
United States Court of Appeals
for the
Third Circuit

Case No. 18-1688

E. D.

– v. –

DANIEL SHARKEY, BERKS COUNTY RESIDENTIAL CENTER
IMMIGRATION FAMILY CENTER, (BCRC-IFC), COUNTY OF BERKS,
PENNSYLVANIA, DIANE EDWARDS, DIRECTOR OF BCRC-IFC, JOHN
BEHM, JAMIE HIMMELBERGER, BRITTNEY ROTHERMEL, ERIKA
TAYLOR, MATTHEW MALINOWSKI, JEREMIAH/JOSH PETRY,
ICE EMPLOYEE,

COUNTY OF BERKS, PENNSYLVANIA, DIANE EDWARDS, DIRECTOR
OF BCRC-IFC, JAMIE HIMMELBERGER, BRITTNEY ROTHERMEL,
ERIKA TAYLOR, MATTHEW MALINOWSKI,

Appellants.

ON APPEAL FROM UNITED STATES DISTRICT COURT FOR THE
EASTERN DISTRICT OF PENNSYLVANIA AT NO. 5-16-CV-02750
HONORABLE EDWARD G. SMITH, U.S. DISTRICT JUDGE

JOINT APPENDIX FOR DEFENDANTS-APPELLANTS
VOLUME IV OF IV (Pages A551-A1050)

MACMAIN LAW GROUP
MATTHEW J. CONNELL
TRICIA M. AMBROSE
Attorneys for Defendants-Appellants
101 Lindenwood Drive, Suite 160
Malvern, Pennsylvania 19355
(484) 318-7106
tambrose@macmainlaw.com
mconnell@macmainlaw.com

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IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA

E.D.,

Plaintiff,

v.

DANIEL SHARKEY, et al.,

Defendants.

No. 5:16-cv-02750-EGS

STIPULATION OF EXTENSION OF TIME TO RESPOND
TO PLAINTIFF'S FIRST AMENDED COMPLAINT

Plaintiff E.D. and defendant United States Immigration and Customs Enforcement (ICE) stipulate as follows:

1. On June 8, 2016, plaintiff filed a complaint against, among others, ICE and an individual identified as "Josh Doe," who was alleged to be "a supervisory employee of ICE at the BCRC-IFC facility." (Complaint ¶ 10.)

2. On August 4, 2016, plaintiff filed an amended complaint against, among others, ICE and "Joshua Petry," who is alleged to be "a supervisory employee of ICE at the BCRC-IFC facility." (Amended Complaint ¶ 10.)

3. The United States Attorney's Office for the Eastern District of Pennsylvania accepted service of the amended complaint, on behalf of the United States Attorney only, on August 11, 2016. However, plaintiff has not yet completed service on Mr. Petry. *See* Fed. R. Civ. P. 4(i)(3).

4. The United States Attorney's Office for the Eastern District of Pennsylvania does not, at this time, represent Mr. Petry. In the event Mr. Petry

requests representation, and such request is approved, the United States Attorney's Office may represent Mr. Petry in the future. *See generally* 28 C.F.R. § 50.15.

5. Under Federal Rules of Civil Procedure 6(d) and 15(a)(3), the time for ICE to respond to plaintiff's amended complaint expires on August 22, 2016.

6. Under Federal Rule of Civil Procedure 12(a)(3), the time for defendant Petry to respond to plaintiff's amended complaint has not begun to run and, in any event, would expire no sooner than October 14, 2016, or sixty days from the date of service on the United States Attorney.

7. ICE and plaintiff agree that it would be in the interest of party and judicial economy for ICE to file its anticipated motion to dismiss concurrent with any motion to be filed by defendant Petry, and for plaintiff to file a consolidated response to any motions to dismiss filed by ICE or defendant Petry.

8. Accordingly, ICE and plaintiff agree that the time for ICE to respond to plaintiff's amended complaint should be extended through and including October 14, 2016.

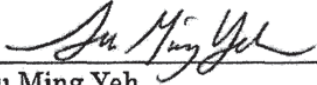
THEREFORE, plaintiff and ICE stipulate and agree that the time for ICE to respond to plaintiff's amended complaint shall be extended through and including October 14, 2016.

So stipulated,

Dated: August 15, 2016

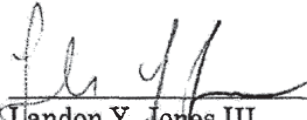
PENNSYLVANIA INSTITUTIONAL LAW
PROJECT

ZANE DAVID MEMEGER
United States Attorney



Su Ming Yeh
Angus R. Love
718 Arch Street, Suite 304S
Philadelphia, PA 19106
smyeh@pailp.org
alove@pailp.org
(215) 925-2966

Counsel for Plaintiff E.D.



Landon Y. Jones III
Assistant United States Attorney
615 Chestnut Street, Suite 1250
Philadelphia, PA 19106-4476
landon.jones@usdoj.gov
(215) 861-8323 (L. Jones Direct)

*Counsel for United States Immigration
and Customs Enforcement*

SO ORDERED:



Edward G. Smith, Judge
United States District Court

**IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

E.D.,	:	
	:	
Plaintiff,	:	
	:	
v.	:	Civil Action No. 16 Civ. 2750
	:	
DANIEL SHARKEY et al.,	:	Judge Edward G. Smith
Defendants	:	
	:	Filed via ECF
	:	

**PLAINTIFF’S RESPONSE TO DEFENDANTS’ STATEMENT OF MATERIAL FACTS
AND COUNTERSTATEMENT OF MATERIAL FACTS**

1. Admitted. By way of further response, the “inappropriate relationship” between Plaintiff E.D. and Daniel Sharkey resulted in a criminal conviction of institutional sexual assault for Defendant Sharkey. (See Ex. 3: Sharkey Dep. Tr. 131:9-12).

2. Admitted in part, denied in part. The Third Amended Complaint outlines all of Plaintiff’s claims.

3. Admitted in part, denied in part. It is admitted that there is an Inter-Governmental Service Agreement between the federal government and Berks County, but it is denied that it is to facilitate the family immigration program.

4. Neither admitted nor denied, as Plaintiff does not know if the BCRC provides an avenue for residents to maintain family unity while DHS and ICE enforce immigration laws, but suggests that there may be better avenues for maintaining family unity while still enforcing immigration laws.

5. Admitted.

6. Admitted. By way of further response, Shelter Care Counselors also have the responsibility to “[m]aintain peace and order” (See Ex. 6: Taylor Dep. Tr. 14:7-12), and “[m]aintain the care and custody of the residents.” (See Ex. 7: Malinowski Dep. Tr. 11:9-16).

7. Admitted in part, denied in part. It is admitted that the main areas of the building are on two floors, but there is also a basement where briefings (meetings) occur and where keys are kept. (See Ex. 3: Sharkey Dep. Tr. 41:20-42:8).

8. Admitted. By way of further response, the A floor is the ground floor, although some refer to it as the 2nd floor, with the upper B floor as the 3rd floor. (To avoid confusion, the brief will refer to the A floor as the lower floor and the B floor as the upper floor). (See Ex. 4: Himmelberger Dep. Tr. 13:1-23).

9. Admitted.

10. Admitted.

11. Admitted.

12. Admitted.

13. Admitted.

14. Admitted.

15. Admitted.

16. Admitted in part, denied in part. It is admitted that staff testified that they used Google Translate to communicate with the residents, but it is denied that it was used “often” by all staff. (See Ex. 7: Malinowski Dep. Tr. 29:15-31:2 (testifying that he used “like little iPhones with a translator on it. I used it sometimes.”)).

17. Admitted.

18. Admitted in part, denied in part. It is admitted that it is not uncommon for staff to be interacting with detainees, but unusual for special attention to be paid by one staff to a specific detainee.

19. Admitted in part, denied in part. It is admitted that staff sit with residents in the cafeteria, but Plaintiff does not have information on whether it is “encouraged.”

20. Admitted.

21. Admitted.

22. Admitted.

23. Admitted in part, denied in part. Plaintiff fled Honduras to seek asylum in the United States.

24. Admitted.

25. Admitted.

26. Admitted in part, denied in part. It is admitted that Plaintiff was detained at the border and processed by ICE, but does not have additional information on whether this process was in accordance with federal immigration laws.

27. Admitted.

28. Admitted.

29. Admitted.

30. Admitted in part, denied in part. It is admitted that Plaintiff signed an acknowledgement form, but does not remember receiving any other information about sexual abuse and sexual assault. (See Ex. 1: E.D. Decl. at ¶2). By way of further response, no other documents that were allegedly given to the detainees, aside from the Resident Handbook, have been produced.

31. Admitted.
32. Admitted.
33. Admitted.
34. Admitted.
35. Admitted.
36. Admitted.
37. Denied. See Counterstatement of Facts below.
38. Admitted.
39. Admitted.
40. Admitted.
41. Admitted.
42. Admitted.
43. Admitted.
44. Admitted.
45. Admitted.
46. Admitted.
47. Admitted.
48. Admitted.
49. Admitted.
50. Admitted.
51. Admitted.
52. Admitted.
53. Admitted.

54. Admitted.

55. Admitted.

56. Admitted.

57. Admitted.

58. Admitted.

59. Admitted in part, denied in part. Behm also supervised residents who worked in the kitchen as part of his duties. (See Ex. 8: Behm Dep. Tr. 17:2-7; 23:22-24).

60. Admitted.

61. Admitted.

62. Admitted.

Policies and Training

63. Admitted.

64. Admitted in part, denied in part. It is admitted only that Jamie Himmelberger testified, “I believe it’s about 40 hours of training that we get per year.” (See Ex. 4: Himmelberger Dep. Tr. 69:2-3).

65. Admitted.

66. Admitted in part, denied in part. It is admitted that staff are trained on the policies.

67. Admitted.

68. Admitted in part, denied in part. It is admitted only that David Smith testified to this, but it is denied that an instructor engages in a conversation with the employee being trained to ensure that the employee understands the policies. (See, e.g., Ex. 3: Sharkey Dep. Tr. 74:11-23; 137:15-20).

69. Admitted.

70. Admitted.

71. Admitted in part, denied in part. It is admitted that Sharkey was aware of the Code of Ethics, and only that he received the Code of Ethics during training, but it is denied that he received training on the Code of Ethics.

72. Admitted.

73. Admitted.

74. Denied. Sharkey testified that he was “vaguely” aware of training on sexual abuse or sexual harassment and that his training consisted of being handed a binder of documents and his going through and signing the documents. (See Ex. 3: Sharkey Dep. Tr. 74:11-23; 137:15-20).

75. Admitted.

76. Admitted.

77. Admitted.

78. Admitted.

79. Admitted in part, denied in part. It is admitted only that Diane Edwards testified this, and that Witmer testified he had “no idea” how long the policy was in progress before the incidents between Sharkey and E.D. came to light. (See Ex. 12: Witmer Dep. Tr. 134:7-16).

80. Denied. See below.

81. Admitted in part, denied in part. It is admitted only that Diane Edwards stated this in her deposition, but otherwise denied.

82. Admitted in part, denied in part. It is admitted only that Diane Edwards stated this in her deposition, but otherwise denied.

83. Admitted in part, denied in part. It is admitted only that Diane Edwards stated this in her deposition, but otherwise denied.

84. Admitted in part, denied in part. It is admitted only that Diane Edwards stated this in her deposition, but otherwise denied.

85. Admitted in part, denied in part. It is admitted only that Diane Edwards stated this in her deposition, but otherwise denied.

86. Admitted in part, denied in part. It is admitted only that Diane Edwards stated this in her deposition, but otherwise denied.

87. Admitted in part, denied in part. It is admitted only that Diane Edwards stated this in her deposition, but otherwise denied.

88. Admitted in part, denied in part. It is admitted that staff conduct hygiene checks, and that they can identify items that are contraband, but deny that clothing was confiscated on a regular basis.

89. Admitted.

90. Admitted.

91. Admitted.

92. Admitted.

93. Admitted.

94. Admitted in part, denied in part. Diane Edwards testified that they looked at “certain standards in the book” every month, but did not specify that it was random. (See Ex, 19: Edwards Dep. Tr. 55:4-17).

95. Admitted in part, denied in part. It is admitted that the federal government hired Nakamoto who would perform audits inspections, but it is unclear whether this company is still hired to do so.

96. Admitted.

97. Admitted.

98. Admitted.

99. Admitted.

100. Admitted. By way of further response, 55 Pa. Code 3800 may not have a specific section on sexual abuse or assault training.

101. Admitted in part, denied in part. It is admitted that Diane Edwards testified to this, however, the correct title is the "Office of Civil Rights and Civil Liberties." (See <https://www.dhs.gov/office-civil-rights-and-civil-liberties>).

102. Denied. (See Ex 44: 2008 Berks Family Residential Center Bi-Annual Compliance Review Report at 9-10, 15-16, Ex. 44 Appx. Sexual Abuse and Assault Prevention and Intervention at 1-5).

103. Admitted in part, denied in part. It is admitted only that there are signs posted now.

104. Admitted.

105. Admitted.

106. Admitted.

107. Admitted.

108. Admitted.

109. Admitted.

Relationship between Plaintiff and Sharkey

110. Admitted.

111. Denied. This is a mischaracterization of the incidents.

112. Denied. This is a mischaracterization of the incidents. Plaintiff stated in her deposition that Sharkey was playing and joking until he kissed her. (See Ex. 2: E.D. Dep. Tr. 76:5-24).

113. Denied. This is a mischaracterization of the incidents. Plaintiff stated in her deposition that Sharkey had kissed her in the laundry room.

114. Admitted.

115. Admitted.

116. Admitted. It is admitted only that this is what was reported.

117. Admitted.

118. Admitted.

119. Admitted.

120. Admitted.

121. Admitted.

122. Admitted.

123. Denied.

124. Denied.

125. Admitted.

126. Admitted in part, denied in part. It is admitted that BCRC staff began a process of interviewing residents and staff, and admitted only that Smith reported that an officer from the Bern Township Police Department stated that “it would probably be best that we do not talk to

our employees until he gets a chance to.” (See Ex. 16: Smith Email to Edwards dated 8/20/2014 at 3:00 PM).

127. Admitted in part, denied in part. It is denied to the extent that this statement indicates that the Bern Township Police Department and Immigration and Customs Enforcement – Office of Professional Responsibility (ICE-OPR) had one investigation together.

128. Denied.

129. Admitted.

130. Admitted.

131. Admitted.

132. Denied.

133. Admitted in part, denied in part. It is only admitted that the mental health notes report this.

134. Denied. Plaintiff was interviewed by Bern Township Police Detective Michael Hoffert on December 4, 2015, but had previously been in touch with the police through her immigration attorney.

135. Denied.

136. Admitted.

137. Admitted.

138. Admitted in part, denied in part. Sharkey was sentenced to three to twenty-three months of incarceration, but did not serve maximum sentence.

139. Admitted in part, denied in part. Plaintiff testified that “we were all in the same place and that it would have been impossible for him not to know what was happening.” (See Ex. 2: E.D. Dep. Tr. 117:4:10).

140. Admitted in part, denied in part. It is admitted only that this is what Behm stated in his deposition.

141. Admitted in part, denied in part. Plaintiff testified that “they could see us when we were together in any area.” (See Ex. 2: E.D. Dep. Tr. 118:16-21).

142. Denied.

143. Admitted in part, denied in part. It is denied that Plaintiff testified that there was no evidence that Rothermel was aware of her and Sharkey’s relationship.

144. Admitted in part, denied in part. It is admitted only that this is what Rothermel stated in her deposition.

145. Denied.

146. Admitted in part, denied in part. It is denied that Plaintiff testified that there was no evidence that Taylor was aware of her and Sharkey’s relationship.

147. Admitted in part, denied in part. It is admitted only that this is what Taylor stated in her deposition.

148. Admitted in part, denied in part. It is denied that Plaintiff testified that there was no evidence that Malonowski was aware of her and Sharkey’s relationship.

149. Denied.

150. Admitted.

151. Admitted in part, denied in part. It is admitted only that this is what Edwards stated in her deposition.

152. Admitted.

153. Denied.

154. Denied.

155. Admitted in part, denied in part. It is admitted only that Edwards stated this in her deposition.

PLAINTIFF'S COUNTERSTATEMENT OF MATERIAL FACTS

156. Plaintiff E.D. fled Honduras and first entered the United States in April 2014. (See Ex. 2: E.D. Dep. Tr. 31:16-18; 32:4-6; 32:22-24).

157. Plaintiff was deported immediately at that time. (See Ex. 2: E.D. Dep. Tr. 32:9-12).

158. After about a week in Honduras, E.D. returned again to the United States because she had suffered from domestic violence from the father of her son. (See Ex. 2: E.D. Dep. Tr. 32:22-33:14).

159. Plaintiff E.D. arrived to the United States with her son who was three years old at that time. (See Ex. 2: E.D. Dep. Tr. 44:18-20).

160. After Plaintiff E.D. arrived to BCRC, she lived "side by side" with all of the workers daily. (See Ex. 2: E.D. Dep. Tr. 75:3-20).

161. At BCRC, she also saw Daniel Sharkey daily. (See Ex. 2: E.D. Dep. Tr. 75:3-20).

162. One day Sharkey said to E.D. that he liked her and that she was pretty. (See Ex. 2: E.D. Dep. Tr. 75:3-20).

163. E.D. thought that Sharkey was playing and joking. (See Ex. 2: E.D. Dep. Tr. 75:3-20; 76:5-8).

164. Sharkey continued to tell E.D. that she was pretty and that he liked her. (See Ex. 2: E.D. Dep. Tr. 75:3-20).

165. Sharkey was nice to E.D. and her son, and spent time with her such as playing outside. (See Ex. 2: E.D. Dep. Tr. 75:18-20).

166. E.D. realized that Sharkey was not joking when he kissed her on the mouth while they were in the laundry room. (See Ex. 2: E.D. Dep. Tr. 76:9-77:5).

167. The laundry room has no cameras. (See Ex. 4: Himmelberger Dep. Tr. 27:10-12).

168. The laundry room is usually locked, and only staff members have keys. (See Ex. 4: Himmelberger Dep. Tr. 23:1-27:4; Taylor Dep. Tr. 67:23-68:4).

169. The kiss occurred approximately one week after Sharkey started telling her that he liked her. (See Ex. 2: E.D. Dep. Tr. 82:5-12).

170. Sharkey knew very little Spanish, but he had his phone which had a translator. (See Ex. 2: E.D. Dep. Tr. 80:10-81:3).

171. Sometimes Sharkey used the cell phone translator to communicate with E.D. (See Ex. 2: E.D. Dep. Tr. 80:10-81:3; Ex. 3: Sharkey Dep. Tr. 109:9-13; 175:20-23).

172. Sharkey also used the computers in the library to translate. (See Ex. 2: E.D. Dep. Tr. 81:20; Ex. 3: Sharkey Dep. Tr. 109:2-8).

173. Sometime after Sharkey kissed E.D., he had words translated on his phone telling her that no one could know anything, otherwise E.D. would be in trouble with immigration and she would be deported. (See Ex. 2: E.D. Dep. Tr. 85:7-19; 96:8-11).

174. Sharkey told E.D. that he was friends with the immigration officer, Jeremiah Petrey (also known as "Josh"). (See Ex. 2: E.D. Dep. Tr. 149:3-9; 141:14-152:1).

175. E.D. was scared that she would be deported if people found out. (See Ex. 2: E.D. Dep. Tr. 85:7-19).

176. E.D. did not have an attorney at that time. (See Ex. 2: E.D. Dep. Tr. 85:20-22).

177. For a long time, E.D. continued to believe that she would be deported if anyone found out. (See Ex. 2: E.D. Dep. Tr. 96:12:19).

178. After Sharkey showed E.D. the translation, E.D. did not know what to do. (See Ex. 2: E.D. Dep. Tr. 88:1-10).

179. During this time period, Sharkey was always near or next to E.D., and wherever E.D. was, he was close by. (See Ex. 2: E.D. Dep. Tr. 88:1-1; 120:8-16; see, e.g., Ex. 20: Video Timeline Notes 8/12/14 at 5:54; Video Timeline Notes 8/15/14 at 9:45).

180. If E.D. was in the dining room, Sharkey would sit with her at the same table, and other staff members did not do that. (See Ex. 2: E.D. Dep. Tr. 120:8-16; see, e.g., Ex. 20: Video Timeline Notes 8/15/14 at 5:55 pm).

181. If E.D. was outside, Sharkey would go outside and sit with her. (See Ex. 2: E.D. Dep. Tr. 120:8-16; see also Ex. 20: Video Investigation Notes of 8/15/14 at 2:24-5:17; Ex. 15: Witmer Memo to Management dated 8/18/14 Re: Interviews of Carranza-Miranda, Quispe-Carranza).

182. If E.D. was in the living room and watching TV, Sharkey would sit next to her. (See Ex. 2: E.D. Dep. Tr. 120:8-16).

183. The instances described above where Sharkey was always near E.D. occurred on a daily basis and happened a lot. (See Ex. 2: E.D. Dep. Tr. 120:18-24).

184. There were many physical contacts where Sharkey would touch her hand or hug or kiss her. (See Ex. 2: E.D. Dep. Tr. 88:1-11; see also Ex. 3: Sharkey Dep. Tr. 102:13-103:14).

185. After it started, there was hugging and kissing every day. (See Ex. 3: Sharkey Dep. Tr. 104:6-15).

186. Sharkey gave E.D. a ring. (See Ex. 2: E.D. Dep. Tr. 89:3-5).

187. Sharkey gave E.D. music CDs. (See Ex. 2: E.D. Dep. Tr. 89:9-11).

188. Sharkey permitted E.D. to use his cell phone, such as to call her mother. (See Ex. 2: E.D. Dep. Tr. 89:12-14; 102:6-8; Ex. 3: Sharkey Dep. Tr. 109:14-21; Ex. 15: Memo of Phillips, T. dated 8/17/14).

189. Sharkey gave E.D. the password to his phone. (See Ex. 2: E.D. Dep. Tr. 101:1-3).

190. Sharkey brought different food for E.D. to eat. (See Ex. 2: E.D. Dep. Tr. 121:18-122:1).

191. Sharkey told E.D. that he was like her boyfriend and she was like his girlfriend. (See Ex. 2: E.D. Dep. Tr. 90:11-16).

192. Sharkey had photos of E.D. on his phone wearing only undergarments. (See Ex. 3: Sharkey Dep. Tr. 205:22-206:5).

193. These photos were later deleted. (See Ex. 3: Sharkey Dep. Tr. 205:22-206:5).

194. Sharkey hugged and kissed E.D. in other areas of the building, including a room that was designated as the chapel. (See Ex. 2: E.D. Dep. Tr. 93:21-94:1).

195. Sharkey thought it was obvious that E.D. was by his side for an entire shift. (See Ex. 3: Sharkey Dep. Tr. 81:3-20).

196. In approximately July or August was the first time Sharkey had sexual intercourse with E.D. (See Ex. 2: E.D. Dep. Tr. 90:1-6).

197. One incident took place in the women's bathroom on the ground floor. (See Ex. 2: E.D. Dep. Tr. 94:10-17; Ex. 3: Sharkey Dep. Tr. 102:13-103:14).

198. E.D. testified that they had sexual intercourse twice on the same day in the women's bathroom. (See Ex. 2: E.D. Dep. Tr. 94:10:12).

199. The women's bathroom is located in the hallway that leads to the outside, and is marked as "292" and "WC" on the diagram of A Floor. (See Ex. 2: E.D. Dep. Tr. 109:7-10; Ex.

5: Rothermel Dep. Tr. 57:2-12; see also Ex. 45: Map of A Floor (labeled at Berks 02970 and “Activities Floor”).

200. Another incident occurred when Sharkey had sexual intercourse with E.D. in one of the dorm rooms. (See Ex. 2: E.D. Dep. Tr. 94:22-95:4; Ex. 3: Sharkey Dep. Tr. 102:13-103:14; see also Ex. 45: Map of B Floor (labeled as Berks 02971).

201. Many of the other women detainees noticed something was happening between Sharkey and E.D. (See Ex. 2: E.D. Dep. Tr. 100:3-13).

202. During the criminal investigation, one detainee reported that she observed Sharkey and E.D. kissing in the entrance to one of the other detainee’s bedroom, that she believed they saw her watching them kissing but did not do anything to hide it. (See Ex. 46: Report No. 012 of Investigation: Interview of Rodriguez-Sutuc at Page 3 of 5 (OPR 0128).

203. Sharkey was always near E.D. and close to her. (See Ex. 2: E.D. Dep. Tr. 100:3-13).

204. Sharkey often went to areas where men were not permitted, such as the laundry room or her room. (See Ex. 2: E.D. Dep. Tr. 100:3-13).

205. Patricia, who was a friend of E.D., reported in the criminal investigation that Sharkey told her not to say anything to anyone because they would be deported, that he was always repeating this, that she believed him, that she was scared that she could be deported, and she was intimidated by Sharkey telling her that she could be deported. (See Ex. 46: Report of Investigation, Report No. 026 (OPR 0181)).

206. Sharkey also acted jealous about E.D., such as with respect to other male staff members, or around the detainees who were 16 or 17 years old. (See Ex. 2: E.D. Dep. Tr. 104:12-16).

207. Sharkey told or implied to E.D. that he could watch the videos of the video surveillance system, and that he had access to the cameras. (See Ex. 2: E.D. Dep. Tr. 152:6-23).

208. E.D. believed Sharkey because if Sharkey was not at work one day and E.D. did something, Sharkey would tell her the next day what she had done. (See Ex. 2: E.D. Dep. Tr. 166:11-167:3).

209. Sharkey had given E.D. a music CD, and when E.D. was dancing to the music with a friend and other guys, Sharkey was very mad about it even though he had not been there. (See Ex. 2: E.D. Dep. Tr. 166:18-167:3).

210. Sharkey admitted that had had viewed some surveillance videos. (See Ex. 3: Sharkey Dep. Tr. 159:6-16).

211. Sharkey gave an example where a supervisor called him into the video room to watch a video where someone who was mopping the floors lost his footing, and it was funny, like “America’s Funniest Home Videos type thing.” (See Ex. 3: Sharkey Dep. Tr. 159:6-16).

212. Videos show Sharkey entering female resident restrooms with E.D. on several occasions for extended periods of time (30 minutes). (See Ex. 14: Affidavit of Probable Cause, filed Jan. 20, 2015 (at Berks 2932)).

213. Videos show Sharkey entering female bedrooms several times in the hallway with E.D. (See Ex. 14: Affidavit of Probable Cause, filed Jan. 20, 2015 (at Berks 2932); see also Ex. 20: Video Investigation Notes of 8/10/14, 8/12/14).

214. Videos show Sharkey entering the chapel and laundry room with E.D., and eating dinner and watching TV with E.D. in the common area of BCRC. (See Ex. 14: Affidavit of Probable Cause, filed Jan. 20, 2015 (at Berks 2932); see also Ex. 20: Video Timeline Notes of 8/10/14, 8/12/14, 8/15/14).

215. In August 2014, one of the detainees went to talk to a supervisor to complain about what they saw, that Sharkey was always close to E.D. and that there was preferential treatment towards her. (See Ex. 2: E.D. Dep. Tr. 100:23-101:4).

216. E.D. felt obligated to have sexual intercourse with Sharkey, and felt that she had to, otherwise Sharkey would get annoyed with her, and if she did not consent to Sharkey's requests there would be negative repercussions for her because Sharkey had told her if anyone found out about their relationship she would get deported. (See Ex. 14: Affidavit of Probable Cause, filed Jan. 20, 2015 (at Berks 2934); Ex. 1: E.D. Decl.).

217. Through her immigration attorney, on October 30, 2014, E.D. reported that Sharkey had sexual intercourse with her through a letter to the ICE Philadelphia Field Office. (See Ex. 34: Letter to Philadelphia Field Office, Assistant Field Office Director: David O'Neil dated Oct. 30, 2014).

After E.D.'s Report

218. On August 17, 2014, E.D. was written up for "Disobedience/Disrespect" for not doing enough when her son climbed on another child's walker. (See Ex. 21: Informational Report 8/17/14 by Katie Reabold).

219. On August 17, 2014, E.D. was written up for "Violation of Program Rules" for allegedly not supervising children. (See Ex. 22: Informational Report 8/17/14 by Beth Hrezik).

220. On August 18, 2014, E.D. was written up for "Violation of Program Rules" for allegedly not supervising children while they were on the toys in the outside recreation area. (See Ex. 23: Informational Report 8/18/14 by Sandra Kreager).

221. On September 4, 2014, E.D. was written up for "Violation of Program Rules" for allegedly joking about suicide. (See Ex. 24: Informational Report 9/4/14 by Katie Reabold).

222. On September 11, 2014, E.D. was written up for “Violation of Program Rules” and “Contraband” for having lotion that contained alcohol, mirrored compact, domestic and foreign money, and a crushed up Dramamine pill in her closet. (See Ex. 33: Informational Report 9/11/14 by Brittany Rothermel).

223. On September 13, 2014, E.D. was written up for “Violation of Program Rules” and “Disobedience/Disrespect” and counseled for her son riding a bike that was too big. (See Ex. 25: Informational Report 9/13/14 by Beth Hrezik).

224. On September 19, 2014, E.D. was written up for “Violation of Program Rules” and counseled for allegedly dancing inappropriately. (See Ex. 26: Informational Report 9/19/14 by Erika Taylor).

225. On September 21, 2014, E.D. was written up for “Violation of Program Rules” and counseling E.D. for alleging kicking her son, and she was placed on mental health PCs. (See Ex. 27: Informational Report 9/21/14 by Josiah Scott-Manga).

226. After Plaintiff reported the incidents in mid to late October, the attitude and treatment towards Plaintiff worsened. (See Ex. 1: E.D. Decl.).

227. A new clothing policy dated November 1, 2014, was issued that prohibited clothing that was too tight, revealing, short, and no dresses or skirts were allowed at all unless for religious reasons. (See Ex. 36: Resident Dress Code Policy of 11/1/14; see also Ex. 4: Himmelberger Dep. Tr. 114:24-115:12; Ex. 7: Malinowski Dep. Tr. 51:3-9).

228. Plaintiff E.D. received a handbook when she arrived to BCRC. (See Ex. 2: E.D. Dep. Tr. 61:9-16).

229. After E.D. reported the incidents, BCRC revised the Handbook to add more rules to the previous one, specifically about the clothing policy. (See Ex. 2: E.D. Dep. Tr. 133:6-10;

134:22-135:23; Ex. 1: E.D. Decl.; Ex. 37: Handbook at p.11 (copy that E.D. had that was changed); and Ex. 38: Handbook at 13; Ex. 39: Handbook at 12).

230. Berks County staff requested for the Handbooks back, made revisions with respect to the dress code policy and a statement about the sexual abuse policy, and handed them back to the detainees with the revisions. (See Ex. 2: E.D. Dep. Tr. 134:22-135:23; Ex. 1: E.D. Decl.).

231. Staff became stricter with respect to the clothing that the detainees wore. (See Ex. 2: E.D. Dep. Tr. 139:13-140:2).

232. Staff came through and confiscated large numbers of clothing, in which Brittany Rothermel participated. (See Ex. 35: Room Inspections at 11/17/14; Ex. 5: Rothermel Dep. Tr. 155:24-10).

233. If E.D. wore something that was deemed too tight, then the E.D. was told to change. (See Ex. 2: E.D. Dep. Tr. 139:___-140:2; Ex. 1: E.D. Decl.).

234. E.D. received write-ups for wearing inappropriate clothing. (See Exs. 31, 32).

235. There were also multiple times when E.D. was ordered to change clothing where it was not written up. (See Ex. 1:E.D. Decl.).

236. E.D. was targeted under the clothing policy more than the other detainees. (See Ex. 2: E.D. Dep. Tr. 143:5-9; Ex. 1: E.D. Decl.).

237. On December 15, 2014, E.D. received an Informational Report where she was ordered to change out of a pair of black pants. (See Ex. 31: Information Report of Josiah Scott-Manga dated Dec. 15, 2014).

238. Josiah Scott-Manga wrote that he would continue reinforcing the clothing rules per instructions of management. (See Ex. 31: Information Report of Josiah Scott-Manga dated Dec. 15, 2014 at 2).

239. The following day, E.D. was counseled by staff members Josiah Scott-Manga and Brittany Rothermel on inappropriate dress, and was informed of the stages of discipline of inappropriate dressing. (See Ex. 32: Information Report of Josiah Scott-Manga dated Dec. 16, 2014).

240. Brittany Rothermel and other staff members also went to E.D.'s room and took clothing from E.D. (See Ex. 2: E.D. Dep. Tr. 139:24-140:24).

241. This occurred after E.D. had met with her attorney and spoken to others about the incidents. (See Ex. 2: E.D. Dep. Tr. 140:16-24).

242. Scott-Manga still works at BCRC (as of the time of his deposition) and stated that they no longer have the clothing policy anymore. (See Ex. 9: Scott-Manga Dep. Tr. 60:16-61:3).

243. Rothermel informed E.D. that E.D. had a restriction order that prevented her from leaving the facility. (See Ex. 2: E.D. Dep. Tr. 142:16-143:4; E.D. Decl.).

244. A "restriction" is a method of discipline of the detainees, such that field trips could be taken away. (See Ex. 12: Witmer Dep. Tr. 73:2-21).

245. Plaintiff also continued to receive Informational Reports for minor matters. (See Ex. 29: Informational Report 11/20/14: Plaintiff found a dime in couch; Ex. 30: Informational Report 12/9/14: staff member thought her son was being inappropriate, but he was fixing a zipper).

246. As a result, E.D. and her son were denied privileges and programs that other detainees participated in. (See Ex. 2: E.D. Dep. Tr. 142:14-144:5; Ex. 1: E.D. Decl.).

247. These programs included haircuts for the children or going on a trip or to the park. (See Ex. 2: E.D. Dep. Tr. 143:23-144:5).

248. Other detainees blamed E.D. (See Ex. 16: Email of Mosko, M. to Allain, S and Clement, J., dated 8/18/14 (Berks 02442); Ex. 1: E.D. Decl.).

249. E.D. became even more depressed and isolated, and regretted coming forward about what happened. (See Ex. 1: E.D. Decl.).

250. Plaintiff was released from BCRC in December 2014. (See Ex. 2: E.D. Dep. Tr. 46:9-11).

Other Staff

251. Sharkey worked the second shift at BCRC, which was approximately from 2:15 pm to 10:15 or 10:30 pm. (See Ex. 3: Sharkey Dep. Tr. 18:4-10).

252. The staff had frequent interactions with each other. (See Ex. 3: Sharkey Dep. Tr. 59:10-13).

253. Many of the detainees were aware of the improper actions between Sharkey and E.D., including hugging, kissing, and observed E.D. in possession of Sharkey's cell phone. (See Ex. 16: Email from Phillips, T. to Smith, D and Edwards, D. of Aug. 17, 2014 (Berks 02428)).

254. Jamie Himmelberger worked the same shift as Sharkey. (See Ex. 2: E.D. Dep. Tr. 118:10-15).

255. E.D. saw Himmelberger see E.D. and Sharkey together. (See Ex. 2: E.D. Dep. Tr. 118:19-21).

256. Himmelberger testified that she saw Esmery and Sharkey in the laundry room together. (See Ex. 4: Himmelberger Dep. Tr. 110:9-111-3).

257. Himmelberger testified that it was unusual for a male staff member to be in there with a female detainee, and did not tell anyone. (See Ex. 4: Himmelberger Dep. Tr. 111:4-20).

258. Himmelberger saw Sharkey in the dining room with E.D, in the living room with E.D., in the laundry room with E.D., and outside with E.D. (See Ex. 2: E.D. Dep. Tr. 121:1-10).

259. Sharkey and Himmelberger often worked in the same area of the living room (or common room) area. (See Ex. 2: E.D. Dep. Tr. 123:1-6).

260. If E.D. said she was going to the laundry room, Sharkey said he would accompany her, and Himmelberger could see that Sharkey went into the laundry room with her even though that was not permitted. (See Ex. 2: E.D. Dep. Tr. 123:1-12).

261. Sharkey testified that “Jamie told me to watch out for her so – at one point.” (See Ex. 3: Sharkey Dep. Tr. 218:14-15).

262. E.D. felt that Himmelberger had a bad attitude towards her. (See Ex. 2: E.D. Dep. Tr. 124:22-24).

263. For example, Himmelberger would set her aside and put her on different activities in the center. (See Ex. 2: E.D. Dep. Tr. 125:1-7).

264. The staff, including Himmelberger, Taylor, Rothermel, and Malinowski, spoke to E.D. differently than to other detainees. (See Ex. 2: E.D. Dep. Tr. 125:1-13).

265. E.D. often felt that Brittany Rothermel had a “bad attitude” towards her. (See Ex. 2: E.D. Dep. Tr. 125:24-126:7).

266. Brittany Rothermel worked from 12:30 pm to 8:30 pm (See Ex. 5: Rothermel Dep. Tr. 49:6-10).

267. In the Bern Township Police Department Incident Report Form that includes an interview with Brittany Rothermel, Rothermel is reported to have said, “Dan would talk to E.D.

more than usual, more than anyone else. I noticed that E.D. would dress nice and do her hair when Dan was working. I was told by other residents that Dan and E.D. were seen kissing after Dan was told he was suspended. That they were alone together in rooms. That she was using his cell phone. That Dan sent her a package here with a false return address after he was suspended. After Dan was suspended they told me that they knew what was going on between Dan and E.D. but, were afraid to say anything because of getting in trouble, or that Dan would treat them differently.” (See Ex. 19: Bern Township Police Dept. Incident Report Form at p.12).

268. Erica Taylor worked the second shift, which was from 2:15 pm to 10:30 pm. (See Ex. 6: Taylor Dep. Tr. 23:10-17).

269. Erica Taylor was often in the same place as Sharkey and E.D. (See Ex. 2: E.D. Dep. Tr. 127:22-128:1).

270. Matthew Malinowski had the same or similar schedule as Daniel Sharkey, and also worked the second shift. (See Ex. 2: E.D. Dep. Tr. 128:5-10; Ex. 7: Malinowski Dep. Tr. 46:17-20).

271. The ring that Sharkey gave to E.D. was found during a search by Brittany Rothermel. (See Ex. 2: E.D. Dep. Tr. 141:6-142:1).

272. Brittany Rothermel also found a piece of paper with Sharkey’s cell phone passcode on it during the search. (See Ex. 2: E.D. Dep. Tr. 142:2-8).

273. On August 14, 2017, Sharkey and E.D. were together in Room 13 when Darrius Palmer was conducting a sweep where he looked into Room 13, and then continued the sweep even though Sharkey and E.D. were in the room together. (See Ex. 20: Video Timeline Notes (Berks 2417)).

274. At the time Darrius Palmer looked into Room 13, Sharkey and E.D. were in the room for approximately 15 minutes (from 3:31:38 to 3:46:25). (See Ex. 20: Video Timeline Notes (Berks 2417)).

275. Afterwards, Sharkey and E.D. remained in the room together for another seven or eight minutes (from 3:46:25 to 3:54:13). (See Ex. 20: Video Timeline Notes (Berks 2417)).

276. Sharkey testified that many staff at BCRC were aware, and that “It was a facility joke that she [E.D.] was my girlfriend.” (See Ex. 3: Sharkey Dep. Tr. 80:17-18).

277. Sharkey testified that, “It was guys that thought this was funny.” (See Ex. 3: Sharkey Dep. Tr. 212:9-16).

278. Sharkey testified that “people just knew” that E.D. was getting dressed up and putting on makeup for him and that she stayed at his post or followed him around. (See Ex. 3: Sharkey Dep. Tr. 81:4-82:20).

279. Sharkey testified, “[T]here was [*sic*] staff members that told me themselves that they would send [her] to me.” (See Ex. 3: Sharkey Dep. Tr. 212:9-11).

280. Briefings were conducted daily prior to staff members’ shifts, and they are meetings where management and supervisors can describe how the next shift will work. (See Ex. 3: Sharkey Dep. Tr. 253:11-24; Ex. 5: Rothermel Dep. Tr. 162:6-15).

281. For those on the second shift, everyone who would be starting the second shift would attend the briefing. (See Ex. 3: Sharkey Dep. Tr. 254:18-22).

282. The supervisors attended the briefings. (See Ex. 3: Sharkey Dep. Tr. 253:19-24; 255:4-256:8).

283. Jason Mills and Len Kopetsky were Sharkey’s “everyday” supervisors and were present at the briefings. (See Ex. 3: Sharkey Dep. Tr. 255:14-256:8).

284. Sharkey testified that staff members joked about Sharkey and E.D. “every day at briefing. It was every fricking day.” (See Ex. 3: Sharkey Dep. Tr. 214:11-19).

285. Sharkey testified that the supervisors knew about it, specifically Jason Mills and Len Kopetsky. (See Ex. 3: Sharkey Dep. Tr. 214:11-19).

286. Sharkey explained, “[T]hey knew, because the one comment that Jason Mills made was we got a bunch of John Reiches working here, and that was in front of everybody.” (See Ex. 3: Sharkey Dep. Tr. 214:5-11).

287. Sharkey explained that John Reich was a former employee “that had a similar situation to mine. Not so extreme . . .” but who was “hitting on females and some run-ins with female residents.” (See Ex. 3: Sharkey Dep. Tr. 214:5-20).

288. Sharkey testified that when laundry was stopped on the second shift because it was too much, E.D. was permitted to do her on the second shift, so it became, “oh, that’s for Dan” and it turned into a joke. (See Ex. 3: Sharkey Dep. Tr. 257:3-12; see also id. at 214:20-24 (“Oh, she waited to do her laundry on second shift. That must be for Sharkey. It was a daily – a daily thing after awhile, after a certain period of time”)).

289. In July 2014, Sharkey approached three supervisors about E.D. over the course of approximately ten days. (See Ex. 3: Sharkey Dep. Tr. 88:13-22).

290. On July 12, 2014, Sharkey approached Witmer regarding E.D., claiming that E.D. was smiling at him and following him around. (See Ex 17 : Witmer Memo to Management dated 7/12/14; Ex. 16: Email to Smith, D. dated 7/12/14 at 4:27 pm).

291. Witmer spoke with Sharkey and informed him to immediately speak to a supervisor if anything else should transpire. (See Ex. 17: Witmer Memo to Management dated 7/12/14; Ex. 16: Email to Smith, D. dated 7/12/14 at 4:27 pm).

292. Witmer wrote an email and memo regarding the incident. (See Ex. 17: Witmer Memo to Management dated 7/12/14; Ex. 16: Email to Smith, D. dated 7/12/14 at 4:27 pm).

293. In mid-July, Witmer informed Jason Mills that Sharkey had approached him about E.D. “following him around” and making kissing faces at him. (See Ex. 17 : Mills Memo of 8/21/14).

294. During that week, possibly the next day, Sharkey approached Mills and told him that E.D. tried to follow him into the cleaning closet. (See Ex. 17 : Mills Memo of 8/21/14).

295. Mills did not report this incident until August 21, 2014. (See Ex. 17 : Mills Memo of 8/21/14).

296. According to Sharkey, when he told Jason Mills about an incident involving Patricia and E.D., Jason Mills “laughed, chuck[l]ed.” (See Ex. 3: Sharkey Dep. Tr. 85:8-86:24).

297. Sharkey approached Len Kopetsky joking about E.D. following him outside when Sharkey has the post, and stating that she would sit near him. (See Ex. 17 : Kopetsky Memo dated 8/19/14 (Berks 02528)).

298. According to Sharkey, Sharkey told Kopetsky about “other stuff” and “pointed her out to him that she was following [him] around the facility,” and his reaction was “kind of like a whatever type of remark.” (See Ex. 3: Sharkey Dep. Tr. 85:1-10).

299. Kopetsky did not report the conversation with Sharkey until August 19, 2014. (See Ex. 17 : Kopetsky Memo dated 8/19/14 (Berks 02528)).

300. Len Kopetsky and Jason Mills were the supervisors on second shift (Sharkey’s shift). (See Ex. 4: Himmelberger Dep. Tr. 8:20; 49:5)

301. David Smith is part of management at BCRC. (See Ex. 11: Smith Dep. Tr.188:17-19).

302. Program Director David Smith testified that if he had received these other two, he would have conducted a more in-depth investigation at that time. (See Ex. 11: Smith Dep. Tr. 247:4-14).

303. The two incidents of sexual intercourse happened after Sharkey had spoken with his supervisors, and no one followed up with him after he spoke with them. (See Ex. 3: Sharkey Dep. Tr. 107:21-108:4).

304. Sharkey told a BCRC staff member, Darrius Palmer, about what was going on with Sharkey and E.D. (See Ex. 3: Sharkey Dep. Tr. 107:21-108:4).

305. Sharkey testified that he told Palmer that Sharkey and E.D. had “hugged, kissed or engaged in sexual intercourse.” (See Ex. 3: Sharkey Dep. Tr. 198:21-200:2).

306. Sharkey testified that Darrius Palmer knew about their relationship since Palmer sent Sharkey a picture of E.D. in her bra and panties from Palmer’s phone while Sharkey was on vacation in the Outer Banks. (See Ex. 3: Sharkey Dep. Tr. 198:21-200:2).

307. Palmer sent this text prior to when Sharkey had sexual intercourse with E.D. (See Ex. 3: Sharkey Dep. Tr. 201:21-202:7; 229:6-8).

308. Initially, Sharkey stated he went on vacation to the Outer Banks in August 2014, but later stated he went in June 2014. (See Ex. 3: Sharkey Dep. Tr. 198:21-200:2; 228:17-229:2).

309. Sharkey testified that he had sexual intercourse with E.D. after his August 2014 vacation. (See Ex. 3: Sharkey Dep. Tr. 229:6-8).

310. Sharkey stated that Darrius Palmer was his “inside man.” (See Ex. 3: Sharkey Dep. Tr. 9-13).

311. Most of the time supervisors were in their office. (See Ex. 3: Sharkey Dep. Tr. 60:22-6; see also Ex. 4: Himmelberger Dep. Tr. 49:22-50:7).

312. Some staff stated that supervisors could be out on the floor more. (See Ex. 4: Himmelberger Dep. Tr. 109:9-22; see also Ex. 18: Smith Interview Notes at Berks 2613)

313. There was some variation in how much time a supervisor was “on the floor” and Sharkey testified that some “just showed their face for ten minutes in an eight-hour period.” (See Ex. 3: Sharkey Dep. Tr. 60:19-61:6).

314. A video shows that one staff member, Jillian Noll, was conducting room checks while Sharkey was still in the detainee’s room and that he did not leave after Noll conducted the check, and that Sharkey was in the room for an extended period of time. (See Ex. 16: Email of Wetzel, Al to Edwards, D. dated 8/19/14 at 1:34 PM (Berks 02473); Email of Wetzel, A. to Edwards, D. dated 8/19/14 at 2:46PM (Berks 02475)).

315. One detainee reported that she saw E.D. and Sharkey on the playground outside talking, and when the detainee wanted to re-enter the building, she called to Sharkey four times but he did not reply because he was in a conversation with E.D. (See Ex. 15: Witmer Memo to Management dated 8/18/14 Re: Interview Carranza-Miranda, Quispe-Carranza).

316. This detainee reported that another staff member that had exited the building, Jillian Noll, had to let the residents back inside. (See Ex. 15: Witmer Memo to Management dated 8/18/14 Re: Interview Carranza-Miranda, Quispe-Carranza).

317. Several staff were disciplined as a result of the incidents relating to Sharkey and E.D. (See Ex. 10: Edwards Dep. Tr. 188:2-8)

318. Diane Edwards was responsibility for oversight of BCRC. (See Ex. 10: Edwards Dep. Tr. 16:8-10).

319. Diane Edwards has oversight over everything in the program for BCRC, including training. (See Ex.10: Edwards Dep. Tr. 19: 6-9).

320. Edwards is overall responsible for supervising everybody at the residential center. (See Ex. 10: Edwards Dep. Tr. 101:23-102:4).

321. Edwards reviews the performance reviews of staff. . (See Ex. 10: Edwards Dep. Tr. 101:23-102:4).

Training

322. Sharkey stated that his daily interactions with his supervisors were “minimal.” (See Ex. 3: Sharkey Dep. Tr. 59:3-9).

323. Sharkey did not remember receiving any training on the code of ethics. (See Ex. 3: Sharkey Dep. Tr. 69:16-22; 73:24-74:2).

324. Although Sharkey acknowledged that he signed the Code of Ethics document, but didn’t think that “it signifies [he] received it.” (See Ex. 3: Sharkey Dep. Tr. 73:6-13).

325. Sharkey testified in his deposition, “[M]y training consisted of them handing me a binder with all these documents in it and me going through them and signing them.” (See Ex. 3: Sharkey Dep. Tr. 75:21-23; see also Ex. 3: Sharkey Dep. Tr. 137:9-20 (“So, a lot of times they would just – I would sit there at a table and the supervisor would leave and I would sign.”)).

326. With regard to policies, Sharkey testified, “[S]ome of them I just would flip through them and just sign them.” (See Ex. 3: Sharkey Dep. Tr. 76:3-8).

327. With regard to Sharkey’s training upon his return to BCRC, he testified, “When I got hired back there, it was just me and a supervisor going over these documents, you know, this binder . . .” and that “[t]here was a bit of time where I was in that room by myself just signing papers.” (See Ex. 3: Sharkey Dep. Tr. 77:6-15).

328. Sharkey disputed the number of hours of training that he received, testifying, “There’s no way I have 50.5 hours of training. I’m sorry. That’s not the way it works.” (See Ex. 3: Sharkey Dep. Tr. 240:19-21).

329. Sharkey further testified, “This might be required by the Department of Public Welfare for them to put this on this computer But this is not what happens at the Berks County Residential Center when I was there.” (See Ex. 3: Sharkey Dep. Tr. 240:24-241:6.)

330. With respect to the sexual abuse and sexual harassment training, Himmelberger testified, “We got a packet of information and then we had basically what was sort of like a test to test our knowledge on it.” (See Ex. 4: Himmelberger Dep. Tr. 70:4-11).

331. Staff are required to report warning signs where there might be sexual abuse or assault. (See Ex. 4: Himmelberger Dep. Tr. 77:9-14).

332. Witmer was involved in developing the training for sexual abuse and sexual assault. (See Ex. 12: Witmer Dep. Tr. 36:22-37:9).

333. Supervisor Brandon Witmer testified that sexual abuse/sexual assault training consists of a PowerPoint being printed out and the employee going to a private area, reading it, and taking a quiz. (See Ex. 12: Witmer Dep. Tr. 45:3-11).

334. A staff member, Rothermel, did not recall examples of favoritism that she learned in training. (See Ex. 5: Rothermel Dep. Tr. 100:23-101:2).

335. Edwards approves of the training curriculum, all the subjects under training. (See Ex. 10: Edwards Dep. Tr. 174:22-23).

Sharkey

336. Witmer stated that there was an incident before Sharkey started working at BCRC where Sharkey was cursing and being disrespectful and had to be spoken to. . (See Ex. 12: Witmer Dep. Tr. 77:13-78:4).

337. Edwards was aware the Sharkey had an incident during his employment as a Juvenile Correction Counselor with Berks County at the youth center, where he was out on break with other employees and was loud and used vulgarity with words, and was disciplined. . (See Ex. 10: Edwards Dep. Tr. 122:3-23).

