### FACILITY STRUCTURE

The facility shall have a policy defining its organizational structure (Chain of Command), to include:

A. Facility operations administrator  
B. Personnel responsible for the day-to-day supervision, management, and observation of residents  
C. Process that enables effective communication between line-staff and administration  
D. Process for reporting facility/personnel issues

**Facility’s Responsibility:**  
- Upload facility’s corresponding policy

**Responsibility of the Compliance Monitor:**  
- Review all uploaded policy(s)/proof(s) for compliance with Standard  
- On-site verification of compliance through interviews and observations

### AGENCY POLICIES

The facility shall have a policy requiring a documented review of all policies to be conducted every 2-years. The policy shall define the process for archiving and tracking any changes made during the review.

**Facility’s Responsibility:**  
- Upload facility’s corresponding policy  
- Uploaded proof of policy review

**Responsibility of the Compliance Monitor:**  
- Review all uploaded policy(s)/proof(s) for compliance with Standard  
- On-site verification of compliance through interviews and observations

### AMERICANS WITH DISABILITIES ACT (ADA)

The facility shall have a policy requiring compliance with the Americans with Disabilities Act and the Rehabilitation Act of 1973, including the Code of Federal Regulations (CFR) at 28 CFR part 35 (Title II). The policy will provide for the implementation of reasonable physical modifications to ensure each resident with a disability is housed in a cell with necessary accessible elements, affording a safe and appropriate housing environment. Any existing architectural barriers or inaccessible design features should be brought into compliance with ADA design guidelines for detention and correctional facilities as soon as practicable. The policy should also provide that no otherwise eligible offender shall be unlawfully denied participation in available education, programming, or work opportunities on the basis of disability. Reasonable modifications and/or auxiliary aids shall be provided to allow the participation of eligible offenders with disabilities.

**Facility’s Responsibility:**  
- Upload facility’s corresponding policy

**Responsibility of the Compliance Monitor:**  
- Review all uploaded policy(s)/proof(s) for compliance with Standard  
- On-site verification of compliance through interviews and observations

### MISSION STATEMENT & GOALS

The facility shall have a policy outlining its mission statement and goals.

**Facility’s Responsibility:**  
- Upload facility’s corresponding policy

**Responsibility of the Compliance Monitor:**  
- Review all uploaded policy(s)/proof(s) for compliance with Standard  
- On-site verification of compliance through interviews and observations

### FACILITY STAFFING

The facility shall have a policy requiring the 24-hour supervision of residents by certified/trained staff.

**Facility’s Responsibility:**  
- Upload facility’s corresponding policy  
- Uploaded proof of 24-hour coverage (facility staff schedule)

**Responsibility of the Compliance Monitor:**  
- Review all uploaded policy(s)/proof(s) for compliance with Standard  
- On-site verification of compliance through interviews and observations
### A-06 DISCRIMINATION

The facility shall have a code of conduct/ethics policy that employees are required to be familiar with. The policy shall prohibit the unlawful discrimination of staff, residents, volunteers, visitors, or others based on race, national origin, gender, sexual orientation, gender identity, color, religion, age, disability, or any other protected status.

**Facility's Responsibility:**
- Upload facility’s corresponding policy

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

### A-07 NEW HIRE SCREENING & FACILITY ACCESS

The facility shall have a policy regarding the hiring of all new civilian, volunteer, contract, and Correctional/Law Enforcement Officer-certified employees. The policy shall include a screening and orientation process, consisting of:

A. BCI/Criminal History Report
B. Orientation Training
C. Provided with the rules and regulations of the facility
D. Yearly Training

**Facility's Responsibility:**
- Upload facility’s corresponding policy
- Upload facility’s screening form
- Upload facility’s orientation related materials

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

### A-08 TRAINING & CERTIFICATION

The facility shall have a policy determining the certification and training requirements of each employee, including those employees requiring Peace Officer Standards & Training (P.O.S.T.) certification. The policy shall contain a process for developing and implementing initial/yearly required training, including such topics as (Utah Code §53-6-202);

A. Legal Updates
B. Facility Operations
C. First Aid & CPR
D. Suicide Prevention and Intervention/Mental Health
E. De-Escalation/Crisis Intervention
F. Use of Force/Arrest Control

**Facility's Responsibility:**
- Upload facility’s corresponding policy
- Upload P.O.S.T certification (only one (1) example proof needed)
- Upload training itinerary/scheduled topics
- Upload training credit/course completion form

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

### A-09 P.O.S.T. CERTIFIED EMPLOYEE ORIENTATION

The facility shall have a policy documenting the Officer In Training (OIT) training requirements for all newly sworn/certified Correctional and Peace Officers. The facility shall have a process for assigning the new officer a mentor/trainer and tracking the officer's progress.

