whether the detainee's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

2. *Detainee Discipline Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- **FACILITY DISCIPLINARY PROCESSES AND SANCTIONS FOR DETAINEE OFFENSES RELATING TO SEXUAL ABUSE (OR CROSS-REFERENCES TO FACILITY DETAINEE DISCIPLINARY POLICY)]**

XII. Sexual Abuse Incident and Annual Reviews

A. Review Requirements

1. The facility shall conduct a sexual abuse and assault incident review at the conclusion of every investigation of sexual abuse or assault.
2. For any substantiated or unsubstantiated allegation, the facility shall prepare a written report within 30 days of the conclusion of the investigation recommending whether the allegation or investigation indicates that a change in policy or practice could better prevent, detect, or respond to sexual abuse and assault.
3. The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so in a written response. Both the report and response shall be forwarded to the Field Office Director, or his or her designee, for transmission to the ICE PSA Coordinator. The facility shall also provide any further information regarding such incident reviews as requested by the ICE PSA Coordinator.
4. The review team shall consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility.
5. The facility shall conduct an annual review of all sexual abuse investigations and resulting

incident reviews to assess and improve sexual abuse intervention, prevention, and response efforts. If the facility has not had any reports of sexual abuse during the annual reporting period, then the facility shall prepare a negative report. The results and findings of the annual review shall be provided to the facility administrator and Field Office Director, or his or her designee, for transmission to the ICE PSA Coordinator.

B. Review Procedures

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- **SPECIFIC PROCEDURES FOR CONDUCTING INCIDENT REVIEWS, INCLUDING DETAILED FACTORS OR CRITERIA TO BE TAKEN INTO CONSIDERATION**
- **SPECIFIC PROCEDURES FOR CONDUCTING ANNUAL REVIEWS, INCLUDING DETAILED FACTORS OR CRITERIA TO BE TAKEN INTO CONSIDERATION]**

XIII. Data Collection

A. Data Collection Requirements

1. The facility shall maintain in a secure area all case records associated with claims of sexual abuse or assault, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment, if necessary.
2. The facility administrator shall maintain two types of files regarding incidents of sexual abuse and assault, which include the following minimum information:
 - a. General files include:
 - the victim(s) and assailant(s) of a sexual assault

- the date, time, location, and nature of the incident
 - the demographic background of the victim and the perpetrator (including citizenship, age, gender, and whether either has self-identified as gay, lesbian, bisexual, transgender, intersex, or gender nonconforming)
 - detailed reporting timeline, including the names of the individual who reported the incident and received the report of sexual assault, date and time the report was received, and steps taken to communicate the report up the chain of command
 - any injuries sustained by the victim
 - all formal and/or informal action taken, including all post-report follow up response taken by the facility (e.g. housing placement/custody classification, medical examination, mental health counseling, etc.)
 - all reports
 - medical forms or other relevant medical information
 - supporting memos and videotapes, if any
 - any sanctions imposed on the perpetrator
 - any other evidentiary materials pertaining to the allegation
3. The facility administrator shall maintain these files chronologically in a secure location.
 4. The facility administrator shall maintain a listing of the names of sexual assault victims and assailants, along with the dates and locations of all sexual assault incidents

occurring within the facility, on his/her computerized incident reporting system. Such information shall be maintained on a need-to-know basis; access shall be limited to those staff involved in the treatment of the victim or the investigation of the incident. At no time may law enforcement sensitive documents or evidence be stored at the facility.

5. On an ongoing basis, the PSA Compliance Manager and facility administrator must work with the Field Office and ICE PSA Coordinator to share data regarding sexual abuse incidents and response.

B. Data Collection Procedures

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- **NAMES/TYPES OF FILES TO BE MAINTAINED REGARDING INCIDENTS OF SEXUAL ABUSE, TO BE MAINTAINED IN A SECURE AREA]**

XIV. Facility Audits

The facility shall cooperate with all DHS audits of the facility's compliance with sexual abuse and assault policies and standards, including by:

1. In advance of and during the on-site audit, making available relevant documents, records, and other information as requested (including available videotapes and other electronically available data);
2. Permitting auditors access to all areas of the facility;
3. Permitting detainees to have private interviews with auditors, and to send confidential correspondence to the auditor; and
4. Making available space suitable for interviews of detainees and staff.