338. Sharkey had previously been disciplined before. (See Ex. 3: Sharkey Dep. Tr. 123:20-13).

339. Sharkey was disciplined for telling another staff member to wash his hands with Clorox and turning his skin white. (See Ex. 3: Sharkey Dep. Tr. 123:4-10).

340. Sharkey received a suspension as part of the discipline. (See Ex. 3: Sharkey Dep. Tr. 123:4-10).

341. When Sharkey returned, he came back to work and did not receive any retraining. (See Ex. 3: Sharkey Dep. Tr. 127:16-5).

342. David Smith participated with Diane Edwards and a Human Resources representative in interviewing staff relating to the incidents between Sharkey and E.D. (See Ex. 11: Smith Dep. Tr.199:16-18).

343. David Smith took notes at these meetings. (See . (See Ex. 11: Smith Dep. Tr. 202:18:5; referring to Ex. 18); Ex. 18: Smith Notes; Ex. 11: Smith Dep. Tr.)

344. Smith's notes indicate that staff member Rebecca Hillbert stated something like:

- a. "I noticed Dan S hanging w/E.D./Patricia a lot."
- b. "Dan S doesn't sit w/Residents to eat. He sat w/her a lot that week."

- c. She saw Dan in the laundry room and E.D. was outside room. Rebecca felt like she interrupted something.

(See Ex. 18: Smith Notes at Berks 02611).

345. Smith's notes indicate that staff member Sandy Kreager stated something like:

- a. The week before [she was out] Sharkey was hanging out in the bedroom wings w/ a bunch of women.
- b. She tried not be around Dan because he is an "ass."

(See Ex. 18: Smith Notes at Berks 02611).

346. From an interview with Jill Noll, Smith's notes state:

- a. "On the 16th, I knew something wasn't right. We were really short staffed that night."
- b. "Beth and I were on floor by ourselves Dan S. disappeared a lot. He was @ the end of the hall. He had to of [sic] been in one of the room."
- c. "Why didn't you take it to a sup[ervisor]? Our sups are shit, we can never find them."
- d. "She stated my checks suck."

(See Ex. 18: Smith Notes at Berks 02614).

347. From an interview with Beth Hrezik, Smith's notes state:

- a. "We were short staffed → Did you call a sup[ervisor] about being short staffed? ★No."
- b. "They always claim they are short staffed."
- c. SUP[ervisor]S → Mills + Len → in general they have been around more now but all shifts are in the office a lot."

(See Ex. 18: Smith Notes at Berks 02617).

348. From an interview with Jim Stedrick:

- a. "I saw Dan and E.D. around each other."
- b. "I saw – Dan and E.D. on CPU in library on google translator."

(See Ex. 18: Smith Notes at Berks 02616).

349. From an interview with Josiah Scott-Manga:

- a. "Have you noticed any inappropriate relationship? Yes what flags – some people make poor judgment: Dan is hardly on the floor, he finds himself handy when he belongs, trying to delegate his work to others."
- b. "Dan spent a lot of time w/E.D. + Patricia."
- c. "If I tell Sup[ervisors] I felt it wouldn't have been handled. And cause more anemonsity [*sic*] between Dan + Josiah. Thinks Sups may not have enough time to address it."

(See Ex. 18: Smith Notes at Berks 02612).

350. Himmelberger stated that Sharkey was manipulative, did not have the nicest demeanor, and created a lot of stirs between staff. (See Ex. 4: Himmelberger Dep. Tr. 91:10-14).

351. Himmelberger stated that Sharkey sometimes congregated with other staff members in the parking lot taking long breaks and other staff would complain and wonder why they weren't on the floor. (See Ex. 4: Himmelberger Dep. Tr. 92:9-24).

352. Himmelberger reported that Brittany had said Sharkey would disappear, such as abandoning his post. (See Ex. 4: Himmelberger Dep. Tr. 114:2-11; see also Ex. 18: Smith Notes at Berks 02613).

353. Josiah Scott-Manga stated that Sharkey was a “laid back guy” . . . “[t]owards his duty” and “You have to instruct him. You tell him, he get angry.” (See Ex. 9: Scott-Manga Dep. Tr. 31:23-32:2; 46:7-10).

354. Scott-Manga saw Sharkey give E.D.’s son a toy. (See Ex. 9: Scott-Manga Dep. Tr. 33:24-34:5).

355. Scott-Manga saw Sharkey and E.D. sitting in chairs next to each other in front of the computer. (See Ex. 9: Scott-Manga Dep. Tr. 41:19-42:3).

356. Himmelberger stated that Sharkey made sexist comments. (See Ex. 4: Himmelberger Dep. Tr. 93:8-12; 94:17-24).

357. Himmelberger also heard Sharkey make racist comments. (See Ex. 4: Himmelberger Dep. Tr. 93:10-94:9).

358. Himmelberger also heard Sharkey make vulgar comments, which usually were in front of a group of people so other people were aware of it. (See Ex. 4: Himmelberger Dep. Tr. 97:1-14).

359. Himmelberger reported the sexist comment and vulgar comments to her supervisors and Diane Edwards. (See Ex. 4: Himmelberger Dep. Tr. 97:15-21).

360. In David Smith’s notes in the interview with Erika Taylor, it reads, “talked to E.D./Patricia a lot but it was always in public” and “He pursued them in seemed in hindsight.” (See Ex. 18: Smith Notes at Berks 02613).

361. Taylor recalls making these statements. (See Ex. 6: Taylor Dep. Tr. 125:11-127:6).

362. BCRC has a policy that forbids the use of personal phones and devices within the program space, which constitutes where the detainees live. (See Ex. 41: Policy: Chapter: Training; Subject: Personal Phones/Devices, Effective date 12/10/13, Revised date 12/10/13).

363. Sharkey frequently had his personal cell phone with him that he let E.D. use.

364. Sharkey sometimes took out his cell phone in the common areas. (See Ex. 20: Video Timeline Notes dated August 12, 2014 (at 7:15)).

Policies and Practices

365. Edwards is sometimes in charge of developing new policies for BCRC. (See Ex. 10: Edwards Dep. Tr. 143:1-7).

366. Edwards has the ability to propose new policies if those policies are warranted. (See Ex. 10: Edwards Dep. Tr. 143:19-22).

367. Edwards signs off if a policy goes into the SOP. (See Ex. 10: Edwards Dep. Tr. 146:2-5).

368. Diane Edwards name is on the clothing policy. (See Ex. 36).

369. BCRC staff supervise the detainees during the meals and must eat in the dining room. (See Ex. 4: Himmelberger Dep. Tr. 37:12-37:22).

370. BCRC does a count or census of the detainees three times a day. (See Ex. 1: E.D. Decl. at ¶9; Ex. 4: Himmelberger Dep. Tr. 38:18-39:9; Ex. 6: Taylor Dep. Tr. 50:18-22).

371. Staff were permitted to search the detainees. (See, e.g. Ex. 5: Rothermel Dep. Tr. 143:7-10).

372. All the BCRC entrances and exits were guarded, there was an office with a staff member near the main entrance, and staff members were always watching the detainees. (See Ex. 1: E.D. Decl. at ¶5; Ex. 4: Himmelberger Dep. Tr. 39:13-24).

373. Detainees could not go outside to the recreation area without permission of a staff member, and a staff member would have to escort detainees outside. (See Ex. 1: E.D. Decl. at ¶6; Ex. 4: Himmelberger Dep. Tr. 47:13-24; Ex. 5: Rothermel Dep. Tr. 70:4-6).

374. The only way to open the front entrance was with an access pass that only staff had. (See Ex. 1: E.D. Decl. at ¶4).

375. At night, the detainees were not allowed to leave the upper floor (where the dorm rooms were) after 8:00 pm. (See Ex. 1: E.D. Decl. at ¶8; Ex. 4: Himmelberger Dep. Tr. 56:13-15).

376. The detainees slept in dorm rooms which had six as the maximum number in each room. (See Ex. 4: Himmelberger Dep. Tr. 57:1-4).

377. Staff who were posted on the ground floor (A Floor) often had one person assigned to the desk while the other person walked around the halls on that same floor. (See Ex. 6: Taylor Dep. Tr. 38:7-15; see also Ex. 7: Malinowski Dep. Tr. 16:22-17:22).

378. Staff who were posted on the upper floor (B floor) often had the staff member who had the B1 post sit at the desk and the other staff member, who would be B2, would assist the B1 post. (See Ex. 6: Taylor Dep. Tr. 35:3-36:21; see also Ex. 7: Malinowski Dep. Tr. 16:7-14).

379. One detainee expressed concern that she would be in trouble because her daughter had informed staff of what she had witnessed between Sharkey and E.D. (See Ex. 16: Email of Mosko, M. to Allain, S and Clement, J., dated 8/18/14 (Berks 02442)).

380. Staff members are not permitted to supervise detainees of the opposite gender in areas that do not have cameras. (See Ex. 4: Himmelberger Dep. Tr. 85:1-22; Ex. 9: Scott-Manga

Dep. Tr. 22:6-23:7; Ex. 6: Taylor Dep. Tr. 102:12-103:14; Ex. 7: Malinowski Dep. Tr. 22:16-24:24; Ex. 5: Rothermel Dep. Tr. 112:12-15).

381. Among the staff members, only Brittany Rothermel spoke Spanish with fluency. (See Ex. 3: Sharkey 65:4-19; Ex. 4: Himmelberger Dep. Tr. 63:18-24).

382. Before Brittany Rothermel started working there, no other staff were fluent in Spanish. (See Ex. 4: Himmelberger Dep. Tr. 63:18-24).

383. Staff had access to language services which entailed going to the phone in a specific room. (See Ex. 6: Taylor Dep. Tr. 72:8-73:18).

384. Sometimes staff would communicate through other detainees who could speak some English. (See Ex. 5: Rothermel Dep. Tr. 84:8-13).

385. Taylor testified that she did not speak Spanish fluently, and didn't communicate with the detainees a whole lot. (See Ex. 6: Taylor Dep. Tr. 72:8-73:18).

386. During the investigation by Bern Township police and DHS/ICE, a detainee (Miranda-Morales) reported that she observed another detainee (Dubon-Chicas) talking to a staff member, Ryan Reabold), explaining that Sharkey and E.D. were kissing. Reabold stated, "No comprendo" [I don't understand]. The detainee observed Dubon-Chicass put her hands together by the fingertips and turned them in opposite directions in an attempt to explain to Reabold that they were kissing. The detainee heard Reabold respond by stating "No problema." [No problem]. The detainee reported that she heard Dubon-Chicas explain to Reabold in Spanish that the other BCRC staff members needed to know that they were kissing, and that Reabold did not respond and left the area. (See Ex. 47: DHS Report of Investigation, Report No. 018 at p. 4-5).

387. Several staff members could not identify who the SAAPI program coordinator was. (See, e.g., Ex. 6: Taylor Dep. Tr. 85:1-11; Ex. 8: Behm Dep. Tr. 36:22-37:3; Ex. 7: Malinowski Dep. Tr. 37:18-22; Ex. 5: Rothermel Dep. Tr. 104:7-107:17).

Respectfully submitted,

/s/ Su Ming Yeh

Su Ming Yeh

I.D. No. 95111

Angus R. Love

Attorney # PA 22392

Pennsylvania Institutional Law Project

718 Arch Street, Suite 304S

Philadelphia, PA 19106

(215) 925-2966

Counsel for Plaintiff

DATE: October 26, 2017

**IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

E.D.,	:	
	:	
Plaintiff,	:	
	:	
v.	:	Civil Action No. 16 Civ. 2750
	:	
DANIEL SHARKEY et al.,	:	Judge Edward G. Smith
Defendants	:	
	:	Filed via ECF
	:	

CERTIFICATE OF SERVICE

On this October 26, 2017, I, Su Ming Yeh, hereby certify that I caused a true and correct copy of the above document, to be served electronically on counsel as follows:

Langdon Jones
U.S. Attorney's Office for the E.D. Pa.
615 Chestnut Street, Suite 1250
Philadelphia, PA 19106
landon.jones@usdoj.gov

Matthew J. Connell
Tricia M. Ambrose
MacMain Law Group
101 Lindenwood Drive, Suite 160
Malvern, PA 19355
mconnell@macmainlaw.com
tambrose@macmainlaw.com

A hard copy of the above document was mailed on October 27, 2017:

Daniel Sharkey
223 S. 7th Avenue
Reading, PA 19611

Respectfully submitted,

/s/ Su Ming Yeh
Su Ming Yeh
I.D. No. 95111
Pennsylvania Institutional Law Project

EXHIBIT 1

**IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

E.D.,	:	
	:	
Plaintiff,	:	
	:	
v.	:	Civil Action No. 16 Civ. 2750
	:	
DANIEL SHARKEY et al.,	:	Judge Edward G. Smith
Defendants	:	
	:	
	:	

DECLARATION OF E.D.

I, E.D., hereby declare as follows:

1. From May to December 2014, I was detained at the Berks County Residential Center (BCRC) as an immigration detainee with my son, who was three years old at that time.
2. When I entered BCRC, I remembered signing a number of forms, but I do not remember receiving specific information about what sexual abuse is, or how to report sexual abuse, sexual assault or other improper behavior by staff members.
3. While detained at BCRC, I was not free to leave the facility.
4. The only way to open the front entrance was with an access pass that only staff had.
5. All the entrances and exits were guarded, there was an office with a staff member near the main entrance, and staff members were always watching, and I never tried to leave the BCRC facility.
6. I could not go outside to the recreation area without permission of a staff member, and a staff member would have to escort me outside.

7. Once I was outside in the recreation area, I asked a staff member what would happen if I (or another detainee) tried to leave the facility, and I was told that the police would be called with the radio and that the police would come after us.

8. At night, the detainees were not allowed to leave the upper floor (where the dorm rooms were) after 8:00 pm.

9. BCRC had “count” three times a day, where they counted the number of detainees in the facility.

10. After I arrived to BCRC, a staff member named Daniel Sharkey began to befriend me, by giving me and my son treats, such as chocolate and extra portions of food.

11. He provided me favors, such as he let me use of his cell phone, which I could use to call my mother.

12. He also gave me toys and clothes from outside the facility to me and my son.

13. He made promises to me to helping me with my immigration issues.

14. He told me he liked me and that I was pretty, but I thought he was just joking or playing around.

15. One day he kissed me, and I realized he was not joking around.

16. He kissed me in the laundry room, which is a room that has no cameras.

17. A day or a few days after Sharkey kissed me, he came to me with a translation on his cell phone that I should not tell anyone about what happened, and if anyone found out, I would be deported, which I believed.

18. I feared from Sharkey retaliation if I protested.

19. If I refused to touch Sharkey, this angered him and he would insult me.

20. Sharkey was also jealous, for example if I interacted with other male staff members or the older teen male detainees.
21. Eventually Sharkey was hugging and kissing me on a daily basis.
22. Sharkey also touched my breasts and buttocks while we were alone in my dorm room or other detainees' dorm rooms.
23. Sharkey asked me to take pictures of myself in my bra and underwear with his cell phone.
24. I agreed to have pictures taken of me while I was in my bra and underwear with Sharkey's cell phone.
25. Sometime in late July or August 2014, Sharkey wanted to have sexual intercourse with me.
26. We did have sexual intercourse three times, two times in the women's bathroom in the hallway to the facility entrance on the same day, and one time in my friend's dorm room.
27. I felt obligated to have sex with him.
28. A few days after the first time we had sexual intercourse, Sharkey approached me while I was in the outdoor recreation area and tried to pull my pants down but I refused to agree because there were children present.
29. Sharkey told me numerous time that if I told anyone of the nature of our relationship that I would be deported back to Honduras.
30. I felt that Sharkey was always near or next to me, so if I sat down in the common area, he would sit down, or if I went to the outside recreation area, then he would go outside.
31. In mid-August 2014, a young child had witnessed Sharkey and my when we were having sex in the bathroom, and she told her mother, and one of them reported it sometime after.

32. Until this point, I had not been informed, either by BCRC staff or any U.S. Immigration and Customs Enforcement (ICE) or Department of Homeland Security (DHS) officers, that I had not broken any state or federal laws, or that the incidents would not affect my immigration status.

33. I continued to believe that I could be deported for what had happened.

34. After the investigation started, the BCRC began to treat me very poorly.

35. I received a number of write-ups which I had not received before.

36. I felt very isolated, upset, and depressed.

37. In mid-September, some pro bono lawyers met with me.

38. In mid- to late- October, I met my current immigration attorney for the first time.

39. I broke down and revealed the relationship to him and/or his paralegal during a legal visit.

40. My immigration attorney then faxed, emailed, and wrote to various ICE employees and offices and to report the incidents.

41. After I reported the incidents through my attorney, the attitude and treatment to me by BCRC staff worsened.

42. I was denied certain privileges, such as my son being denied a haircut, even though other children were permitted haircuts.

43. I was told by staff member Brittany Rothermel that I was on a restriction.

44. If I talked to any other detainee, staff members would go to that detainee and question them.

45. This caused other detainees to not want to talk to me.

46. In or around November 2014, BCRC staff, under the direction of Diane Edwards, took many of the women's and girls' clothing, placed them in garbage bags, and gave the detainees other clothing that they claimed were more appropriate.

47. In or around November 2014, BCRC and Diane Edwards began prohibiting women detainees from wearing any tight clothing, clothing that revealed any cleavage, or skirts and dresses, and the other BCRC-IFC detainees blamed me for this policy and isolated me.

48. BCRC staff also took our Handbooks, made changes to them, and gave them back.

49. The changes they made related to the clothing restrictions.

50. I felt that BCRC staff specifically targeted me with my clothing, and I was ordered to change out of certain clothes several times because BCRC thought my clothing was inappropriate.

51. I also received a write-up or more about my clothing, which upset me greatly.

52. There were also many times when I was ordered to change an article of clothing were they did not write it up.

53. I saw other women detainees who wore the same or similar things as I was, but the staff members did not say anything to them.

54. After this happened so many times, I went to a medical staff person to help me translate so I could tell the staff that I was upset and that I felt that I was being singled out.

55. I became even more depressed and isolated, and regretted coming forward about what happened.

Pursuant to 28 U.S.C. § 1746, I, E.D., declare under penalty of perjury that the foregoing is true and correct. Executed this 26 day of October, 2017.

E.L.D.

EXHIBIT 8

JOHN ROBERT BEHM
E.D. vs SHARKEY

July 11, 2017
1-4

<p style="text-align: right;">Page 1</p> <p>1 UNITED STATES DISTRICT COURT 2 FOR THE EASTERN DISTRICT OF PENNSYLVANIA 3 - - - 4 E.D. : 5 : 6 v. : 7 : 8 DANIEL SHARKEY, et al. : NO. 16 CIV. 2750 9 10 11 12 13 14 15 16 17 - - - 18 19 20 21 22 23 24</p> <p style="text-align: center;">July 11, 2017</p> <p style="text-align: center;">Oral deposition of JOHN ROBERT BEHM, taken pursuant to notice, was held at the Berks County Government Offices, 633 Court Street, 14th Floor, Reading, Pennsylvania, commencing at 2:09 p.m., on the above date, before Sherry L. Stills, Court Reporter and Notary Public for the Commonwealth of Pennsylvania.</p> <p style="text-align: center;">- - -</p> <p style="text-align: center;">ESQUIRE DEPOSITION SOLUTIONS 1835 Market Street Suite 2600 Philadelphia, Pennsylvania 19103 (215) 988-9191</p>	<p style="text-align: right;">Page 3</p> <p>1 - - - 2 I N D E X 3 - - - 4 Testimony of: JOHN ROBERT BEHM 5 BY MS. YEH 5 6 BY MR. CONNELL 52 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24</p> <p style="text-align: center;">- - - E X H I B I T S - - -</p> <table border="1"> <thead> <tr> <th>NO.</th> <th>DESCRIPTION</th> <th>PAGE</th> </tr> </thead> <tbody> <tr> <td>8</td> <td>None marked</td> <td></td> </tr> </tbody> </table>	NO.	DESCRIPTION	PAGE	8	None marked	
NO.	DESCRIPTION	PAGE					
8	None marked						
<p style="text-align: right;">Page 2</p> <p>1 APPEARANCES: 2 3 PENNSYLVANIA INSTITUTIONAL LAW PROJECT 4 BY: SU MING YEH, ESQUIRE 5 MATTHEW ARCHAMBEAULT, ESQUIRE 6 718 Arch Street 7 Suite 304S 8 Philadelphia, Pennsylvania 19106 9 (215) 925-2966 10 smyeh@pailp.org 11 Representing the Plaintiff 12 13 14 15 16 THE MacMAIN LAW GROUP LLC 17 BY: MATTHEW J. CONNELL, ESQUIRE 18 TRICIA M. AMBROSE, ESQUIRE 19 101 Lindenwood Drive 20 Suite 160 21 Malvern, Pennsylvania 19355 22 (484) 318-7803 23 MConnell@macmainlaw.com 24 TAmbrose@macmainlaw.com Representing all Berks County defendants except Daniel Sharkey</p> <p>U.S. DEPARTMENT OF JUSTICE UNITED STATES ATTORNEY'S OFFICE BY: LANDON Y. JONES, ESQUIRE 615 Chestnut Street Suite 1250 Philadelphia, Pennsylvania 19106 (215) 861-8323 landon.jones@usdoj.gov Representing the Defendant, Jeremiah Petrey</p> <p>ALSO PRESENT: Liam Thomas, Intern Diane Edwards David Smith Jamie Himmelberger Brittany Rothermel</p>	<p style="text-align: right;">Page 4</p> <p>1 - - - 2 DEPOSITION SUPPORT INDEX 3 - - - 4 5 Direction to Witness Not to Answer 6 Page Line Page Line Page Line 7 None 8 9 10 Request for Production of Documents 11 Page Line Page Line Page Line 12 None 13 14 15 Stipulations 16 Page Line Page Line Page Line 17 5 2-6 18 19 20 Question Marked 21 Page Line Page Line Page Line 22 None 23 24</p>						



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1 - - -
 2 (It is hereby stipulated and agreed by
 3 and among counsel that sealing, filing and
 4 certification are waived; and that all
 5 objections, except as to the form of questions,
 6 be reserved until the time of trial.)
 7 - - -
 8 JOHN ROBERT BEHM, after having been
 9 duly sworn, was examined and testified as
 10 follows:
 11 - - -
 12 EXAMINATION
 13 - - -
 14 BY MS. YEH:
 15 Q. Good afternoon.
 16 A. Hello.
 17 Q. My name is Su Ming Yeh, and I
 18 represent the plaintiff in this case, E.D.
 , and I'll be taking your deposition
 20 today. Have you ever had your deposition taken
 21 before?
 22 A. No, ma'am.
 23 Q. So, I'm going to just go through a
 24 few ground rules so that we are all on the same

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1 page. In the deposition I'll be asking you
 2 questions and you will be responding. And
 3 everything we say will be taken down by the
 4 court reporter here. So, she cannot take down a
 5 shake of the head or a nod of the head. So, I'm
 6 going to ask that you make all your responses
 7 verbal.
 8 A. Yes, ma'am.
 9 Q. Also that you say yes, no or
 10 another verbal response as opposed to body
 11 language. Do you understand?
 12 A. Yes, ma'am.
 13 Q. And do you understand that you are
 14 under oath today?
 15 A. Yes, ma'am.
 16 Q. Do you understand that this means
 17 you are swearing that all your answers to my
 18 questions are true and correct?
 19 A. Yes, ma'am.
 20 Q. If at any point you need a break,
 21 feel free to let me know. I'll just ask you to
 22 first respond -- if I have asked you a question,
 23 to respond to that question and then we can take
 24 that break.

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1 A. Yes, ma'am.
 2 Q. If at any point you do not
 3 understand a question that I ask you, please let
 4 me know. Do you understand?
 5 A. Yes, ma'am.
 6 Q. And if at any point during this
 7 deposition you realize that an answer that you
 8 gave earlier is either incorrect or incomplete,
 9 please let me know.
 10 A. Yes, ma'am.
 11 Q. Is there any reason at all today
 12 why you would not be able to give full and
 13 complete testimony?
 14 A. No, ma'am.
 15 Q. Are you on any medications that
 16 would inhibit your ability to testify truthfully
 17 today?
 18 A. No, ma'am.
 19 Q. Okay. Can you please state your
 20 name for the record?
 21 A. John Behm.
 22 Q. And what is your date of birth?
 23 A. Redacted
 24 Q. And you don't have to tell me your

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1 exact address, but where do you live currently,
 2 the town and state?
 3 A. Hamburg, Pennsylvania.
 4 Q. Can you describe your educational
 5 background?
 6 A. I have a Bachelor's degree.
 7 Q. And when did you get that degree?
 8 A. 2001.
 9 Q. Okay. Have you ever served in the
 10 armed forces?
 11 A. No, ma'am.
 12 Q. Have you ever been sued or been a
 13 defendant in a lawsuit in your professional
 14 capacity?
 15 A. No, ma'am.
 16 Q. Do you have any criminal
 17 convictions?
 18 A. No, ma'am.
 19 Q. I'm going to ask you to give an
 20 overview of your employment history. So, what
 21 is your current occupation?
 22 A. I'm a CPA in the assessment office
 23 here in Berks County.
 24 Q. How long have you been working



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1 here?
 2 A. For the county or in the
 3 assessment office?
 4 Q. In the assessment office?
 5 A. Two years.
 6 Q. Okay. And you have responded for
 7 the county. How long have you worked for the
 8 county?
 9 A. August will be 13 years.
 10 Q. Okay.
 11 A. No. Hold on. Yeah, I think
 12 that's right.
 13 Q. Well, let's --
 14 A. Okay.
 15 Q. We'll go through it. Why don't we
 16 start from the point of when you got your
 17 Bachelor's degree and then move forward. Did
 18 you have any significant employment while you
 19 were receiving your degree?
 20 A. Significant employment?
 21 Q. Yes. You don't have to tell me
 22 about like if you were -- I understand some
 23 people work while they get their education. Any
 24 professional types of jobs?

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1 A. Not -- not really, ma'am.
 2 Q. Okay. What was your first job
 3 after you received your degree?
 4 A. I worked for Mid-Atlantic Energy
 5 and Data Concepts.
 6 Q. And what did you do with them?
 7 A. I was a data technician
 8 apprentice. I ran computer cables and fiber
 9 optics.
 10 Q. Okay. And how long did you do
 11 that for?
 12 A. A year or two.
 13 Q. Was this in, approximately, 2001?
 14 A. Approximately, yes, ma'am.
 15 Q. What did you do after that?
 16 A. I briefly sold windows, in-home
 17 demonstrations.
 18 Q. Okay. How long did you do that
 19 for?
 20 A. A few weeks to a few months.
 21 Q. Okay. What did you do after that?
 22 A. I briefly sold cars.
 23 Q. Okay. And how long did you do
 24 that for?

Page 11

1 A. A few months.
 2 Q. Okay. And what did you do after
 3 that?
 4 A. After that I came to the center.
 5 Q. The Berks County Residential
 6 Center?
 7 A. Yes, ma'am.
 8 Q. Do you remember the year that you
 9 started there?
 10 A. I want to say 2004. So, yes, it
 11 would be 13 years.
 12 Q. Okay. What was your position when
 13 you started there?
 14 A. When I started there I was a
 15 juvenile correctional counselor.
 16 Q. At that time were you working for
 17 the Berks County Residential Center or was it
 18 another facility? When you said started working
 19 there as a juvenile correctional counselor?
 20 A. Yes, ma'am. It was the Berks
 21 County -- Berks County Youth Center.
 22 Q. Okay. How long were you a
 23 juvenile corrections counselor?
 24 A. I worked the floor in detention at

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1 the Berks County Youth Center a year and a half
 2 to two years, but then I worked in the kitchen
 3 there and my title there was juvenile
 4 correctional counselor/kitchen. So, I would say
 5 a total of four years, maybe.
 6 Q. Okay. What did you do after that?
 7 A. I bid into the family residential
 8 shelter.
 9 Q. Was that in, approximately, 2008?
 10 A. Approximately, ma'am. I don't --
 11 I don't know exact.
 12 Q. Okay. I only did that, you said
 13 Berks County Residential Center 2004, roughly
 14 four years. I won't hold it against you if you
 15 are off a little bit.
 16 A. Okay.
 17 MR. CONNELL: Just for
 18 clarification, I think there may have been many
 19 names used for the Berks County Residential
 20 Center. Some people refer to it as the family
 21 residential shelter, some people refer to it as
 22 ICE. We can agree or we can clarify it at a
 23 later deposition that the BCRC is all of those
 24 entities that he referred to them.



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1 MS. YEH: Sure.
 2 MR. CONNELL: That's where he
 3 worked. I just want the record to be clear.
 4 MR. ARCHAMBEAULT: Starting 2008?
 5 MR. CONNELL: Correct.
 6 MR. ARCHAMBEAULT: It has a lot of
 7 different names.
 8 MR. CONNELL: Yeah, but I can
 9 assure you the Berks County Residential Center
 10 is the name of the facility.
 11 MS. YEH: I believe that's what
 12 we've been calling it, but --
 13 MR. CONNELL: Yeah. I just know
 14 that other people have used different
 15 terminology, even county employees or former
 16 county employees. I just want to make sure the
 17 record is clear we are all taking about the same
 18 center.
 19 MS. YEH: Okay.
 20 BY MS. YEH:
 21 Q. When you first started working at
 22 the Berks County Residential Center what was
 23 your job position?
 24 A. I was a -- I worked the floor. I

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1 was an SCC, shelter care counselor.
 2 Q. And in total how many years did
 3 you work at the Berks County Residential Center?
 4 MR. CONNELL: If it's easier for
 5 you to explain the back and forth.
 6 THE WITNESS: Okay. I worked at
 7 the family residential on the floor, then I
 8 worked in the kitchen.
 9 BY MS. YEH:
 10 Q. Okay.
 11 A. Then I left completely and came to
 12 the Office of Aging for about nine months. Then
 13 I went back to the residential center, bid back
 14 into the kitchen, and then from there I left and
 15 came to the assessment office two years ago.
 16 Q. Okay.
 17 MR. CONNELL: This is why he's
 18 struggling with --
 19 MS. YEH: Yes. I understand.
 20 That question was a little more complicated than
 21 usual.
 22 MR. CONNELL: That's the union
 23 employment. You can bid into different jobs at
 24 difference times. So --

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1 THE WITNESS: Yes.
 2 BY MS. YEH:
 3 Q. So, did you start in the
 4 assessment office in, approximately, 2015?
 5 A. That sounds correct, ma'am.
 6 Q. And so you started at the Berks
 7 County Residential Center in, approximately,
 8 2008. Do you recall when you left to the Office
 9 of Aging?
 10 A. Not off the top of my head, ma'am.
 11 I really don't. I'm trying to say going
 12 backwards 2012, maybe.
 13 Q. Okay. And then you said you were
 14 there for, approximately, nine months and then
 15 you came back. Do you remember when that was?
 16 Was it -- do you think it was 2012 or 2013,
 17 around there?
 18 A. Yes, ma'am.
 19 Q. And actually for our purposes it
 20 doesn't matter too much. I just want to get on
 21 the record a framework.
 22 A. Okay.
 23 Q. And certainly you were, therefore,
 24 employed at the Berks County Residential Center

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1 in 2014?
 2 A. Yes, ma'am.
 3 Q. Okay. At the time in 2014 were
 4 you working in the kitchen?
 5 A. I believe so.
 6 Q. Okay. When you -- after you came
 7 back from the Office of Aging did you work other
 8 positions?
 9 A. I worked the floor and then bid
 10 back into the kitchen.
 11 Q. So, when you first started did you
 12 work on the floor? Am I understanding that when
 13 you first came back to Berks County --
 14 A. Yes.
 15 Q. Okay. So, when you say you worked
 16 the floor, was that in the position as a shelter
 17 care counselor?
 18 A. Yes, ma'am.
 19 Q. And working in the kitchen, did
 20 that have a particular job title, do you know?
 21 A. SCC/kitchen.
 22 Q. Okay. Was that the job title or
 23 did that mean that you also had some
 24 responsibilities as an SCC as well as



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1 responsibilities as a kitchen worker?
 2 A. In general I was strictly a
 3 kitchen worker but had the same certifications
 4 as an SCC. That way there were residents --
 5 residents under my supervision from time to time
 6 for cleanup crews and things like that. So, I
 7 was an SCC, just mainly in the kitchen.
 8 Q. All right. So, I want to focus on
 9 whatever job duties you had in 2014, and I think
 10 you had just said that you believe at that time
 11 you were an SCC/kitchen worker at that time?
 12 A. Yes, ma'am.
 13 Q. Okay. Can you describe your job
 14 duties in that position?
 15 A. Feeding the residents, cooking the
 16 residents food, making sure the kitchen was
 17 clean and stocking.
 18 Q. Stocking the kitchen?
 19 A. Yes, ma'am. The kitchen and also
 20 kitchenettes for their snack.
 21 Q. When you say kitchenettes what is
 22 that referring to?
 23 A. In the dayrooms, I believe they
 24 were called, there was a refrigerator and a

Page 18

1 microwave.
 2 Q. Okay. So, you had said that as
 3 part of your duties you were to feed the
 4 residents, cooking, clean the kitchen and
 5 stocking the kitchen and the kitchenettes?
 6 A. Yes, ma'am.
 7 Q. Was there anything else?
 8 A. I can't think of anything else. I
 9 can't think of anything off the top of my head.
 10 Q. Okay. So, I'm just going to
 11 ask -- some of these I believe are
 12 self-explanatory, but I'm just going to ask you,
 13 you had noted cooking. Can you just explain
 14 what you mean by that?
 15 A. There was a set menu. At the
 16 beginning of my shift I would help serve lunch.
 17 Once lunch was cleaned up, whatever the set menu
 18 was, we would begin cooking the food, temping
 19 it, getting it set up in the steam tables so
 20 when the residents came in for dinner it was
 21 ready to be served.
 22 Q. Okay. In 2014 what were the hours
 23 that you worked?
 24 A. 12:00 to 8:00.

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1 Q. And were you considered to be a
 2 part of a particular shift, like first shift,
 3 second shift or third shift?
 4 A. I was second shift kitchen.
 5 Q. And what time were the meals
 6 served?
 7 A. I believe lunch was 12:00 to 1:00.
 8 Dinner I'm not exactly sure.
 9 Q. Okay. So, when your shift started
 10 at 12:00, was lunch being served at that time?
 11 A. Yes. That was usually one of my
 12 responsibilities is to help first shift serve
 13 lunch.
 14 Q. Can you describe the process of
 15 how you would serve lunch?
 16 A. Usually all the residents would
 17 come into the cafeteria and then a staff member
 18 or multiple staff members would call them up a
 19 table at a time. There were steam tables. A
 20 cafeteria setting. They would go by, say, yes,
 21 I want that, and then you would serve it to them
 22 and then they would move on and they will call
 23 up the next table.
 24 Q. So, where you served the lunch,

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1 was that in the same room as where the residents
 2 ate?
 3 A. Yes, ma'am.
 4 Q. And so from where you were -- from
 5 where you were standing, did you have a view of
 6 the room while you were there?
 7 A. In general, yes, but you were more
 8 focused on exactly who's in front of you.
 9 Q. Okay. And in terms of those who
 10 ate the lunch, who are the people who ate lunch?
 11 I mean, in terms of -- maybe I should make that
 12 more specific. Was the food made for the
 13 residents?
 14 A. The food was made for the
 15 residents with the intent that there would be
 16 some leftovers so staff could eat, as well.
 17 Q. And did the staff eat the food?
 18 A. Some did and some didn't.
 19 Q. Okay. Did you eat the food?
 20 A. Yes, ma'am.
 21 Q. And did some staff bring their own
 22 food?
 23 A. Yes, ma'am.
 24 Q. Was there any special food made



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1 for the staff?
 2 A. From time to time. In general,
 3 no. Sometimes there would be leftovers in the
 4 back and staff members would opt to have that
 5 rather than what was for the specific meal.
 6 Q. And would they be leftovers from a
 7 prior meal?
 8 A. Usually, yes, ma'am.
 9 Q. And you said from time to time.
 10 What do you mean by that? When would there be
 11 an occasion for a separate meal being made for a
 12 staff?
 13 A. Some kind of special occasion.
 14 Q. Okay. Like what?
 15 A. Christmas. It was a 24/7
 16 facility.
 17 Q. Sure.
 18 A. So, we did our best to treat the
 19 residents as best we could, but sometimes it was
 20 nice for staff to have a little -- a little
 21 something.
 22 Q. Okay. And, aside from Christmas,
 23 were there other occasions or special occasions
 24 where you might make something different for the

Page 22

1 staff?
 2 A. It's possible, ma'am, but I can't
 3 think of anything off the top of my head.
 4 Q. Okay. And, if you know, did the
 5 staff also eat the food in the same dining room
 6 where the residents ate?
 7 A. For the most part, yes, they would
 8 eat in the dining room. There was also an
 9 elevator lobby where a few staff would eat
 10 because, when the residents were finished
 11 eating, at the time they could go out into the
 12 elevator lobby and watch TV.
 13 Q. The residents could?
 14 A. Yes, ma'am.
 15 Q. And then some staff would also be
 16 there with them?
 17 A. Yes, ma'am.
 18 Q. And in terms of the seating of the
 19 staff, how were they situated through the room?
 20 A. Spaced out. Some would sit at
 21 resident tables. Usually there would be a staff
 22 in the back corner of the room because there
 23 were resident bathrooms back there. So, just --
 24 we tried to maintain equal spacing so that

Page 23

1 everyone could -- the entire room could be seen.
 2 Q. Okay. And did residents have
 3 assigned seats in the dining room?
 4 A. No, ma'am.
 5 Q. They were permitted to sit where
 6 they choose?
 7 A. Yes, ma'am.
 8 Q. What about staff, did they have
 9 assigned -- aside from having -- you mentioned
 10 earlier there would be someone in the back
 11 corner, I believe. Did the staff have specific
 12 areas where they were supposed to sit?
 13 A. No, ma'am.
 14 Q. So, they were also free to choose
 15 where they were going to sit?
 16 A. Yes.
 17 Q. Okay. Okay. So, when you arrived
 18 you stated, on your shift, you said that one of
 19 your first responsibilities was to help serve
 20 the lunch. What would you do after that?
 21 A. Clean up lunch.
 22 Q. Okay. And at that time did you
 23 also have residents assisting you?
 24 A. Usually.

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1 Q. Were there other staff that worked
 2 with you in the kitchen?
 3 A. You mean other kitchen staff?
 4 Q. Yes.
 5 A. Yes, ma'am.
 6 Q. And so staff who are not residents
 7 there?
 8 MR. CONNELL: Object to that
 9 question. Staff were not residents?
 10 MS. YEH: He had said that other
 11 staff were there but he also had said that some
 12 residents helped clean up. So, I just wanted to
 13 make that distinction.
 14 MR. CONNELL: I'm not sure we're
 15 making much of a distinction.
 16 MS. YEH: Okay.
 17 MR. CONNELL: Let's back up a
 18 little bit. He testified that some residents
 19 did assist in cleanup, and then you asked him if
 20 there were other staff in the kitchen area. He
 21 asked you other -- if there are others in the
 22 kitchen area. He asked you other staff and you
 23 said yes. Are we trying to --
 24 MS. YEH: Yes.



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1 MR. CONNELL: Out of the world of
 2 people that might be in the kitchen that there
 3 is kitchen staff, staff and resident helpers
 4 cleaning up? Is that what we're trying to get
 5 to?
 6 BY MS. YEH:
 7 Q. I want to see were there Berks
 8 County employees as well as residents who are in
 9 the kitchen?
 10 A. Yes, ma'am.
 11 Q. Okay. And typically how many
 12 other Berks County employees would be working in
 13 the kitchen with you at a time?
 14 A. At lunchtime there was usually an
 15 overlap of first and second shift. So, four.
 16 At dinner usually two.
 17 Q. And were these individuals -- was
 18 their primary responsibility to work in the
 19 kitchen?
 20 A. Yes, ma'am.
 21 Q. Were they also shelter care
 22 counselors who -- were they also shelter care
 23 counselors?
 24 A. Yes, ma'am.

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1 Q. Were they shelter care counselors
 2 who also as you had called it earlier worked the
 3 floor?
 4 A. Once --
 5 MR. CONNELL: I'm going to object
 6 to that question. I think that mischaracterizes
 7 his testimony or at least it's unclear. It's
 8 vague.
 9 MS. YEH: It might be, because I'm
 10 just trying to clarify and perhaps if there's
 11 another way to ask the question --
 12 MR. CONNELL: I guess because he
 13 had indicated that he worked the floor in the
 14 past of his employment.
 15 MS. YEH: Right.
 16 MR. CONNELL: But during his
 17 kitchen job I think he said the kitchen was what
 18 he did.
 19 BY MS. YEH:
 20 Q. So, I guess what I'm trying to ask
 21 is you had said that your title is SCC/kitchen.
 22 So, I realize my prior question may have been
 23 confusing because when I said were they shelter
 24 care counselors. What I mean is were they staff

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1 who were more like you in terms of their primary
 2 job was the kitchen, or were they shelter care
 3 counselors who worked the floor who also helped
 4 out in the kitchen?
 5 A. They were other SCC/kitchen
 6 workers like myself.
 7 Q. Okay. And were there any kitchen
 8 workers who were not SCCs?
 9 A. Other than the residents, no.
 10 Q. Okay.
 11 A. No.
 12 Q. And you had noted earlier that you
 13 would start -- strike that.
 14 After you cleaned up the -- after
 15 lunch, what would you do next typically in a
 16 day?
 17 A. It varied from day-to-day. It
 18 depended on what was for dinner and what had to
 19 be done. It could be prepping the salad bar, it
 20 could be the starting of browning meat. It
 21 could be -- it could be an easily prepared
 22 dinner so then we would fill up the
 23 kitchenettes. That way it was done and they
 24 were stocked.

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1 Q. And you had noted earlier about a
 2 menu. Did you have any role in setting the
 3 menu?
 4 A. No, ma'am.
 5 Q. Do you know who set the menu?
 6 A. I don't know exactly, no.
 7 Q. That's fine.
 8 Then as another responsibility you
 9 said that you had to stock the kitchen. How is
 10 that done?
 11 A. You looked around to see what you
 12 were running low on, and there was a storage
 13 area in the basement. I'm trying to remember
 14 what floor it was on, but off the loading dock
 15 there was a storage area and a storage room.
 16 Q. And, to retrieve those items, was
 17 that conducted by SCC kitchen workers?
 18 A. Yes, ma'am.
 19 Q. And were residents allowed to do
 20 that?
 21 A. No, ma'am.
 22 Q. So, running through the day, you
 23 had said you come in, help serve lunch, then you
 24 might start prepping the meal or possibly



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1 depending on what type of preparation was
 2 required you might also fill the kitchenette.
 3 After that would you start then serving the next
 4 meal?
 5 A. Yes, ma'am.
 6 Q. Okay. And would you assist in
 7 serving the dinner meal?
 8 A. Yes, ma'am.
 9 Q. When would you eat your meal?
 10 A. As soon as the residents and the
 11 staff were fed I would try to grab a plate, go
 12 sit in the elevator lobby before free -- any
 13 kind of free movement started so I could eat in
 14 peace for five or ten minutes and then right
 15 back in to start cleaning up.
 16 Q. Okay. And then describe the
 17 process of cleaning up.
 18 A. Any leftovers that are going to be
 19 saved are re-panned and tempted.
 20 Q. What do you mean by that?
 21 A. The temperature is taken.
 22 Q. Okay.
 23 A. They are labeled as to what it is
 24 and the date and put in the proper storage.

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1 Q. And are residents assisting you in
 2 this process?
 3 A. With that part, no, ma'am.
 4 Q. What about the cleanup process?
 5 A. Yes. They'll -- at the time,
 6 anyway, they would do the dishes, dry the
 7 dishes, put the dishes away, and then there were
 8 other residents who would sweep and mop the
 9 floors.
 10 Q. And, approximately, how long would
 11 that take?
 12 A. 45 minutes to an hour and a half
 13 depending on our population and how many people
 14 were helping.
 15 Q. Okay. And did you ever have
 16 individuals who are SCCs but not kitchen workers
 17 assist in the cleanup process?
 18 A. There would usually be a couple
 19 staff members in the actual dining room keeping
 20 an eye on the residents.
 21 Q. And so did they help in the actual
 22 cleaning or did they more or less supervise the
 23 residents who are there?
 24 A. It depended on the staff member.

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1 Q. After the cleanup process what
 2 would you do next, if anything?
 3 A. Check the kitchenettes again, make
 4 sure snack -- snack was out, and from time to
 5 time there would be some form of special snack
 6 that we would also take out.
 7 Q. And after that did you have any
 8 other duties?
 9 A. They always say in a kitchen if
 10 you have time to lean, you have time to clean.
 11 So --
 12 Q. So, you would clean until your
 13 shift finished?
 14 A. Yes, ma'am.
 15 Q. In 2014, if you remember, the
 16 residents that you interacted with, were they
 17 mostly Spanish speaking?
 18 A. Most of the population, ma'am,
 19 yes.
 20 Q. Okay. And did those individuals
 21 also speak English?
 22 A. Some did, some did not.
 23 Q. Okay. And how did you communicate
 24 with them?

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1 A. A lot of pointing, simple words
 2 and also very rarely was a cleanup crew all
 3 brand new residents who had never done it
 4 before. There was usually a couple residents
 5 who knew what they were doing who would guide
 6 the new ones. So, that actually helped a lot.
 7 Q. Do you speak Spanish?
 8 A. No, ma'am.
 9 Q. If you did need to communicate
 10 beyond the pointing, what would you do?
 11 MR. CONNELL: I'm going to object
 12 to the question. It lacks foundation. Maybe we
 13 can ask him if that happened.
 14 BY MS. YEH:
 15 Q. Did you ever have an occasion to
 16 need to communicate with a resident beyond what
 17 you described?
 18 A. From time to time.
 19 Q. Okay. And so if -- from those --
 20 at those times how would you communicate with
 21 them?
 22 A. Usually I'd find a bilingual
 23 resident and ask them to explain it to the
 24 resident that I was talking to.



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1 Q. Okay. Any other methods?
 2 A. There was a translator if -- we
 3 had access to language services but, in general,
 4 no.
 5 Q. Okay.
 6 A. It's pretty straightforward.
 7 Q. Right. It sounds like your job
 8 duties were fairly outlined.
 9 A. Work had to get done.
 10 Q. Okay. As part of your job
 11 responsibilities in terms of working in the
 12 kitchen, I want to focus that time period, did
 13 you also have to conduct any type of 15-minute
 14 sweeps at all?
 15 A. Not really.
 16 Q. Okay. Did you have to conduct any
 17 type of sweep or check in the kitchen?
 18 A. Not really. Once the residents
 19 weren't in the kitchen the door was locked and
 20 closed and it was only staff members, so --
 21 Q. Where did you spend most of your
 22 time when you were working at the Berks County
 23 Residential Center and specifically when you had
 24 the job position of SCC/kitchen?

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1 A. Most of my time was spent in the
 2 kitchen.
 3 Q. Okay. Did you ever have occasion
 4 to go out to the dayroom area?
 5 A. Yes, ma'am.
 6 Q. And when would that be?
 7 A. Usually when I was filling the
 8 kitchenette.
 9 Q. Okay. And did you also have
 10 occasion to walk down the hallways where the
 11 residents' rooms were?
 12 A. I'm sure from time to time.
 13 Q. Okay. From the time -- it sounds
 14 like it wasn't as frequent as the time that you
 15 spent in the kitchen?
 16 A. Correct.
 17 Q. Did the kitchen have video
 18 surveillance?
 19 A. Yes, ma'am.
 20 Q. And did you have access to that
 21 video surveillance?
 22 A. No, ma'am.
 23 Q. You were aware that it did have a
 24 video camera?

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1 A. Yes, ma'am. More than one.
 2 Q. Okay. I'm going to ask you about
 3 the training that you received. And did you
 4 receive training when you first started at the
 5 Berks County Residential Center?
 6 A. Yes, ma'am.
 7 Q. And we did receive through the
 8 discovery process a number of documents relating
 9 to that so, you know, you don't need to explain
 10 everything. I just want to get a sense from you
 11 what that training was about, if you recall.
 12 Did you -- okay. Let me back up. That's, I
 13 know, a lot.
 14 Do you recall receiving training
 15 about sexual harassment?
 16 A. Yes, ma'am.
 17 Q. And did you receive that training
 18 when you first started at the Berks County
 19 Residential Center?
 20 A. Yes, ma'am.
 21 Q. Did you get any ongoing training
 22 with respect to sexual abuse and harassment?
 23 A. Yes, ma'am.
 24 Q. And how often would you receive

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1 that, if you remember?
 2 A. I believe it was yearly.
 3 Q. Do you recall if you received any
 4 training with respect to the sexual abuse
 5 policy?
 6 A. Yes, ma'am.
 7 Q. I'm just going to ask you to --
 8 there's a pile of documents in front of you. If
 9 you could turn to number 23. It's called Berks
 10 County 23. It would be labeled on the bottom.
 11 MR. CONNELL: Take a moment to
 12 look through that. It's a few pages. You don't
 13 have to study the whole thing. She's probably
 14 going to ask you questions about specific things
 15 later, but familiarize yourself with the
 16 document, please.
 17 THE WITNESS: Okay.
 18 BY MS. YEH:
 19 Q. Do you recall this document at
 20 all?
 21 A. It looks familiar, yes, ma'am.
 22 Q. Okay. And while you were working
 23 there did you know who the SAAPI program
 24 coordinator was? SAAPI stands for sexual abuse



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1 and assault prevention/intervention.
 2 A. I don't understand. SAAP
 3 coordinator?
 4 Q. Right. Had you heard of that term
 5 before?
 6 A. I don't remember.
 7 Q. Okay. Do you remember
 8 receiving -- during the sexual abuse and
 9 harassment training do you remember receiving
 10 training about recognizing situations where
 11 sexual abuse or assault may occur?
 12 A. Yes, ma'am.
 13 Q. Do you remember receiving any
 14 trainings about any signs of sexual abuse or
 15 assault?
 16 A. Yes, ma'am.
 17 Q. And do you remember receiving any
 18 training about how to report sexual abuse or
 19 sexual assault?
 20 A. Yes, ma'am.
 21 Q. And what were you trained to do if
 22 you -- well, first of all, were you -- did you
 23 have an obligation to report sexual abuse or
 24 assault if you became aware of it?

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1 A. Yes, ma'am.
 2 Q. And how would you report that?
 3 A. I probably would have gone to my
 4 immediate supervisor first.
 5 Q. Who was your immediate supervisor?
 6 A. Because I was considered second
 7 shift, it probably would have been Jason Mills
 8 or Len -- Len. I don't remember his last name.
 9 Q. And do you recall how you were
 10 supposed to make that report?
 11 A. Off the top of my head, no, ma'am.
 12 Q. Okay. Do you also recall
 13 receiving any training about the code of ethics?
 14 A. Yes, ma'am.
 15 Q. And do you recall any training
 16 about either fraternization or whether
 17 favoritism was permitted by staff to residents?
 18 A. Yes, ma'am.
 19 Q. Okay. And was a show of
 20 favoritism permitted?
 21 A. No, ma'am.
 22 Q. And I'm just going to cite some
 23 examples. Would giving gifts to a resident be
 24 permitted by a staff member?