**Facility's Responsibility:**
- Upload facility’s corresponding policy
- Upload OIT manual

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations
<table>
<thead>
<tr>
<th><strong>CENTER REFERRALS</strong></th>
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</thead>
<tbody>
<tr>
<td><strong>A-10</strong></td>
<td><strong>RESIDENT SERVICE FEES</strong></td>
</tr>
<tr>
<td>The facility shall have a policy governing the process for referring, accepting, and denying new residents:</td>
<td>The facility shall have a policy governing the process by which resident service fees are charged, collected, and/or waived.</td>
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<tr>
<td><strong>Facility’s Responsibility:</strong></td>
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<tr>
<td>• Upload facility’s corresponding policy</td>
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<tr>
<td>• On-site verification of compliance through interviews and observations</td>
<td>• On-site verification of compliance through interviews and observations</td>
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</tbody>
</table>
### FACILITY GENERATOR

The facility shall have a policy requiring regular load testing, maintenance, and inspections of all generators. The facility’s generator(s) shall provide power backup to critical security systems, such as:

- **A.** Emergency lighting
- **B.** Security access doors
- **C.** Control panels

**Facility’s Responsibility:**
- Upload facility’s corresponding policy
- Upload verification of generator load testing

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

### RESIDENT LIVING CONDITIONS

The facility shall have a policy providing residents access to safe, sanitary, and secure living conditions, such as:

- **A.** Toilet
- **B.** Sink
- **C.** Shower
- **D.** Bunk/bed
- **E.** Recreation area
- **F.** Hot & Cold potable water
- **G.** Table and seating
- **H.** Adequate lighting
- **I.** HVAC
- **J.** Clothing/laundry
- **K.** Bedding
- **L.** Eating utensils

**Facility’s Responsibility:**
- Upload facility’s corresponding policy

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

### FIRE INSPECTION, CODE, DRILLS & EQUIPMENT

The facility shall have a policy requiring the inspection and compliance to any Federal Law, State Statute or Rule, and local ordinance involving any fire and life safety equipment; such as detectors, extinguishers, suppression equipment, and systems. The policy shall also require corrective action to address any noted violations without delay. The facility shall have a policy requiring fire drills to be conducted and logged, quarterly by each shift (day & night). The facility may conduct actual evacuation drills or table-top scenario training ("What If" style of training). The facility shall have posted emergency exit routes posted.

**Facility’s Responsibility:**
- Upload facility’s corresponding policy
- Upload fire drill training documentation (1 example)

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

### FACILITY PERIMETER & LIGHTING

The facility shall have a policy requiring a perimeter check be conducted and logged, a minimum of once per shift (Day & Night). The exterior lighting of the facility will be required to illuminate all areas of the perimeter fencing, building entries, and parking lot.

**Facility’s Responsibility:**
- Upload facility’s corresponding policy
- Upload verification of logged/documented perimeter check

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations
FACILITY INSPECTIONS

The facility shall have a policy requiring documented facility inspections to be conducted at a minimum of weekly, by staff. The policy must contain a process for reporting and tracking maintenance issues, along with identifying significant areas of interest, such as:

A. Facility cleanliness
B. Pest/Vermin control
C. Interior/Exterior Structural Integrity
D. Interior/Exterior lighting
E. Security doors & locks

Facility’s Responsibility:
- Upload facility’s corresponding policy
- Upload verification of facility inspections
- Upload verification of reporting/tracking maintenance work

Responsibility of the Compliance Monitor:
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

B-05

FACILITY ACCESS

The facility shall have a process for challenging the identification of individuals, prior to them entering the restricted areas of the facility.

Responsibility of the Compliance Monitor:
- On-site verification of compliance through interviews and observations

B-06

FACILITY DELIVERIES

The facility shall have a process for searching all deliveries before entering the restricted area of the facility.