XV. ICE Approval of Facility Policy

The following policies and procedures require approval by the local ICE Field Office.

1. Facility Zero Tolerance Policy outlining the facility's approach to preventing, detecting, and responding to all forms of sexual abuse.
2. Facility policy and procedures to ensure medical staff is trained in procedures for examining and treating victims of sexual abuse (where medical staff may be assigned these duties).
3. Facility policy and procedures specifying appropriate procedures for staff to report any knowledge, suspicion, or information regarding an incident of 1) sexual abuse that occurred in a facility; 2) 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.

4. Facility policy and procedures for coordination and conduct of internal administrative investigations with the assigned criminal investigative entity to ensure non-interference.
5. Facility policy and procedures regarding disciplinary or adverse actions for staff, up to and including removal, when there is a substantiated allegation of sexual abuse, or when there has been a violation of agency sexual abuse rules, policies, or standards.

[INSERT FACILITY PROCEDURES TO REQUEST AND MAINTAIN RECORDS OF ICE FIELD OFFICE REVIEW AND APPROVAL]

- **Appendix 2.11.B1: Sexual Abuse and Assault Awareness Brochure (English)**
- **Appendix 2.11.B2: Sexual Abuse and Assault Awareness Brochure (Spanish)**

How to Report Sexual Abuse and Assault

If you feel at risk of being victimized, or if you become a victim of sexual abuse or assault, report the incident immediately. There are many options for reporting. Your ICE Detainee Handbook has more information about each of these:

Report to the Facility

1. Tell any trusted staff member at the facility.
2. File an informal or formal grievance (including an emergency grievance) with the facility.

Report to the ICE Field Office

3. Tell any ICE/ERO staff member who visits the facility.
4. File a written informal or formal request or grievance to ICE/ERO.

Report to DHS or ICE Headquarters

5. Contact the ICE Detention Reporting and Information Line: **1-888-351-4024 or 9116#**. Language assistance is available.
6. Contact the DHS Office of Inspector General (OIG):

Write a letter to:

Office of Inspector General/MAIL STOP 0305
Department of Homeland Security
245 Murray Lane, SW Washington, DC 20528-0305
(202) 254-4100 / FAX: (202) 254-4285

Call the toll-free hotline at:

1-800-323- 8603 / 1-844-889-4357 – TTY

Report to Your Consular Official

7. Call or write to your consular official.

Anonymous Reporting

You do not have to give your name to report a sexual abuse or assault. You can choose to report anonymously to the Detention Reporting and Information Line (DRIL) or the DHS OIG. You can also have somebody else report on your behalf to the facility, ICE Headquarters, or the OIG.

Will this Impact my Immigration Case or Detention?

Any report of sexual abuse, or fear of being abused or assaulted, will not negatively affect your immigration case. No one can retaliate against you in any way for reporting sexual abuse or assault.

Confidentiality

Information concerning your identity and the facts of your report will be limited to only those who need to know.



****For more information on this content, please read the ICE Detainee Handbook or ask a trusted facility staff person.****



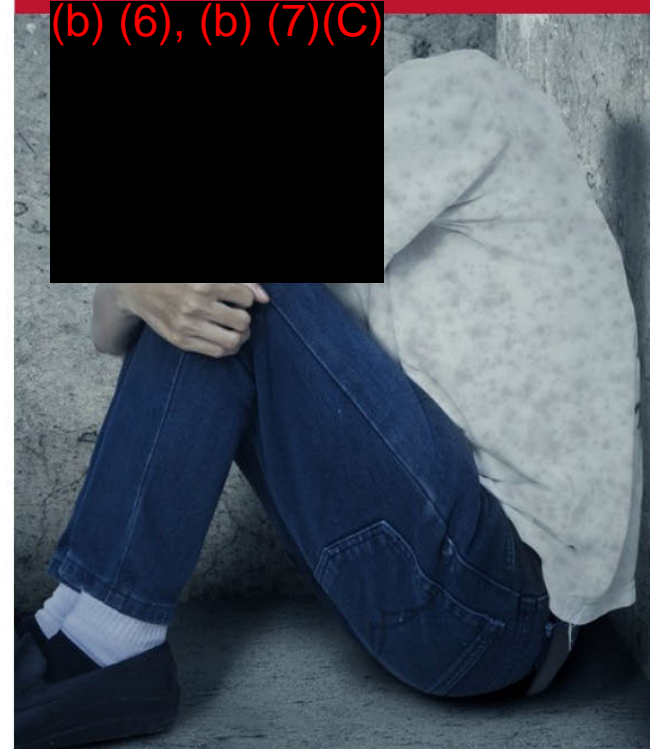
**U.S. Immigration
and Customs
Enforcement**