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1 A. No, ma'am.
 2 Q. And what about sharing personal
 3 information between staff member and residents?
 4 A. No, ma'am.
 5 Q. You had indicated earlier that
 6 some staff members would eat the food but then
 7 some staff members did not?
 8 A. Yes, ma'am.
 9 Q. For those who did not, did they
 10 bring in food from the outside into the facility
 11 to eat?
 12 A. Some did.
 13 Q. Was that permitted?
 14 A. Yes, ma'am.
 15 Q. Would it be permitted for that
 16 staff member to give outside food to a resident?
 17 A. I don't believe so, ma'am.
 18 Q. Okay. Did you ever observe any
 19 staff members giving food to a resident, outside
 20 food to a resident?
 21 A. No, ma'am.
 22 Q. You also noted that on occasion
 23 there would be times when something special
 24 would be prepared for the staff food-wise. Was

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1 a staff member permitted to share that food with
 2 a resident?
 3 A. No, ma'am.
 4 Q. And did you ever observe any staff
 5 members giving that specially prepared food to a
 6 resident?
 7 A. No, ma'am.
 8 Q. I'm just going to run through a
 9 couple job duties. I believe I might know the
 10 answer to this, but I just want to double-check.
 11 Some other staff members had testified as part
 12 of their job duties as shelter care counselors
 13 that they would also accompany or supervise
 14 residents on field trips. Did you ever have
 15 that as part of your job responsibilities as a
 16 shelter care counselor/kitchen worker?
 17 A. No, ma'am.
 18 Q. Did you -- when you were a shelter
 19 care counselor who as you called it worked on
 20 the floor did you ever supervise individuals on
 21 field trips?
 22 A. I believe so. Yes, ma'am.
 23 Q. And earlier I had asked you
 24 whether or not you participated in the 15-minute



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1 sweeps in your role as a shelter care counselor
 2 for the kitchen and you had, I believe,
 3 responded no. When you were a shelter care
 4 counselor did you perform that job duty?
 5 A. Yes, ma'am.
 6 Q. Do you remember a resident named
 7 E.D. ?
 8 A. At this point in time, yes.
 9 Q. And why do you say at this point
 10 in time?
 11 A. Because so many residents came and
 12 went in the years that I worked there
 13 remembering a particular resident was few and
 14 far between.
 15 Q. Okay. Well, what do you remember?
 16 A. Not much, ma'am.
 17 Q. Okay. Do you recall interacting
 18 with her at all?
 19 A. I don't recall, ma'am.
 20 Q. Okay. Do you remember an
 21 individual named Daniel Sharkey?
 22 A. Yes, ma'am.
 23 Q. And did you work with Daniel
 24 Sharkey?

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1 A. We had overlapping shifts.
 2 Q. Did you interact with Mr. Sharkey
 3 at the Berks County Residential Center?
 4 A. Professionally.
 5 Q. Did you ever work with him at the
 6 Berks County Youth Center?
 7 A. Our times overlapped, I believe,
 8 but I believe I was in the kitchen at the time.
 9 I don't know if we ever worked the floor
 10 together. I do not remember.
 11 Q. At the Berks County Residential
 12 Center did you ever work the floor together?
 13 A. No, ma'am. I was in the kitchen
 14 by the time he came back.
 15 Q. Okay. When you say when he came
 16 back, what do you mean by that?
 17 A. He didn't work there for almost a
 18 year.
 19 Q. At the Berks County Residential
 20 Center?
 21 A. Yes, ma'am.
 22 Q. So, was that a break in his
 23 employment at the Berks County Residential
 24 Center? Do you mean that?

Page 43

1 A. No. He worked in juvenile
 2 detention at the youth center.
 3 Q. And then there was a break between
 4 those two positions?
 5 A. Yes, ma'am.
 6 Q. Okay.
 7 A. Sorry.
 8 Q. Okay. So, by the time he came
 9 back or was starting at the Berks County
 10 Residential Center you were already working in
 11 the kitchen?
 12 A. Yes, ma'am.
 13 Q. And what was your work
 14 relationship like with him, if any?
 15 A. Professional. Minimal.
 16 Q. Okay.
 17 A. Only required by the job.
 18 Q. Okay. And was that common -- a
 19 common occurrence with you and the other staff
 20 there?
 21 A. I wouldn't say common. You go to
 22 work, you do your job, try to be friendly.
 23 Q. And you had said that your contact
 24 with Daniel Sharkey was minimal, is that what

Page 44

1 you said?
 2 A. Yes, ma'am.
 3 Q. Okay. So, what I mean is
 4 similarly with other staff there, did you have
 5 minimal contact with them, as well?
 6 A. Not as minimal.
 7 Q. Okay. Was there a particular
 8 reason why it was more minimal -- well, I don't
 9 want to misstate. Was it more minimal with
 10 Daniel Sharkey compared to other staff?
 11 A. Yes, ma'am.
 12 Q. And why was that?
 13 A. I didn't like him.
 14 Q. Did you -- can you explain that?
 15 Why didn't you like him?
 16 A. He could joke around what he
 17 thought was funny and others may not think so.
 18 So, I choose not to interact with him other than
 19 what was required working.
 20 Q. Okay.
 21 A. I'm trying to use really nice
 22 words here.
 23 Q. You are being very diplomatic.
 24 You said he was joking around and I believe you



Page 45

1 said some people did not like it, and forgive me
 2 if I'm misstating that. What was your opinion
 3 of the joking around?
 4 A. He made some jokes and comments to
 5 me that I did not appreciate.
 6 Q. And what were those jokes and
 7 comments?
 8 MR. CONNELL: Were they related to
 9 the residents or were they related to E.D.
 10 ?
 11 THE WITNESS: No.
 12 MR. CONNELL: I'm going to object
 13 to any questions in general broad categories of
 14 joking unless we can tie it in somehow to this
 15 litigation.
 16 BY MS. YEH:
 17 Q. Did you perceive any of those
 18 jokes to be sexist in nature?
 19 A. No.
 20 MS. YEH: Which I do believe would
 21 be relevant.
 22 BY MS. YEH:
 23 Q. Did you perceive any of these
 24 jokes to be anti-immigrant in nature?

Page 46

1 A. No.
 2 Q. And did you perceive any of these
 3 jokes to be racist in nature?
 4 A. No.
 5 Q. But they were jokes that you
 6 didn't care for for other reasons?
 7 A. Yes, ma'am.
 8 Q. And was there any other reason why
 9 you didn't like him?
 10 A. Some people in this world we just
 11 don't get along with.
 12 Q. Fair enough.
 13 Did you ever observe him giving
 14 more attention to certain residents than other
 15 residents?
 16 A. No, ma'am.
 17 Q. Did you ever see him sitting
 18 frequently with E.D. ?
 19 A. No, ma'am.
 20 Q. Did you see him sitting frequently
 21 with any other -- with E.D. son?
 22 A. No. I don't think so. No, ma'am.
 23 I spent a lot of time in the kitchen.
 24 Q. Okay.

Page 47

1 A. Usually I was just passing through
 2 around.
 3 Q. And specifically in the dining
 4 room did you ever observe Daniel Sharkey paying
 5 more attention to certain residents?
 6 A. I did not notice anything, no,
 7 ma'am.
 8 Q. Okay. Did you ever see Daniel
 9 Sharkey give outside food to any residents?
 10 A. Not that I saw, no, ma'am.
 11 Q. Aside from this case had you heard
 12 of any other complaints of improper sexual
 13 behavior or sexual abuse at Berks County
 14 Residential Center?
 15 A. No, ma'am.
 16 Q. Did you hear any other complaints
 17 of inappropriate relationships between staff and
 18 residents at the Berks County Residential
 19 Center?
 20 A. No, ma'am.
 21 Q. Did you ever socialize with Daniel
 22 Sharkey outside of the work arena?
 23 A. No, ma'am.
 24 Q. And did you -- while you were

Page 48

1 employed at the Berks County Residential Center
 2 did you hear any allegations that there was an
 3 inappropriate relationship between Daniel
 4 Sharkey and E.D. ?
 5 A. Could you repeat the question,
 6 please?
 7 MS. YEH: Actually, could you
 8 repeat that.
 9 - - -
 10 (The court reporter read the
 11 pertinent part of the record.)
 12 - - -
 13 THE WITNESS: I had heard rumors
 14 after he was no longer employed there.
 15 BY MS. YEH:
 16 Q. Okay. And you said rumors?
 17 A. (Witness nods).
 18 Q. Did you hear anything directly --
 19 anything directly from any supervisors or other
 20 staff about any of those complaints?
 21 A. No, ma'am.
 22 Q. And do you recall how you heard
 23 about it?
 24 A. I think somebody brought in an



Page 49

1 article that was an online article from a
 2 different state, I think.
 3 Q. Okay. And I understand that you
 4 had earlier testified that you didn't remember
 5 that much about E.D. , but after you -- after
 6 Daniel Sharkey no longer worked there did you
 7 observe any differences in E.D. behavior at
 8 all?
 9 MR. CONNELL: I'm going to object
 10 to the form of the question as lacking
 11 foundation, calls for speculation.
 12 MS. YEH: Yes. Let me --
 13 MR. CONNELL: Only because I think
 14 he said he doesn't recall her, but I could be
 15 wrong, but I just want the objection to be
 16 there.
 17 BY MS. YEH:
 18 Q. I think you said you did remember
 19 her now, do you?
 20 A. Definitely her name.
 21 Q. Do you remember what she looked
 22 like at all?
 23 A. Not really. I -- not really,
 24 ma'am.

Page 50

1 Q. Okay.
 2 A. I'm sorry.
 3 Q. No. That's fine.
 4 MR. CONNELL: I think he said he
 5 only remembers her as a result of this incident
 6 after the incident, which means he couldn't
 7 compare change in behavior from before the
 8 incident. That's the base of my objection.
 9 Feel free to ask it.
 10 BY MS. YEH:
 11 Q. Do you remember her because of the
 12 lawsuit or do you remember her because of those
 13 particular rumors that were going around?
 14 A. I'd say maybe a little of both.
 15 Q. Okay. Well, if you -- to the
 16 extent that you have any memory, did you see any
 17 changes in her behavior at all?
 18 MR. CONNELL: Same objection. You
 19 can answer.
 20 BY MS. YEH:
 21 Q. You can answer.
 22 A. I --
 23 Q. It's okay if your answer is --
 24 A. I don't know.

Page 51

1 Q. Okay. That's fine.
 2 After Daniel Sharkey was no longer
 3 working there there was some reports about a
 4 Facebook post that he posted. Did you ever see
 5 that Facebook post?
 6 A. No, ma'am. I do not have a
 7 Facebook.
 8 Q. Okay. And did you ever see it
 9 from any other staff member showing you?
 10 A. No, ma'am.
 11 Q. After the incidents relating --
 12 between Daniel Sharkey and E.D. came to light,
 13 did you observe any changes in policies and
 14 practices at the Berks County Residential
 15 Center?
 16 A. No, ma'am.
 17 Q. Did you make any changes at all in
 18 terms of your job duties as a shelter --
 19 SCC/kitchen worker?
 20 A. Not to the best of my knowledge,
 21 ma'am.
 22 MS. YEH: I may be done, but let
 23 me just check in. Give me one minute.
 24 THE WITNESS: Yes, ma'am.

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1 - - -
 2 (Whereupon, there was an
 3 off-the-record discussion.)
 4 - - -
 5 MS. YEH: I don't have any more
 6 questions for you.
 7 MR. JONES: Nothing for me.
 8 MR. CONNELL: I have very, very
 9 briefly, if I may.
 10 - - -
 11 EXAMINATION
 12 - - -
 13 BY MR. CONNELL:
 14 Q. Did you ever see Dan Sharkey hug,
 15 kiss or engage in any sort of sexual activity
 16 with any resident at the Berks County
 17 Residential Center?
 18 A. No.
 19 Q. You indicated that you would
 20 occasionally enter the floor area to stock
 21 kitchenettes. How often would that be; weekly,
 22 monthly, daily?
 23 A. Daily.
 24 Q. And how long of a period of time



Page 53

1 would that cause you to be outside the kitchen?
 2 A. Five to 15 to 20 minutes. It
 3 depended.
 4 MR. CONNELL: All right. That's
 5 all I have.
 6 MS. YEH: I also have no more
 7 questions.
 8 (Witness excused.)
 9 - - -
 10 (Deposition concluded at
 11 approximately 3:03 p.m.)
 12 - - -
 13
 14
 15
 16
 17
 18
 19
 20
 21
 22
 23
 24

Page 55

DEPOSITION ERRATA SHEET

1
 2
 3
 4 Our Assignment No. J0611373
 5 Case Caption: E.D.
 6 vs. Daniel Sharkey, et al.
 7
 8 DECLARATION UNDER PENALTY OF PERJURY
 9 I declare under penalty of perjury
 10 that I have read the entire transcript of my
 11 Deposition taken in the captioned matter or the
 12 same has been read to me, and the same is true
 13 and accurate, save and except for changes and/or
 14 corrections, if any, as indicated by me on the
 15 DEPOSITION ERRATA SHEET hereof, with the
 16 understanding that I offer these changes as if
 17 still under oath.
 18 Signed on the ____ day of
 19 _____, 20____.
 20
 21 _____
 22 JOHN ROBERT BEHM
 23
 24

Page 54

1
 2 C E R T I F I C A T E
 3
 4
 5 I HEREBY CERTIFY that the witness
 6 was duly sworn by me and that the
 7 deposition is a true record of the
 8 testimony given by the witness.
 9
 10 *Sherry L. Stills*
 11
 12 Sherry L. Stills,
 13 Court Reporter
 14 Notary Public
 15 Dated: 7/19/2017
 16
 17 (The foregoing certification
 18 of this transcript does not apply to
 19 any reproduction of the same by any
 20 means, unless under the direct
 21 control and/or supervision of the
 22 certifying reporter.)
 23
 24

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DEPOSITION ERRATA SHEET

1
 2 Page No. ____ Line No. ____ Change
 3 to: _____
 4 Reason for change: _____
 5 Page No. ____ Line No. ____ Change
 6 to: _____
 7 Reason for change: _____
 8 Page No. ____ Line No. ____ Change
 9 to: _____
 10 Reason for change: _____
 11 Page No. ____ Line No. ____ Change
 12 to: _____
 13 Reason for change: _____
 14 Page No. ____ Line No. ____ Change
 15 to: _____
 16 Reason for change: _____
 17 Page No. ____ Line No. ____ Change
 18 to: _____
 19 Reason for change: _____
 20 Page No. ____ Line No. ____ Change
 21 to: _____
 22 Reason for change: _____
 23 SIGNATURE: _____ DATE: _____
 24 JOHN ROBERT BEHM



<p>1 DEPOSITION ERRATA SHEET</p> <p>2 Page No. ____ Line No. ____ Change</p> <p>3 to: _____</p> <p>4 Reason for change: _____</p> <p>5 Page No. ____ Line No. ____ Change</p> <p>6 to: _____</p> <p>7 Reason for change: _____</p> <p>8 Page No. ____ Line No. ____ Change</p> <p>9 to: _____</p> <p>10 Reason for change: _____</p> <p>11 Page No. ____ Line No. ____ Change</p> <p>12 to: _____</p> <p>13 Reason for change: _____</p> <p>14 Page No. ____ Line No. ____ Change</p> <p>15 to: _____</p> <p>16 Reason for change: _____</p> <p>17 Page No. ____ Line No. ____ Change</p> <p>18 to: _____</p> <p>19 Reason for change: _____</p> <p>20 Page No. ____ Line No. ____ Change</p> <p>21 to: _____</p> <p>22 Reason for change: _____</p> <p>23 SIGNATURE: _____ DATE: _____</p> <p>24 JOHN ROBERT BEHM</p>	<p>Page 57</p>



A616

EXHIBIT 12

BRANDON MICHAEL WITMER
E.D. vs DANIEL SHARKEY

July 21, 2017
1-4

Page 1

1 UNITED STATES DISTRICT COURT
2 FOR THE EASTERN DISTRICT OF PENNSYLVANIA
3 - - -
4 E.D. :
5 :
6 :
7 DANIEL SHARKEY, et al. : NO. 16 CIV. 2750
8 - - -
9 July 21, 2017
10 - - -
11 Oral deposition of BRANDON MICHAEL
12 WITMER, taken pursuant to notice, was held at
13 the Berks County Government Offices, 633 Court
14 Street, 14th Floor, Reading, Pennsylvania,
15 commencing at 10:06 a.m., on the above date,
16 before Sherry L. Stills, Court Reporter and
17 Notary Public for the Commonwealth of
18 Pennsylvania.
19 - - -
20
21
22 ESQUIRE DEPOSITION SOLUTIONS
23 1835 Market Street
24 Suite 2600
Philadelphia, Pennsylvania 19103
(215) 988-9191

Page 3

1 - - -
2 I N D E X
3 - - -
4 Testimony of: BRANDON MICHAEL WITMER
5 BY MS. YEH 5, 140
6 BY MR. JONES 127
7 BY MR. CONNELL 132
8 - - -
9 E X H I B I T S
10 - - -
11
12 NO. DESCRIPTION PAGE
13 Berks County 78 Document Bates
14 stamped Berks
15 02776-78 17
16 Berks County 79 Documents Bates
17 stamped Berks
18 02551 - 53 94
19 Berks County 80 Documents Bates
20 stamped Berks
21 025566- 68 104
22 Berks County 81 Documents Bates
23 stamped Berks
24 02590 - 92 108
Berks County 82 Documents Bates
stamped Berks
02555 - 57 110

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1 APPEARANCES:
2
3 PENNSYLVANIA INSTITUTIONAL LAW PROJECT
4 BY: SU MING YEH, ESQUIRE
5 718 Arch Street
6 Suite 304S
7 Philadelphia, Pennsylvania 19106
8 (215) 925-2966
9 smyeh@pailp.org
10 Representing the Plaintiff
11
12 THE MacMAIN LAW GROUP LLC
13 BY: MATTHEW J. CONNELL, ESQUIRE
14 101 Lindenwood Drive
15 Suite 160
16 Malvern, Pennsylvania 19355
17 (484) 318-7803
18 MConnell@macmainlaw.com
19 TAmbrose@macmainlaw.com
20 Representing all Berks County defendants
21 except Daniel Sharkey
22
23 U.S. DEPARTMENT OF JUSTICE
24 UNITED STATES ATTORNEY'S OFFICE
BY: LONDON Y. JONES, ESQUIRE
615 Chestnut Street
Suite 1250
Philadelphia, Pennsylvania 19106
(215) 861-8323
london.jones@usdoj.gov
Representing the Defendant,
Jeremiah Petrey
ALSO PRESENT:
Liam Thomas, Intern
David Smith

Page 4

1 - - -
2 DEPOSITION SUPPORT INDEX
3 - - -
4 Direction to Witness Not to Answer
5 Page Line Page Line Page Line
6 None
7
8 Request for Production of Documents
9 Page Line Page Line Page Line
10 None
11
12 Stipulations
13 Page Line Page Line Page Line
14 5 2-6
15
16
17
18 Question Marked
19 Page Line Page Line Page Line
20 None
21
22
23
24



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Page 5

1 - - -

2 (It is hereby stipulated and agreed by

3 and among counsel that sealing, filing and

4 certification are waived; and that all

5 objections, except as to the form of questions,

6 be reserved until the time of trial.)

7 - - -

8 BRANDON MICHAEL WITMER, after having

9 been duly sworn, was examined and testified as

10 follows:

11 - - -

12 EXAMINATION

13 - - -

14 BY MS. YEH:

15 Q. Good morning.

16 A. Morning.

17 Q. My name is Su Ming Yeh and I

18 represent the plaintiff in this case, E.D.

 , and I'll be taking your deposition

20 today.

21 A. Okay.

22 Q. Have you ever been deposed before?

23 A. No.

24 Q. So, I'm just going to go through a

Page 6

1 few ground rules so we are all on the same page.

2 In this deposition I'll be asking you questions

3 and then you will respond, and everything that

4 we say will be taken down by the court reporter.

5 So, I'm going to ask that you make all your

6 answers verbally because she can't type down a

7 shake of the head or a nod of the head.

8 A. Okay.

9 Q. And do you understand that you are

10 under oath?

11 A. Yes.

12 Q. And do you understand that this

13 means that you are swearing that all your

14 answers to my questions are true and correct?

15 A. Yes.

16 Q. And if at any point you need a

17 break please feel free to let me know. My only

18 request is that, if I have a question that I

19 have asked, to answer that question and then we

20 can take that break.

21 A. Okay.

22 Q. If at any point you do not

23 understand a question that I have asked you,

24 please let me know.

Page 7

1 A. Okay.

2 Q. And if at any time during this

3 deposition you realize that an answer that you

4 gave earlier is either incorrect or not complete

5 can you please let me know?

6 A. Yes.

7 Q. Is there any reason at all today

8 why you would not be able to give full and

9 complete testimony?

10 A. No.

11 Q. Are you on any medications at all

12 that might prevent you from testifying fully

13 today?

14 A. No.

15 Q. Okay. So, we have asked to depose

16 you today. You are not a defendant in this

17 lawsuit, but it may be that you have some

18 information that would be relevant to the

19 lawsuit.

20 A. Okay.

21 Q. So, I'm just going to start with

22 some introductory questions. Can you please

23 spell your name for the record?

24 A. Brandon, B-R-A-N-D-O-N, Witmer,

Page 8

1 W-I-T-M-E-R.

2 Q. And what is your date of birth?

3 A. [Redacted].

4 Q. And you can -- I'm going to ask

5 you where you live, but don't give me the exact

6 address. Just the town and the state is fine.

7 A. Pine Grove, Pennsylvania.

8 Q. And can you describe your

9 educational background?

10 A. I have a Bachelor's degree in

11 criminal justice from Penn State.

12 Q. And do you have any other

13 certifications or degrees?

14 A. No.

15 Q. Okay. And have you ever served in

16 the armed forces?

17 A. No.

18 Q. Have you ever been sued or been a

19 defendant in a lawsuit in your professional

20 capacity?

21 A. No.

22 Q. And do you have any criminal

23 convictions?

24 A. No.



Page 9

1 Q. Can you tell me what your current
 2 job or vocation is?
 3 A. I am a supervisor at the Berks
 4 County Residential Center.
 5 Q. And so what I'm going to do is I'm
 6 going to ask you for just a brief overview of
 7 your employment background. So, when did you
 8 first get your Bachelor's?
 9 A. I got my Bachelor's in 2001.
 10 Q. Okay. So, after that, when did
 11 you -- what was the job you had?
 12 A. I was hired with the county as a
 13 juvenile correctional counselor in August of
 14 2001.
 15 Q. Okay. And how long were you in
 16 that position for?
 17 A. I became a supervisor in 2004. In
 18 between 2001 and 2004 I did have another role in
 19 the building. I don't remember when it was,
 20 though.
 21 Q. Okay. That's fine.
 22 A. It was a control room operator,
 23 but --
 24 Q. All right. And when you were a

Page 10

1 juvenile correction counselor, what facility
 2 were you at?
 3 A. The Berks County Youth Center.
 4 Q. And how long were you a
 5 supervisor? You said you were a supervisor in
 6 2004. How long did you have that position?
 7 A. Till present.
 8 Q. Okay. Did you at some point
 9 transition from the youth center to the Berks
 10 County Residential Center?
 11 A. Yes.
 12 Q. Okay. And when was that?
 13 A. That was 2007.
 14 Q. Okay. It sounds like your title
 15 was the same?
 16 A. Yes.
 17 Q. But you just moved to a
 18 different --
 19 A. Department.
 20 Q. -- department. Okay.
 21 And, just generally, your title
 22 was the same. Were your responsibilities mostly
 23 the same --
 24 A. Yes.

Page 11

1 Q. -- from one to the other?
 2 So, what I'm going to do is I'm
 3 going to ask you about your job duties as a
 4 supervisor at the Berks County Residential
 5 Center. So, can you please describe your job
 6 duties as a supervisor there.
 7 A. Oversee the line staff, make sure
 8 that the day-to-day functions are completed, all
 9 assignments are completed. In charge of
 10 training for my shift. That's about it.
 11 Q. Okay. All right. So, when you
 12 say oversee the line staff and the day-to-day --
 13 make sure the day-to-day tasks are completed,
 14 how do you do that?
 15 A. Daily chore assignment schedules,
 16 direct supervision, interacting with the staff,
 17 residents, making sure everything is running
 18 smoothly.
 19 Q. Okay. We had seen -- actually,
 20 I'll just -- Berks County 19. So, it's in here.
 21 So, each one is labeled. Let's see. Okay.
 22 This one. You had mentioned assignments of
 23 schedules. We had -- I'm putting in front of
 24 you what was marked as Berks County 19 --

Page 12

1 A. Okay.
 2 Q. -- and we understand from previous
 3 testimony that it is a shift schedule. Do you
 4 have any role in assigning people to the
 5 different posts?
 6 A. Yes.
 7 Q. Okay. And does anyone else also
 8 have that responsibility or is it --
 9 A. We each have the responsibility
 10 for our own shift. So --
 11 Q. Okay.
 12 A. -- whatever shift we're on.
 13 Q. Okay. And how do you determine
 14 what post to put people in?
 15 A. Even rotation.
 16 Q. So, when you say even rotation, do
 17 you mean you try to balance it out, everyone has
 18 give or take a rotation of all the posts?
 19 A. Yes.
 20 Q. Okay. Do you take anything else
 21 into consideration in assigning people?
 22 MR. CONNELL: Object to the
 23 question as overbroad. You can answer.
 24 THE WITNESS: No. I mean, the



Page 13

1 logbook post is the most difficult one, so
 2 that's the one we want to make sure we rotate
 3 out and get everyone equally. Other ones not as
 4 difficult as that one. There is a lot of
 5 documenting for that one, but, no.
 6 Q. Okay. Now, in terms of -- you
 7 said daily -- I apologize. I can't even read my
 8 own writing. You said you do the daily
 9 assignment schedules, also direct supervision.
 10 And what do you mean by that?
 11 A. Direct supervision, just watching,
 12 observing, making sure everything is done right.
 13 Q. Okay. And then you said
 14 interacting with the staff and the residents.
 15 A. (Witness nods).
 16 Q. And how often do you interact with
 17 the staff?
 18 A. Like daily or --
 19 Q. Right.
 20 A. -- hourly or --
 21 Q. Sure. However.
 22 A. As often as needed. I couldn't
 23 put a time frame on it.
 24 Q. Okay. We had heard some testimony

Page 14

1 earlier about briefings that occur. Is that
 2 something that you are responsible for?
 3 A. Yes.
 4 Q. Okay. Can you just describe when
 5 they occur, where they occur?
 6 A. Briefings start at the -- at the
 7 beginning of the shift. The on-coming shift
 8 will brief with the previous shift's logbook
 9 person. They will go over all of the events
 10 that happened, anything pertinent for the day,
 11 anything that they need to be aware of, any
 12 upcoming events or anything that's happening for
 13 the day to make sure everyone is all on the same
 14 page.
 15 Q. When you say pertinent for the
 16 day, what would be some examples?
 17 A. Like if there was a trip or a
 18 transport and we had to set up and pull people
 19 to send them on that, we will get all that
 20 coordinated at the beginning of the shift so the
 21 rest of the shift can run smooth.
 22 Q. Okay. And what -- what shift do
 23 you currently supervise?
 24 A. First shift.

Page 15

1 Q. And back in -- actually, let me
 2 clarify. What time does -- what's the time
 3 frame for first shift?
 4 A. We are 6:15 a.m. and we end at
 5 2:30 p.m.
 6 Q. Okay. So, in your case when do
 7 you have the briefings?
 8 A. At 6:15 a.m.
 9 Q. Okay. And do you recall in 2014
 10 if you were also first shift?
 11 A. Yes.
 12 Q. And the shift times were the same
 13 back in 2014?
 14 A. Yes.
 15 Q. Okay. And how long do the
 16 briefings typically take?
 17 A. Depends how much information has
 18 to be related. Sometimes a couple minutes,
 19 sometimes they could last up to ten, maybe.
 20 Q. Okay. So, relatively short?
 21 A. Yes.
 22 Q. Okay. Are all staff required to
 23 go to the briefings?
 24 A. Yes. Any that are at that time

Page 16

1 there.
 2 Q. And does anything else take place
 3 in the briefings?
 4 MR. CONNELL: Object to the
 5 question as overbroad. You can answer.
 6 THE WITNESS: I don't think so.
 7 BY MS. YEH:
 8 Q. Okay. That's fine if there's
 9 nothing. Just want to double-check.
 10 We had heard some testimony
 11 earlier that in the beginning of the shift the
 12 counselors also pick up a set of keys. Are you
 13 responsible for distributing those?
 14 A. No. That's all on the line staff.
 15 They are required to do that.
 16 Q. So, they do it themselves?
 17 A. Uh-huh.
 18 Q. Okay. Okay. And do you have any
 19 role in putting together the sets of keys at
 20 all?
 21 A. No.
 22 Q. Okay. So, what I'd like to do is
 23 just show you what was produced in discovery.
 24 It's a job description.



Page 17

1 - - -
 2 (Whereupon, the document was marked
 3 as Berks County 78 for identification.)
 4 - - -
 5 MR. CONNELL: Take a moment. Take
 6 a look at it.
 7 BY MS. YEH:
 8 Q. Have you ever seen this document
 9 before?
 10 A. Yes.
 11 Q. Okay. So, I'm just going to --
 12 for the record, it says on the top County of
 13 Berks position description form; position title:
 14 Residential center supervisor.
 15 So, when have you seen this
 16 document, if you remember?
 17 A. I don't remember. It's been so
 18 long.
 19 Q. Do you think you would have seen
 20 it at some point during your employment?
 21 A. Yes.
 22 Q. Okay. So, I just wanted to go
 23 through some of these responsibilities and
 24 confirm whether or not you consider these a part

Page 18

1 of your job duties. Okay. So, it says
 2 essential functions. The first one, supervises
 3 daily work assignments of the employees and
 4 resident activities - staff and resident daily
 5 chores.
 6 That sounds like it matches what
 7 you had described earlier.
 8 A. Uh-huh.
 9 Q. Is that correct?
 10 A. Uh-huh. Yes.
 11 Q. The next one says, performs
 12 employee performance appraisals and disciplinary
 13 actions.
 14 Is that one of your job duties?
 15 A. Yes.
 16 Q. Can you describe how you do the
 17 performance appraisals? What your role is in
 18 that?
 19 A. We take a look at the previous
 20 year for each employee, any disciplines they may
 21 or may not have had, their attendance record,
 22 overall work ethic. I'm trying to think of the
 23 different categories that are on it.
 24 Dependability, things like that, and how we

Page 19

1 would rate them.
 2 Q. Okay. So, you have a role or a
 3 voice in appraising employees during their
 4 reviews?
 5 A. That I'm directly in charge of on
 6 my shift, yes.
 7 Q. Okay. And what about disciplinary
 8 actions? What is your role with that?
 9 A. Any policy violations that would
 10 happen with my staff on my shift I would bring
 11 forth to upper management and follow their
 12 directives from there whether or not to proceed
 13 with a disciplinary action or not.
 14 Q. Okay. So, you said you raise it
 15 with upper management. What is the process in
 16 terms of a discipline of an employee from your
 17 experience?
 18 A. Recognizing a violation of a
 19 policy, presenting it to upper management,
 20 taking their suggestions or human resources'
 21 suggestions of what discipline action to follow
 22 and then delivering the action to the employee.
 23 Q. Okay. So, when you say present to
 24 upper management, what are the ways you can

Page 20

1 raise it with upper management?
 2 A. In person, in e-mail.
 3 Q. Okay. And so you are permitted to
 4 use any of those methods to present?
 5 A. Yeah. It's probably preferred
 6 e-mail so there's, you know, documentation for
 7 everything.
 8 Q. Sure. Okay. When you say take
 9 suggestions, if there is to be disciplinary
 10 action to be taken, who has the decision -- who
 11 makes the decision on whether to impose
 12 discipline and what discipline to impose?
 13 A. I guess it's human resources.
 14 They have the final say.
 15 Q. Okay. And do you have any say in
 16 disciplinary action?
 17 MR. CONNELL: Object to the
 18 question. Other than what he has already
 19 described, just for clarification?
 20 MS. YEH: Right. Correct.
 21 BY MS. YEH:
 22 Q. So, let's say --
 23 MR. CONNELL: Do you understand?
 24 BY MS. YEH:



Page 21

1 Q. -- it's sort of perhaps of more
2 minor -- well, I don't know if you would
3 consider this more minor. What if it's someone
4 who just has an issue with lateness, would that
5 be a similar process as you described?
6 A. No. Time and attendance is pretty
7 cut and dry. There's no leniency there.
8 Q. So, when you say cut and dry, what
9 do you mean by that?
10 A. Well, if somebody is seven minutes
11 late, they're seven minutes late, and they
12 follow through with the discipline matrix that's
13 set forth.
14 Q. And what is the discipline matrix?
15 Is it what you described?
16 MR. CONNELL: I'm going to object
17 to the question being vague and overbroad. You
18 can answer if you understand.
19 THE WITNESS: I would have to pull
20 the actual policy and look at it.
21 BY MS. YEH:
22 Q. So, when you say discipline
23 matrix, you are following a set of --
24 A. Guidelines.

Page 22

1 Q. -- guidelines or rules?
2 A. From human resources.
3 Q. I understand.
4 A. But like progressive discipline.
5 So, everyone has to get the exact same.
6 Q. Okay. So, it's not a matrix that
7 you necessarily put together?
8 A. Oh, no.
9 Q. It's from external?
10 A. Right.
11 Q. Okay. I understand.
12 Okay. And then you said you take
13 suggestions about the disciplinary action and
14 then would you be responsible for imposing the
15 disciplinary action?
16 A. Most of the time, yes.
17 Q. Okay.
18 A. If it's serious in nature I think
19 human resources handled like terminations and
20 stuff.
21 Q. Okay. And so what are some
22 examples of disciplinary actions that you have
23 imposed?
24 A. Everything that's in the policy

Page 23

1 I've probably dealt with.
2 Q. Okay. So, can you describe some
3 of them?
4 A. Time and attendance issues,
5 failure to follow general rules and procedures,
6 unsatisfactory job performance, excessive
7 absenteeism. There's probably more, but I don't
8 remember. That's about it. Those are the main
9 ones.
10 Q. So, if someone is found to have
11 let's say done one of these excessive --
12 actually, let's stay away from that because I
13 think you mentioned there's a matrix for that.
14 But let's say unsatisfactory job performance.
15 What types of disciplinary actions are imposed
16 for something like that?
17 A. I would have to review the human
18 resources' policy and procedure manual for
19 discipline and look under that section and
20 everything is listed.
21 Q. Okay. So, from your experience,
22 what are some things that you had to do? You
23 don't have to necessarily correlate it with an
24 exact.

Page 24

1 A. Like an oral warning would be the
2 first step. Sometimes there will be a
3 counseling where you could talk to somebody
4 first. There's written warnings, suspensions,
5 paper and time off, and that's it.
6 Q. So, you had mentioned earlier sort
7 of a progressive process in terms of, for
8 example, lateness or absenteeism.
9 A. Uh-huh.
10 Q. Would you consider this similar,
11 like a progressive process?
12 A. All the discipline in progressive.
13 Q. Okay. So, just moving on, next
14 one, facility-wide supervision on assigned
15 weekends, holidays or in the absence of other
16 administrative staff. What does that mean?
17 A. The group of supervisors that we
18 have in our department work in pairs and split
19 the weekends up. So, two of us work a weekend
20 and we work every fourth weekend.
21 Q. Okay. Next, assist in employee
22 scheduling and request of leave paperwork. Does
23 that relate to the job posting or does it also
24 refer to other things?



Page 25

1 A. I don't understand that question.

2 Q. Yes. Sorry. That is a little

3 confusing. It says assist in employee

4 scheduling and request of leave paperwork. Why

5 don't you just explain what that means.

6 A. Just for employees' personal time

7 off.

8 Q. Okay. Next it says, runs monthly

9 fire drills, weekly hygiene inspections,

10 compliance reports on a daily, weekly, monthly,

11 quarterly basis. I'm less interested in the

12 monthly fire drills. Presumably they are

13 comparable to other types of fire drills?

14 A. Uh-huh.

15 Q. Is that a yes?

16 A. Yes.

17 Q. Okay. Can you describe the weekly

18 hygiene inspections?

19 A. First and second shift do hygiene

20 inspections for resident rooms -- resident

21 bedrooms. Make sure that they are sanitary,

22 they don't have any inappropriate items in

23 there. And common areas are done by third shift

24 while residents are sleeping. So, you get the

Page 26

1 whole facility checked.

2 Q. Okay. And so presumably you

3 are -- are you supervising the weekly hygiene

4 inspections?

5 A. Yes.

6 Q. As opposed to conducting them

7 yourself?

8 A. Correct.

9 Q. And then what types of compliance

10 reports are required? Here it's noted daily,

11 weekly, monthly, quarterly basis?

12 A. Compliance reports pretty much are

13 dealing with the federal standards that we have

14 to follow. So, there's different questions that

15 are asked either daily, weekly, monthly,

16 quarterly to make sure that we're in compliance.

17 Q. Okay. And do you receive training

18 on those federal standards?

19 A. Yes.

20 Q. All right. The next one is

21 training employees to maintain compliance.

22 Address and coach employees to develop them.

23 Can you explain that?

24 A. It's basically making sure that

Page 27

1 they follow the standards, they understand the

2 standards and what's expected of them. That's

3 it.

4 Q. All right. I might come back and

5 ask you more about that, but I just want to get

6 through. Next it says, perform investigations

7 (SAAPI, child abuse, et cetera).

8 Have you had job duties relating

9 to performances investigations?

10 A. Yes.

11 Q. And you consider that part of your

12 job duties?

13 A. Yes.

14 Q. And are you one of the SAAPI

15 program coordinators?

16 A. Right now?

17 Q. Correct. Well, actually, I should

18 say in 2014, if you know?

19 A. Yes, I believe all supervisors

20 were with that title in 2014.

21 Q. Okay. Has that changed? Are you

22 now or --

23 A. There's one supervisor who is

24 the -- it's not the program -- it's not the

Page 28

1 SAAPI coordinator. It has a new title but it's

2 the same position. I don't remember what the

3 title is called.

4 Q. Okay.

5 A. That's the point of contact. So,

6 a supervisor would get notified of a SAAPI

7 incident. She's included. She's one of the

8 supervisors, so she is in one of the contacts if

9 she's not present that has to -- she's basically

10 in charge of filing and making sure the records

11 and everything are maintained.

12 Q. Okay. And in 2014 was she there?

13 A. No, she wasn't, and that would

14 have -- that role would have been the supervisor

15 who starts the investigation.

16 Q. Okay. Next it says, maintains a

17 safe/secure working environment through internal

18 security checks on each shift.

19 Can you describe what that means?

20 A. Just making sure -- the line staff

21 have to do certain checks throughout the

22 building to make sure everything is safe.

23 Q. Okay. And what types of checks

24 are those?



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1 A. Internal security checks just
 2 making sure there's no maintenance issues,
 3 security threats, cleanliness, things like that.
 4 Q. Okay. Does it also include -- we
 5 have heard about room checks. Is that included
 6 in this job description?
 7 A. That wouldn't be like an internal
 8 security check.
 9 Q. Okay.
 10 A. But that is included -- that's
 11 part of the responsibility of the line staff.
 12 Q. Okay.
 13 A. That wouldn't be really my
 14 responsibility.
 15 Q. Okay. So, in this case these are
 16 checks that you, yourself, are doing?
 17 A. No. I would make sure that these
 18 are being done.
 19 Q. Okay. So, you supervise it, you
 20 insure they are being done, but it might not be
 21 you, but you are insuring some employee is
 22 taking care of it?
 23 A. Correct.
 24 Q. And you noted checks through the

Page 30

1 building like I think you said no maintenance
 2 problems, security threats, cleanliness, et
 3 cetera?
 4 A. Uh-huh.
 5 Q. Okay.
 6 A. Yes.
 7 Q. And then last says here,
 8 participate in programming and interaction with
 9 residential center residents.
 10 Do you have any role in
 11 establishing or setting up the programming for
 12 the residents?
 13 A. Yes. We do have a recreation
 14 coordinator that handles a lot of that, but if I
 15 have suggestions or ideas I can bring them forth
 16 and do them, too. So, I can, yes.
 17 Q. Okay. All right. And then just
 18 says multi task functions: Employee is
 19 responsible for the following at all times. The
 20 first is provides care for dependent children
 21 and families within a minimum secure residential
 22 environment.
 23 Is that one of your functions?
 24 A. Yes.

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1 Q. Interact with and communicate in a
 2 professional manner with outside agencies (ICE,
 3 IHSC, JFRMU, lawyers, et cetera).
 4 Is that one of your
 5 responsibilities?
 6 A. Yes.
 7 Q. Now, is that something that you
 8 typically do or other people handle?
 9 MR. JONES: Objection. Overbroad.
 10 BY MS. YEH:
 11 Q. Okay. At what point do you have a
 12 role in communicating with these various
 13 agencies or individuals?
 14 A. Program-related issues, I guess.
 15 Q. Okay. And what do you mean by
 16 program-related issues?
 17 A. Well, if I would need to contact
 18 ICE, it would be for something within the
 19 program that would involve them.
 20 Q. Okay.
 21 A. IHSC, if it's a medical issue I
 22 would contact them. JFRMU something with the
 23 standards maybe I would contact them. Lawyers,
 24 they usually contact me, I guess.

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1 Q. All right. And, just for clarity,
 2 what is JFRMU?
 3 A. That would be Juvenile and Family
 4 Residential Management Unit.
 5 Q. Okay. And are they a unit through
 6 the federal government or Berks, if you know?
 7 A. That's a federal government.
 8 Q. Okay. So, next says, maintains
 9 behavioral security of all residents at all
 10 times.
 11 What does that mean?
 12 A. Just making sure that the line
 13 staff are following the discipline policy making
 14 sure that the residents are acting
 15 appropriately.
 16 Q. Okay. And then the last four are,
 17 supervises and interacts with the residents at
 18 all times; maintains a courteous, respectful and
 19 professional demeanor and atmosphere at all
 20 times; acts as a role model; perform other
 21 duties as assigned.
 22 Those are all tasks that you have
 23 to fulfill?
 24 A. Yes.



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1 Q. Okay. So, what I wanted to do was
 2 ask you a little bit more about on the -- where
 3 it says physical demands. That's the third
 4 page, I think.
 5 A. Okay.
 6 Q. You know, first is ability to work
 7 non-traditional hours which sounds a little bit
 8 like what you are describing in terms of, you
 9 know, having to work some weekends?
 10 A. Uh-huh.
 11 Q. Then it says, ability to safely
 12 manage crisis events using de-escalation
 13 techniques first and physical intervention as a
 14 last resort.
 15 Can you explain what that means?
 16 A. Safe crisis management is our
 17 curriculum that we follow for safety in the
 18 building. Basically it puts counseling, talking
 19 to residents, de-escalating the situation
 20 verbally first and going hands-on techniques as
 21 a physical intervention as an absolute last
 22 resort. It's a nationally recognized curriculum
 23 that we use. It's used by schools, you know,
 24 resident facilities, and it's all over. It's

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1 exactly what JFRMU would want us using to handle
 2 residents safely.
 3 Q. So, it sounds like it's a series
 4 of techniques that you would start with?
 5 A. Starting with verbal and
 6 de-escalating techniques and stuff and then, if
 7 need be, going to hands-on.
 8 Q. Okay. All right. So, I wanted
 9 to -- I wanted to ask you a little bit about
 10 training because you had noted that you were
 11 responsible for training employees. You told me
 12 earlier but then also here it says training
 13 employees to maintain compliance. Can you tell
 14 me what your role is in training -- the training
 15 at the facility?
 16 A. First shift training coordinator.
 17 Make sure that the -- all the line staff have
 18 their required training hours for the year.
 19 Make sure all new hires have their required
 20 training hours for starting. And just make sure
 21 that we're in compliance with state regulations
 22 for training, federal regulations required by
 23 the standards.
 24 Q. Okay. And then do you conduct the

Page 35

1 trainings?
 2 A. I do.
 3 Q. And do you conduct the trainings
 4 for your shift or do you also conduct trainings
 5 for other shifts?
 6 A. I do my shift directly. I can do
 7 others if needed. Like if another training
 8 coordinator on another shift is off or, you
 9 know, out for an extended time, then I will fill
 10 in.
 11 Q. Okay. And then how do you
 12 determine -- so, we had heard testimony earlier
 13 that there's a variety of topics to be trained.
 14 A. Uh-huh.
 15 Q. How do you determine the content
 16 of each topic? So, what I mean is are you
 17 developing it or do you receive a curriculum
 18 from elsewhere?
 19 A. Both.
 20 Q. So, why don't you describe how
 21 it's determined what is presented in the
 22 training.
 23 A. Well, it's determined by --
 24 MR. CONNELL: I'm going to object

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1 to the question as overbroad. Are you talking
 2 the specific topics or overall?
 3 BY MS. YEH:
 4 Q. Just overall if there is -- I
 5 guess, first of all, is there an overall method
 6 where the curriculum is developed, if you know?
 7 A. Well, it's such a wide variety of
 8 different training topics, everything is
 9 different. You would have to ask
 10 specifically --
 11 Q. Okay.
 12 A. -- like what topic?
 13 Q. And are you responsible -- for
 14 each shift are you responsible for training each
 15 person on each of those topics?
 16 A. Yes.
 17 Q. As opposed to different people
 18 specializing on different topics?
 19 A. Correct. Yeah. Training -- all
 20 the training coordinators are trained equally to
 21 training everything out.
 22 Q. Okay. All right. Then in that
 23 case I'll focus on training relating to sexual
 24 abuse and sexual assault.



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1 A. Okay.

2 Q. And from -- first of all, just to

3 confirm, that is something that you train in

4 terms of staff who are on your shift?

5 A. Correct.

6 Q. Specifically with that curriculum,

7 is that something that you assisted in

8 developing?

9 A. Yes.

10 Q. Okay. And can you describe the

11 process of how you developed that training?

12 A. Everything came directly from the

13 federal standards and the national trainings

14 that we get on PREA and SAAPI.

15 Q. Okay.

16 MR. CONNELL: Can we just be clear

17 for the record what you mean by SAAPI?

18 THE WITNESS: Sexual Assault and

19 Awareness Prevention and Intervention.

20 BY MS. YEH:

21 Q. When you say that are you

22 referring to a particular policy of Berks County

23 or something else?

24 A. No. The national standards. The

Page 38

1 federal standards that come out about that

2 topic.

3 Q. Okay. And so the standards come

4 from federal standards, and then did you work

5 with other people in developing the curriculum

6 to I guess be able to present those federal

7 standards?

8 A. I don't really understand that

9 one.

10 Q. Okay. So, let's say you have

11 someone who's going to start tomorrow, if you

12 will, and you needed to train them on a variety

13 of topics including sexual abuse and sexual

14 assault.

15 A. Okay.

16 Q. The curriculum that you are going

17 to provide to them --

18 A. Has been given to me by the

19 federal standards.

20 Q. Okay. So, then -- and then how do

21 you present that to them?

22 A. The SAAPI training is a PowerPoint

23 presentation with an accompanying test, and then

24 the staff would sign off on the end with a

Page 39

1 discussion like a Q and A session.

2 Q. The Q and A session, is that

3 written or is that verbal?

4 A. Verbal.

5 Q. And is that done individually?

6 A. Yes.

7 Q. If you happen to be training --

8 well, I guess I should ask. Do you train people

9 individually or do you train people in a group?

10 A. It depends what the topic is.

11 Q. So, specifically on sexual abuse

12 and sexual assault?

13 A. That's individual.

14 Q. Okay. Okay. So, you had

15 mentioned a PowerPoint presentation with a quiz.

16 So, I believe it's Berks County 55.

17 A. That's 58.

18 Q. Sorry. I have a little trouble

19 reading upsidedown.

20 MR. CONNELL: I can help.

21 BY MS. YEH:

22 Q. It's that one.

23 A. Okay.

24 MR. CONNELL: Take a second and

Page 40

1 look at it first.

2 THE WITNESS: Oh, the whole thing?

3 MR. CONNELL: Yes. Just flip

4 through it and make sure you are familiar with

5 it.

6 THE WITNESS: Okay.

7 BY MS. YEH:

8 Q. So, earlier you had referenced a

9 PowerPoint presentation as well as a

10 questionnaire.

11 A. Yes.

12 Q. Does this look like the PowerPoint

13 presentation and questionnaire that is used in

14 the training?

15 A. From that time?

16 Q. Yes.

17 A. Yes.

18 Q. Okay. And you say from that time.

19 Does that mean that it's been revised or

20 changed?

21 A. Well, they are reviewed yearly and

22 anything that's relevant or updated nationally

23 can be added in and taken out.

24 Q. Okay. Sure.



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1 A. Yeah, this is the one from that
 2 time.
 3 Q. Okay. So, if you can turn to the
 4 second page where the PowerPoint presentation
 5 starts, I just wanted to ask you, were you
 6 responsible for putting this particular
 7 PowerPoint presentation together?
 8 A. I don't remember if this was one
 9 of mine or not.
 10 Q. Would you have put together some
 11 PowerPoint presentations as part of your role as
 12 training?
 13 A. On specific topics or this one?
 14 Q. Right. Just in general, is that
 15 one of your --
 16 A. Yes.
 17 Q. So, putting together PowerPoint
 18 presentations is one of your responsibilities
 19 but you just don't know if you did this
 20 particular one?
 21 A. Correct.
 22 Q. Okay. So, as -- and I think we
 23 had -- either you had stated or other people had
 24 stated that all the supervisors are involved in

Page 42

1 the training?
 2 A. Correct.
 3 Q. So, do you divide up the
 4 responsibilities for who does what?
 5 A. No. It's done equally.
 6 Q. What was that?
 7 A. It's done equally amongst
 8 everybody.
 9 Q. Okay.
 10 A. There's not a specific order.
 11 Q. Okay. And so in putting together
 12 a PowerPoint like this, when you say it's all
 13 done equally, do all of you have a say in this
 14 or is it one person takes the lead? Like how is
 15 it done?
 16 A. As far as a say in what?
 17 Q. In putting together the PowerPoint
 18 presentation?
 19 MR. CONNELL: Just in terms of
 20 what he has already testified to outside the
 21 scope of this particular PowerPoint that's
 22 Exhibit 55, correct?
 23 MS. YEH: Right. Yes. Right. I
 24 understand that you didn't remember --

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1 MR. CONNELL: I just want to make
 2 sure the record is clear, because the way I
 3 think your question was it suggested that you
 4 were referring to this particular one.
 5 BY MS. YEH:
 6 Q. Okay. So, in general, in terms of
 7 the process, I understand you may not have put
 8 together this particular PowerPoint
 9 presentation. You had stated earlier that the
 10 responsibilities were divided equally. So, can
 11 you just describe generally how a PowerPoint
 12 presentation might be put together for a
 13 training?
 14 A. Well, this one would have come
 15 from the national standards, and -- well, this
 16 one directly came from the national standards.
 17 So, that's where that one came from.
 18 Q. And then --
 19 A. So, it would just be a matter of
 20 putting it into the form of a slide show.
 21 Q. Okay. So, presumably someone
 22 looked at the federal standards and then went to
 23 the computer, typed it up?
 24 A. Or copied and pasted it to relay

Page 44

1 all the information.
 2 Q. Right. And then does anyone take
 3 a look to review it before it starts -- it's
 4 being used?
 5 A. They are all reviewed by upper
 6 management. And, again, it's all reviewed by
 7 our oversight agencies, as well. The state and
 8 JFRMU will all approve of everything before we
 9 put it out.
 10 Q. Okay. So, you said that the
 11 state --
 12 A. Well, probably not the state for
 13 this one. State would be more for the
 14 children's --
 15 Q. Okay.
 16 A. -- part of it.
 17 Q. So, whatever -- there might be
 18 relevant --
 19 A. Yeah, topics.
 20 Q. -- topics that the state would
 21 review or relevant topics that JFRMU would
 22 review?
 23 A. Correct.
 24 Q. Okay. As well as upper



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1 management?