Responsibility of the Compliance Monitor:
- On-site verification of compliance through interviews and observations

B-07

FOOD SERVICES

The facility shall have a policy requiring nutritionally adequate meals to be provided to all residents, with the assistance of a Dietician. The policy shall require an annual inspection of the Kitchen/Culinary to be conducted by the local or State Health Department. The policy will define the process for;

A. Approving menu/meals
B. Preparing and Approving all special diets
C. Supervision of food preparation
D. Food allergies
E. Dietary restrictions
F. Security restrictions

Facility’s Responsibility:
- Upload facility’s corresponding policy
- Upload verification of documented Health Department inspections
- Upload verification of meal/menu approval

Responsibility of the Compliance Monitor:
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

B-08
### TOOLS, EQUIPMENT & SHARPS

The facility shall have a policy covering all tools, equipment, and sharps within the facility, with a process for documenting and tracking:

- **A.** Tool, equipment, and sharps accountability
- **B.** Lost, broken, damaged, and/or replaced tools, equipment, and sharps
- **C.** Tool, equipment, and sharps training (prior to their use)
- **D.** Securing & storing

**Facility’s Responsibility:**
- Upload facility’s corresponding policy
- Upload verification of logged/documentated inventory
- Upload verification of tool/equipment training

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

### HAZARDOUS MATERIALS

The facility shall have a policy covering the handling, use, training, and disposal of hazardous materials, in accordance with local, state, and federal laws/rules (29 CFR 1910.1200).

**Facility’s Responsibility:**
- Upload facility’s corresponding policy
- Upload verification of hazardous materials training

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

### KEY & LOCK CONTROL

The facility shall have a policy covering key & lock control; prohibiting residents from using/handling security keys. The facility shall have a process for:

- **A.** Routine key/lock inspections
- **B.** Lost or damaged keys
- **C.** Key accountability
- **D.** Emergency key access
- **E.** Training (care, handling, and use of keys/locks)

**Facility’s Responsibility:**
- Upload facility’s corresponding policy
- Upload verification of key/lock accountability

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

### RESIDENT ACCOUNTABILITY

The facility shall have a policy requiring the accountability of all residents, whether on/off-property. The policy shall define the process for verifying resident accountability, by using such methods as:

- **A.** Security Checks (Q-Check)
- **B.** Electronic Monitoring
- **C.** Telephone verification
- **D.** On-site/In-Person verification
- **E.** Head-counts (utilizing a count-sheet)

**Facility’s Responsibility:**
- Upload facility’s corresponding policy
- Upload count-sheet

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations
<table>
<thead>
<tr>
<th>C-05</th>
<th>RESIDENT SEARCHES</th>
</tr>
</thead>
<tbody>
<tr>
<td>The facility shall have a policy informing all residents, that his/her person, property, clothing, and cell/housing area are subject to search at any time. The facility policy shall define the process for resident searches to include, pat/frisk, strip, body cavity, and cross-gender. The policy shall require all staff to be familiar with and trained in the search processes.</td>
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<tr>
<th>C-06</th>
<th>FAIR NOTICE OF SEARCH &amp; PROHIBITED ITEMS</th>
</tr>
</thead>
<tbody>
<tr>
<td>The facility shall have a process to inform all persons visiting the facility they are subject to search, and which items are to be considered contraband/prohibited items.</td>
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<tr>
<td>Responsibility of the Compliance Monitor:</td>
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<tr>
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<thead>
<tr>
<th>C-07</th>
<th>CONTROL ROOMS</th>
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<tbody>
<tr>
<td>The facility shall have a policy defining those authorized to access operational control rooms. The policy must express that residents are prohibited from accessing operational control rooms.</td>
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<tr>
<th>C-08</th>
<th>RESIDENT OBSERVATION</th>
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</thead>
<tbody>
<tr>
<td>The facility shall have a policy requiring the documented visual observation (security check, welfare check, and or walkthrough) of all residents to be conducted at a minimum of once every two (2) hours.</td>
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<td>Facility’s Responsibility:</td>
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<td>• Upload facility’s corresponding policy</td>
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<tr>
<td>• Upload verification of logged/documented security check/walkthrough</td>
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<tr>
<td>Responsibility of the Compliance Monitor:</td>
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<td>• On-site verification of compliance through interviews and observations</td>
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<tr>
<td><strong>D-01</strong></td>
<td><strong>RESIDENT ACCOUNTS</strong></td>
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</tbody>
</table>
| The facility shall have a policy requiring the use of a system to track, disperse, and retain all resident funds, including a process for addressing residents on indigent status, such as:  
A. Providing basic hygiene items  
B. Providing basic writing materials  
C. Use of Postal service  
Facility’s Responsibility:  
• Upload facility’s corresponding policy  
Responsibility of the Compliance Monitor:  
• Review all uploaded policy(s)/proof(s) for compliance with Standard  
• On-site verification of compliance through interviews and observations |