**This pamphlet is intended to be distributed as a tri-fold brochure.*



**U.S. Immigration
and Customs
Enforcement**

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**SEXUAL ABUSE
and ASSAULT
AWARENESS**

www.ICE.gov

What is Sexual Abuse and Assault

Detainee-on-detainee sexual abuse and assault:

All forms of sexual abuse and assault by a detainee against another detainee(s) are prohibited. If another detainee forces you or tries to force you to engage in a sex act, touches the sexual parts of your body, forces you or tries to force you to touch the sexual parts of their body, or uses threats or intimidations to pressure you to engage in sex, it is sexual abuse.

Staff-on-detainee sexual abuse and assault:

All forms of sexual acts between a detainee and a staff member (including contract guards, medical professionals, and volunteers) are prohibited and against the law, regardless of whether they are consensual. If a staff member tries to or actually does have sex with you, intentionally touches you in a sexual manner, makes sexual advances or repeated sexual comments, displays his or her genitals, or engages in voyeurism, it is sexual abuse.



If You Are a Victim of Sexual Abuse or Assault

Whatever your reactions or fears, it is important to understand that you are not to blame. Sexual abuse can violate your sense of safety and trust. You may feel shocked, angry, anxious, depressed, or guilty. You may also experience a variety of physical reactions, from changes in eating and sleeping patterns to nightmares or flashbacks.

These reactions are normal, and help is available. The facility and ICE will help you get support and offer resources specific to your needs.

What Support Can You Expect from ICE and the Facility

You will be offered immediate protection from the perpetrator and you will be referred for a medical examination, when appropriate. You will also be offered mental health services and outside victim services. Some victims may also be encouraged

to receive a sexual assault forensic medical exam, which can help in criminally prosecuting the perpetrator.

How Will Reports be Investigated?

When you report a sexual abuse or assault incident the facility and/or an appropriate law enforcement agency will conduct an investigation. You may be asked to participate in an interview to gather information. ICE will inform you of the result of any investigation once it is completed.

There is a difference between reporting the incident and choosing to press charges. You may choose not to immediately press charges, but you can always decide to do so later. If criminal charges are filed, it will be presented for possible prosecution. It is important for you to discuss any concerns you have with the prosecutor (or your attorney) or a victim advocate.

How Can I Protect Myself from Sexual Abuse or Assault?

Sexual abuse and assault is never the victim's fault. Knowing the warning signs and red flags can help you stay alert and aware:

1. Report concerns.
2. Carry yourself in a confident manner. Many abusers choose victims who look like they would not fight back or who they think are emotionally weak.
3. Do not accept gifts or favors from others. Gifts or favors can come with demands or terms that the giver expects you to accept.
4. Do not accept an offer from another detainee to be your protector.
5. Find a staff member with whom you feel comfortable discussing your fears and concerns.
6. Do not use drugs or alcohol; these can weaken your ability to stay alert and make good judgments.
7. Be clear, direct and firm. Do not be afraid to say "no" or "stop it now."
8. Choose your associates wisely. Look for people who are involved in positive activities like educational programs, work opportunities or counseling groups. Get yourself involved in these activities, if they are available at your facility.
9. If you suspect another detainee is being sexually abused or assaulted, report it using one of the methods listed in this pamphlet.
10. Trust your instincts. Be aware of situations that make you feel uncomfortable. If it does not feel right or safe, leave the situation or seek assistance. If you fear for your safety, report your concerns to staff.