2 A. Correct.

3 Q. Can you describe how -- so, you

4 mentioned that there's a -- we talked about this

5 PowerPoint and there's a quiz at the end. How

6 is that PowerPoint presentation presented to the

7 trainee?

8 A. Sort of like this in a printout

9 form where they would go in private and do --

10 read through it, take the test and then hand it

11 back in to any of the supervisors.

12 Q. Okay.

13 A. And then the Q and A would happen

14 once they are completed to make sure that they

15 understand everything and everything is signed

16 off and done completed -- correctly. You know,

17 make sure that the test answers are right, as

18 well.

19 Q. Okay. And so they actually get a

20 hard copy as opposed to seeing it on a screen or

21 something like that?

22 A. Correct.

23 Q. And are all the trainings

24 conducted at the Berks County Residential

Page 46

1 Center?

2 A. As far as --

3 Q. Let's say specifically the sexual

4 abuse and assault prevention/intervention

5 training or the sexual abuse and sexual assault

6 training, does that take place in the Berks

7 County Residential Center or off site?

8 A. No, on-site.

9 Q. Okay. And, as the trainer, do you

10 get training to be the trainer?

11 A. Yes.

12 Q. Okay. And can you describe what

13 training you receive?

14 A. JFRMU handled all the PREA and

15 SAAPI training. So, it was a classroom setting.

16 They had an expert come in twice, I think, for

17 us prior -- prior to this.

18 Q. Okay.

19 MR. CONNELL: Can we clarify what

20 he means by prior to this?

21 MS. YEH: Sure.

22 THE WITNESS: I mean prior to

23 2014.

24 MR. CONNELL: Okay.

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1 BY MS. YEH:

2 Q. And so you had said that they had

3 experts come and it was in a classroom setting,

4 and you say the classroom setting was

5 interactive?

6 A. Yes.

7 Q. Okay. And, just to clarify, you

8 said two times before 2014, and that's

9 presumably the start -- two times from the time

10 you started at the Berks County Residential

11 Center to 2014?

12 A. On that topic of PREA and SAAPI --

13 Q. Yes.

14 A. -- yes.

15 Q. Okay.

16 A. Don't ask me when, though. I

17 honestly don't remember.

18 Q. That's fine. I understand.

19 And do you recall any other

20 training that you received in terms of becoming

21 a trainer on sexual abuse and sexual assault?

22 A. No. Just that training there.

23 Q. Okay. And during that training do

24 you recall receiving training on how to

Page 48

1 recognize sexual abuse?

2 A. I would have to see the

3 curriculum. I'm sure it's in there.

4 Q. Okay. And, if you remember, do

5 you recall getting and receiving training on

6 reporting sexual abuse?

7 A. Yes.

8 Q. Okay. And as part of your -- I

9 know that there are a number of topics that you

10 train on, but, just to confirm, do you also

11 train on the specific policy that Berks County

12 has relating to sexual abuse and sexual assault?

13 A. Uh-huh. Yes.

14 Q. And, just to confirm that, that is

15 Berks County 23. Okay. Would that -- I just

16 referenced Berks County policy on sexual abuse

17 and sexual assault. Is that the policy that --

18 specific policy that you train on -- that you

19 train staff on?

20 MR. CONNELL: At that time?

21 BY MS. YEH:

22 Q. Yes. In 2014.

23 A. Yep. This -- this is the one.

24 Q. Okay. I just wanted to ask you



Page 49

1 about -- if you turn to page three. And I'm
 2 looking at Berks County 23.
 3 A. Okay.
 4 Q. It says SAAP program coordinator.
 5 So, you had stated that when you were the
 6 supervisor during your shift you would be the
 7 program coordinator. This was back in 2014.
 8 A. Okay.
 9 Q. Okay. So, I just wanted to also
 10 go through these. It says in terms of the
 11 responsibilities for one, assist in the
 12 development of written policies and procedures
 13 for the sexual abuse and assault
 14 prevention/intervention program.
 15 Did you have a role in that?
 16 A. Yes.
 17 Q. Okay. The program coordinator
 18 shall also be responsible for keeping such
 19 policies and procedures current.
 20 Did you also handle that?
 21 A. Yes.
 22 Q. Okay. What about assist with the
 23 development of initial and ongoing training
 24 protocols?

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1 A. Yes.
 2 Q. Serve as a liaison with other
 3 agencies?
 4 A. Yes.
 5 Q. Okay. Review the results of every
 6 investigation of sexual abuse and conduct an
 7 annual review of all investigations to assess
 8 and improve prevention and response efforts?
 9 A. I think yes.
 10 Q. Why do you say I think yes?
 11 A. Well, as of that time I never had
 12 one.
 13 Q. Okay.
 14 A. So, I mean, I guess I would have
 15 reviewed any, but there wasn't any.
 16 Q. Okay. Number five, review
 17 facility practices to insure required levels of
 18 confidentiality are maintained?
 19 A. Yes.
 20 Q. Coordinate the collection of
 21 statistics and reports on sexual abuse or
 22 assault as detailed in the ICE residential
 23 standard on SAAP?
 24 A. Again, that yes, if there was.

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1 Q. Okay.
 2 A. But there wasn't.
 3 Q. Okay.
 4 A. And the same thing for seven.
 5 There was no annual review of nothing.
 6 Q. Okay. All right. And then
 7 similarly, just turning to another topic, did
 8 you also train staff on the code of ethics?
 9 A. Yes.
 10 Q. And that was part of the training
 11 that you would have been responsible for for
 12 people on your shift?
 13 A. Yes.
 14 Q. Okay. All right. So, just to
 15 look at Berks County 64. So, I just wanted to
 16 see if this was -- so, I have just handed you
 17 Berks County 64. Take a look at it and see if
 18 this was the code of ethics that you would have
 19 trained your staff on in 2014 or from the date
 20 of the revised date on?
 21 A. Yes.
 22 Q. Okay. And you can just -- can you
 23 describe how you would train the staff on the
 24 code of ethics?

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1 A. Well, code of ethics is this
 2 three-page document that they would read and
 3 then sign off at the end that they understand
 4 it --
 5 Q. Okay.
 6 A. -- with a Q and A if they have any
 7 questions on any of them.
 8 Q. When you say Q and A, is it their
 9 opportunity to ask you questions?
 10 A. Absolutely.
 11 Q. And then do you ask questions of
 12 them?
 13 A. As far as like if they understand
 14 it?
 15 Q. Right.
 16 A. Yeah.
 17 Q. So, I was just wondering, the Q
 18 and A, which way it went, basically. Is it more
 19 of an opportunity for them to be able to clarify
 20 or is it more of a quiz type of thing?
 21 A. Usually the Q and A is more for me
 22 when they are handing it in.
 23 Q. Okay.
 24 A. That I am specifically saying,



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1 okay, you signed off on this. Do you understand
 2 everything in it? So, then it's 99 percent of
 3 the time yes.
 4 Q. Got it. Okay.
 5 I apologize for that pause. I had
 6 a few sort of -- well, I'll go into a few more
 7 topics and then I have some more technical
 8 things I want to clarify first.
 9 In terms of the staffing at the
 10 Berks County Residential Center we had heard
 11 testimony earlier that a number of -- a large
 12 number of the residents were Spanish speaking.
 13 Was that correct in 2014 from your memory?
 14 A. I would have to see the roster at
 15 the time, because our population does fluctuate.
 16 Q. Okay. Do a large number of the
 17 residents have limited English skills?
 18 A. Yes.
 19 Q. Okay. So, did you -- we had
 20 talked earlier about interacting with the
 21 residents. Have you had situations where
 22 residents do not speak the same language as you
 23 do?
 24 A. Yes.

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1 Q. So, what are ways that you then
 2 communicate with them?
 3 A. Learn their language, use the
 4 language line and use interpreters if we have
 5 them available.
 6 Q. So, you said learn their language
 7 and you said use language line?
 8 A. Uh-huh.
 9 Q. And we had heard earlier that's
 10 like a telephone service you can utilize?
 11 A. Correct, 24/7.
 12 Q. And you said use interpreters.
 13 What do you mean by that?
 14 A. We have facility interpreters.
 15 Q. Okay. And are they on staff?
 16 A. Yes.
 17 Q. And are there interpreters who
 18 speak -- separate interpreters who speak
 19 different languages?
 20 A. Yes.
 21 Q. And do you think it's important --
 22 do you find it helpful to have interpreters on
 23 staff at the Berks County Residential Center?
 24 A. Yes.

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1 Q. Okay. And do you recall in 2014
 2 if there was an interpreter who spoke Spanish, a
 3 Spanish speaking interpreter?
 4 A. I don't know when the Spanish
 5 interpreters started.
 6 Q. Okay. In terms of the -- we had
 7 heard earlier about video surveillance at the
 8 Berks County Residential Center, and we had
 9 learned that the facility does have cameras; is
 10 that correct?
 11 A. Yes.
 12 Q. And we had also learned that it's
 13 not simultaneously viewing of the cameras? It's
 14 not a simultaneous monitoring of the video
 15 cameras; is that right, or do you know?
 16 A. I don't understand what you mean
 17 there.
 18 Q. What I mean is, while the cameras
 19 are showing, are there people/staff viewing
 20 those live?
 21 A. No.
 22 Q. Okay. And the cameras then record
 23 what's going on; is that right?
 24 A. Correct.

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1 Q. And are you one of the individuals
 2 who has access to those videos?
 3 A. Yes.
 4 Q. And do you review the videos?
 5 A. Yes.
 6 Q. And can you tell me when do you
 7 review the videos?
 8 A. Whenever there's a relevant
 9 situation that needs clarification by video.
 10 Q. Okay. Do you review the videos
 11 regularly on a regular basis?
 12 MR. CONNELL: Object to the form
 13 of the question. You can answer.
 14 THE WITNESS: As needed.
 15 BY MS. YEH:
 16 Q. Okay. So, you had said as needed.
 17 As opposed to like every Friday I'm going to
 18 review the videos?
 19 A. Oh, no, not like that. It would
 20 just be when something comes up.
 21 Q. Okay.
 22 A. So, we could go a month where I
 23 don't have to look at the cameras or I could
 24 look at the cameras three times in one week.



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1 Q. And who else has access to viewing
 2 the videos?
 3 A. That would just be management
 4 confidential.
 5 Q. You said management --
 6 A. Management confidential employees.
 7 So, supervisors and the directors.
 8 Q. Okay. So, as a supervisor you
 9 would be considered a confidential employee?
 10 A. Correct.
 11 MR. CONNELL: It's defined by the
 12 collective bargaining agreement, too. So --
 13 MS. YEH: Okay.
 14 MR. CONNELL: -- that's where the
 15 term comes from.
 16 BY MS. YEH:
 17 Q. Okay. All right. I had just a
 18 couple questions I wanted to ask you. They
 19 might seem minor, but I realized afterwards that
 20 I didn't get clarification. So, on 65. Yeah,
 21 it's the colored one. So, Berks County 65 looks
 22 like a shift schedule. I do understand this
 23 says second shift and you were first shift,
 24 correct?

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1 A. Yes.
 2 Q. But is the shift schedule -- does
 3 it look similarly to the -- does the first shift
 4 schedule look similar --
 5 A. Yes.
 6 Q. -- in terms of structure and
 7 format?
 8 A. Yes.
 9 Q. Okay. So, we had heard testimony
 10 the other day about what each of the columns
 11 mean. I don't need to go through each of them,
 12 but I realize I forgot to ask one question. So,
 13 I thought I would ask you.
 14 First of all, have you seen this
 15 type of document before?
 16 A. Yes.
 17 Q. And are you familiar with it?
 18 A. Yes.
 19 Q. Okay. So, in terms of -- I think
 20 it says ICE shelter. It looks like there's a
 21 hole punch there.
 22 A. Right.
 23 Q. Supervisor. And then it says
 24 number on duty?

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1 A. Uh-huh.
 2 Q. And there are numbers. Can you
 3 just explain to me what those numbers mean?
 4 A. That's how many supervisors are on
 5 duty for that shift.
 6 Q. Okay. And typically what is
 7 the -- do the shifts vary in how many
 8 supervisors are on duty, if you know?
 9 A. Yes.
 10 Q. So, how many supervisors are
 11 usually on duty for first shift?
 12 A. Three.
 13 Q. Okay. And what about -- so, is
 14 that three at one time or three who rotate?
 15 A. Well, I guess technically because
 16 we have a weekend -- well, are we talking 2014
 17 or now?
 18 Q. Yes, 2014.
 19 A. 2014 it would have been a rotation
 20 of three.
 21 Q. Okay. When you say rotation, how
 22 many would be on duty at a time, if you
 23 remember?
 24 A. It varies because of the weekends.

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1 So, if I work the weekend I have to take three
 2 days off. So, it would be the Friday before my
 3 weekend and the Monday, Tuesday after.
 4 Q. Okay.
 5 A. So, if you see like Monday and
 6 Tuesday here on this schedule, the 12th and the
 7 13th there's one on.
 8 Q. Uh-huh.
 9 A. That's because one of the second
 10 shift supervisors worked that weekend. So, he
 11 was off Monday, Tuesday and the Friday before.
 12 Q. Oh, okay. I see that.
 13 A. And then it says on the bottom
 14 here rotation of two supervisors. That's how
 15 many were on for second shift at that time.
 16 Q. Okay. And then on Wednesday and
 17 Thursday it looks like both of them were on?
 18 A. Correct.
 19 Q. So, at that time you can tell how
 20 many people would have been in rotation by that
 21 line, rotation of two supervisors?
 22 A. Uh-huh.
 23 Q. Okay. And did you have any role
 24 in assigning people's work schedules?



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1 A. No.
 2 Q. And do you happen to know who did?
 3 A. That's how they're hired and then
 4 it's all handled through the collective
 5 bargaining agreement on schedules.
 6 Q. Okay. So, you didn't have any
 7 responsibility towards the days of the week, but
 8 you would have been responsible for assigning
 9 them the posts?
 10 A. Correct.
 11 Q. All right. And I'm also going to
 12 just ask you another question because we had
 13 received some photographs but we only received
 14 them Monday, so I didn't have a chance to ask
 15 some of the shelter care counselors. So, I just
 16 wanted to ask you.
 17 A. Okay.
 18 Q. So, are you -- just to clarify,
 19 are you -- when you work there, you work there
 20 on a regular basis?
 21 A. Correct.
 22 Q. And you would be familiar with the
 23 structure --
 24 A. Yes.

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1 Q. -- of the Berks County Residential
 2 Center?
 3 A. Yes.
 4 MS. YEH: Okay. And I apologize.
 5 I didn't have a way to make copies.
 6 MR. CONNELL: That's fine.
 7 MS. YEH: So, I will just refer to
 8 the Bates number and we will just note that.
 9 MR. CONNELL: That's fine.
 10 BY MS. YEH:
 11 Q. Okay. So, this is just to kind of
 12 confirm. I'm going to refer to Confidential
 13 3381. I'm just basically going to be asking you
 14 to identify. Can you just describe what that
 15 is?
 16 A. That is one of the common areas.
 17 Q. And do you know if that's the
 18 second floor or the -- actually, the A floor or
 19 the B floor, if you can tell?
 20 A. That is the B floor 'cause the
 21 walls are blue.
 22 Q. Okay. And would -- okay. And,
 23 just to clarify --
 24 A. And based on there's a phone room

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1 there and on the A floor this is not a phone
 2 room. So, that's the B -- that's the bedroom
 3 floor.
 4 Q. Thank you. 3382, is that also a
 5 photograph of the dayroom area?
 6 A. Yes.
 7 Q. And what floor is that?
 8 A. That's the same, B floor.
 9 Q. Okay. And, to clarify, B floor is
 10 the upper floor?
 11 A. It's the third floor. It's the
 12 bedroom floor.
 13 Q. Okay.
 14 A. But the highest floor for
 15 residents.
 16 Q. Okay.
 17 A. Yes.
 18 Q. So, the highest floor. And then A
 19 floor is what some people refer to as the second
 20 floor?
 21 A. Yes.
 22 Q. But is it also the ground floor
 23 where you would enter the building?
 24 A. Correct.

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1 Q. All right. I'm just going to ask
 2 you about 3395. Can you clarify what that floor
 3 is, if you know, in 2014?
 4 A. This would be the A floor or
 5 second floor. The main hallway. This would be
 6 like the activity desk.
 7 Q. Okay.
 8 A. That's like a supply closet or
 9 what do you call it, IT closet.
 10 Q. And in 2014 is that where the
 11 video camera was done, if you know? And it's
 12 okay if you don't.
 13 MR. CONNELL: Where the video
 14 camera was what?
 15 BY MS. YEH:
 16 Q. The video surveillance machinery
 17 was kept in there?
 18 A. At one point in time the video
 19 equipment was in there. I don't know if it was
 20 at that time or not.
 21 Q. Okay. That's fine. All right.
 22 This is 3402, and can you just clarify -- or
 23 explain what that is?
 24 A. That is the A floor or second



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1 floor main hallway towards the front entrance of
 2 the building.
 3 Q. Okay. And is also the doors to
 4 the outside yard area also located?
 5 A. Yes. They are right here.
 6 Q. All right. Okay. We had heard
 7 testimony about the layout of the laundry room,
 8 and I just wanted to clarify that with the
 9 photograph. So, it's 3446. We had heard
 10 testimony that in the laundry room some supplies
 11 are also kept?
 12 A. Uh-huh.
 13 Q. And we had heard in 2014 there
 14 were some supplies that were things like diapers
 15 and whatnot that were not kept in a locked
 16 cabinet. Is that correct?
 17 A. I don't remember.
 18 Q. Okay. Is that something -- would
 19 you have been responsible at all for any of the
 20 supplies in the laundry room in 2014?
 21 A. Me personally responsible or
 22 making sure that the line staff keep them
 23 stocked?
 24 Q. Making sure that the line staff

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1 keep them stocked?
 2 A. Yes. The line staff, yes.
 3 Q. Okay. You, yourself, were not
 4 responsible for the actual responsibility of
 5 making sure, you know, X number of diapers were
 6 there?
 7 A. No.
 8 Q. Okay. So, we had also heard that
 9 some items were kept in a locked cabinet. Was
 10 that correct?
 11 A. In the --
 12 Q. Laundry room?
 13 A. Correct. Yes.
 14 Q. Okay. And, so, I just want to
 15 see, is this cabinet in the back here, it's all
 16 the way in the back, it looks like it's kind of
 17 waist high?
 18 A. Uh-huh.
 19 Q. And underneath a green --
 20 A. Eyewash station.
 21 Q. Okay. Is that the locked cabinet?
 22 A. Yes.
 23 Q. And is that where -- what's kept
 24 in the locked cabinet?

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1 A. Chemicals.
 2 Q. Okay. So, items that are
 3 considered dangerous would be kept in there?
 4 A. Correct.
 5 Q. But it looks like also that up
 6 closer to the door of the laundry room it looks
 7 like toilet paper and some diapers?
 8 A. Paper products.
 9 Q. Those are not locked up?
 10 A. Correct.
 11 Q. Okay. All right. I just wanted
 12 to preface when I saw these pictures I could not
 13 remember which was A floor and B floor. This is
 14 3460. You had stated the one with the blue
 15 walls was B floor. Is that A floor, then?
 16 A. This is A floor courtesy desk.
 17 Q. So, similarly, just as an example,
 18 3471 is also A floor?
 19 A. Yes.
 20 Q. Okay. And that's a picture of the
 21 dayroom?
 22 A. Correct.
 23 Q. Okay. All right. That's all of
 24 that.

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1 As part of your job duties did you
 2 also have any role in putting together the
 3 family service plan for residents?
 4 A. No.
 5 Q. All right. I'm now going to ask
 6 you about E.D. . Do you remember
 7 her?
 8 A. Yes.
 9 Q. Okay. What do you remember about
 10 her?
 11 A. I believe she had a little boy,
 12 maybe four or five years old.
 13 Q. Okay.
 14 A. That's about it.
 15 Q. And do you recall if you -- do you
 16 recall having much interaction with her?
 17 A. I do remember she was one of the
 18 residents always notorious for not watching her
 19 child.
 20 Q. Okay. And did you observe her not
 21 watching her child?
 22 A. I don't remember.
 23 Q. Okay. So, when you say notorious,
 24 did you hear that from other -- who did you hear



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1 that from?

2 A. Line staff, multiple reports.

3 Q. Okay. When you say reports, do

4 you know if those reports were verbal or

5 written?

6 A. Written.

7 Q. And so can you describe just the

8 process for a written report? Maybe I should

9 back up. When would a written report be made?

10 A. When a problem becomes -- first

11 step for a line staff would be to verbally talk,

12 you know, watch your child. Once you are saying

13 it so many times, then we put it in writing.

14 Q. Okay. And what happens to that

15 written report?

16 A. Then it gets briefed on at a shift

17 briefing so everyone is aware so everyone can

18 watch and make sure that whatever the issue is

19 it's corrected.

20 Q. Are those reports called

21 informational reports?

22 A. Yes.

23 Q. And do supervisors have to sign

24 the informational reports?

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1 A. Yes.

2 Q. You said that when a written

3 report is -- a report is written if there is --

4 when a problem sort of goes beyond just the

5 verbal warning stage --

6 A. Uh-huh.

7 Q. -- if you will. Are there

8 guidelines as to what areas are considered

9 problems by the residents?

10 MR. CONNELL: Object to the

11 question being vague. You can answer if you

12 understand.

13 THE WITNESS: Yeah, I don't.

14 BY MS. YEH:

15 Q. So, what would --

16 A. I don't understand.

17 Q. -- be some examples of problems

18 that should warrant a written report?

19 A. Persistent problems like not

20 watching your children, violation of program

21 rules, procedures. Anything that would be

22 dangerous or a safety concern. That's about it.

23 Q. Okay. And so, in terms of the

24 process, let's say a staff member has decided

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1 that something warrants a written report. What

2 are the steps that they have to take? They

3 write the report. Then what happens next?

4 A. Well, the report is to make sure

5 that everyone is aware. So, that would be that

6 step.

7 Q. Okay. So, when they write the

8 report, who do they give it to?

9 A. Supervisor.

10 Q. Okay. And then, if you receive a

11 report, then do you discuss it in the briefing?

12 A. Yes.

13 Q. And that's how everyone would

14 become aware of it?

15 A. Uh-huh.

16 Q. Do all informational reports get

17 discussed at the briefings?

18 A. Yes.

19 Q. And who's able to write a report?

20 A. Everyone.

21 Q. Everyone.

22 So, the shelter care counselors?

23 A. Yes.

24 Q. The kitchen staff?

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1 A. Yes.

2 Q. Supervisors?

3 A. Yes.

4 Q. Okay.

5 A. Interpreters.

6 Q. Interpreters?

7 A. Yes.

8 Q. Okay. Case workers?

9 A. Yes.

10 Q. After it is discussed at the

11 briefing do you do anything else with the

12 report?

13 A. We monitor for any future

14 occurrences. So, if there's more -- you know,

15 multiple reports come out, it could lead to more

16 discipline. Like there could be -- we could

17 follow through with our discipline policy, which

18 we have never gotten to that point. So --

19 Q. Oh, okay. So, from your

20 experience have you found that writing a report,

21 discussing it in the briefings, monitoring has

22 been sufficient to alleviate an issue?

23 A. Yes.

24 Q. And do you know what the next step



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1 would be for discipline?
 2 A. Yes. There would be a
 3 disciplinary board the resident would have to
 4 sit in front of, kind of like a hearing, and the
 5 problem would be discussed. Sanctions if
 6 warranted would be issued.
 7 Q. And what are some type of
 8 sanctions that would be issued at the Berks
 9 County Residential Center for residents?
 10 A. There could be wing restriction,
 11 there could be -- you know, if it's for a child
 12 it could be no field trips. They have hall
 13 passes they can go away from their parents if
 14 they are a certain age. That could be revoked.
 15 They might have to stay with their parent at all
 16 times.
 17 Q. So, you said wing restriction, no
 18 field trips. Would not being placed on field
 19 trips, is that another type of restriction
 20 placed on a child?
 21 A. It could be, yes.
 22 Q. Okay. Do you remember anything
 23 else about E.D. ?
 24 A. No.

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1 Q. And did you know an individual
 2 named Daniel Sharkey?
 3 A. Yes.
 4 Q. And how did you know him?
 5 A. He was a line staff.
 6 Q. Did you supervisor him?
 7 A. Directly like on my shift?
 8 Q. Correct.
 9 A. I don't think so. Just in
 10 covering my weekend shifts would have been when
 11 I would have been with him for partial of the
 12 shift.
 13 Q. So, you said you might -- on the
 14 weekends you might partially cover his shifts?
 15 A. Yeah, because our weekend shifts
 16 go from 6:00 a.m. to 6:00 p.m. I think when he
 17 transferred from his department to ours I think
 18 he only ever worked second shift. So, if my
 19 weekend would fall on his weekend day, I would
 20 have him for, you know, like four hours on --
 21 Q. Oh, I understand. Okay. And it
 22 sounds like your weekend shift times were
 23 actually a little different from --
 24 A. Yeah.

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1 Q. -- what the first shift time was?
 2 A. Correct, because the two of us, we
 3 would have to do twelves. So, one would work
 4 6:00 a.m. to 6:00 p.m. The other would work
 5 6:00 p.m. to 6:00 a.m.
 6 Q. So, that would insure there was
 7 always one supervisor on staff at all times?
 8 A. Correct.
 9 Q. So, what do you remember about
 10 Daniel Sharkey?
 11 A. I know he had some discipline
 12 issues. I know when the transfer from the
 13 department happened -- when the detention
 14 program closed I think he was reluctant to
 15 transfer over. There was some hard feelings
 16 there. But he did transfer over. I know he was
 17 a good employee in detention -- in the setting
 18 of detention. We never really had any major
 19 issues other than the several disciplines that
 20 he had there. But as far as line staff he was
 21 okay.
 22 Q. Okay. You had mentioned a few
 23 disciplinary issues. Were you involved in any
 24 of those?

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1 A. No.
 2 Q. You also mentioned that when he
 3 transferred from the detention center. Did you
 4 guys work together at the detention center?
 5 A. No. He started after I left.
 6 Q. Okay. And you had mentioned that
 7 he -- you believe that he was reluctant to
 8 transfer and that there were some hard feelings.
 9 Can you explain what you mean by that?
 10 A. There was one time where he was
 11 at -- he came over to the program before the
 12 closing happened, and I know he had to get
 13 talked to because he was cursing in the hallways
 14 and being loud and disrespectful.
 15 Q. That was when he was still
 16 employed by Berks County?
 17 A. Yes. That was -- he was still --
 18 he was still in the detention program, but he
 19 was slated to bump to get over once that closed.
 20 Q. Okay.
 21 A. He even may have been out on leave
 22 at the time. I don't know if he had medical
 23 leave and he came in for something.
 24 Q. Okay.



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1 A. I can't really remember.
 2 MR. CONNELL: Su Ming, is there a
 3 good time to take a break, a brief break?
 4 MS. YEH: Yes. Why don't we do it
 5 now.
 6 MR. CONNELL: Is that okay?
 7 MS. YEH: Yes. Absolutely.
 8 - - -
 9 (Whereupon, a short recess
 10 occurred.)
 11 - - -
 12 BY MS. YEH:
 13 Q. So, we were earlier discussing
 14 Mr. Sharkey, and we had talked about his
 15 transfer from the detention center to the Berks
 16 County Residential Center. You had noted that
 17 there may have been some hard feelings, that at
 18 some point he came to the Berks County
 19 Residential Center prior to his employment, and
 20 I think you had said that there was -- he was
 21 cursing and being disrespectful. Did I get that
 22 right or did I get that wrong?
 23 A. Yeah. There was a situation where
 24 he came in. He was in -- I remember he was in

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1 the program area, and one of the other
 2 supervisors that was with him -- or they heard
 3 him in the hallway. They had to speak with him
 4 about it.
 5 Q. Okay.
 6 A. Which is odd for -- you know, we
 7 have to talk to a person who is not even in our
 8 program about violating like policies already.
 9 Q. Right. And were you present at
 10 that time?
 11 A. No.
 12 Q. And who was the other -- do you
 13 recall who the other supervisor was who spoke to
 14 him?
 15 A. I believe it was supervisor Ben
 16 Snyder.
 17 Q. Okay. And do you know if
 18 Mr. Snyder reported that to anyone?
 19 A. I don't know.
 20 Q. Okay. But it was an unusual
 21 situation?
 22 A. Yes.
 23 Q. And while you were working at the
 24 Berks County Residential Center while Daniel

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1 Sharkey was working there, did you encounter any
 2 situations where he either was cursing or acting
 3 disrespectfully?
 4 A. No.
 5 Q. I wanted to ask you about a memo,
 6 and there's also an e-mail about the same topic.
 7 So, I will ask you about the memo first. It's
 8 number 71. And just pull this out while we have
 9 it.
 10 A. Okay.
 11 Q. So, Berks County 71 looks like a
 12 memo. It says to management from Brandon
 13 Witmer, supervisor. Do you remember this
 14 document?
 15 A. Yes.
 16 Q. Did you write this document?
 17 A. Yes.
 18 Q. And is that your signature on the
 19 bottom?
 20 A. Yes.
 21 Q. Can you describe -- actually,
 22 let's just look at Berks County 72. That looks
 23 like an e-mail that's from you to David Smith?
 24 A. Yes.

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1 Q. Subject: Documentation, date,
 2 July 12th, 2014. Did you write this e-mail?
 3 A. Yes.
 4 Q. Okay. Do you recall which one you
 5 wrote first? I don't know if you remember.
 6 A. I believe the e-mail was first.
 7 Q. Okay. So, let's --
 8 A. The documentation was more for me
 9 to keep in my records just in case.
 10 Q. Okay. And just in case of --
 11 A. If anything would ever happen
 12 again or --
 13 Q. So you also have a record. You
 14 can remember it if you need to refer back to it?
 15 A. Correct.
 16 Q. When you say your own records, did
 17 you keep your own separate records or a file?
 18 A. We have files that we kept on
 19 every line staff. We would put their discipline
 20 copies, but that's usually stuff that everyone
 21 knows about. We would also document things down
 22 here and there for research for like the
 23 performance appraisals so we could put not just
 24 all the bad things, too. We would put good



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1 things in there so we could reference it for the
 2 previous year for them.
 3 Q. Okay. And when you say you keep
 4 it on all line staff, did you keep it for line
 5 staff who are on your shift or all line staff at
 6 the time?
 7 A. Well, it was for all line staff at
 8 the time, but, you know, I'm only putting stuff
 9 in people I'm directly supervising.
 10 Q. Okay. So, there were folders for
 11 all line staff, and then you had
 12 responsibilities towards the people you interact
 13 with more?
 14 A. Correct.
 15 Q. All right. So, going back to this
 16 e-mail from July 12th, can you tell me what --
 17 what led up to this e-mail?
 18 A. Well, Dan approached me that he
 19 was concerned about one of the residents who was
 20 flirting. He informed me who it was and that he
 21 had spoke to her and explained to her that it
 22 was inappropriate. I told him about maintaining
 23 the professional distance, be mindful of
 24 surroundings, using female staff because of the

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1 opposite gender, and informed him to immediately
 2 come to me or another supervisor if anything
 3 else would happen again. And he did explain
 4 that, you know, he did take care of it. He did
 5 talk to her about it and explained, which is
 6 step one for this type of situation with the
 7 line staff.
 8 Q. Okay. And at the time that he
 9 spoke with you had he already spoken with the
 10 resident, E.D. ?
 11 A. Yes.
 12 Q. So --
 13 A. He was basically telling me what
 14 he did and that it had occurred.
 15 Q. Okay. And, when he reported this
 16 to you, was it an unusual situation?
 17 A. No. I wouldn't say unusual.
 18 Q. Okay.
 19 A. He did seem like it was handled,
 20 and he was more or less -- he just wanted to
 21 make us aware that he did this. So --
 22 Q. Okay. And what was the purpose of
 23 you writing an e-mail about it?
 24 A. Just for documentation. You know,

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1 he approached me with something and I wanted to
 2 make sure that I pass it along to everybody.
 3 Q. And you thought it was something
 4 that warranted at least passing on --
 5 A. Yes.
 6 Q. -- and documenting?
 7 A. Yes.
 8 Q. And once you -- it looks like this
 9 e-mail was sent to David Smith. Did you receive
 10 any response from Mr. Smith?
 11 A. No, I don't think I did.
 12 Q. And do you know if you spoke to
 13 David Smith about it, either in person or in
 14 an --
 15 A. I don't remember.
 16 Q. Okay. So, can you then tell me in
 17 terms of the memo, it looks like it was written
 18 the same day. It's dated July 12th?
 19 A. Basically that's for the records
 20 then, for the file.
 21 Q. Okay. And then do you know if
 22 Mr. Sharkey made a similar report to any of the
 23 other supervisors?
 24 A. I know he talked to one of his

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1 direct supervisors on second shift. I don't
 2 know if he talked to both of them at the time.
 3 And I also spoke with one of the second shift
 4 supervisors about this situation, as well, just
 5 to give him like a heads up, hey, this happened.
 6 Q. And is this the -- we had talked
 7 earlier about the process of a report and then
 8 discussing it in the briefing so all are aware
 9 and monitoring it.
 10 First, is this the kind of
 11 thing -- you wrote a report on it. Is this the
 12 kind of thing that you would raise at a briefing
 13 for your staff?
 14 A. I don't think the way it was
 15 presented and how it was handled this situation
 16 would have. I don't think it was serious
 17 enough. If it was more than serious, it would
 18 have been handled differently.
 19 Q. Okay. And you said you spoke to
 20 one of the other direct supervisors?
 21 A. Yes.
 22 Q. Do you recall who that was?
 23 A. That would have been supervisor
 24 Jason Mills.



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1 Q. Okay. And can you tell me what
 2 you remember from that conversation with him?
 3 A. I don't. Just what's on here.
 4 Q. Okay.
 5 A. Just kind of relaying the
 6 information.
 7 Q. Okay. So, I'm going to ask you to
 8 look at 76. It's also a memo.
 9 MR. CONNELL: Before today that
 10 would have been between 75 and 77. Just
 11 kidding.
 12 THE WITNESS: What are you allowed
 13 to type there? Okay.
 14 BY MS. YEH:
 15 Q. So, this appears to be a memo. At
 16 the bottom it says Jason Mills, so it's possible
 17 you did not write it.
 18 Had you ever seen this memo
 19 before? And feel free to take a look at it.
 20 A. I have seen it from reviewing it.
 21 Q. Okay. For -- for -- and don't
 22 tell me anything that you -- that Mr. Connell
 23 may or may not have told you. I don't want to
 24 know about any communications you have had,

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1 since he does represent Berks County, but did
 2 you review it for purposes of the deposition?
 3 A. Yes.
 4 Q. Okay. So, had you seen it before?
 5 A. No, I never saw it.
 6 Q. Well, here it says say sometime
 7 around mid-July when I got back from vacation
 8 supervisor Brandon Witmer had told me that SCC
 9 Daniel Sharkey approached him about a resident
 10 that was following him around the facility and
 11 making kissing faces at him and he was feeling
 12 uncomfortable about it. And then it notes,
 13 Brandon told me that he documented it and that
 14 he told him to keep his distance and bring
 15 anything else that happens up to management.
 16 So, does this kind of reference
 17 that conversation? Does it seem like it's about
 18 that conversation that you had with him?
 19 A. Yes.
 20 Q. Okay. Then it notes that it was
 21 within that same week, possibly the next day,
 22 SCC Dan Sharkey approached me in the office and
 23 told me the same things he told Brandon and
 24 added that she, the resident in question, had

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1 tried to follow him into the cleaning closet but
 2 he went in and shut the door.
 3 Do you recall if Jason Mills spoke
 4 to you about that incident?
 5 A. I don't remember that.
 6 Q. Okay. And do you -- do you know
 7 if he also wrote an e-mail or report to either
 8 David Smith or management?
 9 A. Who, Jason Mills?
 10 Q. Right.
 11 A. I don't know.
 12 Q. Okay. If -- based on this, do you
 13 think it's something that you would have put in
 14 an e-mail?
 15 A. Well, since he was telling the
 16 exact same thing that he already told me to
 17 Jason. If he didn't know that I talked to him
 18 I -- it's pretty much the same stuff, so --
 19 Q. Okay. After Daniel Sharkey came
 20 to you about this did you do any follow-up with
 21 him?
 22 A. Well, at the end of the
 23 conversation I made sure that he had it handled,
 24 and he said everything was good on his part,

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1 that he just wanted to, you know, make us aware.
 2 So --
 3 Q. Okay.
 4 A. -- there really wasn't a follow-up
 5 needed.
 6 Q. Afterward did you keep an eye on
 7 either E.D. or Daniel Sharkey to see if it was
 8 happening again?
 9 A. I never worked directly with them,
 10 so I really didn't have the opportunity to.
 11 Q. Okay. And did you talk to Jason
 12 Mills so that if he felt it was appropriate he
 13 could do so?
 14 A. Correct.
 15 Q. And did you -- let me just see. I
 16 guess you can turn to 77. And, again, it's
 17 possible you didn't write this, but it's a memo
 18 dated August 19th, and on the bottom it says
 19 supervisor Len Kopetsky.
 20 Do you happen to know if that
 21 looks like his signature?
 22 A. Yes.
 23 Q. Okay. And it states, Dan Sharkey
 24 about a month ago did approach me outside joking



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1 about E.D. following him outside
 2 when he has the post.
 3 Did you have any conversations
 4 with Len Kopetsky about any of these incidents?
 5 A. No.
 6 Q. Okay. And did you know -- were
 7 you aware that Daniel Sharkey had spoken to Len
 8 Kopetsky about it?
 9 A. No.
 10 Q. Okay. So, at a certain point it
 11 came to light, if you will, about an improper,
 12 for lack of a better word, relationship, if you
 13 will, between Daniel Sharkey and E.D.
 14 . Do you recall when you became aware of
 15 it?
 16 A. I don't remember.
 17 Q. Okay. And, as a supervisor, do
 18 you know if you would have been in -- in terms
 19 of the chain of information would have been
 20 informed relatively soon after the incidents
 21 came to light?
 22 A. I don't understand that question.
 23 Q. Okay. In something like this how
 24 soon would you be informed about it?

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1 MR. CONNELL: I'm going to object
 2 to the question. It's vague and calls for
 3 speculation. I think he testified before that
 4 there was never anything like this before.
 5 MS. YEH: Okay.
 6 MR. CONNELL: I think it's a fair
 7 question what you are trying to get at.
 8 MS. YEH: Sure.
 9 MR. CONNELL: But I think that
 10 question is objectionable.
 11 BY MS. YEH:
 12 Q. Well, in terms of process, you had
 13 stated earlier that if you are at least the
 14 on-shift supervisor you would be considered the
 15 SAAPI program coordinator and have certain
 16 responsibilities with respect to that.
 17 If a report or complaint of sexual
 18 abuse or sexual assault came, was there sort of
 19 a chain of -- for lack of a better word, a chain
 20 of command how that information should be
 21 conveyed, to your knowledge?
 22 A. Well, whoever the SAAPI
 23 coordinator was at the time would have informed
 24 all the supervisors, whether it was an e-mail or

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1 a report, however it was, and I would have
 2 gotten that my first shift back after the
 3 incident would have happened.
 4 Q. Okay. Actually, let me see if
 5 I -- do you recall getting an e-mail like that?
 6 A. I can't say yes. I'm sure --
 7 Q. That's fine if you don't remember
 8 exactly.
 9 A. -- I did, but I don't know. I
 10 don't remember.
 11 Q. At some point you do remember --
 12 A. Yes.
 13 Q. -- learning about what happened?
 14 A. Yes.
 15 Q. Okay. And subsequently, as we
 16 understand, there was -- there were various
 17 steps taken including kind of an investigation,
 18 however you want to call, an inquiry as to what
 19 happened?
 20 A. Like an information gathering from
 21 some of the residents.
 22 Q. Sure.
 23 A. Correct.
 24 Q. And were you involved in that?

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1 A. Yes.
 2 Q. Can you tell me what your role
 3 was?
 4 A. Me and another supervisor Ben
 5 Snyder took some statements from some of the
 6 residents that -- I don't even remember who, but
 7 we took some of the statements and asked them
 8 some questions.
 9 Q. Okay. And do you recall if you
 10 were directed to do that?
 11 A. Yeah, I had to have been.
 12 Q. And at that time was there someone
 13 sort of facilitating or overseeing the different
 14 parts of the inquiry?
 15 A. I'm sure there was, but I --
 16 Q. And do you know who that was?
 17 A. I know one of two people.
 18 Q. Okay.
 19 A. It was either Dave Smith or Diane
 20 Edwards.
 21 Q. Okay. So, one of them was saying,
 22 okay --
 23 A. Correct.
 24 Q. -- can you please help by talking



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1 to residents or whatever else they might ask you
 2 to do?
 3 A. Correct.
 4 Q. So, it would have been one of
 5 those two?
 6 A. (Witness nods).
 7 Q. Okay. And can you describe the
 8 process of how you spoke with the residents?
 9 A. I know we pulled them one at a
 10 time to the administrative conference room, sat
 11 them down and asked them some questions.
 12 Q. Did you -- who identified the
 13 residents to speak to?
 14 A. I don't remember.
 15 Q. Were you involved in that at all,
 16 do you remember?
 17 A. I don't remember.
 18 MR. CONNELL: Involved in
 19 identifying what residents to speak to?
 20 THE WITNESS: Picking a list of
 21 residents?
 22 MS. YEH: Right.
 23 THE WITNESS: I don't remember.
 24 BY MS. YEH:

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1 Q. So, for example, was it like
 2 someone saying, oh, can you please speak with
 3 these people as opposed to you looking at some
 4 chart and determining who to speak with?
 5 A. I don't remember how that was
 6 determined.
 7 Q. That's fine.
 8 So, you pulled each of them into
 9 an administrative conference room. It was you
 10 and Ben Snyder. Was anyone else present?
 11 A. No.
 12 Q. And the resident, of course, was
 13 present. And then how did you communicate with
 14 the resident?
 15 A. Language services.
 16 Q. I'm just going to show you -- I
 17 understand it was awhile ago, you might not
 18 remember the details of who you spoke to, et
 19 cetera, so I'm going show you one of them.
 20 - - -
 21 (Whereupon, the document was marked
 22 as Berks County 79 for identification.)
 23 - - -
 24 MR. CONNELL: Take your time and

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1 look that over. Okay.
 2 THE WITNESS: Okay.
 3 BY MS. YEH:
 4 Q. Okay.
 5 A. It looks like I had a typo in
 6 there, too.
 7 Q. Oh, yeah? I didn't notice that.
 8 A. Oh, then never mind.
 9 Q. Okay. So, I have handed you what
 10 we've marked as Berks County 79, and it looks
 11 like a memo from you to management dated August
 12 18, 2014.
 13 A. Uh-huh.
 14 Q. This particular one says re:
 15 Interview with Luz Carranza-Miranda, Esmeralda
 16 Quispe-Carranza?
 17 A. Uh-huh.
 18 Q. So, this document, was it
 19 something that -- have you seen this document
 20 before?
 21 A. Yes.
 22 Q. And were you involved in putting
 23 the document together?
 24 A. Yes.

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1 Q. Do you know if you wrote the
 2 document?
 3 A. I believe I did.
 4 Q. Okay. And the second page has two
 5 signatures on it. Is that your signature where
 6 it says supervisor Brandon Witmer?
 7 A. Yes.
 8 Q. And can you tell me the process of
 9 how this memo came to be? So, for example, was
 10 it kind of simultaneously during the interview,
 11 was it after? Can you just describe how -- how
 12 it came to be?
 13 A. Well, this is my notes from the
 14 interview itself.
 15 MR. CONNELL: Referring to page,
 16 I'm sorry --
 17 THE WITNESS: Three.
 18 MR. CONNELL: -- Berks 02553.
 19 BY MS. YEH:
 20 Q. Okay. So, 2553 Berks were your
 21 specific notes?
 22 A. Correct.
 23 Q. And this is your handwriting,
 24 then?



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1 A. Yep.
 2 Q. Okay. And then what happened
 3 next?
 4 A. Then I just documented on an
 5 official memo so we could file it.
 6 Q. Okay. So, you took some
 7 handwritten notes while it was going on but then
 8 you typed it up a little later?
 9 A. Correct.
 10 Q. Now, I see that the notes has a
 11 signature on the bottom?
 12 A. Okay.
 13 Q. And do you know who signed that?
 14 A. I can't tell who it is. I'm
 15 assuming it's the mom being questioned, because
 16 it looks like the same signature as on the first
 17 page.
 18 Q. Okay. So, when you say mom,
 19 were --
 20 A. Luz.
 21 Q. Luz was the mother and Esmeralda
 22 was her daughter?
 23 A. Correct.
 24 Q. And why did you have the mom sign

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1 the notes?
 2 A. Just to confirm that that's
 3 exactly what she was telling me.
 4 Q. Okay. And do you know if Luz
 5 Carranza-Miranda was able to read English?
 6 A. I don't recall.
 7 Q. Okay.
 8 A. I know it was done over language
 9 services.
 10 Q. Okay. So, can you explain the
 11 process of you taking the notes and then having
 12 her sign it?
 13 A. I guess it's kind of like the
 14 court reporter. I wrote everyone down when Ben
 15 and her were talking, and then we just asked her
 16 to sign that that's what she said.
 17 Q. Okay. Did you read this back to
 18 her before she signed it?
 19 A. I don't recall.
 20 Q. Okay.
 21 A. Yeah. Like a summary?
 22 Q. Right.
 23 A. Yes, I do remember that.
 24 Q. So, you may have summarized it?

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1 A. I would have gone through the
 2 points that she made just to confirm like a
 3 summary.
 4 Q. And then would the language
 5 services have interpreted it for her?
 6 A. Yes.
 7 Q. And then she would sign after?
 8 A. Correct.
 9 Q. Okay. So, I had a couple
 10 questions with respect to this interview. And
 11 it's noted both in the typed up portion as well
 12 as the written notes, there's a reference to a
 13 black iPhone.
 14 A. Uh-huh.
 15 Q. And were residents permitted to
 16 have cell phones?
 17 A. No.
 18 Q. So, if she had a cell phone it
 19 would have been considered improper or
 20 contraband?
 21 A. Contraband.
 22 Q. And at that time did you know
 23 whose cell phone it was?
 24 A. I believe in the interviews this

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1 is the first time anything came out about a
 2 phone, and nobody else had mentioned. I would
 3 have to look at all the other ones, though, but
 4 I --
 5 Q. Okay. And were staff members
 6 permitted to bring cell phones into the
 7 facility?
 8 A. No.
 9 Q. And in 2014, if you remember, were
 10 there any residential center cell phones in use?
 11 A. Yes.
 12 Q. All right. And then I just wanted
 13 to ask you to clarify. It says -- I'm actually
 14 now on the handwritten part -- Luz saw Dan and
 15 E.D. at the playground outside. Her and her
 16 daughter were also outside and wanted to come
 17 inside. They had to tell him four times to get
 18 him to come over to let them back inside the
 19 building. Another staff (Jill) had come outside
 20 and let them inside.
 21 Can you just -- so, at that
 22 time -- well, I guess let me back up. At that
 23 time in 2014 were residents able to move from
 24 different parts of the facility on their own?



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1 A. Yes.

2 Q. Okay. And so, for example, they

3 would be able to go from B floor to A floor if

4 they wanted to?

5 A. Yes.

6 Q. And did they require a pass to do

7 that or anything -- permission from anyone to do

8 that?

9 A. Depending on their age.

10 Q. Okay. So, if they were -- let's

11 just assume they were an adult.

12 A. A family.

13 Q. Or a family. Okay.

14 A. Yeah. A family could freely move

15 from 8:00 a.m. to 8:00 p.m.

16 Q. And we had heard some testimony

17 earlier that young people or juveniles above a

18 certain age also had that ability?

19 A. Hall pass, yeah.

20 Q. But if you were considered an

21 adult or a family you didn't need to have a

22 pass?

23 A. No.

24 Q. Okay. What about if -- if an

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1 individual wanted to go to the outside yard

2 area, if you will --

3 A. Uh-huh.

4 Q. -- did they require a pass to go

5 outside?

6 A. No.

7 Q. At that time did they need to get

8 permission to go outside?

9 A. No.

10 Q. Okay. Did someone have to unlock

11 the door to go to the yard?

12 A. To go outside?

13 Q. Yes.

14 A. No.

15 Q. So, a question -- it says they had

16 to tell him four times to get him to come over

17 and let them back inside the building.

18 What did that mean?

19 A. The doors lock from the outside.

20 They don't lock from the inside. So, you could

21 go out but you have to get let back in.

22 Q. Okay. And then -- in terms of

23 this particular incident they had to tell him

24 four times to get him to come over and let them

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1 back in, was that unusual that residents would

2 have had to make that request multiple times?

3 MR. CONNELL: Object to the form

4 of the question as being vague, calls for

5 speculation. Do you understand the question?

6 THE WITNESS: Say it again.

7 BY MS. YEH:

8 Q. So, as a supervisor hearing that a

9 resident had to request that a counselor four

10 times to let them back into the building, would

11 you have considered that to be unusual?

12 A. Yeah.

13 Q. Okay. Looking at the bottom it

14 says, Luz then saw Dan and E.D. exit that room

15 after a little while, not sure on time and not

16 sure of any other details. And I believe she is

17 referencing -- actually, do you know what room

18 they are referring to?

19 A. In the sentence before there it

20 says that Dan went -- she told Dan that she

21 needed soap in her bathroom. So --

22 Q. So, presumably they were in --

23 they were in a resident's room?

24 A. Correct.

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1 Q. Okay. And as a -- as a supervisor

2 were staff permitted in the residents' rooms?

3 A. Opposite gender, no.

4 Q. Same gender, is that permitted?

5 A. Yes.

6 Q. So, if Dan had been in the

7 resident's room, would that have been against

8 the rules?

9 A. Yes.

10 Q. Okay. I'm going to give you

11 another one.

12 - - -

13 (Whereupon, the document was marked

14 as Berks County 80 for identification.)