<table>
<thead>
<tr>
<th><strong>D-02</strong></th>
<th><strong>RESIDENT COMMUNICATION ACCESS</strong></th>
</tr>
</thead>
</table>
| The facility shall have a policy regarding all resident communication, including the processes for:  
A. Screening incoming/outgoing means of communication  
B. Notification of denied communication  
C. Searching privileged (legal) materials  
D. Mail delivery  
E. Monitoring communication (privileged/non-privileged)  
Facility’s Responsibility:  
• Upload facility’s corresponding policy  
Responsibility of the Compliance Monitor:  
• Review all uploaded policy(s)/proof(s) for compliance with Standard  
• On-site verification of compliance through interviews and observation |

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<thead>
<tr>
<th><strong>D-03</strong></th>
<th><strong>ROOM/HOUSING STANDARDS</strong></th>
</tr>
</thead>
</table>
| The facility shall have a policy defining a resident’s property matrix, based on classification/housing status. The policy shall identify the allotted items of property permitted in a resident’s room/living area.  
Facility’s Responsibility:  
• Upload facility’s corresponding policy  
• Upload verification property matrix  
Responsibility of the Compliance Monitor:  
• Review all uploaded policy(s)/proof(s) for compliance with Standard  
• On-site verification of compliance through interviews and observations |

<table>
<thead>
<tr>
<th><strong>D-04</strong></th>
<th><strong>LAUNDRY SERVICES</strong></th>
</tr>
</thead>
</table>
| The facility shall have a policy requiring laundry services to be provided or made available to all residents on a regular and routine basis.  
Facility’s Responsibility:  
• Upload facility’s corresponding policy  
• Upload laundry schedule  
Responsibility of the Compliance Monitor:  
• Review all uploaded policy(s)/proof(s) for compliance with Standard  
• On-site verification of compliance through interviews and observations |
<table>
<thead>
<tr>
<th>D-05</th>
<th>RESIDENT VISITING</th>
</tr>
</thead>
</table>
| The facility shall have a policy concerning all forms of resident visiting, along with the process for approving and denying resident visitors. The policy shall include the rules & regulations section for the resident and visitor, covering such topics as;  
A. Dress code  
B. Renewal process  
C. Required identification  
D. Visiting times/schedule  
E. ADA accommodations  
Facility’s Responsibility:  
- Upload facility's corresponding policy  
- Upload visitor rules/regulations  
Responsibility of the Compliance Monitor:  
- Review all uploaded policy(s)/proof(s) for compliance with Standard  
- On-site verification of compliance through interviews and observations |

<table>
<thead>
<tr>
<th>D-06</th>
<th>RESIDENT SPONSORS</th>
</tr>
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</table>
| The facility shall have a policy requiring all resident sponsors to be screened for approval/denial, to include:  
A. Submitted sponsor application form  
B. A completed criminal history background check (BCI)  
C. Documented sponsor compliance acknowledgment form  
Facility's Responsibility:  
- Upload facility’s corresponding policy  
Responsibility of the Compliance Monitor:  
- Review all uploaded policy(s)/proof(s) for compliance with Standard  
- On-site verification of compliance through interviews and observations |

<table>
<thead>
<tr>
<th>D-07</th>
<th>AVAILABLE PROGRAMMING</th>
</tr>
</thead>
</table>
| The facility shall have a policy outlining the available programs/classes offered to residents. All programs/classes being delivered shall require an associated curriculum or lesson plan, to assist in delivering consistent content. All completed and uncompleted programs/classes shall be documented and tracked on behalf of the resident.  
Facility's Responsibility:  
- Upload facility’s corresponding policy  
Responsibility of the Compliance Monitor:  
- Review all uploaded policy(s)/proof(s) for compliance with Standard  
- On-site verification of compliance through interviews and observation |