Como Reportar un Abuso o una Agresión Sexual

Si usted se siente a riesgo de ser victimizado o si usted se convierte en una víctima de abuso o agresión sexual, reporte el incidente inmediatamente. Hay muchas opciones para reportar. Su Manual para los Detenidos de ICE contiene más información acerca de éstas:

Repórtelo al Centro

1. Dígaselo a cualquier empleado de confianza del centro.
2. Entregue una queja formal o informal (incluyendo una queja de emergencia) en el centro.

Repórtelo a la Oficina Regional de ICE

3. Dígaselo a cualquier empleado de ICE/ERO que visite el centro.
4. Entregue una petición o queja informal o formal a ICE/ERO.

Repórtelo a las Oficinas Centrales de DHS o ICE

5. Contacte la Línea de Reportes e Información de Detención de ICE: 1-888-351-4024 o 9116#. Hay asistencia de idiomas.
6. Contacte la Oficina del Inspector General de DHS (OIG por sus siglas en inglés):

Envíe una carta a:

DHS Office of Inspector General
Attention: Office of Investigations
Hotline 245 Murray Lane, SW
Building 410/Mail Stop 0305
Washington, DC 20528

Llame gratuitamente a la línea de asistencia:

1-800-323- 8603 / 1-844-889-4357 – TTY

Repórtelo a su Oficial Consular

7. Llame o escríbale a su oficial consular.

Reportar Anónimamente

Usted no tiene que dar su nombre para reportar un abuso o asalto sexual. Usted puede elegir reportar anónimamente a la Línea de información y denuncias del Centro de Detenciones del ICE (DRIL) o al DHS OIG. Usted también puede hacer que otra persona lo reporte por usted a las Oficinas Centrales de ICE o al OIG por usted.

¿Esto impactará mi caso de inmigración o detención?

Cualquier reporte de abuso sexual o temor de ser abusado o agredido no afectará negativamente su caso de inmigración. *Nadie podrá tomar ninguna represalia en contra de usted por haber reportado un abuso o una agresión sexual.*

Confidencialidad

La información concerniente a su identidad y los hechos de su reporte serán limitados a quienes necesitan saberlos.



****Para más información sobre este tema, por favor lea el Manual para los detenidos de ICE o pregúntele a un empleado de confianza del centro.****



U.S. Immigration
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Enforcement

*Este folleto está destinado a ser distribuido como un folleto tríptico.



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**CONOCIMIENTO
DEL ABUSO Y LA
AGRESIÓN
SEXUAL**

www.ICE.gov

¿Qué es el abuso y la agresión sexual?

Abuso y agresión sexual por parte de un detenido hacia otro detenido:

Todos los tipos de abuso y agresión sexual por parte de un detenido hacia otro detenido son prohibidos. Si un detenido lo fuerza o intenta forzarlo a participar en cualquier acto sexual, le toca las partes sexuales del cuerpo, lo fuerza a tocarle las partes sexuales de su cuerpo o usa amenazas o intimidación para presionarlo a participar en relaciones sexuales, eso es un abuso sexual.

Abuso o agresión sexual por parte de un empleado hacia un detenido:

Todos los tipos de actos sexuales entre un detenido y un empleado (incluyendo los guardias contratistas, profesionales médicos y voluntarios) son prohibidos y contrarios a la ley, aún si son con consentimiento. Si un empleado intenta o logra tener sexo con usted, intencionalmente lo toca en una manera sexual, le hace proposiciones sexuales o comentarios sexuales repetidos, le muestra su área genital o participa en voyerismo, es un abuso sexual.



Si usted es una víctima de abuso o agresión sexual

Cualesquiera que sean sus reacciones o temores, es importante que entienda que no es culpable. El abuso sexual puede violar su sentido de seguridad y confianza. Puede ser que usted se sienta ofendido, bravo, ansioso, deprimido o culpable. Puede ser que usted también experimente una variedad de reacciones físicas, desde cambios en sus hábitos de comer y dormir hasta pesadillas y flashbacks. Estas reacciones son normales y hay ayuda disponible. El centro y ICE le ayudarán a conseguir apoyo y ofrecen recursos específicos para sus necesidades.

¿Qué apoyo puede esperar de ICE y su centro?

Se le ofrecerá protección inmediata del culpable y usted será referido para un examen médico, cuando sea apropiado. También se le ofrecerán servicios de salud mental y servicios externos para las víctimas. A algunas víctimas también se les recomendará que reciban un examen de medicina forense de abuso sexual, lo cual puede ayudar a procesar criminalmente al culpable.