15 - - -

16 THE WITNESS: Okay.

17 BY MS. YEH:

18 Q. Okay. So, I have handed you Berks

19 County 80, which is another memo to management

20 from Brandon Witmer, supervisor dated August

21 18th, 2014. And this interview was with --

22 well, it's noted that this interview was with

23 Claudia Flores-Rios and Diana Prudencia-Flores.

24 And did you conduct this



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1 interview?
 2 A. Yes.
 3 Q. And have you seen this document
 4 before?
 5 A. Yes.
 6 Q. Were you involved in creating or
 7 writing this document?
 8 A. Yes.
 9 Q. All right. And Claudia
 10 Flores-Rios and Diana Prudencia-Flores, were
 11 they also related like in other pair?
 12 A. Mother/daughter.
 13 Q. Okay. And do you recall
 14 interviewing them?
 15 A. Just based off of the
 16 documentation here.
 17 Q. But not an independent memory of
 18 it?
 19 A. No.
 20 Q. So, similarly, on the third page
 21 of this set which is labeled Berks 2568, is this
 22 your handwriting on the page?
 23 A. Yes.
 24 Q. And were these notes that you took

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1 during the interview?
 2 A. Yes.
 3 Q. And then that signature on the
 4 bottom, is it one of the resident's signatures?
 5 A. Yes. That would be the initials
 6 for the mother, Claudia.
 7 Q. And so did you have a similar
 8 process as you described before in terms of
 9 having her sign it?
 10 A. Correct, with the summary of what
 11 I wrote.
 12 Q. Okay. All right. And I just
 13 wanted to ask you, on the front page, the typed
 14 page, it looks like some corrections were made?
 15 A. Yeah. There's some typos.
 16 Q. So, I just wanted to clarify. You
 17 know, it looks like Claudia is written in. I'm
 18 looking under where it says question one, then
 19 answer one. So, that was a correction?
 20 A. Yeah. I had written Luz there.
 21 Q. Okay.
 22 A. So, it's supposed to be Claudia.
 23 Q. Okay. And was that your initials
 24 next to it?

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1 A. Yep.
 2 Q. All right. And in this report it
 3 notes that they had told you that they had
 4 witnessed E.D. and -- E.D. and Dan
 5 Sharkey kissing. And do you recall them telling
 6 you that?
 7 A. Just based off the documentation
 8 here.
 9 Q. Okay. And then moving down to the
 10 bottom where it says question four, answer four,
 11 it notes that, she said that she had heard from
 12 another resident (not sure who, but may have
 13 been Luz Carranza-Miranda) that SCC Ryan Reabold
 14 had caught SCC Dan and E.D. in the resident
 15 laundry room sometime on Saturday.
 16 Had you heard of that at all
 17 happening?
 18 A. No.
 19 Q. And did you -- was Ryan Reabold on
 20 your shift?
 21 A. Yes.
 22 Q. Did Ryan Reabold ever talk to you
 23 about witnessing anything?
 24 A. No.

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1 Q. And if he had witnessed Dan and
 2 E.D. -- well, first, if he had caught them
 3 kissing, would you expect him to report it?
 4 A. Absolutely.
 5 Q. If he saw them in the laundry room
 6 together, is that something he should report?
 7 A. Absolutely.
 8 Q. I don't know if I would need to go
 9 through every single one in detail, but I'm just
 10 going to have you look at documents and just
 11 confirm that you, in fact, wrote them and that
 12 they are your notes.
 13 A. Okay.
 14 - - -
 15 (Whereupon, the document was marked
 16 as Berks County 81 for identification.)
 17 - - -
 18 BY MS. YEH:
 19 Q. So, I have just handed to you
 20 Berks County 81, and I just want to confirm that
 21 this is something that you would have put
 22 together based on the interview that you
 23 conducted with Ben Snyder?
 24 A. Correct.



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1 Q. So, this does not have your name
2 in the from line, but it does have your
3 signature on the second page.
4 A. Okay.
5 Q. Or I should say what looks like
6 your signature. Is it your signature?
7 A. On the second page?
8 Q. Yes.
9 A. Yes.
10 Q. Okay. And then on the last page,
11 is that your handwriting?
12 A. My notes, right.
13 Q. And your notes.
14 Okay. So, sorry, are those your
15 notes on the third page?
16 A. Yes.
17 Q. So, if there are other interview
18 memos that look similar like this, I assume you
19 had -- and it has what looks like your
20 signature, can I say that more than likely it's
21 your signature?
22 A. Yeah, because when me and Ben went
23 through them all, I took all the notes. He did
24 all the questioning and talking. So, whatever.

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1 I would say, yeah, I did them all.
2 Q. Okay.
3 A. He may have typed this one up,
4 maybe that's why his name is on for saving time,
5 because I think it was towards the end of our
6 shift that day.
7 Q. Right. You know, I'll just do one
8 more just because of the interview here.
9 - - -
10 (Whereupon, the document was marked
11 as Berks County 82 for identification.)
12 - - -
13 BY MS. YEH:
14 Q. All right. So, similarly, I just
15 wanted to ask you, this one does say to
16 management from Brandon Witmer. And on the
17 second page there is a signature on top of
18 supervisor Brandon Witmer. Is this something
19 you were involved in creating?
20 A. Yes.
21 Q. And you were involved in this
22 interview with Ana Rivera and Jennifer
23 Rodas-Rivera?
24 A. Yes.

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1 Q. And so is that your signature on
2 the second page?
3 A. Yes.
4 Q. And are those your handwritten
5 notes on the third page?
6 A. Yes.
7 Q. Okay. Did you have any other -- I
8 should say after you conducted the different
9 meetings or interviews with the residents it
10 sounds like you then -- you or Ben Snyder typed
11 up the results from those interviews?
12 A. Correct.
13 Q. And those results are in these
14 memos. And what did you do with the memos?
15 A. Everything was given to the
16 directors, Dave and Diane, and that's all. And
17 then it was taken over elsewhere.
18 Q. Okay. Taken over by an outside --
19 A. I believe that's when either Bern
20 Township or OPR took it over.
21 Q. And were you involved in any of
22 that portion?
23 A. No. We were out of it then.
24 Q. So, when you gave it to the

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1 directors, did you discuss the interviews with
2 them at all?
3 A. I don't remember.
4 Q. Okay. Did you have any other role
5 in the inquiry or investigation afterwards?
6 A. Preparing videos.
7 Q. Okay. What role did you have with
8 that?
9 A. Burning them onto discs for copies
10 for people that requested them.
11 Q. Okay.
12 A. That's about it, I think.
13 Q. And did you have any role in
14 viewing all the videos?
15 A. Yes, we all did.
16 Q. Okay. And we had seen through the
17 discovery process some of the various
18 timelines --
19 A. Uh-huh.
20 Q. -- but I don't believe they are
21 signed by any particular person. Do you know
22 who was involved in viewing the videos and
23 typing up the timelines?
24 A. I believe it -- it was a mixture



<p style="text-align: right;">Page 113</p> <p>1 of all supervisors at the time, because it was 2 so much footage. 3 Q. So, it sounds like several 4 supervisors were involved in that process? 5 A. Correct. 6 Q. Okay. And it wasn't assigned to 7 one particular person? 8 A. No, because it had to get done. 9 So -- 10 Q. Okay. And then you also had the 11 additional responsibility of actually physically 12 burning copies of videos? 13 A. Correct. 14 Q. Did you have any other role in the 15 inquiry afterwards? 16 A. No, I don't think so. 17 Q. Okay. Prior to this particular 18 incident at the Berks County Residential Center 19 had you heard of any complaints of improper 20 sexual contact or behavior between staff and 21 residents? 22 A. Never. 23 Q. At the -- when you were working 24 for the detention center had you ever heard</p>	<p style="text-align: right;">Page 115</p> <p>1 said, though. 2 Q. Okay. So, it's 26. 3 A. Okay. 4 Q. Okay. So, this was produced to us 5 and it appears to be a Facebook post that says 6 Dan Sharkey on the top. And had you seen this 7 before? 8 A. Yes. 9 Q. Do you recall when you saw it? 10 A. I believe I was friends with him 11 on Facebook, so I think I saw it or somebody let 12 me know about it and then I viewed it. 13 Q. Okay. And, when you saw it, what 14 was your reaction? 15 MR. CONNELL: I'll object to the 16 question as being vague. Can you be more 17 specific like was -- did he express shock and 18 awe or did he report it, did he pull it? 19 BY MS. YEH: 20 Q. Yes. What was your first reaction 21 when you saw the post? 22 MR. CONNELL: I'm going to object 23 to the question. I still think it's vague. 24 Describe what you mean by reaction.</p>
<p style="text-align: right;">Page 114</p> <p>1 about any complaints of improper sexual behavior 2 or sexual contact there? 3 A. I don't remember any. 4 Q. Okay. Subsequent to the inquiry 5 and then it was an investigation that seems to 6 have been then handled by outside organizations, 7 if you will, we learned through other testimony 8 that Mr. Sharkey was placed on administrative 9 leave. Did you have any role in that? 10 A. No. 11 Q. Did you have any contact with 12 Mr. Sharkey after he was placed on 13 administrative leave? 14 A. No. 15 Q. We had learned that -- through 16 prior testimony that subsequently he was 17 terminated in around mid-September or so 2014. 18 Did you have any role in that process? 19 A. No. 20 Q. We had also seen in the documents 21 that were produced a Facebook post that seemed 22 to be from Daniel Sharkey. Did you see that 23 Facebook post? 24 A. I did. I don't remember what it</p>	<p style="text-align: right;">Page 116</p> <p>1 MS. YEH: Well, if I ask him if 2 he's in shock and awe I don't want to lead him, 3 because if he doesn't -- 4 MR. CONNELL: Do you mean an 5 emotional reaction, a physical reaction? 6 BY MS. YEH: 7 Q. Yes. Did you have an emotional 8 reaction to it? 9 A. No. 10 Q. And do you know if you reported 11 the Facebook post? 12 A. I believe it was already reported. 13 Q. Okay. And -- and do you know if 14 other staff similarly also saw the post? 15 A. Yes. 16 Q. Okay. And do you recall if any of 17 those people who saw the post were people you 18 supervised? 19 A. I don't remember who saw it. 20 Q. Do you know if anyone spoke to you 21 about the post, any staff people I mean? 22 A. I don't remember who, but I know 23 somebody informed me of it and I went and viewed 24 it myself. So, I don't remember who told me,</p>



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1 though.

2 Q. Okay. And I believe you said it

3 was already reported by the time you viewed it?

4 A. Yeah.

5 Q. Okay. And do you know if there

6 was any follow-up to this post at all, if you

7 know?

8 A. I don't know.

9 Q. Okay. And you had noted that you

10 may have been Facebook friends with Daniel

11 Sharkey?

12 A. I believe I was.

13 Q. And did you socialize with Daniel

14 Sharkey at all?

15 A. No.

16 Q. After the incidents between E.D.

17 and Daniel Sharkey came to light were

18 there any changes or revisions at the facility

19 after the incidents were discovered?

20 MR. CONNELL: Object to the form

21 of the question being vague. You can answer if

22 you understand.

23 THE WITNESS: As far as what?

24 BY MS. YEH:

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1 Q. Well, for example, you, as a

2 supervisor, did you have a discussion in the

3 briefings?

4 A. About what happened?

5 Q. Yes.

6 A. No.

7 Q. Do you recall if you had any

8 individual conversations with any staff members

9 about it?

10 A. No.

11 Q. And were there --

12 A. Other than the fact that he was no

13 longer allowed in the building after he was

14 terminated and stuff like that, or do you mean

15 about like specifics, like what I have seen

16 and --

17 Q. No. Even that. So, was there a

18 briefing that Daniel Sharkey was no longer

19 permitted --

20 A. Yes.

21 Q. -- in the building?

22 A. Once he was terminated.

23 Q. When he was placed on

24 administrative leave were staff informed that he

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1 was not to be in the building?

2 A. Yes.

3 Q. Okay. And you were one of the

4 people informing staff members?

5 A. Yes.

6 Q. And you sort of were seeking

7 clarification as to, you know, did you speak to

8 anyone else about what you saw. Did you speak

9 to anyone else about what you saw, if anything,

10 if you saw anything?

11 A. As far as like --

12 MR. CONNELL: Object to the

13 question as being vague. You can answer.

14 BY MS. YEH:

15 Q. Yes. It was a little confusing.

16 I mean, did you speak to anyone

17 about whether you had seen or witnessed anything

18 between Daniel and E.D. ?

19 MR. CONNELL: I'm going to object

20 to the question. It lacks foundation. I think

21 you already asked him if he saw that, in which

22 case -- and he said no. Well, if you want to

23 ask that question first. Establish foundation

24 if he actually saw anything unusual.

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1 BY MS. YEH:

2 Q. Did you see anything unusual

3 between Daniel Sharkey and E.D. ?

4 A. No.

5 Q. Okay. Had you heard any reports

6 from any other people that there was potentially

7 something unusual between them?

8 A. Prior to everything coming to

9 light?

10 Q. Yes.

11 A. No.

12 Q. And that fact did you convey --

13 were you asked about it at all?

14 A. Asked about --

15 Q. For example, were you asked, hey,

16 did you ever see anything between Daniel and

17 E.D. ?

18 MR. CONNELL: Was he interviewed

19 during the course of the investigation, is that

20 what you mean?

21 THE WITNESS: No.

22 BY MS. YEH:

23 Q. Even if it wasn't a formal

24 interview. It could have been a softer inquiry,



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1 if you will.
 2 A. I don't recall.
 3 Q. Okay. And then after the
 4 incidents came to light I had asked were there
 5 any changes. For example, did you do -- conduct
 6 any refresher trainings, if you remember?
 7 A. I don't remember.
 8 Q. Okay. And beyond informing people
 9 that Daniel Sharkey could no longer be at the
 10 facility, do you recall any other meetings
 11 regarding the incidents?
 12 A. No.
 13 Q. Okay. I wanted to ask you about
 14 Berks County 25.
 15 A. Okay.
 16 Q. And have you seen this document
 17 before?
 18 A. Yes, I have seen this before.
 19 Q. Okay. When have you seen it?
 20 When did you see it, excuse me, if you remember?
 21 A. It would have been when it came
 22 out.
 23 Q. Okay.
 24 A. I know this was in the process of

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1 working prior to that.
 2 MR. CONNELL: Prior to what?
 3 THE WITNESS: Prior to the
 4 incidents coming to light with Dan and E.D. .
 5 BY MS. YEH:
 6 Q. Okay. And were you involved in
 7 putting this operating procedure or policy
 8 together at all?
 9 A. I don't recall.
 10 Q. Okay. And what role, if any, did
 11 you have in distributing this policy to other
 12 staff members?
 13 A. Just as the role of a trainer to
 14 make sure that everyone signed off that they
 15 understand and are aware of it and where to get
 16 it.
 17 Q. Okay. So, generally, what is the
 18 process if either a revised or new -- first of
 19 all, if a new or revised policy comes out, is
 20 the process the same for conveying that
 21 information to staff?
 22 A. Yes.
 23 Q. Okay. And so what is that
 24 process?

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1 A. First the -- there would be a memo
 2 to come out with a sign-off sheet with the
 3 entire facility's names on it. We have a memo
 4 book in the briefing room. Memos are required
 5 to be read prior to your shift to make sure you
 6 are up-to-date with everything. And then, once
 7 all the signatures are completed, it goes to the
 8 training department. We file them, make sure we
 9 have them all, and then it's completed.
 10 Q. Okay. And then once -- in terms
 11 of the process of -- you had said you would give
 12 it to the staff and they would sign off on it.
 13 Would you do it in groups or would you do it
 14 individually?
 15 A. That was all done individually.
 16 Q. Okay.
 17 A. So, in the memo book there is a
 18 sign-off sheet with the attached policy. They
 19 are required to read it and then sign off that
 20 they understand it.
 21 Q. Okay. And afterwards did you have
 22 any role in insuring that staff members were
 23 following -- just in general after a new or
 24 revised policy comes to light do you have a role

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1 in insuring that staff follow those or enforce
 2 those policies?
 3 A. Sure.
 4 Q. And do you recall if you had any
 5 role with this particular policy after it was
 6 revised or made effective?
 7 A. Yeah.
 8 Q. Okay. And what role did you have?
 9 A. Making sure that the line staff
 10 are following the policy as it's written.
 11 Q. Okay. And how would you do that?
 12 A. Well, first I have to know the
 13 policy. If I see a resident who's violating the
 14 policy, I would check with the staff in that
 15 area and ask do you see any violations of the
 16 policy here? If they say yes, then could you
 17 please address it.
 18 Q. Okay. So, it sounds like your way
 19 would be to discuss it with the staff member as
 20 opposed to discussing it directly with the
 21 resident?
 22 A. Correct.
 23 Q. And do you recall if you did that
 24 with this particular policy?



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1 A. With whom?
 2 Q. With any staff members?
 3 A. I don't recall.
 4 Q. Okay. So, just give me one
 5 minute. I just want to double-check to see if I
 6 had any other questions at all.
 7 A. Yeah.
 8 Q. Just one follow-up question. We
 9 had talked earlier about kind of the progressive
 10 disciplinary actions for residents. First it
 11 might be like speaking with them, and it could
 12 lead to possible restrictions in terms of a
 13 written restriction or a restriction on field
 14 trips. Was that -- if someone did receive a
 15 restriction, was that documented anywhere?
 16 A. In an informational report.
 17 Q. Okay. And would the resident be
 18 advised that they were on a particular
 19 restriction?
 20 A. Correct.
 21 Q. How would they be advised?
 22 A. In a counseling session with
 23 language services or an interpreter or, if they
 24 spoke English, then in person.

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1 Q. Okay. So, it sounds like it
 2 was -- it was done verbally or orally?
 3 A. Correct.
 4 MR. CONNELL: I'm going to object
 5 to that because he also said that it's never
 6 been done. So, that question you said, so it
 7 would have been done. It just makes the record
 8 look like it had been done when he already said
 9 it has never been done.
 10 BY MS. YEH:
 11 Q. All right. In terms of the
 12 process that's how it would be done if it were
 13 to be done?
 14 A. Uh-huh.
 15 MR. CONNELL: Yes?
 16 THE WITNESS: Yes.
 17 BY MS. YEH:
 18 Q. Since 2014 have you -- to your
 19 knowledge, has any resident had to go through
 20 any of those steps?
 21 A. The disciplinary board?
 22 Q. Yes.
 23 A. No. We have never had one.
 24 MS. YEH: Okay. All right. I

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1 don't have any questions. So, I don't know if
 2 Mr. Connell or Mr. Jones have any.
 3 MR. JONES: I have a few.
 4 - - -
 5 EXAMINATION
 6 - - -
 7 BY MR. JONES:
 8 Q. Good afternoon, Mr. Witmer. My
 9 name is Landon Jones. I'm an Assistant U.S.
 10 Attorney. I represent an individual named Josh
 11 Petrey in this case.
 12 A. Okay.
 13 Q. And I also represent the United
 14 States, effectively ICE in a related case to
 15 this.
 16 A. Okay.
 17 Q. I actually want to start by asking
 18 you a question that kind of could have been
 19 asked of anybody, but I haven't asked it yet.
 20 So, what do you normally wear when you are on
 21 duty at the facility?
 22 A. This.
 23 Q. And could you describe what you
 24 are wearing, please?

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1 A. Dark blue polo with the county
 2 seal on it and either khaki shorts or pants,
 3 comfortable sneakers.
 4 Q. And do the other shift supervisors
 5 wear the same outfit?
 6 A. Yes.
 7 Q. And do the shelter care counselors
 8 wear the same outfit?
 9 A. Yes.
 10 Q. And you don't -- or do you carry
 11 around any visible weapon while you are walking
 12 around the facility, do you?
 13 A. No.
 14 Q. Okay. You don't carry a firearm,
 15 correct?
 16 A. No. No.
 17 Q. Sorry.
 18 MR. CONNELL: That is correct,
 19 correct?
 20 THE WITNESS: Correct.
 21 BY MR. JONES:
 22 Q. It's also correct that you don't
 23 carry a nightstick or any other kind of weapon,
 24 right?



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1 A. Correct.
 2 Q. Thank you.
 3 Okay. So, if you would turn to
 4 Berks County Exhibit 19 for just a minute.
 5 A. Okay.
 6 Q. And you testified earlier a little
 7 bit about this type of duty assignment sheet.
 8 Do you recall that testimony?
 9 A. Yes.
 10 Q. Okay. I think you testified that
 11 one of your responsibilities is to assign
 12 individuals who you are supervising to various
 13 duty posts such as shown on this example; is
 14 that right?
 15 A. Yes. Yes.
 16 Q. Okay. And when you were making
 17 those assignments you were not taking any
 18 directions from any ICE employee, were you?
 19 A. No.
 20 Q. Okay. And these assignments
 21 control the day-to-day responsibilities of the
 22 Berks County employees who you are supervising;
 23 is that correct?
 24 A. Correct.

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1 Q. At any time did any ICE employee
 2 direct you in your day-to-day responsibilities?
 3 A. For assignments?
 4 Q. For your day-to-day work at the
 5 facility were ICE employees directing you how to
 6 go about those responsibilities?
 7 A. No.
 8 Q. Okay. You can set that one aside,
 9 and if you could take a look the Berks County 55
 10 for a moment.
 11 MR. CONNELL: I'm sorry. Landon,
 12 what number? 45?
 13 MR. JONES: 55.
 14 THE WITNESS: Okay.
 15 BY MR. JONES:
 16 Q. Okay. And Berks County 55 is --
 17 the first page is an example of a quiz connected
 18 with the training, and then following that is
 19 the PowerPoint presentation you discussed with
 20 the SA-API training; is that correct?
 21 A. Correct.
 22 Q. Okay. I think your testimony will
 23 be clear on this, but, just to make sure, for
 24 the PowerPoint which begins on page 2382, this

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1 PowerPoint was prepared by Berks County; is that
 2 correct?
 3 A. Yes.
 4 Q. Okay. It was prepared with
 5 reference to the federal standards perhaps, but
 6 the actual document was made by Berks County; is
 7 that right?
 8 A. Correct.
 9 Q. Okay. And is the same true for
 10 the quiz on the first page?
 11 A. Correct.
 12 Q. Okay. All right. You can set
 13 that one aside.
 14 I mentioned earlier that I
 15 represent Mr. Petrey. Do you know Mr. Petrey?
 16 A. Yes.
 17 Q. Okay. Do you have any reason to
 18 believe that Mr. Petrey and Mr. Sharkey were
 19 friends?
 20 A. I wouldn't know.
 21 Q. Okay. So, you have no reason to
 22 believe?
 23 A. No.
 24 Q. No, you don't have a reason to

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1 believe?
 2 A. I don't know anything about either
 3 one's personal lives, so I wouldn't know.
 4 Q. Okay. Thank you. Do you have any
 5 reason to believe that Mr. Petrey was aware of
 6 Mr. Sharkey's relationship with E.D.
 7 prior to the relationship coming to light?
 8 A. No, I wouldn't.
 9 Q. You don't know one way or another?
 10 A. No.
 11 MR. JONES: All right. Thank you.
 12 That's all the questions I have.
 13 MR. CONNELL: I have a couple
 14 quick ones.
 15 - - -
 16 EXAMINATION
 17 - - -
 18 BY MR. CONNELL:
 19 Q. We'll start back since it's on
 20 my -- you were asked to look at Berks 25, which
 21 is, I believe, the clothing policy. You started
 22 to say that that document was a work in
 23 progress?
 24 A. Yes.



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1 Q. What do you mean by that?

2 A. We were trying to develop this

3 over time. We were getting a lot of -- it was a

4 difficult policy to write.

5 Q. Why was that?

6 A. I guess because different people's

7 interpretations of different things, what's

8 appropriate and not appropriate was hard to find

9 a middle ground to come up with all the parts of

10 the policy.

11 Q. Okay. And you had mentioned

12 sometime before that any policies have to get

13 reviewed by the state, the state appropriate and

14 the federal government?

15 A. If it's applicable, yes.

16 Q. And would this policy have gone

17 through that same process?

18 A. Yes. It would have went through

19 JFRMU. Probably not the state, though. This

20 would really not have anything to do with them.

21 Q. And is that because the state if

22 it's anything that would touch on the 3800

23 regulations of the Commonwealth of Pennsylvania?

24 A. Correct. Correct.

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1 Q. All right. So, if it doesn't

2 touch on something covered by the 3800

3 regulations by the Department of Public

4 Welfare --

5 A. Pretty much the state doesn't need

6 to be involved at all, then.

7 Q. Okay. So, with regards to this

8 policy, when you say it was a work in progress,

9 is it fair to say that it was in progress before

10 the relationship of Mr. Sharkey and E.D.

came to light?

12 A. Yes.

13 Q. Do you have any recollection as to

14 how long before that relationship came to light

15 that this policy was in progress?

16 A. I have no idea.

17 Q. Okay. Shelter care counselors at

18 the BCRC are union members?

19 A. Correct.

20 Q. Are you a union member?

21 A. No.

22 Q. Do you -- are you aware that

23 there's a collective bargaining agreement in

24 place between that union and the county with

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1 regards to the terms and conditions of the

2 employment of shelter care counselors?

3 A. Yes.

4 Q. As we sit here today do you know

5 all the details of that collective bargaining

6 agreement?

7 A. No.

8 Q. Do you know whether or not that

9 collectively bargaining agreement at least in

10 part touches on disciplinary procedures of

11 shelter care counselors?

12 A. Yes.

13 Q. You were asked questions with

14 regards to hygiene inspections. Do you recall

15 that?

16 A. Yes.

17 Q. You were -- you testified that you

18 supervised hygiene inspections. I also have a

19 question about that. What do you mean by you

20 supervise hygiene inspections?

21 A. To make sure that they are being

22 completed correctly.

23 Q. Okay. Now, we have heard

24 testimony as to what that inspection process is.

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1 Two counselors go to each room and search rooms

2 for hygienic reasons and assure that there's not

3 contraband. Are you going room-to-room with the

4 counselors as they do that?

5 A. No.

6 Q. So, you are not looking over their

7 shoulder supervising them?

8 A. No, unless they are training.

9 Q. Okay.

10 A. Then I may go with a trainee to do

11 that.

12 Q. Okay. Just for clarification, if

13 you can turn to the SAAPI policy.

14 MR. THOMAS: 55, I think.

15 MR. CONNELL: It's 23.

16 MR. THOMAS: Oh, I'm thinking of

17 the training.

18 THE WITNESS: 23?

19 BY MR. CONNELL:

20 Q. Yes, 23. The SAAPI policy.

21 A. Okay.

22 Q. Just so the record is clear, I

23 think I had asked -- I had asked you to identify

24 what SAAPI meant earlier. This policy is the



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1 chapter of sexual abuse and assault prevention
 2 and intervention policy.
 3 A. Okay.
 4 Q. Do you understand that SAAPI is an
 5 acronym for that terminology?
 6 A. Yes.
 7 Q. Okay. You were asked several
 8 questions about informational reports and why
 9 they are done and how they are done. Do you
 10 recall that testimony?
 11 A. Yes.
 12 Q. You were also shown an e-mail and
 13 a memo that you completed after Mr. Sharkey told
 14 you that he was uncomfortable with the way
 15 E.D. was following him, et cetera. Do you
 16 recall that?
 17 A. Yes.
 18 Q. Why would there not have been an
 19 informational report done based upon what
 20 Sharkey told you?
 21 A. I guess it would have been the
 22 seriousness of it that Mr. Sharkey relayed to
 23 me, because he came to me saying this lady or
 24 this resident was following me, flirting. I

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1 informed her of the rules and the policies and
 2 procedures that she's not supposed to do that.
 3 I'm just making you aware of it. So, it felt
 4 like he was handling it appropriately and there
 5 wasn't need for anything else to come with that.
 6 Q. Did you have any reason to believe
 7 that -- or strike that.
 8 On page 79 or, I'm sorry, Exhibit
 9 79, and this is the answer we've all been dying
 10 to hear since you identified this document.
 11 When you were first shown that document you
 12 mention that there was a typo.
 13 A. Yes.
 14 Q. And I need to clarify for the
 15 record what that typo is.
 16 A. It would be in the paragraph --
 17 second sentence. I have Ana and Jennifer were
 18 questioned. So, obviously, you have caught me
 19 that I was cutting and pasting to save time.
 20 Q. Okay.
 21 A. And did not change it to Luz and
 22 Esmeralda were questioned.
 23 Q. Okay. Thank you for that
 24 clarification.

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1 A. Yep.
 2 Q. You were asked questions also
 3 referring to 79 where a resident described
 4 having seen Dan in a bedroom. First of all,
 5 there's nothing indicated in here that the
 6 resident had told anybody that before August
 7 19th, 2014, correct?
 8 A. Correct.
 9 Q. If -- and you had also affirmed
 10 that had Dan been in the resident room that that
 11 would have been against the rules?
 12 A. Correct. That's a violation of
 13 policy.
 14 Q. Okay. What if an opposite gender
 15 staff cleared a room before entering? Do you
 16 know what I mean by that?
 17 A. So, if, hypothetically, it's a
 18 female resident room, if a female goes in and
 19 clears it, can a male enter it?
 20 Q. Yes.
 21 A. Yes.
 22 Q. So, there are circumstances under
 23 which an opposite gender staff member can go
 24 into a resident's room?

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1 A. Yes.
 2 Q. And are staff trained on that
 3 protocol?
 4 A. Yes.
 5 MR. CONNELL: That's all I have.
 6 MS. YEH: Okay. I just have a
 7 couple follow-ups, if you don't mind.
 8 MR. CONNELL: Sure.
 9 - - -
 10 EXAMINATION
 11 - - -
 12 BY MS. YEH:
 13 Q. You were asked about Berks County
 14 25, which is the clothing policy.
 15 A. Okay.
 16 Q. Okay. And you had -- you were
 17 sort of discussing or mentioning the
 18 difficulties in developing the policy. Did you
 19 have a role in developing the policy?
 20 A. Yes.
 21 Q. Okay. And what role did you have?
 22 A. Just one of the -- I didn't
 23 physically write it. I was one of the topic
 24 discussers.



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1 Q. So, you were part of the
 2 discussions relating to it?
 3 A. Yes.
 4 Q. Were there any -- during the
 5 process of developing it were there any memos or
 6 e-mails regarding this policy that were written?
 7 A. I don't remember.
 8 Q. Okay. You were also asked a
 9 question relating to the discipline of staff.
 10 Do you recall -- after the incidents came to
 11 light regarding Daniel Sharkey and E.D.
 , were you aware if any staff members were
 13 disciplined as related to those incidents aside
 14 from Mr. Sharkey?
 15 A. Yes.
 16 Q. And do you recall who they were?
 17 A. Shelter care counselor Jill Noll
 18 and shelter care counselor Beth either Hrezik or
 19 Mears. I don't know if she was married at the
 20 time.
 21 Q. So, one is a married name?
 22 A. Hrezik is her maiden name.
 23 Q. What's her name now?
 24 A. Mears is her name now. I know

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1 based on video footage they were disciplined.
 2 Q. And do you recall what the nature
 3 of their discipline was?
 4 A. I don't recall.
 5 Q. And were you involved in that
 6 process at all?
 7 A. I believe I was.
 8 Q. And do you remember what role you
 9 had?
 10 A. I don't.
 11 Q. Okay. And I apologize. I can't
 12 remember the exact question I wanted to ask.
 13 Did you have a role in imposing that discipline?
 14 A. I believe I did.
 15 Q. And do you recall what that
 16 discipline was?
 17 A. No. I remember sitting in on one
 18 or maybe both, but it's been so long I would
 19 have to look at the actual document.
 20 Q. Okay. And do you know if
 21 either/or both of them had any type of process
 22 before that -- what process existed, if any,
 23 before they received that discipline?
 24 A. It would -- it would be based on

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1 what discipline they got what steps to follow.
 2 I mean, if -- if they were at a certain level or
 3 a certain progressive step, sometimes they get
 4 informed like 24 hours in advance. If it's the
 5 beginning of a discipline usually there's not
 6 notice. It's just given to them.
 7 Q. You mean the disciplinary action
 8 is given to them?
 9 A. Yes, it's just given to them and
 10 they are offered union representation, you know,
 11 if they need it.
 12 Q. Okay. And does Jill Noll still
 13 work for the Berks County Residential Center?
 14 A. Yes.
 15 Q. And what about Beth Hrezik or
 16 Mears?
 17 A. No. She transferred to another
 18 department.
 19 Q. To your knowledge, does she still
 20 work for Berks County?
 21 A. Yes.
 22 Q. And do you know where she works?
 23 A. I believe she is in the Office of
 24 Aging.

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1 Q. Okay. All right. You were also
 2 asked about when staff can be entered -- can
 3 enter a resident's room of the opposite gender
 4 and you were asked about, you know, whether or
 5 not there is a protocol, and I believe you
 6 answered yes. Can you just describe to me what
 7 that protocol it?
 8 A. There is a policy.
 9 Q. Okay.
 10 A. It just explains exactly --
 11 Q. Yes.
 12 A. -- what it is. You can only enter
 13 a resident's room -- I would have to look at the
 14 policy. I don't want to stay it on record and
 15 be wrong.
 16 Q. But generally it sounds like, as
 17 Mr. Connell had noted, there's some
 18 circumstances where it's permitted but some
 19 circumstances were not?
 20 A. Correct.
 21 Q. If a female resident is in the
 22 room is a male staff member permitted to enter
 23 that resident's room?
 24 A. No. Only in an emergency.



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1 Q. Okay. So, in an emergency
 2 situation, but on a regular --
 3 A. Day-to-day, no.
 4 Q. It is not permitted. Okay.
 5 On the other hand, if the resident
 6 has been cleared -- you had testified if that
 7 room has been cleared by a female staff member a
 8 male staff member may enter?
 9 A. Correct.
 10 Q. When you say clear, what does that
 11 mean?
 12 A. Just make sure there's no
 13 residents inside.
 14 Q. And are there other locations or
 15 areas where a male staff -- let's say it's
 16 opposite gender -- an opposite staff member may
 17 not be in a location alone with a resident of
 18 the opposite gender?
 19 A. You are going to have to rephrase
 20 that.
 21 Q. Are there other locations in the
 22 facility where let's say a male staff member
 23 can't be in that place alone with a female staff
 24 member?

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1 A. Yes.
 2 Q. And what locations would that be?
 3 A. Like the shower rooms, resident
 4 bathrooms. I think that's it.
 5 Q. And what about the laundry rooms,
 6 are they permitted to be -- are staff and
 7 residents of opposite genders permitted to be in
 8 the laundry room together?
 9 A. No. Well, it would be any -- they
 10 were not allowed in any un-camera documented
 11 areas.
 12 Q. Okay. So, the shower, bathrooms
 13 and laundry are all locations without cameras?
 14 A. No surveillance in them, yes.
 15 MS. YEH: Okay. That's all I
 16 have.
 17 MR. JONES: Nothing further.
 18 MR. CONNELL: We're done.
 19 (Witness excused.)
 20 - - -
 21 (Deposition concluded at
 22 approximately 12:54 p.m.)
 23 - - -
 24

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1
 2 C E R T I F I C A T E
 3
 4
 5 I HEREBY CERTIFY that the witness
 6 was duly sworn by me and that the
 7 deposition is a true record of the
 8 testimony given by the witness.
 9
 10 *Sherry L. Stills*
 11
 12 Sherry L. Stills,
 13 Court Reporter
 14 Notary Public
 15 Dated: 7/31/2017
 16
 17 (The foregoing certification
 18 of this transcript does not apply to
 19 any reproduction of the same by any
 20 means, unless under the direct
 21 control and/or supervision of the
 22 certifying reporter.)
 23
 24

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1 DEPOSITION ERRATA SHEET
 2
 3
 4 Our Assignment No. J0616808
 5 Case Caption: E.D.
 6 vs. Daniel Sharkey, et al.
 7
 8 DECLARATION UNDER PENALTY OF PERJURY
 9 I declare under penalty of perjury
 10 that I have read the entire transcript of my
 11 Deposition taken in the captioned matter or the
 12 same has been read to me, and the same is true
 13 and accurate, save and except for changes and/or
 14 corrections, if any, as indicated by me on the
 15 DEPOSITION ERRATA SHEET hereof, with the
 16 understanding that I offer these changes as if
 17 still under oath.
 18 Signed on the _____ day of
 19 _____, 20____.
 20
 21 _____
 22 BRANDON MICHAEL WITMER
 23
 24



<p>1 DEPOSITION ERRATA SHEET</p> <p>2 Page No. ___ Line No. ___ Change</p> <p>3 to: _____</p> <p>4 Reason for change: _____</p> <p>5 Page No. ___ Line No. ___ Change</p> <p>6 to: _____</p> <p>7 Reason for change: _____</p> <p>8 Page No. ___ Line No. ___ Change</p> <p>9 to: _____</p> <p>10 Reason for change: _____</p> <p>11 Page No. ___ Line No. ___ Change</p> <p>12 to: _____</p> <p>13 Reason for change: _____</p> <p>14 Page No. ___ Line No. ___ Change</p> <p>15 to: _____</p> <p>16 Reason for change: _____</p> <p>17 Page No. ___ Line No. ___ Change</p> <p>18 to: _____</p> <p>19 Reason for change: _____</p> <p>20 Page No. ___ Line No. ___ Change</p> <p>21 to: _____</p> <p>22 Reason for change: _____</p> <p>23 SIGNATURE: _____ DATE: _____</p> <p>24 BRANDON MICHAEL WITMER</p>	<p>Page 149</p>
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<p>1 DEPOSITION ERRATA SHEET</p> <p>2 Page No. ___ Line No. ___ Change</p> <p>3 to: _____</p> <p>4 Reason for change: _____</p> <p>5 Page No. ___ Line No. ___ Change</p> <p>6 to: _____</p> <p>7 Reason for change: _____</p> <p>8 Page No. ___ Line No. ___ Change</p> <p>9 to: _____</p> <p>10 Reason for change: _____</p> <p>11 Page No. ___ Line No. ___ Change</p> <p>12 to: _____</p> <p>13 Reason for change: _____</p> <p>14 Page No. ___ Line No. ___ Change</p> <p>15 to: _____</p> <p>16 Reason for change: _____</p> <p>17 Page No. ___ Line No. ___ Change</p> <p>18 to: _____</p> <p>19 Reason for change: _____</p> <p>20 Page No. ___ Line No. ___ Change</p> <p>21 to: _____</p> <p>22 Reason for change: _____</p> <p>23 SIGNATURE: _____ DATE: _____</p> <p>24 BRANDON MICHAEL WITMER</p>	<p>Page 150</p>
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EXHIBIT 13

A656

TELEPHONE: (610) 828-2822
FAX: (610) 828-9464

Gerald@CookeForensicPsych.com
Margaret@CookeForensicPsych.com

GERALD COOKE, Ph.D. & MARGARET COOKE, Ph.D., P.C.
CLINICAL AND FORENSIC PSYCHOLOGY
LICENSED PSYCHOLOGISTS
4 EAST GERMANTOWN PIKE
PLYMOUTH MEETING, PA 19462

June 28, 2017

Su Ming Yeh, Esq.
Managing Attorney
Pennsylvania Institutional Law Project
718 Arch Street, Suite 304S
Philadelphia, PA 19106

Dear Ms. Yeh:

At your request I have conducted a psychological evaluation of [REDACTED] E.D. As you know, [REDACTED] E.D. was the victim of institutionalized sexual assault by Daniel Sharkey, who was a staff member at the Berks County Residential Center-Immigration Family Center. Mr. Sharkey's offense behavior began shortly after [REDACTED] E.D.'s transfer to the Berks County Residential Center in May of 2014. The purpose of the present evaluation is to assess [REDACTED] E.D.'s psychological functioning in order to determine whether the reported sexual assaults by Mr. Sharkey resulted in psychological sequelae and, if so, to describe the nature and severity of her problems.

[REDACTED] E.D. was seen in the office on 5/21/17. She was accompanied by her attorney, Ms. Yeh, and by a translator/interpreter Katie Clarkson. In addition to a clinical interview and history (utilizing the interpreter) this examiner administered the following tests:

1. Spanish Translation of the Minnesota Multiphasic Personality Inventory-2 (MMPI-2): an objective personality test indicating test-taking attitude and the nature and degree of psychopathology;
2. Detailed Assessment of Posttraumatic Stress (DAPS): a series of ratings regarding various

Specialists in Criminal, Personal Injury, Neuropsychology, and Child Custody

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symptoms that may be associated with Posttraumatic Stress Disorder. It also contains validity scales to assess the possibility of malingering or minimizing symptoms. (The test was administered with the aid of the translator, as this test does not have a Spanish translation).

I also had the opportunity to review the following records:

1. Third Amended Complaint filed in the United States District Court for the Eastern District of Pennsylvania on 5/30/17;
2. Medical records from the U.S. Immigration and Customs Enforcement Berks County Family Shelter Facility covering the period from 5/19/14 through 10/30/14. Some of the notes are medical, but there are also progress notes of therapy beginning with a note on 5/23/14 by Gina Wesner, L.C.S.W. [REDACTED] E.D. was initially diagnosed with Unspecified Trauma and Stressor Related Disorder by History. When asked her reasons for leaving Honduras she indicated that she had been in a physically and psychologically abusive relationship with the father of her son [REDACTED] J. During the time she was experiencing the abuse she had feelings of being depressed and anxious. She had difficulty falling asleep and decreased appetite. However, during the intake mental status exam she presented as euthymic and calm. She appeared competent and was able to clearly express herself.

The note of 6/23/14 indicates she has declined therapy services since her arrival and declined them again on that date. However, the diagnosis was changed to Adjustment Disorder with Mixed Anxiety and Depressed Mood. On 7/10/14 she indicated that both she and her son are doing well. The first note having to do with sexual

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contact with a staff member is a medical consult on 8/18/14 in which she denied the sexual contact. The first note by Ms. Wesner that reflects this issue is on 8/18/14. [REDACTED] E.D. indicates she is feeling increased stress and frustration due to rumors and talk. Nevertheless, she again denies the sexual contact. Subsequent notes indicate that she is doing well. The note of 9/5/14 indicates that her stay has become difficult due to the length of the immigration process as well as her recent incident involving a staff member. She says the other residents and staff are talking about her and this is becoming increasingly difficult and frustrating.

It is only on 9/15/14 that Ms. Wesner's note indicates that [REDACTED] E.D. is now experiencing difficulty. When asked how she was doing she responding "pretty bad" and began to cry. She has become increasingly uncomfortable because of staff and others talking about her. She is spending increased time in her room and avoiding social situations. She at times has difficulty sleeping and is often in a low mood. A note by Ms. Wesner on 9/22/14 indicates that [REDACTED] E.D.'s son had kicked another child and she kicked her son once to show him how it felt. What she demonstrated was more of a tap than a full blown kick. On 9/23/14 she told Ms. Wesner that she continues to feel she is being treated differently and unfairly by the staff. She feels "excluded, not important," and has feelings of sadness. The note of 9/29/14 indicates a continuation of the same feelings. On 10/12/14 she has a medical appointment for headaches. On 10/8/14 she told Ms. Wesner she is spending increased time sleeping and she does appear tired. On 10/15/14 she says she is doing well. There are some subsequent medical appointments for fatigue.

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It is not until the note of 10/24/14 that there is implied reference to the relationship with a staff member because she discusses stressors involving speaking to investigators, a change in relationship and comfort with friends at the facility, as well as staff, and a lack of positive support system. She indicates her family does not know about the stress there, and she admitted to feeling depressed and isolating herself in her room. The diagnosis is modified to Adjustment Disorder with Mixed Anxiety and Depressed Mood, Predominantly Depressed Features. On 10/30/14 she indicates she would like to discuss the incident that occurred between her and a male staff member, but ultimately decided to think about if she would like to discuss it due to the ongoing investigation. She is a little worried waiting for lab results of possible pregnancy. She reported increased preoccupation and a sense of guilt, particularly at night, and indicated that she never thought or wanted for this to happen.

On 11/3/14 she decides that she wants to talk about the allegations regarding her and a staff member. She describes the development of the relationship, but did not provide detail regarding physical contact beyond kissing. She reported that he had told her that he was going to come find her in Atlanta when she was released. He also told her that they had to be careful and that she knew this was against the rules. She was unaware that his actions would be considered a crime and that there would be legal involvement. She also reported that he was very jealous, and if he saw her talking to another staff or sitting close he would give her a dirty look and say ugly things to her. While she denied suicidal intent she did indicate that some days were very bad for her. On 11/4/14 she goes

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into more detail, particularly about his jealousy and anger. She believes that other residents speak negatively about her and blame her for the staff member losing his job, and that other residents and staff believe that she should have the consequences as opposed to the staff member. She finds it very difficult to be in a place where everyone thinks it is her fault. On 11/13 she states that she continues to feel isolated from the other women there and has both anticipation and anxiety about the Court date scheduled for early December. She indicates she is afraid to speak with investigators about the staff member because it may impact on her immigration status. On 11/18/14 she indicates distress regarding interactions with the other residents and that many of them blame her for rules and changes and don't want to associate with her.

On 11/25/14 she indicates she now wants to speak with the investigators. She reports that he once said "If anyone tells about this and I lose my job I will cut their throat," though she thought he was maybe joking. Nevertheless, she expressed fear that he could find her and her family when she leaves the facility. On 12/2/14 she continues to feel depressed. At times she feels guilty for the incidents that occurred. On 12/4 she processed the stress of meeting with the investigators, but said that she was doing well overall. However, on 12/11 she felt increased low mood because her case was being denied, but she is filing an appeal. She has feelings of sadness that she is unable to express in front of other people. On 12/17 she presents with concerns of frustration with the implementation of the dress code. She feels it is unfair and not enforced uniformly across staff members and residents. The last therapy note is 12/21/14. She is "happy and emotional" because she was told

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that she will be released to her mother tomorrow. Nevertheless, the same diagnosis of Adjustment Disorder with Mixed Anxiety and Depressed Mood, Predominantly Depressed Features, is continued.

During the evaluation process [REDACTED] E.D. was friendly and cooperative. Though at times she smiled, there were also times when she broke into tears and it took her awhile to compose herself and to be able to continue talking. There was clinical evidence of both depression and anxiety, though these appeared to be relatively mild. There is no evidence of a thinking disorder or of psychosis. It is this examiner's opinion that despite her efforts to control the outward show of feelings, [REDACTED] E.D. is an emotionally sensitive and emotionally reactive person. One of the MMPI-2 items that brought on tears was one about whether she feels she is an important person. When this was explored further she indicated it is because she is in a place where she doesn't feel like she is important to anybody. She says the way she was treated at the Detention Center made her feel like she was not important.

The history was obtained from [REDACTED] E.D. and the above mentioned records. She was the oldest of four children in an intact family. She describes both of her parents in positive terms and indicates she had a good relationship with them. She denies any history of childhood physical, sexual, or emotional abuse.

Regarding her educational history, she completed nine years of school in Honduras in 2009. She indicates that she got average grades.

Regarding her occupational history, she explains that she did not work in Honduras because there women generally do not work. Her only work history is, then, since her release from the Berks County Center. She began working at Victory Processing in Atlanta in Quality Control in the middle of 2015 and continued until December of 2016. This was a full-time job and she typically worked 40 hours a week. She left that job to take care of her children. Her

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mother, with whom she lives, works and helps to support her.

E.D. lives with her mother in a rented house outside of Atlanta and with her two children J. age six and A. age one. J.'s father lives in Honduras and was the man from whom she fled when she came to the United States in 2014. This will be discussed further below. He does not see J. A.'s father is E. and he lives in the United States, but they are not together and he does not see A. E.D. is not currently in a relationship.

Regarding substance use, E.D. indicates she does not drink. She denies the use of any illicit drugs. She does not smoke cigarettes. She is not on any medication and has never been on any psychiatric medication.

E.D. entered into the United States without proper documentation and inspection. She has no prior criminal record.

E.D. indicates that she has no serious medical history and she believes she is in good health.

When asked about psychiatric or psychological treatment she indicates that she received counseling from a licensed social worker (Gina) while she was in the Berks County Center. This led to a discussion of the situation that occurred there, and is the basis of the Complaint and lawsuit. She indicates that the man with whom she had the relationship in the Detention Center was Daniel. She also indicates that at first she denied it but one day she started to talk about it. This examiner asked her how it affected her at the time it was going on, and she indicates that at first he was just a person who was always with her. He told her that she was pretty and that he liked her. He kept repeating this and then one day when they were alone he kissed her. She says at first it was confusing because she didn't know what to do or how to act. She liked him and he was good to her, and bought her a phone. However,

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he told her that she couldn't say anything about what they were doing or they would deport her and that made her feel fearful. She also said that the relationship with Daniel affected her relationship with the other detainees. She says Daniel was a jealous person and prohibited her from speaking to other staff. There were also some 16 to 17-year old male detainees, and he didn't want her to talk to them either. He didn't want her to even look at anybody else.

When asked how the relationship with Daniel affected how she was treated by the other women she indicates "They refused me," by which she means that they isolated her from the group. This was the first time in the interview that she began crying. She didn't know what to do or what to say and felt she didn't have support from anyone. All they did was judge her. She continued to be upset and crying throughout this recitation, and was unable to stop until we took a short break. This examiner asked her understanding about how the situation with Daniel ended, and she indicates that one of the other women talked to the supervisors about the preferential treatment Daniel was giving her. Then Daniel didn't return to work. Again, this examiner asked her how she felt at that point, and she indicates she was afraid because he said she could be deported if people knew what happened between them. During the investigation the other women still treated her with the same attitude of rejection. She did not learn that she was not going to be deported until she spoke to her lawyer in September of 2014.

[REDACTED] E.D. indicates she was released from the Detention Center in December of 2014. She went to live with her mother in Atlanta and has been there since. She indicates, not surprisingly, that she felt better when she was released. Nevertheless, she indicated that the experience she had there is still affecting her. If she thinks of everything that happened and how everybody treated her, both the workers and the detainees, she again has that feeling that she had no support from anybody. She felt nobody was worried about her or offered her any help.

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Instead of helping her or feeling sorry for her they judged her and she still thinks about that today.

This examiner asked her about her future plans, and she indicates she is at home taking care of her children, but she does plan to go back to work at the same place she was working before. She would like to wait until [REDACTED] A. [REDACTED] is another year older and can go to day care.

This examiner also explored with her why she came to the United States. She explained that she lived with her parents until she was about ten or eleven, and then both parents came to the United States and she began living with her grandparents. She met [REDACTED] J. [REDACTED]'s father when she was 14. She moved in with him when she was 15. She became pregnant with [REDACTED] J. [REDACTED] and [REDACTED] J. [REDACTED] was born. She indicates [REDACTED] J. [REDACTED]'s father drank a lot and she "received domestic violence." She indicates he hit her frequently, and once she was badly enough hurt that she had to go to the hospital. He also mistreated her psychologically. She says she reported him and nobody did anything. She explained that in Honduras the laws are not so good, domestic violence is common, and it doesn't seem to matter to the authorities.

Both the MMPI-2 and the DAPS have validity scales. On the MMPI-2 there is no evidence of exaggeration of symptoms or malingering. On the contrary, she attempts to present herself in a socially desirable light. However, individuals with Hispanic backgrounds often have more elevated scores on the scale that reflects that, and if this is taken into account it is not a significant factor. On the DAPS she was not elevated on either the Positive Bias or the Negative Bias Scales. Thus, the results of the clinical scales on both tests are considered valid.