<table>
<thead>
<tr>
<th>D-08</th>
<th>OFF-PROPERTY LEAVE TIME</th>
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</table>
| The facility shall have a policy regarding resident off-property leave time requests. The policy shall include the process for approving, denying, and documenting the requests; along with a process of notifying the resident of the results of the request.  
Facility's Responsibility:  
- Upload facility’s corresponding policy  
Responsibility of the Compliance Monitor:  
- Review all uploaded policy(s)/proof(s) for compliance with Standard  
- On-site verification of compliance through interviews and observations |

<table>
<thead>
<tr>
<th>D-09</th>
<th>OUT-OF-STATE TRAVEL</th>
</tr>
</thead>
</table>
| The facility shall have a policy regarding the request, approval, restrictions, and denial of out-of-state travel for residents.  
Facility’s Responsibility:  
- Upload facility’s corresponding policy  
Responsibility of the Compliance Monitor:  
- Review all uploaded policy(s)/proof(s) for compliance with Standard  
- On-site verification of compliance through interviews and observations |
## ISOLATION CELL/ROOM

The facility shall have a policy defining the process for housing a resident in an isolation cell/area, for security, medical, or mental health-related issues. The policy shall include a process for:

- A. Supervisory Notification
- B. Medical/Mental health staff notification
- C. Review, step-down, and plan to return to normal status

**Facility’s Responsibility:**
- Upload facility’s corresponding policy

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

## RESIDENT SAFETY CONCERN / KEEP SEPARATE

The facility shall have a policy addressing resident safety concerns, with a process for:

- A. Reporting
- B. Interviewing
- C. Housing
- D. Confidentiality
- E. Documenting

**Facility’s Responsibility:**
- Upload facility’s corresponding policy

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

## COMMUNITY RE-ENTRY

The facility shall have a policy requiring residents receive the necessary programming, training, and assistance, prior to transitioning/re-entering the community.

**Facility’s Responsibility:**
- Upload facility’s corresponding policy

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

## RESIDENT ORIENTATION

The facility shall have a policy requiring an orientation process for all new residents being housed in the facility. The policy shall include a process for assisting residents who have difficulty reading or understanding the orientation information. The policy shall require all residents to have access to the orientation manual/facility rules and regulations, whether in hard-copy or electronic format, which contains the following information:

- A. Accessing medical care
- B. Accessing mental health care
- C. Facility classification process
- D. Access to communication devices (telephone, kiosk, or mail)
- E. Visiting process
- F. Grievance process
- G. Information for reporting sexual abuse and/or assault
- H. Reporting safety, medical, or mental health concerns
- I. Items provided to the resident (clothing, bedding, toiletries, contraceptives, and hygiene)
- J. Facility policy access
- K. Code of conduct