¿Cómo se investigarán los reportes?

Cuando usted reporte un incidente de abuso o agresión sexual, el centro y/o una agencia adecuada del cumplimiento de la ley realizará una investigación. Puede ser que se le pida que participe en una entrevista para coleccionar información. ICE le informará el resultado de cualquier investigación una vez que ésta haya terminado.

Hay una diferencia entre reportar el incidente y elegir poner cargos. Puede ser que usted elija no poner cargos inmediatamente, pero usted siempre podrá decidir hacerlo luego. Si se formulan cargos criminales, se presentarán para un posible enjuiciamiento. Es importante que usted discuta cualquier preocupación que tenga con el fiscal (o su abogado) o un defensor de víctimas.

¿Cómo puedo protegerme del abuso o la agresión sexual?

El abuso y la agresión sexual nunca son culpa de la víctima. El conocer las señales de alerta y actitudes sospechosas pueden ayudarle a mantenerse alerta y consciente:

1. Reporte sus preocupaciones.
2. Compórtese con firmeza. Muchos abusadores eligen víctimas que lucen como que no se defenderían o que ellos perciben como débiles.
3. No acepte regalos o favores de otros. Los regalos o los favores pueden venir con demandas o términos con los cuales el donante espera que usted cumpla.
4. No acepte una oferta por parte de otro detenido para ser su protector.
5. Busque un empleado con el cual usted se siente cómodo discutiendo sus temores y preocupaciones.
6. No use drogas o alcohol. Estos pueden debilitar sus habilidades para mantenerse alerta y tener buen juicio.
7. Sea claro, directo y firme. No tema decir “no” o “pare ya”.
8. Elija cuidadosamente sus asociados. Busque personas que estén involucradas en actividades positivas como los programas educacionales, oportunidades de empleo o grupos de asesoramiento. Involúcrese en estas actividades, si están disponibles en su centro.
9. Si usted sospecha que otro detenido está siendo abusado o agredido sexualmente, repórtelo usando uno de los métodos listados en este panfleto.
10. Confíe en sus instintos. Esté consciente de situaciones que lo hacen sentirse incómodo. Si no se siente bien o seguro, apártese de la situación o busque asistencia. Si teme por su seguridad, repórtelo sus preocupaciones a un empleado.

Ya Basta



2.12 Special Management Units

I. Purpose and Scope

This detention standard protects detainees, staff, contractors, volunteers and the community from harm by segregating certain detainees from the general population in Special Management Units with an Administrative Segregation section for detainees segregated for administrative reasons and a Disciplinary Segregation section for detainees segregated for disciplinary reasons.

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. The facility shall have a Special Management Unit (SMU) with provisions for separating the

administrative segregation section, for detainees segregated from the general population for administrative reasons, from the disciplinary segregation section, for detainees segregated from the general population for disciplinary reasons.

2. Detainees housed in the general population, staff, contractors, volunteers and the local community shall be protected from harm by the segregation of certain detainees in an SMU.
3. Any detainee who represents an immediate, significant threat to safety, security or good order shall be immediately controlled by staff and, if cause exists and supervisory approval granted, placed in administrative segregation. ICE and the detainee shall be immediately provided a copy of the administrative segregation order describing the reasons for the detainee’s placement in the SMU.
4. Administrative segregation may also be available to detainees for the purpose of providing “protective custody.” A detainee shall be placed in “protective custody” status in administrative segregation only when there is documentation and supervisory approval that it is necessary to protect a detainee from harm and that no reasonable alternatives are available.
5. A detainee shall be placed in disciplinary segregation only after a finding by a disciplinary hearing panel that the detainee is guilty of a prohibited act or rule violation classified at a “greatest,” “high” or “high-moderate” level, as defined in “Appendix 3.1.A: Offense Categories,” found in “3.1 Disciplinary System.”
6. Disciplinary segregation shall only be ordered when alternative dispositions may inadequately regulate the detainee’s behavior.
7. Health care personnel shall be immediately informed when a detainee is admitted to an SMU and shall conduct an assessment and review of the detainees medical and mental health status and care needs. Health care personnel shall at a minimum conduct a daily assessment of detainees