On the MMPI-2 the most elevated scale is the Paranoid Scale, but exploration of the critical items indicates that this is largely due to her reaction to her experience at the Detention Center. She feels she has gotten a bad deal from life. When this was explored further she indicates that she is referring to everything that happened to her in

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Honduras. She fled from something and found something even worse. She also feels that if Daniel had not had it in for her she would be much more successful, and would not have had to have gone through this. She also endorsed the item "someone has it in for me" and explained that both the workers and the detainees at the Center had it in for her. Similarly she endorsed "I believe I am being plotted against" and again she indicates that everyone was against her at the Detention Center. Even though she has left there she still feels like they are plotting against her, though she has received no threats. Even adjusting for those items specific to the Detention Center, she would still have a mild elevation on the Paranoid Scale, and this is not surprising given her experiences in Honduras and her being detained for Illegal Entry into the United States. While she tends not to express anger outwardly, E.D. has a lot of underlying anger about the experiences in her life. She feels angry and resentful about the way she feels she has been treated, and generally feels that she has been mistreated. Thus, she is suspicious and guarded in interpersonal relationships. She is anxious and depressed, though currently these are at mild levels. Ms. E.D. indicates that these days every time she remembers what happened at the Detention Center she will cry, and this happens about two to three times a week. As she said this she began crying again. She also experiences some mild somatic symptoms of stress, such as the headaches for which she was treated at the Detention Center. She feels alienated from others and that she is not accepted by her peers. She does not feel part of her social environment. These feelings are a carry-over from her experience at the detention center.

On the DAPS E.D. meets the test criteria for Posttraumatic Stress Disorder due to her situation at the Detention Center. At the time this was going on she felt considerable fear and hopelessness, as well as some feelings of guilt, shame, and humiliation. She was very much upset as well. Because of some of the threats that Daniel made, even though she thought he might be joking, she was also afraid she might die. While it is not an item

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on the DAPS she was also, of course, afraid that she would be deported.

Symptoms in the last 30 days result in significant elevations on scales reflective of re-experiencing, trauma specific dissociation, hyperarousal, and avoidance. As far as re-experiencing, upsetting thoughts or memories will pop into her mind, she becomes upset or nervous when something or someone reminds her of what happened, and she is unable to get the unwanted thoughts or images out of her mind. She feels frightened and upset when something reminds her of the experience, and these memories seem to come out of nowhere. At times the memories are so strong and intense that it feels like it is happening all over again. When she has these thoughts she experiences somatic symptoms of stress such as her heart pounding.

Regarding the trauma specific dissociation, she indicates that since this all happened things do not feel completely real, and she often feels like she is walking around in a daze. Regarding the hyperarousal she reports problems concentrating or paying attention since this experience, and that her mind will wander to the disturbing thoughts even when she needs to concentrate. She also has more trouble falling asleep and staying asleep and feels more restless, jumpy, and on edge. She is on the lookout for danger since this happened and is easily startled or frightened by sudden noises or movements.

As far as avoidance, she does not want to think or talk about what happened. She feels she has lost interest in things as compared to before she went through the experience at the Detention Center. She tries to not have upsetting thoughts and feelings about what happened, but is often unable to keep them out of her mind. She has only a mild, yet clinically significant, elevation on the Impairment Scale, reflecting her feelings that because of what happened to her she is not able to do things as well as she used to do, and that she has some problems at work and in social situations because of what happened to her.

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██████████ E.D. ██████████ is not elevated on scales reflecting substance abuse or suicidal ideation reactive to the situation at the Detention Center. However, she indicated in response to one of the MMPI-2 items that while she no longer has suicidal thoughts, there were times when she was at the Detention Center that she wished she were dead.

In summary, it is this examiner's opinion that prior to coming to the Detention Center, and during the initial period there, ██████████ E.D. ██████████ experienced an Adjustment Disorder with Mixed Anxiety and Depressed Mood, as is also reflected in the records from the Detention Center. This is not surprising, of course, given the physical and psychological abuse she suffered in her relationship with ██████████ J. ██████████'s father in Honduras, her perception that the authorities would not do anything about it, her fleeing to the United States, and then being detained as an illegal immigrant. This examiner would note that both clinical experience and research literature indicate that an individual who has been physically and emotionally abused in a relationship has a greater likelihood of future abuse in relationships, and this would also apply to institutional sexual misconduct. However, it is also my opinion that as the situation developed with Daniel the level of her depression and anxiety, though it did vary somewhat from day to day, generally increased. Part of the reason for this was her concerns about that relationship which, on the one hand, obtained preferential treatment for her but, on the other hand, led her to fear that if she did not cooperate in the relationship she would be deported and possibly also might be in danger of death. Another factor that aggravated her depression and anxiety was her social isolation and her feeling that both staff and residents were judging her negatively and ostracizing her. The signs of Posttraumatic Stress Disorder gradually appeared despite her initial reluctance to indicate what was going on and how it was affecting her. The testing and interview indicates that those Posttraumatic Stress Disorder symptoms continue into the present and remain moderately severe. Thus, in addition to the preexisting diagnosis of Adjustment Disorder with Mixed Anxiety and Depressed Mood, which in

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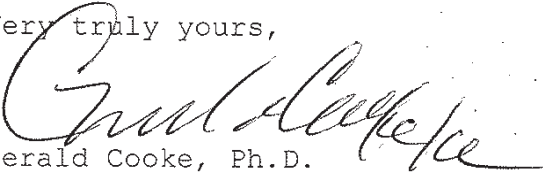
this examiner's opinion then became significantly exacerbated by her experience at the Detention Center, she also now meets the criteria for a diagnosis of Posttraumatic Stress Disorder.

This examiner would recommend that [REDACTED] E.D. seek treatment in the Atlanta area. There are many well qualified therapists in that area who are trained in special techniques for the cognitive-behavioral treatment of anxiety, depression, and Posttraumatic Stress Disorder. Therapy also needs her to get in touch with her underlying feelings of anger and work those through, as those are also fueling the PTSD symptoms.

All of the opinions in this report are held to a reasonable degree of psychological certainty.

Thank you for the opportunity to evaluate [REDACTED] E.D. Please contact me if you have any further questions.

Very truly yours,


Gerald Cooke, Ph.D.

GC/nr

Telephone: (610) 828-2822

Gerald@CookeForensicPsych.com

Fax: (610) 828-9464

Margaret@CookeForensicPsych.com

Gerald Cooke, Ph.D. & Margaret Cooke, Ph.D., P.C.
Clinical and Forensic Psychology – Licensed Psychologists
4 E. Germantown Pike, Plymouth Meeting, PA 19462

GERALD COOKE
CURRICULUM VITAE

PRESENT POSITIONS

Private practice in Clinical and Forensic Psychology. Forensic Psychodiagnostic Evaluation: Child Custody, Civil Litigation for Plaintiff and Defense, Criminal Cases for Prosecution and Defense, Neuropsychological Evaluation. Consultation with attorneys, court testimony.

CERTIFICATIONS

Licensed Psychologist, State of Pennsylvania Number PS-001778-L.

Certified as an Instructor by the Municipal Police Officers' Education and Training Commission, Number MPI 1759.

Diplomate, American Board of Forensic Psychology (ABFP), 1979; past Chairperson of the Board's Continuing Education Committee; 1979-81; Examiner for the Board, 1979-present; Regional Examination Chairperson, Northeastern U.S., 1982-83.

Diplomate, American Board of Professional Psychology (ABPP), 1985, when ABFP became subsumed under ABPP.

Diplomate, American College of Forensic Examiners. Forensic Specialty in Neuropsychology, 1998.

EDUCATION

9/59 - 6/63 University of Chicago, Chicago, Illinois, B.A. Psychology.

9/63 - 6/66 University of Iowa, Iowa City, Iowa, M.A., Ph.D., Clinical Psychology.

8/66 - 8/67 Post-Doctoral Internship, Norristown State Hospital, Norristown, PA.

GERALD COOKE

CURRICULUM VITAE

PAGE 2

PROFESSIONAL MEMBERSHIPS

Fellow, American Academy of Forensic Psychology.

Fellow, American College of Forensic Examiners.

Past Member, American Psychological Association (resigned my life membership 7/15/15 due to ethical and moral breaches committed by the organization).

Charter Member, Division of Psychology and Law, American Psychological Association.

Past Member, American Psychological Association Committee on Legal Issues.

Past Member, Division 37, Society for Child and Family Policy and Practice, American Psychological Association.

Past Member, Division of Clinical Neuropsychology, American Psychological Association.

Past Member, Subcommittee on the impact on the legal System on Women, Montgomery County Commission on Women.

GRANTS AND AWARDS

Visiting Scientist, American Psychological Association, 1972.

NIMH Small Grant MH22267-01, Analysis of the Non-Professional Therapist Program, 6/16/72 - 5/31/73.

NIMH Small Grant MH12195-02, Principal Investigator on a \$9,000, three-year (1972-1975) grant to evaluate the Paraprofessional Training Program at the Salvation Army Harbor Light Alcohol Treatment Program, Detroit, MI. Three year continuing grant, 1975-1978.

Project Advisory Committee, \$120,000 grant to the Forensic Sciences Foundation for a study of Utilization of Psychiatric and Psychological Assessments by Criminal Court Judges, 1980-1981.

Consultant, \$57,000 NIMH Crime and Delinquency grant for training CMHC personnel in Forensic Psychiatry/Psychology, 1980-1982.

Meritorious Service Award, American Board of Professional Psychology, 1993.

GERALD COOKE

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PREVIOUS CLINICAL POSITIONS

1968 - 1971 Research Consultant, Hermann Kiefer Hospital and Sinai Hospital, Detroit, MI.

1970 - 1972 Group Leader of Black-White encounter groups of Police Officers, Detroit Police Department.

1972 - 1973 Group Leader of encounter groups on White supervisors and Black "new hires" for Detroit Edison and Michigan Bell Telephone.

1968 - 1973 Consultant and Acting Director of Psychology, Center for Forensic Psychiatry, State of Michigan.

1971 - 1973 Consultant, V.A. Hospital, Allen Park, MI., Behavior Therapy, Forensic Psychology.

1968 - 1974 Private Practice, Detroit MI.

1974 - 1975 Psychological Consultant, State Correctional Institution at Graterford.

1975 - 1977 Clinical Evaluator of Juveniles for the Youth Services Bureau Project at the State Correctional Institution at Camp Hill.

1971 - 1978 Consultant, Detroit Salvation Army Alcohol Treatment Program.

1973 - 1978 Chief Forensic Psychologist, Norristown State Hospital, Norristown, PA.

1974 - 1979 Member of Norristown State Hospital Suicide Committee.

1979 Consultant to the National Center for Action on Institutions and Alternatives, Rikers Island, NY, Prison Complex, Investigation of Frequency, Causes and Prevention of Inmate Suicides

1979 - 1980 Consultant, Mental Health Advocates of PA.

1978 - 1981 Consultant, Norristown State Hospital Juvenile Forensic Unit.

1982 - 1983 Consultant, Institute of Pennsylvania Hospital Neuropsychological and Forensic Evaluation.

1981 - 1985 Affiliate Staff, Eugenia Hospital, Lafayette Hill, PA. Neuropsychological and Forensic Psychodiagnostic Evaluation.

1982 - 1989 Consultant, Insight Centers - Professional Rehabilitation Services, Psychological-Vocational Evaluation.

1984 - 1988 Consultant, Placement Services, Inc. - Professional Rehabilitation Services, Psychological-Vocational Evaluation.

1989 Off Campus Clinical Practicum Supervisor, Department of Psychology, Temple University.

1993 - 1996 Psychological Consultant, Joseph J. Peters Institute (Psychological evaluation of alleged sex abusers).

1993 - 1997 Consultant, Philadelphia City Solicitors Office/Police Department: Revision of Psychological Screening Process to eliminate adverse impact on minority group members.

1979 - 1999 Consultant, Norristown State Hospital Psychology Department - Forensic and Neuropsychological Evaluation.

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PREVIOUS TEACHING POSITIONS

- 1967 - 1973 Assistant Professor of Psychology, Wayne State University, Detroit, MI.
- 1976 Instructional Consultant, Bucks Count Department of Mental Health, Crisis Intervention Training Program for Police.
- 1978 - 1994 Faculty, Continuing Education Program in Psychiatry. The Department of Psychiatry of the School of Medicine of the University of Pennsylvania.
- 1975 - 1985 Instructional Consultant, Temple University Center for the Administration of Justice. Selection and Training Programs for police departments; course in crisis intervention.
- 1987 - 1996 Lecturer in Law and Mental Health, Villanova University Law School.
- 2007 - 2009 Adjunct Clinical Associate Professor of Psychology in the Institute for Graduate Clinical Psychology of Widener University, Chester, PA.

CONTINUING EDUCATION

(Continuing education records prior to 1993 are no longer available)

- 1993 Treating Troubled Adolescents.
- 1994 The Healing Brain.
- 1995 Suicide Risk: Assessment and Response Guidelines;
Old Loyalties, New Ties: Therapeutic Strategies with Step-Families.
- 1997 Left Brain - Right Brain;
The Myth of Repressed Memory;
Tarasoff and Beyond;
Trauma and Recovery.
- 1998 Ethical Issues;
Trauma Survival: Overcoming the Psychological Scarring;
Current Risk Management and Ethical Issues in Psychology.
- 1999 Testifying in Court;
Ethics, Law and Psychology;
Cybersex: The High Tech Sex Addiction.
- 2001 Custody Evaluation;
Risk Management.

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- 2002 Jeopardy in the Courtroom: A Scientific Analysis of Children's Testimony;
Practical Uses of the MMPI-2;
Preparing for HIPAA.
- 2003 Parenting That Works
- 2004 Comprehensive Child Custody Evaluations
- 2005 The Practical Art of Suicide Assessment;
Ethics and Risk Management in Forensic Settings
- 2006 Ethical Risks when Assessing Risk of Harm to Others
- 2007 Coping with Cross Examinations;
The Challenge of Co-Parenting: Helping Split Couples to Raise Healthy Kids
- 2009 Children, Divorce and Custody: New Research and New Roles of Psychologists Child
Custody and Parenting Evaluations;
Collaborative Practice: A Better Approach to Conflict Resolution in the Dissolution of
Family Relationships
- 2010 Screening, Assessment & Treatment of Dementia
- 2011 Case Studies in Ethics, Diagnosis and Treatment;
Navigating Through Pennsylvania Custody and Support Laws in our Evolving Society
- 2012 Child Abuse from Legal and Psychological Perspectives: Office of Children and Youth;
Effective and Ethical Testimony: American Academy of Forensic Psychology
- 2013 Psychopharmacology for Clinicians
- 2014 Ethical Principles for Pennsylvania Mental Health Professionals;
Child Abuse
- 2015 Roles of Psychologists in Judicial Settings;
Virtual Ethics;
Yoga as Medicine;
When Video Gaming Becomes Compulsion
- 2017 Moral Injury On and Off The Battlefield: Trauma-Related Guilt and Institutional Silencing;
From Witchcraft to Waterboarding: The Art and Science of False Confessions;
Using the Neuropsychological Consequences of Cannabis Use as a Mitigating Factor in
Criminal Sentencing;
Undiagnosed Autism Spectrum Disorder in Child Pornography Defendants;

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Can the Accuracy of Sexual Recidivism Actuarial Measures Be Increased By Considering Dynamic Risk Factors?;

Detection of Previous Exposures to Traumas Among Juvenile Offenders;

Till Death Do Us Co-Parent? The Sustainability of Co-Parenting;

Methodology of Bonding Studies to Evaluate Sibling Attachment Bonds: Interface with Social Psychology;

Forensic Psychological and Psychiatric Advocacy for Troubled Kids in Trouble in Special Needs Schools;

Valid Assessments: What do the APA Standards and the AMA Guides Tell Us?;

Fees and Collections: Practice Challenges and Ethical Quandaries in Forensic Psychology;

Forensic Skills Workshop: Role of the Psychologist in Civil and Criminal Litigation;

Suicide Risk Assessment: What is the Standard of Care?;

Avoiding Trouble Doing Custody Assessments;

Forensic Implications of Autism Spectrum Disorder (ASD);

Forensic Psychological Evaluation in Immigration Cases: Assisting Immigration Attorneys by Providing an Expert Opinion on Clients Applying for Immigration Relief

ARTICLES

1. Cooke, G. The Efficacy of Two Behavior Therapy Procedures: An Analogue Study. Behavior Research and Therapy, 1966, 4, 17-24.
2. Boxer, A., Sadoff, R., & Cooke, G. the Court and the State Hospital: Model for a Therapeutic Relationship, Mimeo, 1967.
3. Cooke, G. Evaluation of the Efficacy of the Components of Reciprocal Inhibition Psychotherapy. J. Abnorm. Psychology, 1968, 73, 464-467.
4. Cooke, G. The Court Study Unit: Patient Characteristics and Comparison of Patients Judged Competent and Incompetent. J. Clin. Psychology, 1969, 25, 140-143.
5. Chodorkoff, B. & Cooke, G. Development of an Inventory to Measure Psychosexual Development. Psychol. Reports, 1970, 27, 186.
6. Cooke, G. & Chodorkoff, B. The Reliability of Classification of Behaviors within Psychosexual Stages. Psychol. Reports, 1970, 26, 751-754.
7. Chodorkoff, B. & Cooke, G. The Attitudes of Medical Students Toward Mental Illness: An Abstract. Proceedings of the 10th Annual Conference on Medical Education, 1971, 183.
8. Cooke, G. & Jackson, N.L.P. Competency to Stand Trial: The Role of the Psychologist. Professional Psychology, 1971, 2, 373-376.
9. Cooke, G. & Robey, A. The MMPI: A Case Study in Dissimulation. J. Consult. Clin. Psychol., 1971, 36, 355-359.
10. Cooke, G., Johnston, N. and Pogany, E. Factors Affecting Referral to Determine Competency to Stand Trial. American Journal of Psychiatry, 1973, 130: 8, 870-875. Also in Messinger, et. al., (Eds) 1973 Crime and Justice Annual, Aldine, Chi.
11. Johnston, N. & Cooke, G. Relationship of MMPI Alcoholism, Prison Escape, Hostility Control and Recidivism to Clinical Judgements. Journal of Clinical Psychology, 1973, 29, 32-34.

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12. Pierce, D., Cooke, G. & Frahm, P. Sort-Score Correlates of Schizophrenia. Journal of Personality Assessment, 1973, 37, 508-511.
13. Cooke, G., Pogany, E. & Johnston, N. A Comparison of Blacks and Whites Committed for Evaluation of Competency to Stand Trial on Criminal Charges. Journal of Psychiatry and Law, Fall, 1974, 319-337.
14. Wehmer, G., Cooke, G. & Gruber, J. Evaluation of the Effects of Training of Paraprofessionals in the Treatment of Alcoholism: A Pilot Study, British Journal of Addiction, 1974, 69, 33-39.
15. Cooke, G. Manual for the Use of the MMPI in the Correctional System, Mimeo, 1975.
16. Cooke, G. Basic Helping Techniques, Mimeo, 1975.
17. Cooke, G., Wehmer, G. & Gruber, J. Training Paraprofessionals in the treatment of Alcoholism: Effects on Knowledge, Attitudes, and Therapeutic Techniques. Journal of Studies on Alcohol, July, 1975, 36, (7), 938-948.
18. Cooke, G. & Sikorski, C. Factors Affecting Length of Hospitalization in Persons Adjudicated Not Guilty By Reason of Insanity. Bulletin of the American Academy of Psychiatry and Law. 1975, 2, 251-261.
19. Cooke, G. & Pogany E. The Influences on Judges' Sentencing Practices of a Mental Evaluation. Bulletin of the American Academy of Psychiatry and Law. 1975, 3, 245-251.
20. Gruber, J., Wehmer, G. & Cooke, G. Training Paraprofessionals in the Treatment of Alcoholism: Differences in Effects Due to Prior History of Alcohol and Drug Abuse. British Journal of Addiction, 1976, 71.
21. Cooke, G. & Thorwarth, C. Prediction of Elopement of Mentally Ill Offenders Using the MMPI. Criminal Justice and Behavior, 1978, 5, 151-157.
22. Cooke, G. Behavioral Treatment of Rapists. The Prison Journal, 1978, 58, 47-52. Reprinted in The Inventory of Marriage and Family Literature, St. Paul; University of Minnesota, Vol. 5, 1979.
23. Cooke, G. Training Police Officers to Handle Suicidal Persons, Journal of Forensic Sciences, 1979, 24, 227-233.
24. Cooke, G. The Role of the Psychologist in Evaluations of Criminal Competency and Responsibility, Clinical Psychology, Philadelphia Society of Clinical Psychologists, 1981.
25. Cooke, M. & Cooke, G. An Integrated Treatment Program for Mentally Ill Offenders: Description and Evaluation, International Journal of Offender Therapy and Comparative Criminology, 1982.
26. Male, T.C. & Cooke, G. The Psychologist and Joint Custody, in Pennsylvania Bar Institute, Custody Update: The New Shared Custody Act and New Custody Rules, Pennsylvania Bar Institute, 1982.
27. Dietz, P.E., Cooke, G., Rappoport, J.D. & Silvergleit, I.T. Psychojargon in the Psychological Report: Ratings by Judges, Psychiatrists and Psychologists, Behavioral Science and the Law, 1983.
28. Cooke, G. The Civil Competency Evaluation: Guidelines for Objective Assessment, American Journal of Forensic Psychology, 1985, 3, 10-20.
29. Cooke, G. Psychological Evaluations in Child Custody Cases, in Pennsylvania Bar Institute, Custody Update: Support, Witness and Discover, 1987.

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30. Cooke, G. Psychological Evaluation in Child Custody Cases in Pennsylvania Bar Institute, Child Custody Litigation, Harrisburg, PA 1990.
31. Cooke, G. & Cooke, M. Dealing with sexual abuse allegations in the context of custody evaluation, American Journal of Forensic Psychology, 1991, 9, 1-13.
32. Cooke, G. Legal Regulation of Child Sexual Abuse Evaluation and Testimony, American Journal of Forensic Psychology, Vol. 10, #4, 1992.
33. Cooke, G. Psychological Evaluation in Child Custody Cases, Pennsylvania Bar Institute, Winning with Expert Witnesses and Discovery in Family Law Litigation, Harrisburg, PA, 1994.
34. Cooke, G. The role of the mental health professional in harassment/discrimination cases: A moderate perspective, American Journal of Forensic Psychology, Vol. 14, #2, 1996.
35. Cooke, G. Parricide, Journal of Threat Assessment, Vol. 1, 2000.
36. Cooke, G. S.B. 74: How Will It Affect Custody Evaluations Conducted by Mental Health Professionals?, Pennsylvania Bar Institute, Child Custody Reform on the Horizon: Practice and Procedure Under S.B. 74, 2006.
37. Cooke, G. MMPI-2 Defensiveness in Child Custody Evaluations: The Role of Education and Socioeconomic Level, American Journal of Forensic Psychology, 2010, Vol 28, #2, 5-16.
38. Cooke, G. Who Doesn't Have PTSD?, The Atrium Group Newsletter, 2011, Vol 7, Issue 3.
39. Cooke, G. Interpreting the MMPI-2 with Higher Educational/Socioeconomic Level Custody Litigants, FamilyLawyerMagazine.com, April 10, 2012.
40. Cooke, G. Evaluating a Teen's Parental Preference, FamilyLawyerMagazine.com, February, 2013.
41. Cooke, G. Forensic Evaluation in Capital Cases, The Forensic Examiner, January, 2015.

BOOK CHAPTERS

1. Cooke, G. Behavior Therapy with Stutterers, in E. Anderson, Treatment of the Young Stutterer. Wayne State University Press, Detroit, Michigan, 1969.
2. Cooke, G. Psychological and Neuropsychological Evaluation. Chapter in Psychic Injuries (M.E. Lewis, R.L. Sadoff, Eds.) Courtroom Medicine, Vol. 12, Matthew Bender, New York, Second Edition, 1978. (Five Chapters in the 1979 reprinting.)
3. Cooke, G. Legal Issues, Chapter in G. Tyron, (Ed) The Professional Practice of Psychology, Ablex, Norwood, NJ., 1986.
4. Cooke, G. Forensic Psychology; Chapter in Wiley Encyclopedia of Psychology, R.J. Corsini (Ed.), Wiley, NY 1984.
5. Cooke, G. Forensic Psychology, Chapter in Cyril H. Wecht (Ed.) Forensic Sciences, Matthew Bender, NY 1984.
6. Cooke, G. Forensic Psychology, Chapter in The Concise Encyclopedia of Psychology, R. J. Corsini (Ed.), Wiley, NY 1987.
7. Cooke, G. Forensic Psychology, Chapter in Cullari, S. (Ed.) Foundations of Clinical Psychology, Allyn & Bacon, MA 1998.

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8. Cooke, G. Forensic Psychologists: Roles and Activities, Chapter in The Corsini Encyclopedia of Psychology and Behavioral Science, W. E. Craighead & C. B. Nemeroff (Eds.), Wiley, NY, 2001.
9. Cooke, G. Forensic Psychology, Chapter Forensic Sciences, Cyril H. Wecht (Ed.), Matthew Bender, NY 2000.
10. Cooke, G. & Cooke, M. Child Custody, Chapter in Forensic Mental Health Assessment: A Casebook, Kirk Heilbrun, Geff Marczyk, David DeMatteo (Eds), Oxford University Press, 2002.
11. Cooke, G. Forensic Psychologists: Roles and Activities, Chapter in The Corsini Concise Encyclopedia of Psychology and Neuroscience, W. E. Craighead & C. B. Nemeroff (Eds.), Wiley, NY, 2004.
12. Cooke, G. Forensic Psychology, Chapter Forensic Sciences, Cyril H. Wecht (Ed.), Matthew Bender, NY 2007.
13. Cooke, G. & Bleier, Henry R. Diminished Capacity in Federal Sentencing, Chapter Handbook of Forensic Assessment: Psychological and Psychiatric Perspectives, E. Y. Drogin, F. M. Dattilio, R. L. Sadoff, T. G. Gutheil (Eds.), Wiley, San Francisco, 2011.
14. Cooke, G. & Norris, D. Child Custody and Parental Fitness, Chapter Handbook of Forensic Assessment: Psychological and Psychiatric Perspectives, E. Y. Drogin, F. M. Dattilio, R. L. Sadoff, T. G. Gutheil (Eds.), Wiley, San Francisco, 2011.

BOOKS

1. Cooke, G. (Ed.) The Role of the Forensic Psychologist. Charles C. Thomas, Springfield, IL, 1980.

BOOK REVIEWS

1. Cooke, G. Book Review of Therapeutic Communities in Corrections by Hans Toch, in The Journal of Psychiatry and Law, Fall, 1981, 345-347.
2. Cooke, G. Book Review of Clinical Handbook of Psychiatry and the Law by Thomas G. Gutheil and Paul S. Appelbaum in The Journal of Psychiatry and Law, Summer, 1984, 285-288.
3. Cooke, G. Book Review of Advances in Forensic Psychology and Psychiatry, Vol. I, in The Journal of Psychiatry and Law, 1986.
4. Cooke, G. Book Review of Custody Disputes: Evaluation and Intervention, Edited by Ruth S. Parry, et al., in The Journal of Psychiatry and Law, Summer, 1987, 307-310.
5. Cooke, G. Book Review of Handbook of Forensic Psychology, Edited by Irving B. Weiner and Allen K. Hess, in Contemporary Psychiatry, 1988, 7, 1, 64-66.
6. Cooke, G. Book Review of Evaluating Children for the Courts Using Psychological Tests, Edited by Stanley Kissel and Nelson W. Freeling, in The Journal of Psychiatry and Law, Winter 1990. 453-457.
7. Cooke, G. Book Review of Assessment and Prediction of Suicide by Ronald W. Maris, et al., in The Journal of Psychiatry and Law, Spring 1994.

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8. Cooke, G. Book Review of The Violence Prediction Scheme: Assessing Dangerousness in High Risk Men by C. D. Webster, et. al., The Journal of Psychiatry and Law, Spring 1996.

EDITORIAL CONSULTATION

Editorial Consultant, Journal of Abnormal Psychology, 1972-1973.

Consulting Reader, Psychological Reports, 1975.

Consulting Reader, Journal of Studies on Alcohol, 1975-1979.

Editorial Consultant, Criminal Justice and Behavior, 1976.

Subcommittee for Paper Selection, Eastern Psychological Association Convention, 1978.

Editorial Consultant, American Psychologist, 1979, 1980, 1982, 1987.

Consulting Reader, Journal of Consulting and Clinical Psychology, 1986.

Consulting Reader, Journal of Threat Assessment, 2001-2002.

Manuscript Reviewer, Behavioral Sciences and the Law, 2015.

CONVENTION PRESENTATIONS, GUEST LECTURES, AND CONSULTS

Cooke, G. University of Pennsylvania Center for Studies in Social-Legal Psychiatry: Psychological testing in forensic cases, 1973-1977, 1982.

Cooke, G. Forensic Psychology, Beaver College, 1973-1975.

Cooke, G. Evaluation of Competency to Stand Trial, St. Elizabeth's Hospital Federal Forensic Unit, Washington, DC, 1974.

Cooke, G. Psychological Testing in Forensic Cases, Villanova University Law School, 1975, 1984-1986.

Cooke, G. Philadelphia State Hospital Forensic Unit, Forensic Evaluations, 1975, 1982, 1983.

Cooke, G. Forensic Psychology, Swarthmore College, 1976.

Cooke, G. The Role of the Psychologist In Criminal Court Proceedings, Presented at the American Psychological Association Convention, Washington, D.C., 1976.

Cooke, G. The Role of the Forensic Psychologist in the Evaluation and Treatment of Offenders, Presented at the Pennsylvania Psychological Association Convention, October, 1977.

Cooke, G. Forensic Evaluations, Temple University Medical School, 1977.

Cooke, G. Psychological Evaluation in Forensic Cases, University of Pennsylvania Law School, 1977-1980.

Cooke, G. Testimony before the Governor's Task Force on Maximum Security Psychiatric Care, 1977.

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- Cooke, G. Forensic Psychological Evaluation, Bucks County Bar Association, 1977. Cooke, G. Behavioral Treatment of Rapists, Presented at the Conference, The Faces of Rape, January, 1978, Philadelphia.
- Chairperson and Discussant: Panel on Forensic Criminal Psychology, Eastern Psychological Association Convention, Washington, D.C., March 1978.
- Cooke, G. The Prediction of Dangerous Behavior, Presented at the Pennsylvania Psychological Association Convention, June, 1978, Lancaster, Pennsylvania. (Also participated as expert witness in a mock trial.)
- Mugrauer, W. and Cooke, G. Crisis Intervention Training for Police Officers, Conference on Violence in the Family, Atlantic County Community College, NJ, August, 1978.
- Mugrauer, W. and Cooke, G. Crisis Intervention Training for Police Officers, Police Training Conference, Pomona, NJ, September, 1978.
- Cooke, G. The Role of the Expert Witness; Screening for Competency to Stand Trial, Presented at the Philadelphia Society of Clinical Psychologists Continuing Professional Education Program, December, 1978.
- Cooke, G. Wernersville State Hospital, Forensic Evaluations, 1978.
- Cooke, G. Forensic Criminal Evaluations and Testimony, Allentown State Hospital, 1978.
- Cooke, G. Evaluation of Civil Competency under the Vecchione Decision, Presented at the Vecchione Workshop of the Philadelphia Bar Association, Philadelphia, May, 1979.
- Cooke, M.K., and Cooke, G. An Integrated Treatment Program for Mentally Ill Offenders: Description and Evaluation, American Psychological Association Annual Convention, New York, 1979.
- Cooke, G. Follow-up of Criminal Status of Persons Evaluated for Criminal Competence, American Psychological Association Annual Convention, New York, 1979.
- Cooke, G. and Lewinn, L. Presentation of Psychological Evidence in Criminal Court Cases, Presented at the Fall Conference of the Pennsylvania Psychological Association, 1979.
- Cooke, G. Assessing Civil Competency, Philadelphia Bar Association, 1979.
- Cooke, G. Psychological Evaluation in Personal Injury Cases, Philadelphia Association of Insurance Claims Processors and Adjustors, 1979.
- Cooke, G. Presentation on Mental Illness, Philadelphia Bar Association Training Seminar on Mental Disabilities, Philadelphia, March, 1980.
- Cooke, G. Crisis Intervention, Monroe-Carbon-Pike Counties MH/MR, 1980.
- Cooke, G. Forensic Psychological Evaluations, Northampton County MH/MR, 1980.
- Cooke, G. Community Services Institute, The New Insanity Legislation, 1980.
- Mugrauer, W. and Cooke, G. Crisis Intervention Training for Police Officers, at the Conference on Violence and Abuse in the Family, Mt. Holly, NJ, April, 1981.
- Cooke, G., Mullen, J., and Olsson, J. Utilization of Psychiatric and Psychological Assessments by Criminal Court Judges: Description of the Project, Methodology, and Preliminary Results, Presented at the American Psychology-Law Society Convention, 1981, Cambridge, MA.
- Cooke, G. Forensic Criminal Evaluations and Testimony, Allentown State Hospital, 1981.
- Cooke, G. Forensic Evaluation, Veterans Administration Hospital Out-Patient Clinic, Philadelphia, 1981.
- Cooke, G. Forensic Evaluation, Clarke Summit State Hospital, 1981.
- Cooke, G. Forensic Evaluation and Treatment, Privilege, Abington Hospital, 1981.

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- Cooke, G. Psychological Evaluation in Custody Cases, Pennsylvania Bar Association Program on Shared Custody, 1982, Philadelphia, PA.
- Cooke, G. Wernersville State Hospital, Forensic Evaluations, 1983.
- Cooke, G. Forensic Criminal Evaluation and Testimony, Harrisburg State Hospital, 1982.
- Cooke, G. Philadelphia Psychiatric Center, Forensic Evaluation, 1982.
- Cooke, G. Forensic and Neuropsychological Evaluation, Pennsylvania Hospital, 1982.
- Cooke, G. Pennsylvania Bar Institute, Workshops on the New Shared Custody Act, 1982.
- Cooke, G. Coatesville VA Hospital, Forensic Psychology, 1983.
- Cooke, G. Forensic Evaluation, Pennsylvania Association on Probation, Parole and Corrections Annual Meeting, 1983.
- Cooke, G. Community Services Institute, Treatment of Mentally Ill Offenders, 1983.
- Cooke, G. Philadelphia Psychiatric Center, Forensic Evaluation, 1983.
- Cooke, G. Forensic Evaluation, Philadelphia Society for Clinical Psychologists, 1984.
- Cooke, G. Forensic Evaluation, St. Joseph's University, 1984.
- Cooke, G. Forensic Neuropsychological Evaluation, Jefferson Medical College, 1985.
- Cooke, G. New Jersey Trial Lawyers Association, Psychological Evaluation of Psychic Injuries, 1985.
- Cooke, G. Psychological Screening of Applicants, Montgomery County Police Chiefs' Association, 1985.
- Cooke, G. Evaluation of Allegations of Child Sexual Abuse in Child Custody Cases, American Academy of Psychiatry and the Law Annual Convention, 1986, Philadelphia, PA.
- Cooke, G. Mental Health Professionals and the Criminal Justice System, Norristown State Hospital, 1986.
- Cooke, G. Wernersville State Hospital, Assessment and Prevention of Suicides Among Mental Hospital Patients, 1986.
- Cooke, G. and Nicholas, W.T. Can Forensic Mental Health Professionals Be Friends of the Court? Lenape Valley Foundation Conference, 1987, Valley Forge, PA.
- Cooke, G. Psychological Evaluations in Child Custody Cases, Pennsylvania Bar Institute Family Law Seminar, 1987, Philadelphia, PA.
- Cooke, G. Forensic Criminal Evaluation and Testimony, Harrisburg State Hospital, 1987.
- Cooke, G. Psychological Evaluations in Child Custody Cases, Pennsylvania Bar Institute Family Law Seminar, 1987, Harrisburg, PA.
- Cooke, G. Philadelphia Psychiatric Center, Neuropsychology as a Contribution to Critical Diagnosis, 1987.
- Cooke, G. Forensic Criminal Evaluations and Testimony, Allentown State Hospital, 1987.
- Cooke, G. Psychological Evaluations in Child Custody Cases, Pennsylvania Bar Institute Family Law Seminar, 1987, Pittsburgh, PA.
- Cooke, G. Coatesville VA Hospital, Forensic Assessment and Issues with Aggressive Patients, 1987.
- Cooke, G. Cross-Examination of Mental Health Experts in Child Custody Cases, Invited Presentation, Family Law Section, 1988, Annual Philadelphia Bench/Bar Conference, Washington, DC, 1988.
- Cooke, G. Forensic Criminal Evaluation and Testimony, Harrisburg State Hospital, 1988.
- Cooke, G. Criminal Evaluations for the Court, Haverford State Hospital, 1988.

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- Cooke, G. Forensic Psychology, Temple University Graduate Department of Psychology, 1989.
- Cooke, G. Psychological Evaluation in Child Custody Cases, Pennsylvania Bar Institute Family Law Seminar, 1990, Pittsburgh, PA.
- Cooke, G. Pennsylvania Bar Institute, Psychological Evaluation in Child Custody Cases, 1990.
- Cooke, G. Psychological Evaluation in Child Custody Cases, Pennsylvania Bar Institute Family Law Seminar, 1990, Philadelphia, PA.
- Cooke, G. Psychological Evaluation in Child Custody Cases, Pennsylvania Bar Institute Family Law Seminar, 1990, Harrisburg, PA.
- Cooke, G. Family Law Section, Psychologists Forum, Panel Member, Chester County Bar Association, 1991, West Chester, PA.
- Cooke, G. Wernersville State Hospital, Forensic Evaluations, 1991.
- Cooke, G. Psychological Issues for Clients in Custody Cases, Member of a panel presentation to the American Academy of Matrimonial Lawyers, Summer Program, 1992, Hershey, PA.
- Cooke, G. Anatomy of a Child Custody Case, Panel member for Family Law Practicum, Montgomery County Bar Association, 1992, Norristown, PA.
- Cooke, G. University of Pennsylvania Center for Studies in Social-Legal Psychiatry: Psychological & Neuropsychological Evaluation in forensic cases, 1992.
- Cooke, G. Psychological and Neuropsychological Evaluation in Forensic Cases, University of Pennsylvania Department of Psychiatry, 1992.
- Cooke, G. Recognition and Prevention of Suicide in County jails, Chester County Prosecutor's Office Training Seminar for County Police Departments, 1992.
- Cooke, G. Family Law Section Psychologists Forum, Panel member, Chester County Bar Association, 1992, West Chester, PA.
- Sadoff, R. and Cooke, G. Forensic Psychiatry and Psychology, Norristown State Hospital, 1993.
- Cooke, G. St. Joseph's University, Graduate Department of Criminal Justice, Psychological and Neuropsychological Evaluation in Forensic Cases, 1993.
- Cooke, G. Forensic Psychology and Child Custody Evaluation, University of Pennsylvania Law School, Law Clinic, 1993.
- Sadoff, R., Cooke, G., and Poplar, C. The use of Forensic Experts at Trial (including child sex abuse cases), Association of Trial Lawyers of America, NJ - Boardwalk Seminar, 1994, Atlantic City, NJ.
- Cooke, G. Winning With an Expert Witness, and Discovery in Family Law Litigation, Pennsylvania Bar Institute Family Law Seminar, 1994, Philadelphia and Harrisburg, PA.
- Cooke, G. Custody Recommendations When There Has Been Domestic Violence Between The Parents, House Republican Policy Committee's Children and Family Task Force Subcommittee on Protecting Children from Sex Offenders and Family Violence, 1994, Plymouth Meeting, PA.
- Cooke, G. The Use of Forensic Experts at Trial, The Association of Trial Lawyers of America - NJ, Boardwalk Seminar, Atlantic City, NJ, 1994.
- Cooke, G. Interviewing Children in Sex Abuse Cases, Pennsylvania Criminal Trial Lawyers Association, 1996, Bethlehem, PA.
- Cooke, G. Pennsylvania Bar Institute, Unhinging Custody and Vocational Experts: Preparing Cross on Topics of Expert, Ethical and Methodological Standards, 1996, Philadelphia, PA.

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- Cooke, G. Proving or Disputing the Head Injury Claim, Atlantic County Bar Association Litigation Skills Seminar, 1996.
- Cooke, G. Coatesville VA Hospital, Forensic Issues in the Treatment of Personality Disorders, 1996.
- Cooke, G. Widener University Institute for Graduate Clinical Psychology: Forensic Psychology - 1997.
- Cooke, G. Seminar: Defending the Difficult Damages Case: Medical & Legal Perspectives, Presentation on Neuropsychological Evaluation, 1998.
- Cooke, G. Guest Lecturer at Rosemont College: Evaluations of Persons Charged with Crimes - 1998.
- Cooke, G. Ethics, Law and Psychology, Coatesville Veterans Administration Hospital, 1999.
- Cooke, G. Widener University Institute for Graduate Clinical Psychology: Forensic Psychology - 1999.
- Cooke, G. Invited Participant in Presentation by Inn of Court, Lehigh County Bar Association, Allentown, PA: Evaluation of Child Sexual Abuse Allegations in Custody Cases, 2000.
- Cooke, G. Widener University Institute for Graduate Clinical Psychology: Evaluations in Employment Cases (Harassment, Discrimination, Retaliation) - 2001.
- Cooke, G. Guest Lecturer at Rosemont College: Presentation on Insanity - 2001.
- Cooke, G. Guest Lecturer at Temple University School of Law: Forensic Psychology - 2001; Evaluation and Testimony in Criminal Cases with a Focus on Downward Departure Cases - 2001.
- Cooke, G. Guest Lecturer at Temple University School of Law: Forensic Psychology - 2002.
- Cooke, G. Widener University Institute for Graduate Clinical Psychology: Forensic Psychology - 2003.
- Cooke, G. Guest Lecturer at Rosemont College: Forensic Psychology – 2003.
- Cooke, G. Invited Speaker by Inn of Court, Delaware County Bar Association: Child Custody Evaluation, 2004.
- Cooke, G. Guest Lecturer at the University of Pennsylvania Department of Psychiatry: Mental Retardation and the Death Penalty: The Atkins Case - 2004.
- Cooke, G. Guest Speaker at Chester County Child Custody Seminar, Gender Issues in Child Custody Evaluations, 2004.
- Cooke, G. Guest Lecturer at Rosemont College: Forensic Psychology – 2005.
- Cooke, G. Presentation to Forry, Ullman, Ullman & Forry: Utilization of Neuropsychological Testing in Evaluating Claims of Organic Brain Damage, 2005.
- Cooke, G. Presentation to Pennsylvania Bar Institute: Child Custody Reform on the Horizon: Practice and Procedure Under S.B. 74, S.B. 74: How Will It Affect Custody Evaluations Conducted by Mental Health Professionals?, 2006.
- Cooke, G. Presentation to Forry, Ullman, Ullman & Forry Seminar for State Farm Insurance Company: Psychological-Neuropsychological Evaluation in Personal Injury Cases, 2006.
- Cooke, G. Guest Lecturer at Widener University Graduate School of Psychology: Forensic Psychology, 2006.
- Cooke, G. Guest Lecturer at Rosemont College: Forensic Psychology, 2008.
- Cooke, G. Guest Lecturer at Widener University Graduate School of Psychology: Forensic Psychology Practice, 2008.

GERALD COOKE

CURRICULUM VITAE

PAGE 15

- Cooke, G. Guest Lecturer at Rosemont College: Forensic Psychology, 2009.
- Cooke, G. Guest Lecturer at Widener University Institute for Graduate Clinical Psychology: Child Custody Evaluation, 2009.
- Cooke, G. Guest Lecturer at Rosemont College: Forensic Psychology, 2010.
- Cooke, G. Guest Lecturer at Widener University Graduate School of Professional Psychology: Forensic Psychology, 2011.
- Cooke, G. Guest Lecturer at Rosemont College, Course on Forensic Sociology: Forensic Psychology, 2011.
- Cooke, G. Guest Lecturer at University of Pennsylvania Medical School, Postdoctoral Seminar on Forensic Psychiatry/Psychology: The Use of Psychological Tests in the Forensic Assessment of Malingering, 2011.
- Cooke, G. Guest Lecturer at Rosemont College: Course on Forensic Sociology: Forensic Psychology, 2012.
- Cooke, G. Presentation at Drexel University School of Law: Experts Varied Roles and Codes of Ethics (Child Custody Evaluations), 2014.
- Cooke, G. Presentation at 2014 Bench-Bar Annual Conference: Custody at the Extremes-From Unweened Infants to Unruly Teens, 2014.
- Cooke, G. Guest Lecturer at Rosemont College: Forensic Psychology, 2017.

COURT TESTIMONY

Testimony in Federal Court in Pennsylvania, New Jersey, Delaware, and Maryland. Testimony in State and County Courts in Pennsylvania, New Jersey, Delaware, New York, Michigan, North Carolina, Texas, and California. Since 1997 when we began keeping formal records of testimony, I have testified the following number of times: Child Custody – 137; Criminal – 198; Civil/Personal Injury – 94; Total – 429.

(Revised 4/2017)

EXHIBIT 14

A685

COMMONWEALTH OF PENNSYLVANIA COUNTY OF BERKS



POLICE CRIMINAL COMPLAINT COMMONWEALTH OF PENNSYLVANIA VS.

Magisterial District Number: 23-3-05

DEFENDANT:

(NAME and ADDRESS):

THOMAS M GAUBY SR 2739 BERNVILLE ROAD

DANIEL

SHARKEY

Address: LEESPORT, PA. 19533

Telephone: 610-916-4496

First Name

Middle Name

Last Name

Gen

Redacted

Redacted

Redacted

NCIC Extradition Code Type

- 1-Felony Full, 2-Felony Ltd, 3-Felony Surrounding States, 4-Felony No Ext, 5-Felony Period, A-Misdemeanor Full, B-Misdemeanor Limited, C-Misdemeanor Surrounding States, D-Misdemeanor No Extradition, E-Misdemeanor Pending, Distance

DEFENDANT IDENTIFICATION INFORMATION

Docket Number, Date Filed, OTN/LiveScan Number, Complaint/Incident Number, SID, Request Lab Services? fields

RACE: White, Asian, Black, Native American, Unknown

ETHNICITY: Hispanic, Non-Hispanic, Unknown

HAIR COLOR: GRY, RED, SDY, BLU, PLE, BRO, BLK, ONG, WHI, XXX, GRN, PNK, BLN

EYE COLOR: BLK, BLU, BRO, GRN, GRY, HAZ, MAR, PNK, MUL, XXX

Driver License, State, License Number, Expires, Weight (Lbs)

DNA, YES/NO, DNA Location, MNU Number, PC HEIGHT

Defendant Fingerprinted, Fingerprint Classification, YES/NO

DEFENDANT VEHICLE INFORMATION

Plate #, State, Hazmat, Registration Sticker, Comm'l Veh. Ind., School Velt., Oth. NCIC Veh. Code, Reg. same as Def.

Office of the attorney for the Commonwealth Approved/Disapproved Because:

(The attorney for the Commonwealth may require that the complaint, arrest warrant affidavit, or both be approved by the attorney for the Commonwealth Prior to filing. See Pa.R.Crim.P. 607.)

Name of the attorney for the Commonwealth, Signature of the attorney for the Commonwealth, Date

I, DET. SGT. M. A. HOFFERT of Bern Township Police Department do hereby state: (check appropriate box) 1. I accuse the above named defendant who lives at the address set forth above

A686

POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: 01/20/2015	OTN/LiveScan Number	Complaint/Incident Number 54-14-5659
Defendant Name	First: DANIEL	Middle:	Last: SHARKEY

- I ask that a warrant of arrest or a summons be issued and that the defendant be required to answer the charges I have made.
- I verify that the facts set forth in this complaint are true and correct to the best of my knowledge or information and belief. This verification is made subject to the penalties of Section 4904 of the Crimes Code (18 P.A.C.S. §4904) relating to unsworn falsification to authorities.
- This complaint is comprised of the preceding page, as well as the attached pages that follow, numbered _____ through _____

The acts committed by the accused, as listed and hereafter, were against the peace and dignity of the Commonwealth of Pennsylvania and were contrary to the Act(s) of the Assembly, or in violation of the statutes cited

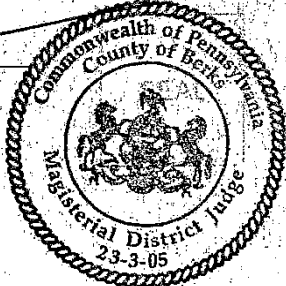
(Before a warrant of arrest can be issued, an affidavit of probable cause must be completed, sworn to before the issuing authority, and attached.)

January 14, 2015 (Date) D. S. P. M. A. H. B. (Signature of Affiant)

AND NOW, on this date 1/14/15 I certify that the complaint has been properly completed and verified

An affidavit of probable cause must be completed before a warrant can be issued.

23-3-05 (Magisterial District Court Number) [Signature] (Issuing Authority)





POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: 01/20/2015	OTN/LiveScan Number	Complaint/Incident Number 54-14-5659
Defendant Name	First: DANIEL	Middle:	Last: SHARKEY

The acts committed by the accused are described below with each Act of Assembly or statute allegedly violated, if appropriate. When there is more than one offense, each offense should be numbered chronologically.

(Set forth a brief summary of the facts sufficient to advise the defendant of the nature of the offense(s) charged. A citation to the statute(s) allegedly violated, without more, is not sufficient. In a summary case, you must cite the specific section(s) of the statute(s) or ordinance(s) allegedly violated. The age of the victim at the time of the offense may be included if known. In addition, social security numbers and financial information (e.g. PINs) should not be listed. If the identity of an account must be established, list only the last four digits. 204 PA.Code §§213.1-213.7.)

<input type="checkbox"/> Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903
<input type="checkbox"/>	3124.2	(a)	of the
Lead?	Offense #	Section	Subsection
	3124.2	(a)	of the
		PA Crimes Code	7
		Counts	F-3
		Grade	
		NCIC Offense Code	
		UCR/NIBRS Code	
<input type="checkbox"/> PennDOT Data (if Applicable)	Accident Number	<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Work Zone
Statute Description (Include the Name of the Statute or Ordinance): INSTITUTIONAL SEXUAL ASSAULT			

Acts of the accused associated with this Offense:
PACC 3124.2 (a) Institutional Sexual Assault,

IN THAT, on or about said date(s), the DANIEL W. SHARKEY, did being an employee or agent of the Department of Corrections or a County correctional authority, youth development center, youth forestry camp, State or County juvenile detention facility, other licensed Residential facility serving children and youth, or mental health or mental retardation facility or institution engage in sexual intercourse, or indecent contact with a E.D. who was a detainee, in violation Section 3124.2 (a) of the PA Crimes Code. 18 P.S. 3124.2 (a), Felony-3

A688

**POLICE CRIMINAL COMPLAINT**

Docket Number:	Date Filed: 01/20/2015	OTN/LiveScan Number	Complaint/Incident Number 54-14-5659
Defendant Name	First: DANIEL	Middle:	Last: SHARKEY

AFFIDAVIT OF PROBABLE CAUSE

On August 19, 2014 the Bern Township Police Department received a report from Diane Edwards the Executive Director of the Berks County Residential Center, regarding a possible inappropriate relationship between an employee and a 19 year old female resident.

The Berks County Residential Center is located at 1040 Berks Road, Leesport Pennsylvania 19533, Bern Township, Berks County. The Center houses detainees for the Department of Homeland Security, Immigration and Customs Enforcement. The Center is staffed and operated by Berks County employees under a contract with the U.S. Government. The detainees are for the most part mothers with their children and a hand full of males that have been detained by the Federal Government and are in removal proceedings.