**Facility’s Responsibility:**
- Upload facility’s corresponding policy
- Upload orientation manual

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations
<table>
<thead>
<tr>
<th>F-01</th>
<th>LEGAL SERVICES</th>
</tr>
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<tbody>
<tr>
<td>The facility shall have a policy requiring legal access to courts, legal counsel, supplies/materials, and legal communication (mail, email, telephone). The policy shall state that privileged legal communications shall not be monitored or recorded, and staff members may not read privileged legal mail. The policy must define the process by which privileged legal mail may be inspected for contraband in the presence of the resident. The policy shall require the training of all staff when handling privileged legal mail or materials.</td>
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<thead>
<tr>
<th>F-02</th>
<th>DOUBLE JEOPARDY</th>
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<tbody>
<tr>
<td>The facility shall have a policy defining the ability for a resident to be administratively (disciplinary action) and criminally charged/prosecuted for the same incident or offense.</td>
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<tr>
<th>F-03</th>
<th>VIDEO, PHOTO, &amp; AUDIO RECORDING DEVICES</th>
</tr>
</thead>
<tbody>
<tr>
<td>The facility shall have a process regarding the use of any recording device entering the facility, such as:</td>
<td></td>
</tr>
<tr>
<td>A. Video</td>
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<tr>
<td>B. Audio</td>
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<tr>
<td>C. Still-photography</td>
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<td>Responsibility of the Compliance Monitor:</td>
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<td>• On-site verification of compliance through interviews and observations</td>
<td></td>
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</tbody>
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<table>
<thead>
<tr>
<th>F-04</th>
<th>RELIGIOUS ACCESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>The facility shall have a policy regarding religious access, complying with the Religious Land Use and Institutionalized Persons Act (RLUIPA) and other applicable state and federal laws.</td>
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<tr>
<td>Facility’s Responsibility:</td>
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<tr>
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<thead>
<tr>
<th>F-05</th>
<th>GRIEVANCES</th>
</tr>
</thead>
<tbody>
<tr>
<td>The facility shall have a policy establishing a multi-level grievance system to provide an administrative means for residents to bring forward and address in writing complaints and concerns, which includes an appeal process. The policy shall provide a process for an resident to request assistance in bringing a grievance if the resident is unable to utilize the system due to, language barrier, disability, and/or mental illness. The policy shall prohibit retaliation against an resident who uses the grievance system by staff or other residents. The policy shall require a time frame for submitting, answering, and logging all grievances. The policy shall include a process for returning non-grievable issues, such as:</td>
<td></td>
</tr>
<tr>
<td>A. Board of Pardons and Parole</td>
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<tr>
<td>B. Resident Classification</td>
<td></td>
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<tr>
<td>C. Resident Disciplinary</td>
<td></td>
</tr>
<tr>
<td>D. GRAMA</td>
<td></td>
</tr>
<tr>
<td>E. ADA</td>
<td></td>
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<tr>
<td>Facility’s Responsibility:</td>
<td></td>
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<tr>
<td>• Upload facility’s corresponding policy</td>
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<tr>
<td>• Upload verification of grievance form</td>
<td></td>
</tr>
<tr>
<td>• Upload verification of appeal form</td>
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<td>Responsibility of the Compliance Monitor:</td>
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</tbody>
</table>
**RESIDENT INFRACTIONS/DISCIPLINARY**

The facility shall have a policy requiring the use of a resident disciplinary system, to enforce administrative rule violations. The policy shall define procedural safeguards to protect due-process rights, including notifying the resident in writing of the disciplinary charge a minimum of 24-hours prior to the hearing, providing the resident with an opportunity to respond to the charge(s), present documentary evidence, and call witnesses as appropriate. The policy shall provide a process for the resident to request assistance from a staff member at the hearing where the resident has difficulty understanding the process due to a language barrier, disability, and/or mental illness. The policy shall provide for the utilization and protection of confidential informants and investigative information and address under what circumstances cross-examination of witnesses may be permitted. The policy shall require that the resident be provided with a written copy of the hearing officer’s decision, including the findings supporting the decision and notice of any sanctions to be imposed. The policy will contain a list of disciplinary infractions.

Facility’s Responsibility:
- Upload facility’s corresponding policy

Responsibility of the Compliance Monitor:
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

**INFRACTION/DISCIPLINARY HEARINGS**

The facility shall have a policy requiring staff assigned as Hearing Officers, receive training prior to conducting hearings. The training is to include due-process rights, standard of proof, cognitive capacity, reporting decisions, imposing sanctions, and dismissed without/with prejudice process. Hearing Officers are to be impartial and fair, having no personal connection to the events leading to the disciplinary hearing. The disciplinary policy shall include an appeal process afforded to the resident and reporting officer.

Facility’s Responsibility:
- Upload facility’s corresponding policy
- Upload verification of disciplinary appeal form

Responsibility of the Compliance Monitor:
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

**ALCOHOL & DRUG DETECTION**

The facility shall have a policy covering the training and testing of residents for alcohol & drug use.

Facility’s Responsibility:
- Upload facility’s corresponding policy

Responsibility of the Compliance Monitor:
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observation

**STABILIZATION**

The facility shall have a policy outlining the process and requirements needed, by which a resident completes the stabilization program.

Facility’s Responsibility:
- Upload facility’s corresponding policy

Responsibility of the Compliance Monitor:
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observation
<table>
<thead>
<tr>
<th>G-01</th>
<th>RESIDENT TRANSPORTATION</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>The facility shall have a policy covering the transportation of residents off-property. The facility shall have a process for documenting vehicle pre/post-trip inspections/searches.</td>
</tr>
</tbody>
</table>

**Facility Responsibility:**
- Upload facility’s corresponding policy
- Upload verification of pre/post-trip vehicle inspections

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

<table>
<thead>
<tr>
<th>G-02</th>
<th>USE OF FORCE &amp; USE OF FORCE REVIEW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>The facility shall have a Use of Force policy, which defines the levels of force approved for both adults and juveniles being housed in the facility. The policy shall require each Use of Force incident to be reviewed by a facility administrator or supervisor, considering such topics as:</td>
</tr>
<tr>
<td></td>
<td>A. Complies with policy</td>
</tr>
<tr>
<td></td>
<td>B. Complies with state and federal law</td>
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<tr>
<td></td>
<td>C. De-escalation tactics attempted</td>
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<tr>
<td></td>
<td>D. Was the least amount of force used during the incident</td>
</tr>
<tr>
<td></td>
<td>E. Was the force retaliatory</td>
</tr>
<tr>
<td></td>
<td>F. Was the resident/suspect offered medical assistance</td>
</tr>
</tbody>
</table>

**Facility’s Responsibility:**
- Upload facility’s corresponding policy

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
- On-site verification of compliance through interviews and observations

<table>
<thead>
<tr>
<th>G-03</th>
<th>RESTRAINTS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>The facility shall have a policy regarding the types of restraints approved for use on adult/juvenile residents, and include the process for restraining female residents who are pregnant.</td>
</tr>
</tbody>
</table>

**Facility’s Responsibility:**
- Upload facility’s corresponding policy

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
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<tr>
<th>G-04</th>
<th>FIREARMS</th>
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<tbody>
<tr>
<td></td>
<td>The facility shall have a policy regarding the auditing and accounting for all department-issued/owned firearms. The policy shall define which firearms and munitions are authorized for use by the department within the facility. The policy shall define the process for storing all firearms/weapons before entering the secure facility.</td>
</tr>
</tbody>
</table>

**Facility’s Responsibility:**
- Upload facility’s corresponding policy
- Upload verification of weapon storage

**Responsibility of the Compliance Monitor:**
- Review all uploaded policy(s)/proof(s) for compliance with Standard
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<tr>
<th>G-05</th>
<th>RESIDENT RELEASE &amp; TRANSFERS</th>
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<tr>
<td></td>
<td>The facility shall have a policy defining the process for releasing or transferring a resident in/out of the facility, to include:</td>
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<tr>
<td></td>
<td>A. Verification of resident</td>
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<td></td>
<td>B. Verification of receiving officer/person</td>
</tr>
<tr>
<td></td>
<td>C. Verification of release paperwork</td>
</tr>
</tbody>
</table>

**Facility’s Responsibility:**
- Upload facility’s corresponding policy

**Responsibility of the Compliance Monitor:**
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<th>Property &amp; Evidence</th>
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<tbody>
<tr>
<td>The facility shall have a policy defining the process for collecting, confiscating, storing, releasing, disposing, and tracking all resident property and evidence. The facility’s designated area for storing resident property and evidence shall be audited and documented monthly.</td>
</tr>
</tbody>
</table>

**G-06**

**Facility’s Responsibility:**
- Upload facility’s corresponding policy
- Upload verification of property/evidence area inspection

**Responsibility of the Compliance Monitor:**
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<tr>
<th></th>
<th>LIFE-SAVING EQUIPMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>H-01</strong></td>
<td>The facility shall have a policy regarding the use, storage, training, and inspection of all life-saving equipment, such as AED’s and NARCAN.</td>
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<th>EMERGENCY MEDICAL &amp; MENTAL HEALTH</th>
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<tr>
<td><strong>H-02</strong></td>
<td>The facility shall have a policy requiring a minimum of one (1) staff member to be on duty who is trained in providing initial emergency medical/mental healthcare services, such as:</td>
</tr>
<tr>
<td>A. First Aid</td>
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<tr>
<td>B. CPR</td>
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<tr>
<td>C. Suicide/Crisis Intervention</td>
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<th>ACCESS TO HEALTHCARE</th>
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<td><strong>H-03</strong></td>
<td>The facility shall have a policy governing resident healthcare access.</td>
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<th>MEDICATION DISTRIBUTION (PILL-LINE)</th>
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<td><strong>H-04</strong></td>
<td>The facility shall have a policy governing the distribution of residents’ medication. The distribution of medication shall be conducted by certified personnel.</td>
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