Information received from Edwards was that an Immigration and Customs Enforcement; (ICE) detainee Witness 1, had reported to Shelter Care Counselor; Jeneake Y. Torres that a Shelter Care Counselor; (SCC) by the name of Daniel W. Sharkey was involved in an inappropriate sexual relationship with an ICE detainee by the name of E.D. Due to Witness 1's report Edwards conducted an internal investigation interviewing several detainees and staff members who provided varying accounts of what was observed and heard throughout the Center. As a result of the Center's investigation Dan Sharkey was suspended and eventually terminated for violations of employee policies.

Edwards also reported the incident to Immigration and Customs Enforcement. I was contacted by Office of Professional Responsibility Senior Special Agent Michael Fischgrund. We were provided copies of the surveillance videos and after review observed SCC Sharkey and E.D. had on several occasions met for extended periods of time, (30 minutes) inside a female resident restroom. Sharkey was seen in the hallway of the location of E.D. bedroom several times and entering female bedrooms in that hallway with E.D. Sharkey was seen in the Center's Chapel, entering a laundry room, eating dinner, and watching T.V. with E.D. in the common area of the Center.

On October 01, 2014 Senior Special Agent Fischgrund and I began a criminal investigation into the alleged incidents, beginning with interviews of detainees identified on the surveillance recordings and who had made complaints to Center Staff.

Two of the subjects interviewed are juvenile detainees and they both had personally seen Sharkey and E.D. enter, or in the female restroom. One female juvenile interviewed, Witness 2, reported that on August 10, 2014 she had entered the bathroom and states she found Sharkey and E.D. in a stall, together. During her interview Witness 2 stated that when she entered the bathroom stall area Sharkey had his hands on E.D. hips adjusting her shorts. She did not know if Sharkey was pulling down or pulling up E.D. shorts. Witness 3 a male juvenile, had watched E.D. enter the female restroom and then a few moments later seen SCC Sharkey enter the same restroom which he thought was not normal. Witness 3 stated he knocked on the restroom door several times because he was curious as to why SCC Sharkey had entered the restroom.

**POLICE CRIMINAL COMPLAINT****AFFIDAVIT CONTINUATION PAGE**

Docket Number:	Date Filed: 01/20/2015	OTN/LiveScan Number	Complaint/Incident Number 54-14-5659
Defendant Name:	First: DANIEL	Middle:	Last: SHARKEY

AFFIDAVIT OF PROBABLE CAUSE CONTINUATION

October 08, 2014 an interview was conducted with ICE detainee Witness 4. Witness 4 stated that she knew both SCC Sharkey and E.D. Witness 4 stated that at first SCC Sharkey would act professionally towards E.D., but later that began to change. Witness 4 stated that E.D. would be inside another female detainee, Witness 5's bedroom, and Witness 5 would make excuses to have SCC Sharkey come to her room by requesting towels, soap, etc. In the beginning SCC Sharkey would hand over the supplies at the door to the bedroom. As time went on both Witness 5 and E.D. would request supplies and SCC Sharkey began going into their bedrooms. Witness 4 stated that she has observed SCC Sharkey and E.D. hugging and kissing each other on several occasions. Witness 4 also observed E.D. with SCC Sharkey's cell phone one evening. Witness 4 stated that the other ICE detainees were upset with what appeared to be an inappropriate, non-professional relationship between SCC Sharkey and E.D.

October 08, 2014 an interview was conducted with ICE detainee Witness 6. Witness 6 stated that she knew E.D. as E.D. and SCC Sharkey as "Dan". Witness 6 stated that on an evening in August of 2014 she had seen E.D. and SCC Sharkey, hugging and kissing each other on the mouth like girlfriend and boyfriend inside the entrance to Witness 7's bedroom as she walked by the bedroom. Witness 6 states she walked down the hallway a little way then turned around at which time she seen three juvenile ICE detainees watching E.D. and SCC Sharkey. Witness 6 returned to her room and instructed the three juveniles to go to sleep at which time her daughter told her she had already seen E.D. and SCC Sharkey hug and kiss. Witness 6 also stated that this same date she had seen E.D. with a cell phone while inside Witness 7's bedroom.

October 23, 2014 and again on December 18, 2014 an interview was conducted with ICE detainee Witness 7. Witness 7 was identified by staff and other detainees as E.D. best friend.

Witness 7 stated that on numerous occasions she acted as a look out for Sharkey and E.D. while they were in the bedrooms hugging and kissing. Witness 7 stated she had not actually seen Sharkey and E.D. have intercourse but E.D. had told her they did. Witness 7 was shown a silver men's ring with "ANAM CARA" engraved in Celtic inscription that was found on E.D. person by staff members. Witness 7 was asked if she had ever seen the ring before. Witness 7 stated that she had seen Dan Sharkey remove the ring from his finger and give it to E.D.

On December 04, 2014 during a recorded interview with E.D. at the Berks County District Attorney Detective's office she admitted that she and Dan Sharkey had a sexual relationship while Dan Sharkey was employed at the Residential Center. E.D. stated that they would meet in the several different areas of the center to include female resident's bathrooms, female resident's bedrooms, laundry rooms and the chapel to hug and kiss.

E.D. stated that Sharkey told her she was pretty and he liked her a lot. The relationship progressed over a two month period during which time E.D. states her and Sharkey had sexual intercourse on three (3) occasions where his penis entered her vagina. Twice in a female's bathroom on



POLICE CRIMINAL COMPLAINT

AFFIDAVIT CONTINUATION PAGE

Docket Number:	Date Filed: 01/20/2015	OTN/LiveScan Number	Complaint/Incident Number 54-14-5659
Defendant Name	First: DANIEL	Middle:	Last: SHARKEY

AFFIDAVIT OF PROBABLE CAUSE CONTINUATION

the same day, within hours of each encounter and once in a bathroom of a female resident's bedroom.

E.D. stated that on each occasion prior to having intercourse Sharkey would perform oral sex on her and the last time they had intercourse she performed oral sex on him. E.D. stated that there were other occasion that the two of them were alone and Sharkey wanted her to touch his penis, but she refused. E.D. stated when she refused Sharkey would become annoyed asking her why she would not touch him.

E.D. stated that she consented to having sexual relations with Sharkey, but at the same time felt that she had to or else he would get annoyed with her. E.D. stated that she felt if she did not consent to Sharkey's requests there would be negative repercussions for her because Sharkey had told her if anyone found out about their relationship she would get deported and he would go to jail.

E.D. stated that during their relationship Sharkey had given her his cell phone to take pictures of her in various stages of undress and to communicate with her. E.D. stated that prior to her and Sharkey having intercourse, he had given her a ring that he used to wear on his finger. The ring was silver and had an inscription on it which she did not know the meaning of. Sharkey had given the ring to Witness 7 to give to her so that she would remember him. E.D. stated that Sharkey had also given her several of his t-shirts and photographs of himself that she had destroyed after he no longer worked at the center. E.D. stated she now feels that she had been taken advantage of by Sharkey.

E.D. stated that Sharkey had told her on more than one occasion that he loved her and she believed they would have a life together once she was released from the center.

Based on your affiant's investigation, education, training and experience in law-enforcement, I submit that there are specific and articulable facts contained within this affidavit of Probable Cause that support probable cause to believe that Daniel Sharkey, on several occasions committed the crime of Institutional Sexual Assault.

The statements contained in this affidavit of Probable Cause are based on information provided to the affiant by the victim and witnesses with whom have knowledge of facts surrounding this investigation.

This affidavit is prepared and filed on information received and investigation conducted.



POLICE CRIMINAL COMPLAINT
AFFIDAVIT CONTINUATION PAGE

Docket Number:	Date Filed: 01/20/2015	OTN/LiveScan Number	Complaint/Incident Number: 54-14-5659
Defendant Name	First: DANIEL	Middle:	Last: SHARKEY

AFFIDAVIT OF PROBABLE CAUSE CONTINUATION

I, DET. SGT. M. A. HOFFERT, BEING DULY SWORN ACCORDING TO THE LAW, DEPOSE AND SAY THAT THE FACTS SET FORTH IN THE FOREGOING AFFIDAVIT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

D. Sgt. M. A. Hoffert
(Signature of Affiant)

Sworn to me and subscribed before me this 14th day of Jan
1/14/15 Date [Signature], Magisterial District Judge

My commission expires first Monday of January, 2018

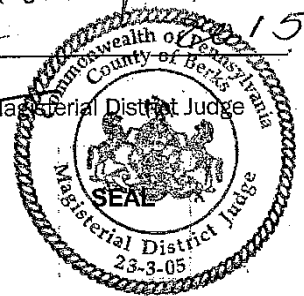


EXHIBIT 15



COUNTY OF BERKS, PENNSYLVANIA

Residential Center

Family Residential Program

1040 Berks Road
Leesport, PA 19533

Phone: 610-396-0310
Fax: 610-396-9218

Diane Edwards, Executive Director

To: Management
From: Brandon Witmer, Supervisor
Date: 8/18/14
Re: Interview Luz Carranza-Miranda **Redacted** Esmeralda Quispe-Carranza **Redacted**

On the above mentioned date, residents Luz Carranza-Miranda **Redacted** and Esmeralda Quispe-Carranza **Redacted** were interviewed by Supervisor Ben Schneider and myself utilizing Language Services. Ana and Jennifer were questioned on some allegations brought forth the previous day regarding resident E.D. E.D. and Shelter Care Counselor (SCC) Dan Sharkey. It was explained to them the importance of the severity of the allegations alleged and honesty in their answers. We also informed them that all of their answers shall remain confidential and will not be shared with any staff or residents here in the Residential Center. Both stated that they understood.

Question 1: We asked Esmeralda if she witnessed E.D. and SCC Dan kiss at all here at the Residential Center.

Answer 1: She said no. She stated that she saw E.D. at her, Esmeralda's, bathroom with a black Iphone. She explained that her bedroom is #12 and that is not E.D.'s bedroom.

Question 2: We asked her if she had witnessed anything else.

Answer 2: She stated that she has seen E.D. and SCC Dan inside of Patricia Trochez-Rivera's **Redacted** bedroom talking. This was bedroom #13, also not E.D.'s bedroom.

Question 3: We asked Luz if she had ever witnessed anything.

Answer 3: She stated that she saw E.D. and SCC Dan at the playground outside talking. Luz and Esmeralda were also outside and wanted to re-enter the building. She stated that she called to SCC Dan four times for help in letting her back inside with no reply while he was in conversation with Esmery. Another staff that had exited the building, SCC Jillian Noll had then let the two back inside. She was not sure on the date of that incident. She also explained that about one month ago (not sure of date or time at all) she saw Patricia go to her bedroom to see if anyone was there. She then came out to the courtesy desk on the B Floor and requested soap for her bathroom from SCC Dan. Luz said that after a little while inside the room with the soap, she saw SCC Dan and E.D. exit the room. She was not sure of any other details about this due to it being a long time ago.


Luz Carranza-Miranda **Redacted**

8-19-14
Date

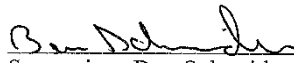

Esmeralda Quispe-Carranza **Redacted**

8-19-14
Date


Mark C. Scott
County Commissioner

Christian Y. Leinbach
County Commissioner

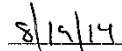
Kevin S. Barnhardt
County Commissioner




Supervisor Ben Schneider



Supervisor Brandon Witmer

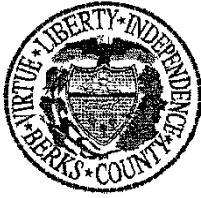


Date



Date

A695



COUNTY OF BERKS, PENNSYLVANIA
Residential Center
Family Residential Program

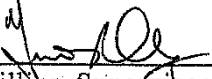
1040 Berks Road
Leesport, PA 19533

Phone: 610-396-0310
Fax: 610-396-9218

Diane Edwards, Executive Director

8/17/14

Nancy Miranda Morales # stated that E.D. had Dan's phone for about 20 minutes outside yesterday 8-16-14 at about 7:45pm.



Tim Phillips, Supervisor

8-17-14

Date

Mark C. Scott
County Commissioner

Christian Y. Leinbach
County Commissioner

Kevin S. Barnhardt
County Commissioner

www.countyofberks.com
Berks 02593

A696

EXHIBIT 16

Edwards, Diane

From: Allain, Sean CDR <Redacted>
Sent: Monday, August 18, 2014 12:23 PM
To: Edwards, Diane
Cc: Pepe, Patricia; Ritchey, Jennifer D
Subject: FW: RE: Resident Allegations

Diane,

This is the other email from Mike.

CDR Sean Allain, MSW, LCSW, BCD

Health Services Administrator

ICE Health Service Corps-Berks

1040 Berks Road

Leesport, PA 19533

Redacted (o)
Redacted (f)
Redacted (bb)

ICE Health Service Corps-York

3400 Concord Road

York, PA 17402

Redacted (o)
Redacted (f)

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From: Mosko, Michael T (CTR)
Sent: Monday, August 18, 2014 12:13 PM
To: Allain, Sean CDR; Clement, Julie M LT
Subject: RE: Resident Allegations

Sean & Julie,

I met with resident Ana RIVERA (Redacted) at her request this morning. In session, Ms. Rivera expressed concerns that her legal status/case would be negatively impacted by events that apparently occurred this weekend between another adult female resident and a male staff member. She expressed concern that somehow she was be in trouble because her daughter informed staff of what she (i.e., her daughter, J [Redacted]) witnessed in the bathroom between this resident and male staff. I educated Ms. Rivera that no repercussions to her or her daughter would occur for telling what either witnessed. Of note, Ms. Rivera continued by indicated that she was upset with the idea that other residents would not respect staff at this facility by engaging in comportment that might be inappropriately suggestive. She also expressed concern that staff would take furtherance on such comportment. Lastly, Ms. Rivera indicated that her daughter is now "afraid" to go to the bathroom by herself because of what she witnessed. I stated that I would meet with her and help her process these fears and concerns. Ms. Rivera commented that she would speak with Jennifer after lunch today and get back to me this afternoon.

Mike

Michael Mosko, Psy.D., ABPP
Licensed Psychologist
Board Certified in Clinical Psychology
Fellow of the American Academy of Clinical Psychology
ICE Health Service Corps (IHSC) Contractor
STG International
Berks County Residential Center
1040 Berks Road
Leesport, PA 19533

o:
f:
e:
e:

Redacted

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²
Berks 02443

A699

Edwards, Diane

From: Moyer, Thomas L
Sent: Monday, August 18, 2014 1:13 AM
To: Phillips, Timothy; Smith, David; Edwards, Diane
Subject: RE: Dan Sharkey

I burned the laundry room incident onto DVD that resident Claudia Flores Rios [Redacted] told Tim about. It shows Dan S. going into the laundry room and a couple minutes later a resident goes in while he is still inside. I placed it on Dave S. desk with the DVD Tim burned earlier.

From: Phillips, Timothy
Sent: Sunday, August 17, 2014 7:46 PM
To: Smith, David; Edwards, Diane
Cc: Moyer, Thomas L
Subject: Dan Sharkey

Tom sat in with me for some of the interviews, after speaking to the residents this is what was found out:

Ana Riveras [Redacted] daughter J [Redacted] witnessed Dan and [E.D.] last Sunday supposedly walking out of the bathroom and Dan appeared to be pulling his pants up.

Linda Rosales Nunez [Redacted] son M [Redacted] saw Dan and [E.D.] coming out from behind a tree outside (no date or time).

Ana Rodriguez Sutuc [Redacted] saw Dan kiss Patricia Trochez Rivera by her room door last night Saturday 8-16-14 around 8:40 pm. She also had Dan's phone last night in the room. Her daughter (Y [Redacted]) also witnessed the two of them behind a tree last night 8-16-14 around 6:30pm one was supposedly on top of the other one.

Aguedita Ordonez Tevalan overheard residents talking about [E.D.] and Dan kissing in the laundry room but she did not know when that was.

Claudia Flores Rios [Redacted] saw Dan and [E.D.] hugging and kissing numerous times but could not give any dates or times. But she did witness [E.D.] have Dan's phone last night 8-16-14 in her room. She also stated that Patricia is a lookout for [E.D.] and Dan when they are together. And that Ryan Reabold saw Dan and [E.D.] kiss last night in the laundry room.

Luz Carranza Miranda [Redacted] saw Dan and [E.D.] inside Patricia's bathroom weeks ago, no exact date or time. Her daughter E [Redacted] saw Dan and [E.D.] together outside yesterday 8-16-14.

Nancy Miranda Morales # stated that [E.D.] had Dan's phone for about 20 minutes outside yesterday 8-16-14 at about 7:45pm.

Thanks, Tim

Edwards, Diane

From: Wetzel, Arnel
Sent: Tuesday, August 19, 2014 1:32 PM
To: Edwards, Diane
Subject: RE: Sharkey investigation

Diane,

Thanks for all the information. Hello, from the great state of Utah ! Not good and very concerning on my part.

Just one thing I noticed in your documentation. On the second or third last page of document 1, during the room checks by J. Noll. She had to see Sharkey in that room, and it is noted from the video Sharkey never leaves after Noll does the check. Anybody talk with her? Why wouldn't she had said or told him to move on. I can't imagine it is standard for a male staff member to be in a female's room for an extended period of time.

I'll be following out here. If we need to talk directly, don't hesitate to give me a call. Work cell is **Redacted** or on my personal cell.

Thanks.

AW

Arnel R. Wetzel, Jr
Director of Human Resources
County of Berks Human Resources Department
633 Court Street, 8th Floor
Reading, PA 19601

Redacted

From: Edwards, Diane
Sent: Tuesday, August 19, 2014 11:45 AM
To: Trish Pepe; Krishock, Robert F (**Redacted**); Wildner, Jesse
Cc: Smith, David; Ritchey, Jennifer D; Baittinger, Joanna; Geffken, Carl; Weaknecht, Jessica; Wetzel, Arnel
Subject: Sharkey investigation

Hello everyone,

Attached is all the paperwork that I have currently gathered for the Sharkey investigation. We have three videos that are burned on disc, and can be viewed at any time at the facility (the time line and description of the videos is in the first attachment).

1. First attachment: Is all the signed statements from staff and residents about the incident, then are the video timelines, and the last document of the attachment is written by staff Brittany Rothermel (she documented the conversation she had with the 9 year old resident, J **Redacted**).
2. The second attachment is the photo Jennifer drew about the incident she witnessed.
3. The third attachment is all the signed trainings that Dan Sharkey as be given at the BCRC.

Edwards, Diane

From: Wetzel, Arnel
Sent: Tuesday, August 19, 2014 2:46 PM
To: Edwards, Diane
Subject: RE: Sharkey investigation

No issue, just noticed she came through and he was milling around/in a room for an extended period of time. That would raise my suspicion.

[REDACTED]

Talk soon.

AW

Arnel R. Wetzel, Jr
Director of Human Resources
County of Berks Human Resources Department
633 Court Street, 8th Floor
Reading, PA 19601

Redacted

From: Edwards, Diane
Sent: Tuesday, August 19, 2014 1:57 PM
To: Wetzel, Arnel
Subject: RE: Sharkey investigation

She was doing a sweep of the hallway and yes there will be several staff that will be spoken to you, dealing with Dan first then the others. Never a dull moment.

Utah??

Diane Edwards|Executive Director
Berks County Residential Center|Family Immigration Program
1040 Berks Road | Leesport, PA 19533
T **Redacted** | F **Redacted**
Redacted www.countyofberks.com

From: Wetzel, Arnel
Sent: Tuesday, August 19, 2014 1:32 PM
To: Edwards, Diane
Subject: RE: Sharkey investigation

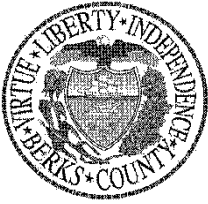
Diane,

Thanks for all the information. Hello, from the great state of Utah ! Not good and very concerning on my part.

1
Berks 02475

A702

EXHIBIT 17



COUNTY OF BERKS, PENNSYLVANIA
Residential Center
Family Residential Program

1040 Berks Road
Leesport, PA 19533

Phone: 610-396-0310
Fax: 610-396-9218

Diane Edwards, Executive Director

To: Management
From: Brandon Witmer, Supervisor
Date: 7/12/14
Re: Dan Sharkey Documentation

Shelter Care Counselor Dan Sharkey came to me today concerned that one of the residents may be flirting with him. He informed me that [REDACTED] E.D. (female age 19) has been smiling at him and following him around in the program a lot. He stated that she spoke with him the other day and had talked about asking if he was married and how old he was. He explained to her that it was inappropriate to talk about any of this and that residents were not to act in this manner while they are here. I told him that he should maintain a professional distance and be mindful of his surroundings and utilize other staff (especially females) if he needs to interact with this particular resident at all. I also informed him to immediately speak to a Supervisor if anything else should transpire. I did confirm with him and he did explain the rules and consequences to her of these actions.

Supervisor Brandon Witmer



7/12/14

Mark C. Scott
County Commissioner

Christian Y. Leinbach
County Commissioner

Kevin S. Barnhardt
County Commissioner

www.berks.com

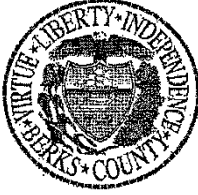
A704

Witmer, Brandon

From: Witmer, Brandon
Sent: Saturday, July 12, 2014 4:27 PM
To: Smith, David
Subject: Documentation

Just wanted to make you aware that SCC Dan Sharkey came to me today concerned that one of the residents may be flirting with him. He informed me that [REDACTED] E.D. (female age 19) has been smiling at him and following him around in the program a lot. He stated that she spoke with him the other day and had talked about asking if he was married and how old he was. He explained to her that it was inappropriate to talk about any of this and that residents were not to act in this manner while they are here. I told him that he should maintain a professional distance and be mindful of his surroundings and utilize other staff (especially females) if he needs to interact with this particular resident at all. I also informed him to immediately speak to a Supervisor if anything else should transpire. I did confirm with him and he did explain the rules and consequences to her of these actions.

Brandon Witmer
1st Shift Supervisor
Berks Family Residential Center
Redacted



COUNTY OF BERKS, PENNSYLVANIA
Residential Center
Family Residential Program

1040 Berks Road
Leesport, PA 19533

Phone: 610-396-0310
Fax: 610-396-9218

Diane Edwards, Executive Director

August 19, 2014

Dan Sharkey about a month ago did approach me outside joking about [REDACTED] E.D. [REDACTED] following him outside when he has the post. He stated she would sit near him at which point I instructed him like the other male staff to keep his professional distance from the resident and watch his interaction with her and other female residents. Dan stated something like "Yea, Yea, Yea, I know, I know".

Supervisor Len Kopetsky

Mark C. Scott
County Commissioner

Christian Y. Leinbach
County Commissioner

Kevin S. Barnhardt
County Commissioner

www.countyofberks.com
Berks 02528

A706



COUNTY OF BERKS, PENNSYLVANIA
Residential Center
Family Residential Program

1040 Berks Road
Leesport, PA 19533

Phone: 610-396-0310
Fax: 610-396-9218

Diane Edwards, Executive Director

8-21-14

Sometime around mid July when I got back from vacation Supervisor Brandon Witmer had told me that SCC Dan Sharkey approached him about a resident that was following him around the facility and making kissing faces at him and that he was feeling uncomfortable about it. Brandon told me that he documented it and that he told him to keep his distance and bring anything else that happens up to management. It was within that same week, possibly the next day, Scc Dan Sharkey approached me in the office and told me the same things he told Brandon and added that she (The resident in question) had tried to follow him into the cleaning closet but he went in and shut the door. I told him to maintain his distance and document anything he felt he needed to in order to keep himself clear of any incidents. I told him if he needed us to augment his post for a particular day ie: if he is the outside post and she is out there and he becomes uncomfortable, then he just needs to call a Supervisor and we will change his post so that he is on camera. He said that it was no big deal and he just wanted to make us aware. This is the last time he brought anything to my attention regarding this resident.

Supervisor
Jason Mills

Mark C. Scott
County Commissioner

Christian Y. Leinbach
County Commissioner

Kevin S. Barnhardt
County Commissioner

www.countyofberks.com

Berks 02424

A707

EXHIBIT 18

Rebecca Hilbert

I didn't hear about sending him to [redacted] ED
I heard about clothing changes Dan & [redacted] Muff

→ Trained? yes
 Sup on floor or in office more? floor (3rd is in office none)
 Mandated Reported? to Dan - yes
 Dotted up? not Bud
 → I didn't notice anything right away. I noticed Dan's hanging w/ Esmeray/Patricia a lot. She was going to say something but all this happened so I didn't
 → Dan S doesn't sit w/ Residents to eat. He sat w/ her a lot that week.
 → Saw Dan in laundry room & [redacted] ED was outside room. Did it seem odd, Rebecca felt like she interrupted something. he was switching Resident laundry around him.
 - is it normal that you see other Males alone w/ females → No
 - buddy staff needed is known.
 → Who was following who → Mutual (Dan didn't seem bothered by it)
 → I feel comfortable telling him but didn't - 3e
 ★ Junita said she told him it was weird ★ ??? ★ Kneager too
 Do you think Sups noticed ~~me~~ it when you did? I don't know
 Do you think Dan was intimidating? No but I'm not intimidated by anyone
 → There was no talk on floor prior to him going out
 - Do you know about any Management dating staff let us know.

Sandy Kneager She car pools w/ Mills

Trained? yes
 Mandated Reporter? yes
 Sups on floor more or in office? could be on floor more
 Dotted up? not really just for 2nd.
 → I wasn't aware of anything intimate but she wink before I was off. She's in washing out in the bedroom wings w/ a bunch of women. I brought it up to you guys before about how cocky he is. Told her she can't turn a blind eye.
 Do you think you could've taken it to a Sup if you did suspect something? I would feel better coming to OS. (I tried to not be around Dan because he is an ass) Dan told her he had anger management issues. Certain stuff = Darius is his buddy
 Joel is his buddy
 Do you think Sups Backed down to him? I think @ one time Mills was buddy buddy w/ him. I would go to Len before Jason.
 - How is the Jason & Erica rumor? Its still going around + I think they still are together

Date: Noticed that Lent Mills are not on floor much
Topic: _____

Attendees

Meeting Objectives
→ Josiah Interview

Trained? - yes ^{100% done} Mandated Reported? - Yes
Dotted up? - No (His normal/speak) (the job is easy)

I like to lead the shift as much as I can. I always want to help. I am on the floating list most of the time. I raised concerns to Len K w/ this incident

Notes: Cameras' home - We don't have cameras in room w/ internet bank. Len said clear the room & then go in. Laundry - tell them to wait outside the room

→ How you noticed any inappropriate relationships? Yes what flags - some people make poor judgement: Dan is hardly on the floor, he finds himself hardly where he belongs trying to delegate his work to others. Dan spent a lot of time w/ ^{ED} & Patricia, at one time Dan gave their kids a toy. Library incident, Josiah why?? We babysit I thought it was odd, inappropriate, I didn't approach Sups because I didn't think I had to go with on it. - I put security first when I am here. I do things more than needed.

He said he was a mandated reporter I could've approached Dan about it. If I tell Sups I felt it wouldn't have been handled.

Had cause more animosity between Dan & Josiah. They think Sups may not have enough time to address it. Dan should've been alone w/ her for that long. Did you notice if over time they were inseparable? yes, the green light was given. He shouldn't have been that close? Do you think Len/Mills knew? Yes

Are Sups out on the floor or in the office? ^{Mon & Tues} ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓
→ on floor more → they say they work as a team -

Is there a sup on your shift that a sup would blow it off? No

→ Sent ^{ED} to Dan all the time? No

→ How is Dan as an employee? he is a bully - very attacking - his way or no way

Action Items → Who is friends w/ Dan? Not sure - stand alone bully - Dan is hardly around

- Do you think it's too easy? yes and no
- We sign a lot of paper work - If we run a mtg w/ each shift individualing
- its better now that Dan is out on leave
-
-
-
-
-
-

Date Erika ^{going to room president? she knew it}

Topic Trained? yes ^{Attorneys} Mandated Reporter? yes Docked up? after the fact she heard this

Meeting Objectives Sending [ED] to Dan? No I would never do that Sup on floor or in office?

→ talked to [ED] Patricia a lot but it was always in public, I don't think he favored them in particular

As said you are [ED] a look out - she kinda went off she depend saying she expected this from him. No she never had that understanding that she would watch his back. I don't think he is any prize piece so really? I'm not afraid of him. Place saying he is mentally unstable - Darrin & Katie are talking to Dan Sharky still. If they are going to take me down for this I'll do something crazier. (but Dan said) One time he was kicking the boys down the hallway & told Erika to clean it up. Dan is not around me or anyone while he is working post. The day she wrote a report on Daniel & Kenya (after the [ED]) He pursued them it seemed in hindsight

I don't hang out w/ work associates

Jamie H ^{Sup on floor or office? Always could be there more after 8pm they are in office}

Trained? yes Mandated Reporter? yes Docked up? heard after incident sending Dan? Nope

Saw sharky hanging out w/ [ED], Patricia, Claude

- stopped sharky in laundry room and said don't be stupid there are no cameras
- it happens all the time that residents walk into the laundry room
- Dan can't speak Spanish and [ED] can't speak English
- shift is different w/ him - its nicer, calm I saw his FB page w/ stickers
- Jill and Sandy are worried about retaliation

lookout I would never he is not trusting I never had a spoken rule w/ him

→ is Dan AWOL a lot? No Brittany said he would disappear

Action Items

Jill → 9/5/14

(Colos on other phone?)

16th (Dana S, Beth, Gary, Jill, Matt, Ryan R, Hollinger, Sup) - 8

Trained? - yes [Mandated Report? yes] ^{sometimes} Dotted up? ^{a lot of them} [When can't rot. sups around]

Following - never heard sending her to him

→ More training always helps but our training is good. (the situation is disgusting)

→ in retrospect I see it all on the 16th - I know something wasn't right. We were really short staffed that night. 07 person left @ 8. Beth & I were on floor by ourselves

Dana S. disappeared a lot. He was @ the end of the hall

He had to be in one of the rooms. Males don't start checks until

9:30 am - Sups & Staff don't answer us on Radio.

I thought I needed something concrete & with him with a

vengeful prick. He said he you ~~called him~~ saw him in the

room. I can't fucking believe it. - we get attacks w/ druids -

Why didn't you take it to a sup? Our sups are shit, we

can never find them. Jason Mills & Erika still dating ^{Erika comes from far away}

sups suck

insinuating that they are ~~shit~~ she is afraid of him

that he will

cut Brake lines - Has he tried to contact you or anyone's

Nope - She saw them talk a lot but didn't think

anything of it. - Both can't speak each other's language

She stated My checks suck. Did Dana ever

feel you she was after him. → ^{mistake} this investigation is out of our hands

- Patients shouldn't be in other residents rooms - have another staff w/ you

or make them wait →

★

→ Who was on a trip that night? Erika & Sandy

→ Anything else on Sups? → milk is always in conf. rm & len is always

in Sups office. Everyone knows he is in conf. rm. - Len is on floor

more now since this incident. Conf. Rm is Mills HUB

→

9/2/14

- Ryan Interview - 9/2/14

- I was on a trip most of that day - didn't notice anything out of ordinary
- ★ he would go in to laundry room but tell a female to stay outside - nothing of extended period of time door open
- Residents don't get dolled up for 2nd
- Didn't hear anything going on (wasn't common knowledge)
- Any issues w/ management, staff, contractors, etc. - NO
- Do you think you are trained well enough to know boundaries
 - I have female staff w/ me whenever I go into resident room
 - mentioned PREP training too
 - Mandated reporting is very clear

Joel Noll

- nothing I saw or heard of prior - rumors going around are that male staff & female resident something happened in a resident floor bathroom
- Trained question - 100% clear for Joel -
- Mandated reported? - yes clear
- Did u ever see any staff @ any time spending too much time with residents - No - how do you not see it. I don't know
- When we 1st heard, someone said Joel saw Dan kiss a resident, No that didn't happen. I was taken back by it.
- Females dolled up for 2nd? I heard that after the fact ->
- Do you feel there is anything lacking from management on any of the shifts? I think it is more structured & managed from that than end

Jim Stedrick - Trained? - yes Mandated Reported? - yes Dolled up? - ^{want see it} ~~after kids are in~~

- I saw - Dan ^{ED} on CPU in library on google translator - I didn't think about it then. (makes sure they get out of their room)
- I have been seeing that residents are getting attached to certain staff / the more you talk spanish with them the more they talk to you. I saw Dan & ^{ED} around each other.
- It is more buttoned up & professional w/ outside & kids. Toilet clogged - must be by yourself



Dean H

School of Education

Attendees

Topic: Trained? yes I Mandated reporter? yes } take about sending her to him?

Meeting Objectives

I noticed [ED] would dress up for Dan S
 they were talking a lot? - I never heard Dan S speak Spanish
 if I saw someone I would've investigated
 Sups? → Joanna asked → Mills in Conf. Rm - when in Sups office

Beth (Sinking Football) (Sups?)

• Mandated? YES } Trained? yes } take about sending her to him? NO
 • I was off a lot in August → 8/10/14 we were short staffed → Did you call a sup about being short staffed? ★ No - suggest to call Dan S on radio & she was looking for [ED] & [J] & Dan S said they were all outside. Dan S wasn't John Reich-like. I never thought Dan would → (was sitting up types @ this time)
 I would take her to [language services] because I can't speak Spanish
 - I did a check & talked to him. I went on break a little later
 → Who told you about video? I don't know - one of the girls on my shift (she drinks everytime she [smoke]) [X] [X] [X] [X]
 → At this time as a mandated reporter you should of spoken up. now you implicated yourself (Crows she starts crying) Dan implicated you in this. He said you made eye contact
 → Show video → I don't know or remember
 → I'm not following around my coworkers [24/7]
 → ~~if you were short staffed why couldn't you go on break?~~
 → that night she left the floor a lot yet says she was busy doing other stuff & thinking other stuff
 Sups → Mills & Len → in general they have been around more now but all shifts are in the office a lot.
 Action Items
 Cont. Rm something in here - occasionally

they always claim they are short staffed

is her excuse for on past off this deluge

EXHIBIT 19

54-14-5659

Bern Township Police Department

- Administrative
- Investigation
- Suspects
- Gang Related
- Accident
- Ready for DA / Prosecutor
- Paperless
- Arrests Made

Officer: DET. SGT. M. A. HOFFERT - 1041

08/19/2014

Incident Report Form

Q. Have you ever found a resident with a cell phone?
A. No

Q. Is it possible for a staff member to lend or give a cell phone to a resident?
A. No, its against policy. The SCC should not even have one with them while working

The interview ended at approximately 12:27 P.M.

At approximately 1:40 P.M. we interviewed **Shelter Care Counselor Brittany Rothmehl**. We explained to her who we were and why we wanted to speak with her. She agreed to be interviewed.

Q. How long have you been employed with Berks County in your current position?
A. Since January 2010

Q. What is your normal shift?
A. 12:30 P.M. to 8:30 P.M.

Q. How long have you been on that shift?
A. A little over a year

Q. Are you the SCC who found the ring on **E.D.**?
A. Yes

Q. Did you write any reports?
A. Yes, I wrote two reports one on the cell phone and one on the ring

Q. Did you inventory **E.D.**'s belongings when she was processed into the Center?
A. Yes

Q. Do you remember that she had unauthorized items and that they were placed in a regular plastic bag because the Center had run out of property bags?
A. Yes, we do that at times but, I am not sure we did it on the day **E.D.** was processed.

Q. So is it safe to say that when the ring was found all of **E.D.**'s unauthorized jewelry was transferred to a property bag and re-dated as such.
A. That's what it appears was done.

We showed Rothmehl a property inventory sheet and ask;

Q. Are those your initials on the property inventory sheet?
A. Yes, for the things I checked, Beth checked some items also

Q. Do you understand and speak Spanish
A. Yes

Q. Can you hold a conversation with a Spanish speaking subject?
A. Yes

54-14-5659

08/19/2014

APPROVED BY:
 APPROVED ON:

PAGE 11

IRF 1.5

Berks 02921

A716

Bern Township Police Department

54-14-5659

- Administrative
- Investigation
- Suspects
- Gang Related
- Accident
- Ready for DA / Prosecutor
- Paperless
- Arrests Made

Officer: DET. SGT. M. A. HOFFERT - 1041

08/19/2014

Incident Report Form

Q. So you talk to the residents in Spanish?

A. Yes

Q. In one of your reports you basically wrote that E.D.'s son was wondering?

A. Yes, I ask J. [redacted] where his mom was

Q. What did he say?

A. He pointed to his room but, stated, "on the phone"

Q. What led you to the ring?

A. Because of the reported cell incident I wanded her and the wand kept hitting on her bra. I took her to the medical intake room with Sandy Kreger and told her she would have to take off her bra so we could make sure there was nothing on her. E.D. then admitted she had something and pulled out this wadded up paper towel. She told me it was a ring and opened it up saying it was just a ring.

Q. Was it a men's ring? A silver ring?

A. Yes it was a very large ring, it was not small

Q. When did she tell you she had entered the Center with the ring?

A. After the ring was found, while in the staff interview room with language services. I ask her if she had the ring when she came into the program and she stated, "Yes". I ask her where she had it and she stated in her clothes. She first stated she brought it from Honduras, then she said it was a gift given to her. She kept asking me what the inscription was on the ring. The only thing I told her that it was Irish but, not what it said

Q. During a routine hygiene inspection did you find a piece of paper in E.D.'s room?

A. Yes, it was in a red composition book

Q. What was on the paper?

A. The code to the entry door, the word Sharkey, and a smiley face

Q. Was there anything that u took notice of between Sharkey and E.D. ?

A. Just what I told you before about the library room

Q. Did you see anything else?

A. Dan would talk to E.D. more then usual, more then anyone else. I noticed that E.D. would dress nice and do her hair when Dan was working. I was told by other residents that Dan and E.D. were seen kissing after Dan was told he was suspended. That they were alone together in rooms. That she was using a cell phone. That Dan sent her a package here with a false return address after he was suspended. After Dan was suspended they told me that they knew what was going on between Dan and E.D. but, were afraid to say anything because of getting in trouble, or that Dan would treat them differently.

Q. Did you ever see the ring E.D. had before it was found on her?

A. No

Q. Were you friends with Dan?

A. Not really, I only knew he had three boys

54-14-5659

08/19/2014

APPROVED BY:
APPROVED ON:

PAGE 12

IRF 1.5

Berks 02922

A717

Bern Township Police Department

54-14-5659

- Administrative
- Investigation
- Suspects
- Gang Related
- Accident
- Ready for DA / Prosecutor
- Paperless
- Arrests Made

Officer: DET. SGT. M. A. HOFFERT - 1041

08/19/2014

Incident Report Form

Q. Who did Dan socialize with before the incident?

A. Darius

We then ask Brittany about the incident where J [redacted] drew a picture of what she had seen in a bathroom.

Brittany stated that J [redacted] drew the picture with her own thoughts and at no ones suggestions. J [redacted] told Brittany that she had a hard time opening the bathroom door because E.D. [redacted] was holding it shut. When she did see E.D. [redacted] and Dan she got scared and ran away to find her mom. Brittany ask J [redacted] if she had gone to the bathroom and she said no, "I ran away". Brittany states that she confirmed everything in the drawing as to facial expressions and body positions with J [redacted]. Brittany states that after Dan was suspended the other residents told her that E.D. [redacted] was crying, depressed and upset.

The interview concluded at approximately 3:15 P.M.

At approximately 3:20 P.M we interviewed **Shelter Care Counselor Darius Parker**. We explained to him who we were and why we wanted to speak with him. He agreed to be interviewed.

Q. How long have you worked here?

A. Two years, since June 2012

Q. Where did you work before?

A. Berks County J.C.O. for one year

Q. Do you know Dan Sharkey?

A. Yes

Q. Do you know him both professionally and personally?

A. Yes

Q. Have you talked to him since he is no longer working here?

A. No, its been like six weeks to two months

Q. Do you know E.D. [redacted] ?

A. Correct

Q. Do you know her last name?

A. No

Q. Do you know Patricia?

A. Yes

Q. Do you know her last name?

A. No

Q. What did Dan tell you as to why he is no longer allowed back at work?

A. He just told me it was bull shit and trumped up charges

Q. What do you mean trumped up charges?

A. That he was having sex with E.D. [redacted]

54-14-5659

08/19/2014

APPROVED BY:

PAGE 13

IRF 1.5

APPROVED ON:
Berks 02023

A718

EXHIBIT 20



COUNTY OF BERKS, PENNSYLVANIA
Residential Center
Family Residential Program

1040 Berks Road
Leesport, PA 19533

Phone: 610-396-0310
Fax: 610-396-9218

Diane Edwards, Executive Director

August 12th, 2014

3:01 Dan walks down to Room 11 and goes in. resident Patricia walks out.
3:02:54 Dan walks out of Room 11
3:31:39 Dan walks down to Back door and passes something to Joel Noll. Looked suspicious
3:57 Dan walks from A-Desk to gym and goes straight to E.D. for something and leaves
4:30 Dan and Darrius walk down to Room 12. Darrius goes in and Dan stands in hallway.
4:35 Dan gets a soap out of the staff desk and goes down to room 13 and goes in. Resident Patricia stands outside the room.
4:43 Dan comes out of room 13
4:54 E.D. comes out of room 13
5:26 Dan walks over to E.D. in the B-Elevator lobby and talks for a minute
5:30 Dan walks back over to E.D. and talks to her for 3 minutes
5:50 Dan sits by back bathroom
5:54 Dan gets up and goes over to E.D. table and sits down
6:23 Dan goes to the back bathroom where E.D. already is
6:24 E.D. looks out to see where staff are and ducks back in the bathroom hallway in kitchen
6:25 Dan come out of the hallway with a mop bucket
7:15 Dan comes in from outside and sits on chair outside of visitation room
7:16 It looks like Dan pulls his cell phone out of his pocket
7:21 John Behm comes down the hall and talks to Dan
7:22 John leaves
7:25 Dan leaves area when Katie Reabold comes down to mop
7:26 Dan goes into staff bathroom A-Floor
7:27 Dan exits bathroom
7:28 Dan is on B-Floor
7:33 Dan enters room 6 with a female resident and her kid and leaves within seconds, throws a piece of orange peel into the room, then walks down to room 3 and goes in
7:35 Dan comes out and stands by the door for seconds then walks down to staff desk
7:42 Dan goes back down to A-Floor
8:05 Dan comes back up to B-Floor
8:16 Dan is in the B-Elevator lobby TV area when a female resident pulls Dan by the pants closer to her and whispers something in his ear
8:18 Dan leaves area
8:18 Dan goes back to elevator lobby TV area and picks up a little girl
8:19 Female resident whispers in his ear
9:22 Dan is back in Medical with nurse Mark

Mark C. Scott
County Commissioner

Christian Y. Leinbach
County Commissioner

Kevin S. Barnhardt
County Commissioner

www.BerksCountyPA.com

A720

9:24 Dan exits Medical hallway

9:35 Dan and darrius go into staff bathroom on B-Floor

9:35 Resident gets off couch in the Tv area of B-Elevator lobby and walks over to the staff bathroom for about 3 seconds and then walks back to the couch. A few seconds later the same resident goes back over to staff bathroom for a few seconds again and then returns to the couch.

9:39 Dan and Darrius exit bathroom

9:47 Dan is sitting talking to female resident East Side of Dayroom

9:51 Dan gets up from talking with female resident and walks to courtesy desk

10:28 Dan is talking to 3 female residents in Dayroom

August 14, 2014

SCC Dan Sharkey and

E.D.

investigation

2:52:11- Dan enters B-west laundry room
2:53:27- E.D. enters same laundry room
2:54:00- Dan steps into hallway to get laundry
2:55:09- Dan sticks his head out of the door and looks quickly towards B-desk
2:58:57- E.D. son J enters the laundry room
2:59:25- E.D. exits with a laundry basket
3:00:15- SCC Rebecca H. approaches laundry room door
3:01:04- E.D. approaches laundry room door with laundry basket
3:01:25- Dan exits and E.D. enters. Rebecca still by door.
3:01:37- As Rebecca is walking away, Dan reenters the laundry room
3:02:00- Dan exits laundry room
3:02:33- Dan reenters
3:02:46- J exits laundry room and walks to his room
3:03:02- Dan sticks his head out of the door and sees a FA who he then talks to in the hallway.
3:03:12- E.D. exits laundry room and goes to room. Dan enters laundry room
3:03:25- Dan exits laundry room
3:04:35- Dan goes to B-floor staff bathroom
3:13:34- Dan at B-floor kitchenette
3:13:34- E.D. approaches kitchenette also
3:13:46- Dan walks away from kitchenette
3:21:34- Dan sits near E.D. who is laying on a sofa watching a movie on a projector in B-common
3:21:41- Dan stick his leg out to touch E.D. head with his foot. J sits on Dan's knee
3:25:38- J gets off of Dan's knee
3:27:12- E.D. goes to room 11
3:29:32- Dan looks in room 13 then goes and talks to E.D. in the doorway of room 11. At the end of the conversation, Dan motions with his head towards room 13 and walks towards B-desk. E.D. looks towards B-desk after he makes his head motion and laughs.
3:30:00- E.D. exits room 11 and looks towards B-desk as she walks to and enters room 13
3:31:38- Dan enters room 13
3:36:09- FA carrying a toddler enters room 13
3:36:39- FA exits room 13 and then goes back to the doorway and brings the toddler out by her hand. She then shuts the door and appears to be frustrated and/or upset. The toddler sits down in the hallway.
3:38:39- FA and toddler leave the bedroom area
3:46:25- SCC Darrius P. does a sweep and looks in room 13 then continues sweep
3:50:06- FA and 2 toddlers enter room 13
3:51:03- FA and 2 toddlers exit room and walk down hallway
3:54:13- E.D. looks out of room towards B-desk
3:54:19- Dan exits room and goes to laundry room

Berks 02417

A722



COUNTY OF BERKS, PENNSYLVANIA
Residential Center
Family Residential Program

1040 Berks Road
Leesport, PA 19533

Phone: 610-396-0310
Fax: 610-396-9218

Diane Edwards, Executive Director

August 15th, 2014

2:21 Dan signs A-Floor post orders
2:24 Exits to outside
3:26 goes into vending machine room
3:28 Exits building through back door
4:26 E.D. exits building through back door
5:00 Dan enters, uses bathroom
5:04 Dan exits the building
5:17 Dan and E.D. enter the building together
5:55 Dan sits at the same table as E.D. at dinner time
6:15 Dan is eating at B-Desk
6:26 Dan leaves the building
7:56 E.D. comes back inside the building
8:00 Dan enters the building and then exits right away
8:19 Dan comes back inside the building
8:45 Dan is talking to E.D.
9:11 Dan ends talking to E.D.
9:29 Dan pushes a couch with residents sitting on it in an intimidating way
9:30 Dan is by the window talking to E.D.
9:31 Throws something across the room towards the Courtesy Desk
9:45 sitting in back by windows talking to E.D.
10:07 Gets the dictionary from staff desk
10:10 puts the book back in desk

Mark C. Scott
County Commissioner

Christian Y. Leinbach
County Commissioner

Kevin S. Barnhardt
County Commissioner

www.countyofberks.com

Berks 02423

A723

EXHIBIT 21

BERKS COUNTY YOUTH CENTER

INFORMATIONAL REPORT

This report is for all incidents that do not result in a facility issued sanction. Required by the Department of Public Welfare Regulations: Necessary for monitoring resident/resident and staff/resident interactions with a comprehensive record of resident behavior; providing staff with a simplified means of documenting resident and staff interactions during these incidents:

J.
E.D.
L.

Name of Resident: P.R. Place of Incident: B-Floor

Date of Incident: 8/17/14 Time of Incident: 1320

Witnesses: N/A

TYPE OF INCIDENT(S)

- Violation of Program Rules
- Misconduct in School
- Disobedience/Disrespect
- Threatening/Intimidation
- Destruction of Property
- Offense Related
- Other: _____
- Suicidal Behavior
- Contraband
- Inappropriate Conversation
- Creating a Disturbance
- Medical

RESULT OF BEHAVIOR

- Precautionary Checks
- Caseworker referral
- Medical Attention
- Mental Health referral

other: Informational Report

If this report involves any alleged or witnessed sexual (and/or inappropriate contact) or physical altercations/behavior or any other issue that requires Mental Health notification, then the following needs to be completed and an investigation needs to be started under the supervision of the on-duty Supervisor as well as initiating the notification system.

On this date and time; _____ a copy of this report was hand delivered to _____ (DIHS Mental Health Employee or alternate DIHS Employee) by _____ (County Employee). If a DIHS Mental Health Employee is not on-site, a copy of this form will be hand delivered to any DIHS employee on-site and their name will be noted above. The original is to be kept in the County's possession for the resident's file.

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

Berks 00077

A725

Describe the incident stating the facts indicating who saw or heard what; what information was received and by whom; location of persons involved; what action/response took place. Include final disposition:

On above stated time and date I witnessed residents J. and L. start climbing on walker while he was in st. Both J. and L.'s mother E.D. and P.R. were sitting on the couch watching this happen and did nothing. J.J.'s mother repeatedly told them to get off the walker but J. and L. did not listen and P.R. and E.D. still did nothing. I then stood up and took J.'s arm and took him off the walker. She did not yank him off or hurt him in any way. She then took J.J. to her room. When I took J. off the walker P.R. asked her to which I did not respond. P.R. and E.D. sat on the couch conversing for a minute then got up and went looking for I. I followed them and witnessed P.R. and E.D. confront I. about taking J. off the walker at which point I asked them why they watched their children climb on the walker that they had no reason to be on, and even after hearing I. ask them to get off they did nothing about it. P.R. responded she grabbed J.'s arm and pulled him. I told them that I witnessed the whole incident and their children should not have been climbing all over the walker especially when there was a baby in it. I told them they need to be watching their children at all times and not just letting them do whatever they want. P.R. then responded, I know nothing. And both parents walked away angry.

Signatures: Katie Reabold

Staff: Katie Reabold

Date: 8/17/14

Supervisor: [Signature] Timothy PETERS

Date: 8-17-14

Administrative Signature: [Signature]

Date: 8/21/14

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

EXHIBIT 22

BERKS COUNTY YOUTH CENTER

INFORMATIONAL REPORT

This report is for all incidents that do not result in a facility issued sanction. Required by the Department of Public Welfare Regulations: Necessary for monitoring resident/resident and staff/resident interactions with a comprehensive record of resident behavior; providing staff with a simplified means of documenting resident and staff interactions during these incidents:

E.D. [Redacted] Y.G. [Redacted] C.M. [Redacted]
[Redacted] P.R. [Redacted]
[Redacted] K.F. [Redacted] L.M. [Redacted]
[Redacted] S.C. [Redacted]

Name of Resident: [Redacted] T.M. Place of Incident: Outside Area

Date of Incident: 8/17/14 Time of Incident: 1940

Witnesses: SCC Mike Kleffel

TYPE OF INCIDENT(S)

- Violation of Program Rules
 - Misconduct in School
 - Disobedience/Disrespect
 - Threatening/Intimidation
 - Destruction of Property
 - Offense Related
 - Other: informational
- Suicidal Behavior
 - Contraband
 - Inappropriate Conversation
 - Creating a Disturbance
 - Medical

RESULT OF BEHAVIOR

- Precautionary Checks
- Caseworker referral
- Medical Attention
- Mental Health referral
- other: documentation

If this report involves any alleged or witnessed sexual (and/or inappropriate contact) or physical altercations/behavior or any other issue that requires Mental Health notification, then the following needs to be completed and an investigation needs to be started under the supervision of the on-duty Supervisor as well as initiating the notification system.

On this date and time; _____ a copy of this report was hand delivered to _____ (DIHS Mental Health Employee or alternate DIHS Employee) by _____ (County Employee). If a DIHS Mental Health Employee is not on-site, a copy of this form will be hand delivered to any DIHS employee on-site and their name will be noted above. The original is to be kept in the County's possession for the resident's file.

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

Berks 00075

A728

Describe the incident stating the facts indicating who saw or heard what; what information was received and by whom; location of persons involved; what action/response took place. Include final disposition:

On the above stated date and time, I, SCC Beth Hrezik was stationed at the outside post. I, SCC Hrezik noticed many of the toddler and juvenile residents under 10 years of age were not being supervised by their parents. I, SCC Hrezik escorted the juvenile residents back to their parents to be more closely supervised. I, SCC Beth Hrezik then spoke to residents.

[Redacted] T.M.
[Redacted] S.C. [Redacted] K.F.
[Redacted] P.R.
[Redacted] E.D. [Redacted] Y.G.
[Redacted] C.M.
[Redacted] L.M.

with the help of officer Brittany Kothermel translating about watching their children more closely. It was explained to the above named residents that they could help each other out watching their children, (ex: one parent could help children riding bikes, while another parent plays soccer, or have some parents helping to monitor the playground area) but someone needs to be watching their children at all times. Residents stated above agreed to the suggestions and agreed to watch their children more closely. wrote IR for documentation.

Signatures:

Staff: Beth Hrezik Beth Hrezik Date: 8/17/14

Supervisor: Thomas L. Meyer Thomas Meyer Date: 8/17/14

Administrative Signature: R. J. Smith Date: 8/21/14

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

EXHIBIT 23

BERKS COUNTY YOUTH CENTER

INFORMATIONAL REPORT

This report is for all incidents that do not result in a facility issued sanction. Required by the Department of Public Welfare Regulations: Necessary for monitoring resident/resident and staff/resident interactions with a comprehensive record of resident behavior: providing staff with a simplified means of documenting resident and staff interactions during these incidents:

P.R. T.M.
 E.D. C.M.

Name of Resident: _____ Place of Incident: A unit

Date of Incident: August 18, 2014 Time of Incident: 19:10

Witnesses: Linda Kolasinski, medical

TYPE OF INCIDENT(S)

- | | |
|--|---|
| <input checked="" type="checkbox"/> Violation of Program Rules | <input type="checkbox"/> Suicidal Behavior |
| <input type="checkbox"/> Misconduct in School | <input type="checkbox"/> Contraband |
| <input type="checkbox"/> Disobedience/Disrespect | <input type="checkbox"/> Inappropriate Conversation |
| <input type="checkbox"/> Threatening/Intimidation | <input type="checkbox"/> Creating a Disturbance |
| <input type="checkbox"/> Destruction of Property | <input type="checkbox"/> Medical |
| <input type="checkbox"/> Offense Related | |
| <input type="checkbox"/> Other: _____ | |

RESULT OF BEHAVIOR

- | | |
|---|---|
| <input type="checkbox"/> Precautionary Checks | <input type="checkbox"/> Medical Attention |
| <input type="checkbox"/> Caseworker referral | <input type="checkbox"/> Mental Health referral |
| <input checked="" type="checkbox"/> other: <u>informative</u> | |

If this report involves any alleged or witnessed sexual (and/or inappropriate contact) or physical altercations/behavior or any other issue that requires Mental Health notification, then the following needs to be completed and an investigation needs to be started under the supervision of the on-duty Supervisor as well as initiating the notification system.

On this date and time; _____ a copy of this report was hand delivered to _____ (DIHS Mental Health Employee or alternate DIHS Employee) by _____ (County Employee). If a DIHS Mental Health Employee is not on-site, a copy of this form will be hand delivered to any DIHS employee on-site and their name will be noted above. The original is to be kept in the County's possession for the resident's file.

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

Berks 00073

A731

Describe the incident stating the facts indicating who saw or heard what; what information was received and by whom; location of persons involved; what action/response took place. Include final disposition:

On the reverse stated date and time, nurse Linda Kolaszinski, came outside to me, SCC Sandra Krasner, and informed me that there was 4 young children in the large muscle room climbing on the toys without their parents.

The children that were in the room without their parents were: [Redacted] P.R. [Redacted] J. [Redacted] (parent) E.D. [Redacted] E. [Redacted] (parent) T.M. [Redacted] M. [Redacted] (parent) C.M. [Redacted]

All parents were reminded, again, that they must be watching their children at all times. This report was written to inform staff and supervisors.

Signatures:

Staff: Sandra Krasner, Sandra Krasner Date: August 18, 2014

Supervisor: Julie/Law Krasner Date: 8/18/14

Administrative Signature: [Signature] Date: 8/21/14

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

EXHIBIT 24

BERKS COUNTY YOUTH CENTER

INFORMATIONAL REPORT

This report is for all incidents that do not result in a facility issued sanction. Required by the Department of Public Welfare Regulations: Necessary for monitoring resident/resident and staff/resident interactions with a comprehensive record of resident behavior: providing staff with a simplified means of documenting resident and staff interactions during these incidents:

Name of Resident: [Redacted] E.D. Place of Incident: outside womens showers
Date of Incident: 9/4/14 Time of Incident: 2030
Witnesses: SUP. Jason Mills

TYPE OF INCIDENT(S)

- Violation of Program Rules
- Misconduct in School
- Disobedience/Disrespect
- Threatening/Intimidation
- Destruction of Property
- Offense Related
- Other: _____
- Suicidal Behavior
- Contraband
- Inappropriate Conversation
- Creating a Disturbance
- Medical

RESULT OF BEHAVIOR

- Precautionary Checks
- Caseworker referral
- Medical Attention
- Mental Health referral
- other: _____

If this report involves any alleged or witnessed sexual (and/or inappropriate contact) or physical altercations/behavior or any other issue that requires Mental Health notification, then the following needs to be completed and an investigation needs to be started under the supervision of the on-duty Supervisor as well as initiating the notification system.

On this date and time: 9/4/14 2210 a copy of this report was hand delivered to [Signature] (DIHS Mental Health Employee or alternate DIHS Employee) by Paul Jason Mills (County Employee). If a DIHS Mental Health Employee is not on-site, a copy of this form will be hand delivered to any DIHS employee on-site and their name will be noted above. The original is to be kept in the County's possession for the resident's file.

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

Berks 00071

A734

Describe the incident stating the facts indicating who saw or heard what; what information was received and by whom; location of persons involved; what action/response took place. Include final disposition:

On above stated time and date resident [redacted] E.D. [redacted] asked me to shave. When I went to give her the razors she said "No" and pointed to [redacted] P.R. [redacted] I gave [redacted] P.R. [redacted] two razors and she said "K.V. [redacted]" and motioned the razors across her wrists like she was going to cut them. Then she said "Bye-Bye" and they both started laughing. I monitored [redacted] P.R. [redacted] while shaving and checked the razors afterwards to make sure the blades were still in them. I then notified the Supervisors. IR written to inform Staff. Resident was put on 5 min PC'S.

Supervisor NOTE * All PC'S ON [redacted] E.D. [redacted] HAVE BEEN LIFTED PER THE EXECUTIVE DIRECTOR @ 1445 9/5/14.

*Resident should never be allowed to shave after this incident until cleared by Mental Health PMS

Signatures: Katie Reabold

Staff: Katie Reabold

Date: 9/4/14

Supervisor: [Signature] Jason Mills

Date: 9/4/14

Administrative Signature: [Signature]

Date: 9/6/14

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

EXHIBIT 25

BERKS COUNTY YOUTH CENTER

INFORMATIONAL REPORT

This report is for all incidents that do not result in a facility issued sanction. Required by the Department of Public Welfare Regulations: Necessary for monitoring resident/resident and staff/resident interactions with a comprehensive record of resident behavior; providing staff with a simplified means of documenting resident and staff interactions during these incidents:

J.
[Redacted]

Name of Resident: [Redacted] E.D. Place of Incident: Outside

Date of Incident: 8/13/14 Time of Incident: 1900

Witnesses: SCC Gary Wright, SCC Oliver Fix

TYPE OF INCIDENT(S)

- Violation of Program Rules
- Misconduct in School
- Disobedience/Disrespect
- Threatening/Intimidation
- Destruction of Property
- Offense Related
- Other: _____
- Suicidal Behavior
- Contraband
- Inappropriate Conversation
- Creating a Disturbance
- Medical

RESULT OF BEHAVIOR

- Precautionary Checks
- Caseworker referral
- Medical Attention
- Mental Health referral
- other: counseled

If this report involves any alleged or witnessed sexual (and/or inappropriate contact) or physical altercations/behavior or any other issue that requires Mental Health notification, then the following needs to be completed and an investigation needs to be started under the supervision of the on-duty Supervisor as well as initiating the notification system.

On this date and time; _____ a copy of this report was hand delivered to _____ (DIHS Mental Health Employee or alternate DIHS Employee) by _____ (County Employee). If a DIHS Mental Health Employee is not on-site, a copy of this form will be hand delivered to any DIHS employee on-site and their name will be noted above. The original is to be kept in the County's possession for the resident's file.

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

Berks 00065

A737

10fa

Describe the incident stating the facts indicating who saw or heard what; what information was received and by whom; location of persons involved; what action/response took place. Include final disposition:

On the above stated date and time I, SCC Beth Hrezik was monitoring residents outside. I, SCC Hrezik noticed resident [redacted] was attempting to get on a bicycle that was much too large for him. Resident [redacted] was trying to hold the bicycle up while standing on a chair. I, SCC Hrezik told [redacted] that the bicycle was too big. Resident [redacted] is mother, [redacted] E.D. who was playing soccer at the time, was then brought over. I, SCC Hrezik informed resident [redacted] E.D. that the bike was too big for [redacted] J. Resident [redacted] E.D. stated the bike was fine. I informed [redacted] E.D. that her son could get hurt by riding the bike, and that he should not ride it. [redacted] E.D. stated "okay". As I, SCC Hrezik walked away, Resident [redacted] E.D. put her son [redacted] J. on the bike and returned to the soccer game. I, SCC Hrezik, with the help of SCC Oliver Fitz [redacted] E.D. to language services, I, SCC Hrezik informed [redacted] E.D. that it is not safe for [redacted] J. to ride a bike that is too large for him, and he needs to ride size appropriate bikes. Resident [redacted] E.D. stated that [redacted] J. knows how to ride a bike, and often rides a bike that is even larger than the one he was riding today. I, SCC Hrezik informed her that due to safety concerns for her son, he was not permitted

Signatures:

Staff: Beth Hrezik Date: 9/13/14

Supervisor: Thomas C. [redacted] Thomas Mayor Date: 9/13/14

Administrative Signature: David Smith Date: 9/14/14

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

20f2

Describe the incident stating the facts indicating who saw or heard what; what information was received and by whom; location of persons involved; what action/response took place. Include final disposition:

to ride a bike that was not the appropriate size. I, SCC Hrenik also informed E.D. that if her son was riding a bike, she needed to monitor him more closely. Resident E.D. stated she understood, and rolled her eyes. Wrote IR to inform staff.

Signatures:

Staff: Beth Hrenik Beth Hrenik Date: 9/13/14

Supervisor: Thomas Meyer Thomas Meyer Date: 9/13/14

Administrative Signature: David Smith Date: 9/19/14

EXHIBIT 26

BERKS COUNTY RESIDENTIAL CENTER

INFORMATIONAL REPORT

This report is for all incidents that do not result in a facility issued sanction. Required by the Department of Public Welfare Regulations: Necessary for monitoring resident/resident and staff/resident interactions with a comprehensive record of resident behavior: providing staff with a simplified means of documenting resident and staff interactions during these incidents:

Name of Resident: [Redacted] E.D.

Name of Resident: [Redacted] E.D. Place of Incident: Exercise Room / Interview Room

Date of Incident: 9-19-14 Time of Incident: 2015

Witnesses: SCC K. Reabold

TYPE OF INCIDENT(S)

- Violation of Program Rules
- Misconduct in School
- Disobedience/Disrespect
- Threatening/Intimidation
- Destruction of Property
- Offense Related
- Other: _____
- Suicidal Behavior
- Contraband
- Inappropriate Conversation
- Creating a Disturbance
- Medical

RESULT OF BEHAVIOR

- Precautionary Checks
- Caseworker referral
- Medical Attention
- Mental Health referral
- other: counseled

If this report involves any alleged or witnessed sexual (and/or inappropriate contact) or physical altercations/behavior or any other issue that requires Mental Health notification, then the following needs to be completed and an investigation needs to be started under the supervision of the on-duty Supervisor as well as initiating the notification system.

On this date and time: _____ a copy of this report was hand delivered to _____ (DIHS Mental Health Employee or alternate DIHS Employee) by _____ (County Employee). If a DIHS Mental Health Employee is not on-site, a copy of this form will be hand delivered to any DIHS employee on-site and their name will be noted above. The original is to be kept in the County's possession for the resident's file.

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

Berks 00059

A741

Describe the incident stating the facts indicating who saw or heard what; what information was received and by whom; location of persons involved; what action/response took place. Include final disposition:

On the stated date and time, I, SSC
Trika Taylor, waited by the adult
exercise room and witnessed E.D.
and P.R.
dancing
young on each other to music they
were playing on the television. I immediately
told them to stop and leave the room.
I spoke to E.D. via language services
and told her her dancing was inappropriate
and that it can't happen again. I
explained to her that she needs to keep
her hands to herself and touching any
other resident at all is not acceptable.
She said she understood. I also informed
E.D. that I witnessed her son with
cleaning spray earlier and that he may
never pick up chemicals. I also had the
interpreter explain this to her son.
They both said they understood.

Signatures:

Staff: Trika Taylor Date: 9-19-14
Supervisor: J. J. Lenkewitz Date: 9-19-14
Administrative Signature: Robert Davidson Date: 9/25/14

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

EXHIBIT 27

BERKS COUNTY RESIDENTIAL CENTER

INFORMATIONAL REPORT

This report is for all incidents that do not result in a facility issued sanction. Required by the Department of Public Welfare Regulations: Necessary for monitoring resident/resident and staff/resident interactions with a comprehensive record of resident behavior: providing staff with a simplified means of documenting resident and staff interactions during these incidents:

E.D.
[Redacted]

Name of Resident: [Redacted] Place of Incident: CAPOTONIA

Date of Incident: 09/21/14 Time of Incident: 1745

Witnesses: SCC LACY MOHN

TYPE OF INCIDENT(S)

- Violation of Program Rules
- Misconduct in School
- Disobedience/Disrespect
- Threatening/Intimidation
- Destruction of Property
- Offense Related
- Other: _____
- Suicidal Behavior
- Contraband
- Inappropriate Conversation
- Creating a Disturbance
- Medical

RESULT OF BEHAVIOR

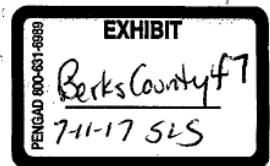
- Precautionary Checks
- Caseworker referral
- Medical Attention
- Mental Health referral
- other: COUNSELED

If this report involves any alleged or witnessed sexual (and/or inappropriate contact) or physical altercations/behavior or any other issue that requires Mental Health notification, then the following needs to be completed and an investigation needs to be started under the supervision of the on-duty Supervisor as well as initiating the notification system.

On this date and time: 9-21-14 2:130 a copy of this report was hand delivered to [Signature] (DIHS Mental Health Employee or alternate DIHS Employee) by Supervisor James M. Corby (County Employee). If a DIHS Mental Health Employee is not on-site, a copy of this form will be hand delivered to any DIHS employee on-site and their name will be noted above. The original is to be kept in the County's possession for the resident's file.

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

Berks 00057



A744

Describe the incident stating the facts indicating who saw or heard what; what information was received and by whom; location of persons involved; what action/response took place. Include final disposition:

ON THE STATED DATE AND TIME WHILE RESIDENTS ARE ENTERING THE CAFETERIA FOR DINNER, I SCC JOSIAH SCOTT - MLANGA AND TWO OTHER PROGRAM STAFF INCLUDING NURSE LINDA OBSERVED RESIDENT E.D. KICKING THE SIDE OF HER SON RESIDENT J. WHILE HE WAS LYING ON THE FLOOR CRYING.

THIS WORKER CONSULTED WITH SUPERVISOR SANDY SCHLESIMAN WHO INSTRUCTED FOR NURSE LINDA TO MANUALLY CHECKED RESIDENT J. FOR ANY INJURY. THIS WORKER THEN COUNSELLED RESIDENT E.D. FOR HER INAPPROPRIATE BEHAVIOR. COUNSELLING RESIDENT E.D., THIS WORKER INFORMED HER THAT SUCH BEHAVIOR WONT BE TOLERATED IN THIS FACILITY. RESIDENT E.D. THEN INFORMED THIS WORKER THAT HER SON WAS KICKING ANOTHER RESIDENT WHILE ON THE FLOOR. THIS WORKER THEN REINFORCED TO RESIDENT E.D. THAT CHILD ABUSE IS A ZERO TOLERANT IN THIS FACILITY.

RESIDENT E.D. THEN APOLOGIZED FOR HER BEHAVIOR AND THE WORKER THIS WORKER THAT SHE WILL TO GO TO HER ROOM. RESIDENT E.D. WAS CRYING THROUGHOUT THE COUNSELLING SESSION AND WAS OBSERVED RESTLESS. THIS REPORT WAS WRITTEN TO INFORM STAFF, CASE WORKERS AND MANAGEMENT.

* Both Residents E.D. and J. will be on 5 min mental health PC's until Reviewed by Mental Health Counselor. Child Checked by Michael, and no further notes. Totally appropriate. Child had no distress. [Signature]

Signatures:

Staff: Josiah Scott - Mlanga

Date: 09/21/2014

Supervisor: Jason M. Corby

Date: 9/21/14

Administrative Signature: [Signature]

Date: 9/23/14

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

9.22.14
3:00 AM

E.D. and J. ARE CLEARED FROM 15 MIN MENTAL HEALTH PC'S. E.D. COUNSELLED ON APPROPRIATE PARENTING. [Signature]

Berks 00058

A745

EXHIBIT 28

BERKS COUNTY RESIDENTIAL CENTER

INFORMATIONAL REPORT

This report is for all incidents that do not result in a facility issued sanction. Required by the Department of Public Welfare Regulations: Necessary for monitoring resident/resident and staff/resident interactions with a comprehensive record of resident behavior: providing staff with a simplified means of documenting resident and staff interactions during these incidents:

Name of Resident: [REDACTED] E.D. Place of Incident: A-Flvst
Date of Incident: 11-19-14 Time of Incident: 1940
Witnesses: SAC Rebecca Hilbert

TYPE OF INCIDENT(S)

- | | |
|---|---|
| <input type="checkbox"/> Violation of Program Rules | <input type="checkbox"/> Suicidal Behavior |
| <input type="checkbox"/> Misconduct in School | <input type="checkbox"/> Contraband |
| <input type="checkbox"/> Disobedience/Disrespect | <input type="checkbox"/> Inappropriate Conversation |
| <input type="checkbox"/> Threatening/Intimidation | <input type="checkbox"/> Creating a Disturbance |
| <input type="checkbox"/> Destruction of Property | <input type="checkbox"/> Medical |
| <input type="checkbox"/> Offense Related | |
| <input checked="" type="checkbox"/> Other: <u>Informational</u> | |

RESULT OF BEHAVIOR

- | | |
|--|---|
| <input type="checkbox"/> Precautionary Checks | <input type="checkbox"/> Medical Attention |
| <input type="checkbox"/> Caseworker referral | <input type="checkbox"/> Mental Health referral |
| <input checked="" type="checkbox"/> other: <u>info</u> | |

If this report involves any alleged or witnessed sexual (and/or inappropriate contact) or physical altercations/behavior or any other issue that requires Mental Health notification, then the following needs to be completed and an investigation needs to be started under the supervision of the on-duty Supervisor as well as initiating the notification system.

On this date and time; _____ a copy of this report was hand delivered to _____ (DIHS Mental Health Employee or alternate DIHS Employee) by _____ (County Employee). If a DIHS Mental Health Employee is not on-site, a copy of this form will be hand delivered to any DIHS employee on-site and their name will be noted above. The original is to be kept in the County's possession for the resident's file.

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

Berks 00046

A747

Describe the incident stating the facts indicating who saw or heard what; what information was received and by whom; location of persons involved; what action/response took place. Include final disposition:

On the stated date and time, I, Shelter Care counselor Matt Malinowski, was monitoring residents on A-Floor when resident E.D. E.D. approached me and said in Spanish, "Dónde esta Dan?" (where is Dan?) I, see Malinowski, responded in Spanish, "No se." (I don't know). Resident E.D. did not specify which "Dan" she was talking about. This report was written to inform staff and management. Also, Supervisor Jason Mills was notified about the exchange.

Signatures:

Staff: Matt Malinowski Date: 11/19/14

Supervisor: Jason Mills Date: 11/19/14

Administrative Signature: David Smith Date: 12/9/14

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

EXHIBIT 29

BERKS COUNTY RESIDENTIAL CENTER

INFORMATIONAL REPORT

This report is for all incidents that do not result in a facility issued sanction. Required by the Department of Public Welfare Regulations: Necessary for monitoring resident/resident and staff/resident interactions with a comprehensive record of resident behavior: providing staff with a simplified means of documenting resident and staff interactions during these incidents:

Name of Resident: [REDACTED] E.D. Place of Incident: outside caseworker office
 Date of Incident: 11/20/14 Time of Incident: 1030
 Witnesses: Sup Ben S.

TYPE OF INCIDENT(S)

- | | |
|---|---|
| <input type="checkbox"/> Violation of Program Rules | <input type="checkbox"/> Suicidal Behavior |
| <input type="checkbox"/> Misconduct in School | <input type="checkbox"/> Contraband |
| <input type="checkbox"/> Disobedience/Disrespect | <input type="checkbox"/> Inappropriate Conversation |
| <input type="checkbox"/> Threatening/Intimidation | <input type="checkbox"/> Creating a Disturbance |
| <input type="checkbox"/> Destruction of Property | <input type="checkbox"/> Medical |
| <input type="checkbox"/> Offense Related | |
| <input checked="" type="checkbox"/> Other: <u>dime found in couch outside caseworker office</u> | |

RESULT OF BEHAVIOR

- | | |
|---|---|
| <input type="checkbox"/> Precautionary Checks | <input type="checkbox"/> Medical Attention |
| <input type="checkbox"/> Caseworker referral | <input type="checkbox"/> Mental Health referral |
| <input type="checkbox"/> other: <u>in to</u> | |

If this report involves any alleged or witnessed sexual (and/or inappropriate contact) or physical altercations/behavior or any other issue that requires Mental Health notification, then the following needs to be completed and an investigation needs to be started under the supervision of the on-duty Supervisor as well as initiating the notification system.

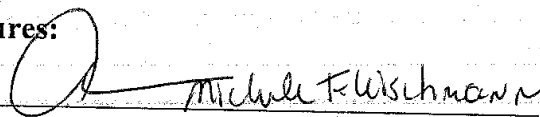
On this date and time: _____ a copy of this report was hand delivered to _____ (DIHS Mental Health Employee or alternate DIHS Employee) by _____ (County Employee). If a DIHS Mental Health Employee is not on-site, a copy of this form will be hand delivered to any DIHS employee on-site and their name will be noted above. The original is to be kept in the County's possession for the resident's file.

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

Describe the incident stating the facts indicating who saw or heard what; what information was received and by whom; location of persons involved; what action/response took place. Include final disposition:

On the above stated date and time Resident E.D. E.D. handed this SCC Michere Fleischmann that she found a dime (10¢) in the couch outside the caseworkers office. The dime was taken from the resident and given to Sup. Ben S. This IR was written to inform staff and management.

Signatures:

Staff:  Date: 11/20/14

Supervisor: Ben Schneider / Ben Schneider Date: 11/20/14

Administrative Signature:  Date: 12/9/14

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

EXHIBIT 30

BERKS COUNTY RESIDENTIAL CENTER

INFORMATIONAL REPORT

This report is for all incidents that do not result in a facility issued sanction. Required by the Department of Public Welfare Regulations: Necessary for monitoring resident/resident and staff/resident interactions with a comprehensive record of resident behavior: providing staff with a simplified means of documenting resident and staff interactions during these incidents:

J. _____

 E.D. _____

 O. S. _____
 V. _____

Name of Resident: _____ Place of Incident: Cafeteria
 Date of Incident: 12/9/14 Time of Incident: 1830
 Witnesses: _____

TYPE OF INCIDENT(S)

- Violation of Program Rules
- Misconduct in School
- Disobedience/Disrespect
- Threatening/Intimidation
- Destruction of Property
- Offense Related
- Other: Informational
- Suicidal Behavior
- Contraband
- Inappropriate Conversation
- Creating a Disturbance
- Medical

RESULT OF BEHAVIOR

- Precautionary Checks
- Caseworker referral
- Medical Attention
- Mental Health referral
- other: Informational/misunderstanding

If this report involves any alleged or witnessed sexual (and/or inappropriate contact) or physical altercations/behavior or any other issue that requires Mental Health notification, then the following needs to be completed and an investigation needs to be started under the supervision of the on-duty Supervisor as well as initiating the notification system.

On this date and time; _____ a copy of this report was hand delivered to _____ (DIHS Mental Health Employee or alternate DIHS Employee) by _____ (County Employee). If a DIHS Mental Health Employee is not on-site, a copy of this form will be hand delivered to any DIHS employee on-site and their name will be noted above. The original is to be kept in the County's possession for the resident's file.

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

Berks 00052

A753

Describe the incident stating the facts indicating who saw or heard what; what information was received and by whom; location of persons involved; what action/response took place. Include final disposition:

On the stated date & time residents [redacted] J. [redacted] O. [redacted] V. [redacted] & [redacted] O. [redacted] were sitting together in the cafeteria chairs located outside the kitchen door while their parents were doing dishes. This SCC Lynn Allen was cleaning the juice bar. When [redacted] turned around, [redacted] saw [redacted] kneeling in his chair backwards, facing the wall. [redacted] V. [redacted] is chair was in between [redacted] V. [redacted] & [redacted] O. [redacted] had both of his hands near his genital area. This SCC asked SCC John Behm if he could see what Joshua was doing. John O' confirmed, he could not. [redacted] asked [redacted] to turn around. [redacted] J. [redacted] & [redacted] O. [redacted] looked at each other & started laughing. [redacted] J. [redacted] turned around. This SCC contacted Supervisor J. Mills & asked if he could check the video to make sure nothing inappropriate occurred. In the meantime, this SCC used SCC Britlang to translate to talk to all three children & their parents. [redacted] J. [redacted] & [redacted] O. [redacted] had no reply. [redacted] V. [redacted] stated that [redacted] was fixing his zipper. Supervisor J. Mills called [redacted] & stated he did not see anything inappropriate on the video. This SCC apologized to both families & explained why it is important to be cautious. Both parents said they understood.

* Children should be monitored closely during meal times.

Signatures: Lynn Allen

Staff: Lynn Allen

Date: 12/9/14

Supervisor: Jason Mills

Date: 12/9/14

Administrative Signature: David Smith

Date: 12/22/14

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

EXHIBIT 31

A755

BERKS COUNTY RESIDENTIAL CENTER

INFORMATIONAL REPORT

This report is for all incidents that do not result in a facility issued sanction. Required by the Department of Public Welfare Regulations: Necessary for monitoring resident/resident and staff/resident interactions with a comprehensive record of resident behavior: providing staff with a simplified means of documenting resident and staff interactions during these incidents:

Name of Resident: [REDACTED] E.D. Place of Incident: B-1-105
Date of Incident: 12/15/14 Time of Incident: 2130
Witnesses: Larry M.

TYPE OF INCIDENT(S)

- Violation of Program Rules
- Misconduct in School
- Disobedience/Disrespect
- Threatening/Intimidation
- Destruction of Property
- Offense Related
- Other: _____
- Suicidal Behavior
- Contraband
- Inappropriate Conversation
- Creating a Disturbance
- Medical

RESULT OF BEHAVIOR

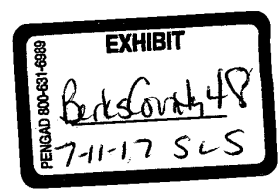
- Precautionary Checks
- Caseworker referral
- Medical Attention
- Mental Health referral
- other: Counseled

If this report involves any alleged or witnessed sexual (and/or inappropriate contact) or physical altercations/behavior or any other issue that requires Mental Health notification, then the following needs to be completed and an investigation needs to be started under the supervision of the on-duty Supervisor as well as initiating the notification system.

On this date and time; _____ a copy of this report was hand delivered to _____ (DIHS Mental Health Employee or alternate DIHS Employee) by _____ (County Employee). If a DIHS Mental Health Employee is not on-site, a copy of this form will be hand delivered to any DIHS employee on-site and their name will be noted above. The original is to be kept in the County's possession for the resident's file.

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

Berks 00050



A756

Describe the incident stating the facts indicating who saw or heard what; what information was received and by whom; location of persons involved; what action/response took place. Include final disposition.

On the above stated date and time Resident [REDACTED] E.D. was re-directed by sec Lucy Mohr about her inappropriate pant she was wearing. Resident [REDACTED] E.D. became agitated and defiant to follow staff Mohr's instruction of changing her pant. As this resident was re-directed by sec Katee Reabold, [REDACTED] E.D. again continued to be defiant and argumentative about changing her pant. [REDACTED] E.D. stated staff are not consistent about the rule of inappropriate dressing. As the incident became increasingly troubling, I sec Josiah Scott-Klang requested from both sec Reabold and Mohr for this worker intervention to counsel resident [REDACTED] E.D. with the help of nurse [REDACTED] E.D. who translated for this worker, resident [REDACTED] E.D. agreed to change her pant, she however refused hand over the pant in question. Plan for this worker is to follow up with management about concern raised by this resident. Staff will continue reinforcing rules as instructed by management. This report was written as information to staff, Case Worker and Management.

Signatures:

Staff: Josiah Scott-Klang Date: 12/15/14

Supervisor: Jason Mills Date: 12/15/14

Administrative Signature: David Smith Date: 12/22/14

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

EXHIBIT 32

BERKS COUNTY RESIDENTIAL CENTER

INFORMATIONAL REPORT

This report is for all incidents that do not result in a facility issued sanction. Required by the Department of Public Welfare Regulations: Necessary for monitoring resident/resident and staff/resident interactions with a comprehensive record of resident behavior: providing staff with a simplified means of documenting resident and staff interactions during these incidents:

Name of Resident: [REDACTED] E.D. of Incident: 2nd Floor
Date of Incident: 12/16/14 Time of Incident: 1509
Witnesses: see Dennis P

TYPE OF INCIDENT(S)

- Violation of Program Rules
- Misconduct in School
- Disobedience/Disrespect
- Threatening/Intimidation
- Destruction of Property
- Offense Related
- Other: Incident on 12/15/14 but informational
- Suicidal Behavior
- Contraband
- Inappropriate Conversation
- Creating a Disturbance
- Medical

RESULT OF BEHAVIOR

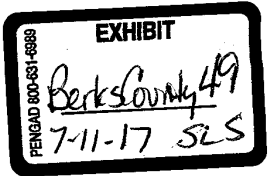
- Precautionary Checks
- Caseworker referral
- Medical Attention
- Mental Health referral
- other: COUNSELOR

If this report involves any alleged or witnessed sexual (and/or inappropriate contact) or physical altercations/behavior or any other issue that requires Mental Health notification, then the following needs to be completed and an investigation needs to be started under the supervision of the on-duty Supervisor as well as initiating the notification system.

On this date and time; _____ a copy of this report was hand delivered to _____ (DIHS Mental Health Employee or alternate DIHS Employee) by _____ (County Employee). If a DIHS Mental Health Employee is not on-site, a copy of this form will be hand delivered to any DIHS employee on-site and their name will be noted above. The original is to be kept in the County's possession for the resident's file.

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

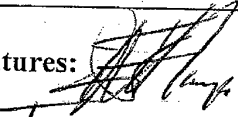
Berks 00048



A759

Describe the incident stating the facts indicating who saw or heard what; what information was received and by whom; location of persons involved; what action/response took place. Include final disposition:

ON THE ABOVE STATED DATE AND TIME
 E.D. [REDACTED] E.D. [REDACTED]
 WAS JOINTLY COUNSELLED BY SEC JOSIAH SCOTT-MANAWA AND SEC BRITHANY RATHERMEL. THIS RESIDENT COMPLIED WITH COUNSELING AS THE RULE WAS EXPLAINED TO HER. RESIDENT E.D. [REDACTED] HOWEVER INFORMED THIS WORKER THAT SHE IS BEING USED AS SCOUTMASTER BECAUSE THE RULE IS NOT APPLY FAIRLY.
 THIS WORKER INFORMED RESIDENT E.D. [REDACTED] THAT THE RULE OF INAPPROPRIATE DRESSING WILL BE ENFORCED AS INSTRUCTED BY MANAGEMENT. THIS WORKER ALSO EXPLAINED TO RESIDENT E.D. [REDACTED] THE STAGES OF DISCIPLINE OF INAPPROPRIATE DRESSING.
 PLAN FOR THIS WORKER IS TO UPDATE MANAGEMENT ABOUT RESIDENT E.D. [REDACTED] CONCERN OF STAFF CONSISTENCY OF APPLYING THE RULE.
 E.D. [REDACTED] APPOINTED FOR HER MAKE-UP WORK AND THEN HAND OVER THE PANT IN QUESTION. THE PANT IS FACILITY PANT WHICH WILL BE PLACED BACK IN THE FACILITY CLOTHING. THIS REPORT IS INFORMATION TO STAFF, CASE WORKERS AND MANAGEMENT.

Signatures: 

Staff: JOSIAH SCOTT-MANAWA Date: 12/16/14

Supervisor: [Signature] / Len Kopetsky Date: 12/16/14

Administrative Signature: [Signature] / David Smith Date: 12/22/14

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

EXHIBIT 33

BERKS COUNTY RESIDENTIAL CENTER

INFORMATIONAL REPORT

This report is for all incidents that do not result in a facility issued sanction. Required by the Department of Public Welfare Regulations: Necessary for monitoring resident/resident and staff/resident interactions with a comprehensive record of resident behavior: providing staff with a simplified means of documenting resident and staff interactions during these incidents:

Name of Resident: [Redacted] E.D.
[Redacted] E.D.

Place of Incident: B Floor Room 4

Date of Incident: 9/11/14 Time of Incident: 1940

Witnesses: Shelter Care Counselor (SCC) Jamie H

TYPE OF INCIDENT(S)

- Violation of Program Rules
- Misconduct in School
- Disobedience/Disrespect
- Threatening/Intimidation
- Destruction of Property
- Offense Related
- Other: _____
- Suicidal Behavior
- Contraband
- Inappropriate Conversation
- Creating a Disturbance
- Medical

RESULT OF BEHAVIOR

- Precautionary Checks
- Caseworker referral
- Medical Attention
- Mental Health referral
- other: info

If this report involves any alleged or witnessed sexual (and/or inappropriate contact) or physical altercations/behavior or any other issue that requires Mental Health notification, then the following needs to be completed and an investigation needs to be started under the supervision of the on-duty Supervisor as well as initiating the notification system.

On this date and time; _____ a copy of this report was hand delivered to _____ (DIHS Mental Health Employee or alternate DIHS Employee) by _____ (County Employee). If a DIHS Mental Health Employee is not on-site, a copy of this form will be hand delivered to any DIHS employee on-site and their name will be noted above. The original is to be kept in the County's possession for the resident's file.

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

Describe the incident stating the facts indicating who saw or heard what; what information was received and by whom; location of persons involved; what action/response took place. Include final disposition:

On the above mentioned date, time and location while conducting a routine inspection of [REDACTED] E.D. [REDACTED] E.D. Room contraband was found. [REDACTED] E.D. had lotion containing alcohol, a mirrored compact, foreign and domestic money, and a crushed up 'Dexamamine' pill in her closet. All items were confiscated. The reason for the removal of each item was explained to [REDACTED] E.D. along with the importance of following rules and regulations. This report written to inform staff and management.

Signatures:

Staff: [Signature] GRITLAND Date: 9/11/14
Supervisor: [Signature] Date: 9/2/14
Administrative Signature: [Signature] Date: 9/19/14

If you are not sure if the incident qualifies under these circumstances consult with a Supervisor and the notification should be made.

EXHIBIT 34



Matthew J. Archambeault, Esq.
Direct 215-599-2189
matthew@ccmalaw.com

October 30, 2014

Philadelphia Field Office
Assistant Field Office Director: David O'Neil
1600 Callowhill St. 6th Floor
Philadelphia, PA, 19130
Phone: (215) 656-7164

Email: Philadelphia.Outreach@ice.dhs.gov

RE: Detainee at Berks
Esmery Lagos Duarte, A206-646-873

Dear Assistant Field Office Director O'Neil:

My client, [REDACTED] E.D., is a current detainee at the Berks Family Shelter. It is my understanding that three of your officers visited her last week regarding inappropriate and criminal conduct by one of the guards at the shelter. My client asserted to me that a guard, who she believes is named Daniel Sharkey, had sexual intercourse with her at the facility. As I am sure you are aware this is a federal sexual offense under 18 U.S. Code Section 2243(b).

My client has been and is very scared regarding the ramifications of her actions. I have assured her that she is the victim in this incident and she has agreed to cooperate fully with your investigation. In consideration of her agreement to cooperate in the prosecution of this individual we would hope that either your office or the US Attorney's Office would certify her as a victim of a crime for U visa purposes. Additionally, we are requesting her immediate parole from the facility to her mother's custody in Atlanta, GA. We believe considering the totality of the situation, a humanitarian parole is in order. This will allow her to obtain work authorization while her U visa is pending administratively with USCIS.

Additionally, considering the gravity of this event and the potential that there may have or continues to be victims of this sort of crime at the Berks facility, we are requesting an opportunity to have an educational seminar at the facility for all of the women so they fully understand the law and the protections the law provides them. It is essential that it be determined if there are any other victims either current or present.



Matthew J. Archambeault, Esq.
Direct 215-599-2189
matthew@ccmalaw.com

My client is a nineteen year old girl who was a victim of savage domestic violence and rape in her home country of Honduras. She, like most every other girl and woman there at that facility are extremely vulnerable and this type of conduct is not only criminally wrong but morally reprehensible. It is my hope that we are both in agreement regarding this point.

Please feel free to contact me at any time on my cell phone at 267-294-5330.

Sincerely,

Matthew J. Archambeault
Attorney at Law

enclosure: G-28

EXHIBIT 35

Resident Room Sanitation / Hygiene Inspection Log

1st Shift	Areas Inspected	Sanitation/Hygiene/Maintenance Issues or Contraband Found	Completed By:
Rooms 1-8 Date Completed: 11/25/14	7, 13 2 5, 10 4, 8	Trash - Removed food, trash - removed Extra toys - clean extra toys, money	Sue Matt Jin John Elyse Jared Kelle
2nd Shift Rooms 9-16 Date Completed: 11/28/14	9 15 12 11, 13 19	N/A N/A N/A Candy wrappers - discarded Extra toys - put back Food - thrown out N/A	Jeanne Jamie Lacy M. Sandy Dan Beth Suzie Verna
3rd Shift Common Areas Date completed: 11-29-14	All common Areas	Outlet covers missing / replaced	Marg Joan Liddy Denise Tom

Week Of: 11/24/14 - 11/30/14

Berks 03376

Resident Room Sanitation / Hygiene Inspection Log

1st Shift	Areas Inspected	Sanitation/Hygiene/Maintenance Issues or Contraband Found	Completed By:
Rooms 1-8 Date Completed: 11/17/14	1 3, 7 4 2 10, 15	N/A Extra clothes removed extra clothes removed Extra clothes removed	Dan Beth, Brittany Rebecca, Sandy Joshiah Jill, Sandy, Lacy
2nd Shift			
Rooms 9-16 Date Completed: 11/17/14	11 10, 15, 13 9, 14 12, 14	Extra clothes removed Extra clothes removed Extra clothes removed Extra clothes removed	Dan Beth, Brittany Rebecca, Sandy Jill, Lacy
3rd Shift			
Common Areas Date completed: 11.21.14	All Common Areas	Outlet covers missing / replaced	Dan Lindy Denise Kelly Tom Corby

Week Of: ~~11/17/14~~ → 11/23/14

Berks 03377

Resident Room Sanitation / Hygiene Inspection Log

1st Shift	Areas Inspected	Sanitation/Hygiene/Maintenance Issues or Contraband Found	Completed By:
Rooms 1-8 Date Completed: 11/10/14	8, 4, 7, 5 2, 1, 2, 1, 6, 3	N/A 5# missing outlet covers - replaced 2# soda cans in rm.	Jennifer E. Sue S. Oliver F. Dave B. Carla K.
2nd Shift	12 9 10 11 13 14, 15 rm 1a	N/A N/A N/A food from kitchen removed N/A N/A N/A	Reiko Zinkoff Lacy N/A Beth Jamir Jill Noll
3rd Shift	Common Areas Date completed: 11/13/14	All common Areas outlet covers missing / replaced	Mark Greg Denise Kelly Tom Corby

Week Of: 11/14-11/18/14

Berks 03378

Resident Room Sanitation / Hygiene Inspection Log

1st Shift	Areas Inspected	Sanitation/Hygiene/Maintenance Issues or Contraband Found	Completed By:
Rooms 1-8 Date Completed: 11/8/14	1-2 3 5,6,7 4 8	N/A sugar, oatmeal removed NONE nothing nothing	Deane Jim Jamie Mary BR Jamie
2nd Shift Rooms 9-16 Date Completed: 11/7/14	11 10 9 13 12 15 14	TRASH, TOWELS - DISCARDED N/A WOOD BASKETS - REMOVED N/A N/A N/A N/A	DAV JILL N JAMIE FORAKA BRUNKA ZUKA JAMIE JILL N. LACY M.
3rd Shift Common Areas Date completed: 11/6/14 0200	All Common Areas	outlet covers Replaced. Shower curtains Replaced in Womens B-floor Shower Room	Corby Tom Kelly Mark Greg Bridget

Week Of: 11/3/14 - 11/9/14

Berks 03379

Resident Room Sanitation / Hygiene Inspection Log

1st Shift	Areas Inspected	Sanitation/Hygiene/Maintenance Issues or Contraband Found	Completed By:
Rooms 1-8 Date Completed: 10/28/14 @730	1, 7, 6 2 3, 4, 5	N/A N/A N/A N/A	Jentake SARA Suz Kim
2nd Shift Rooms 9-16 Date Completed: 11/2/14	15 16 10 13 14, 12 11, 9	Books, powder, shampoo left from discharge N/A Open food, trash N/A N/A N/A BOTH Rooms Clean	SJK SJK BRink gn LM LM
3rd Shift Common Areas Date completed: 10/30/14	All Common Areas	outlet covers missing / replaced	Kelly mark Josh Denise Linda

Week Of: 10/27/14 - 11/2/14

Berks 03380

EXHIBIT 36



Berks County Residential Center Standard Operating Procedures and Policies

Chapter:	Personal Hygiene	Policy #:	20.025
Subject:	Resident Dress Code	Effective Date:	11/1/2014
Program:	Family Residential Program	Revised Date:	11/1/2014

Approved: Signature on File
Diane Edwards, Executive Director

Policy

It is the policy of the Berks County Residential Center (BCRC) to control the dress of the residents to maintain and reflect a family environment.

Procedure

1. The dress code pertains to residents 5 years and older.
2. Residents must wear tops that cover their shoulders, chest, stomach and lower back.
3. Tops cannot be worn where cleavage is exposed.
4. Form fitting shirts/tops are not permitted.
5. See through clothing is not permitted.
6. All types of undergarments are permitted as long as they are not visible in any area or at anytime.
7. Form fitting pants and shorts are not permitted.
8. Shorts should not be any higher then mid-thigh.
9. Dresses and skirts are not permitted, unless approved for religious reasons.
10. Shoes or sandals must be worn at all times
11. If an article of clothing is deemed inappropriate during the day it is still inappropriate for nighttime/sleeping hours.
12. Stud earrings, religious based necklaces and wedding bands are the only items of jewelry
13. Staff must keep all of the above in mind when clothing is searched and inventoried at the time of admissions or when clothing is received in a package or during a visit. If any item is questionable have the residents try on the item and have a staff of the same gender view the resident.

E.D. v. Sharkey
000177

14. If unacceptable clothing is discovered at anytime throughout a residents stay it needs to be confiscated and put into their "unauthorized belongings" if it is their personal clothing.
15. There may be exceptions to the above restrictions for religious or medical reasons. If this happens it must be documented and approved by the appropriate personnel. The facility Chaplain will take requests then speak with the Program Director or Executive Director for approval.
16. If any questions arise whether or not an article of clothing is permitted, contact a Supervisor.
17. If the resident does not have any of their own appropriate clothing and none can be found in the facility clothing you will need to contact a supervisor so items can possibly be purchased.

EXHIBIT 37

Maria Quindt



Berks Family Residential Center

**Manual para los
residentes**

**1040 Berks Road
Leesport, PA 19533
610.396.0310**

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INTRODUCCIÓN

El Berks Family Residential Center (el Centro) celebró un contrato con la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement) de EE. UU. La operación del Centro está a cargo del Condado de Berks, bajo un contrato intergubernamental de servicios (Intergovernmental Service Agreement). La misión del centro es posibilitar que las familias se mantengan unidas mientras estén bajo la custodia de la ICE, en el entorno disponible que sea lo menos restrictivo posible y, a la vez, hacer cumplir las normas necesarias para garantizar la seguridad y el bienestar, tanto de los residentes como del personal. Las decisiones sobre asuntos relacionados con inmigración y toda determinación de liberar a los residentes del Centro o deportarlos de Estados Unidos es de responsabilidad de la ICE, no del Condado de Berks. La Unidad de Administración de Residencias para Jóvenes y Familias (JFRMU, Juvenile and Family Residential Management Unit) controla la actividad de este Centro. La JFRMU es una unidad perteneciente a la Agencia de Aplicación de Leyes de Inmigración y Aduanas de EE. UU. y es responsable de todas las operaciones en lugares donde se alojen las familias que determine la ICE. El funcionario de la JFRMU que actúe en dicho lugar es responsable del control de la salud y la seguridad de los residentes alojados. Este funcionario garantiza que el Centro cumpla con las normas federales relacionadas con diversos asuntos, como servicio de comidas, condiciones de higiene y salubridad, atención médica, visitas y derecho legales. El funcionario de la JFRMU recibe de buen grado a los residentes que deseen conversar sobre este y otros asuntos relacionados con el Centro.

DIRECCIÓN POSTAL Y NÚMERO DE TELÉFONO

Berks Family Residential Center
1040 Berks Road
Leesport, PA 19533
610-396-0310 extensión 2400

CENTRO DE INFORMACIÓN PARA RESIDENTES

El Centro de Información para Residentes (Resident Information Center) está ubicado al lado del salón comedor, en el piso de los dormitorios, y tiene acceso libre durante las 24 horas del día. También se encuentran allí los formularios y los buzones para cuestiones de asistencia legal, solicitudes de comunicación con la ICE, quejas, citas por enfermedad, correo, tienda, ayuda de los asistentes sociales, actividades recreativas, copias del manual actualizado para residentes y publicación de los avisos necesarios, entre otras cosas.

MANUAL PARA RESIDENTES

El propósito de este manual es dar a conocer a los residentes las reglas, reglamentaciones, políticas y procedimientos específicos que se deben seguir durante la residencia en el Centro. En el manual también se provee un panorama general de los programas y servicios que se ofrecen en el Centro. En el momento del ingreso al Centro, se entrega a cada familia una copia del manual para residentes. Usted y su familia tienen la obligación de familiarizarse con el contenido de este manual. Y, si hay algo que no comprenden, deberán preguntar al personal. Las preguntas se pueden dirigir a cualquier miembro del personal o a

la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement). En el Centro de Información para Residentes (Resident Information Center) también se exhibe una copia del manual actualizado. En ocasiones es necesario hacer cambios en el manual para residentes. Cuando esto suceda, se les entregarán a los residentes las actualizaciones, que también se exhibirán en el Centro de Información para Residentes.

DERECHOS Y OBLIGACIONES DE LOS RESIDENTES

Es política del Centro tratar a los residentes con dignidad y respeto, como también mantener un centro residencial seguro, salubre e higiénico. Se espera su total cooperación con el personal durante su residencia en este lugar. Aunque es posible que el personal no conozca los nombres de las personas recién ingresadas, siempre deben dirigirse a ustedes en forma adecuada y respetuosa. Ustedes deben dirigirse de la misma manera a los demás residentes y al personal.

- Tienen derecho a que les informen sobre las reglas, los procedimientos y los horarios de operaciones del Centro. Tienen la responsabilidad de conocerlos y cumplirlos.
- Tienen derecho a profesar y practicar voluntariamente y con libertad su religión. Con respecto a la religión, tienen el deber de reconocer y respetar los derechos de los demás.
- Tienen derecho a comunicarse con los funcionarios de su consulado o embajada y a que ellos les llamen o visiten durante su residencia en el Centro. Para más información, vean las secciones sobre uso del teléfono y visitas.
- Tienen derecho a recibir atención médica regular, comidas nutritivas, ropa de cama y de vestido adecuadas, oportunidad de ducharse regularmente, productos para la higiene personal, control adecuado de la temperatura interior y oportunidades regulares para hacer ejercicio, entre otras cosas. Ustedes tienen la responsabilidad de pedir atención médica cuando la necesiten y de no desperdiciar los alimentos. Asimismo, deben respetar el horario de la lavandería, mantener una higiene adecuada y mantener limpias sus habitaciones.
- Tienen derecho a protección contra todo aquello que constituya maltrato personal, castigos corporales, uso innecesario y excesivo de la fuerza, lesiones personales, enfermedades, daño a la propiedad y acoso.
- Tienen derecho a que no se les discrimine por razones de raza, religión, nacionalidad de origen, sexo, discapacidad o ideas políticas.
- Tienen derecho a presentar quejas de acuerdo con los procedimientos escritos que se establecen en este manual.
- Tienen derecho al debido proceso, incluida la pronta resolución de cuestiones administrativas de disciplina, según se establece en este manual.
- Tienen derecho al acceso confidencial y sin restricciones a los tribunales.
- Tienen derecho a solicitar al gobierno de Estados Unidos asistencia legal sin costo.
- Tienen derecho a usar la biblioteca legal. Tienen la obligación de usar esos recursos de manera responsable y de respetar los derechos de otros residentes para el uso del espacio y los materiales.
- Tienen derecho a mantener correspondencia con toda libertad con personas y organizaciones.
- Tienen derecho a que sus familiares y amigos les visiten. Tienen la responsabilidad de comportarse correctamente durante las visitas.

- Tienen derecho a participar en actividades y programas, que pueden ayudarles a sentirse bien durante la estadía en el Centro. Tienen la responsabilidad de cumplir las reglas que rigen la participación en dichas actividades y programas.
- Los niños en edad escolar tienen derecho a asistir a la escuela y recibir una educación igual que sus pares. Ustedes tienen la obligación de garantizar que los niños asistan a la escuela, estudien el material que reciben en clase y hagan sus tareas.
- Cuando los niños no están en la escuela, tienen derecho a participar en todas las actividades y programas adecuados a su edad. Ustedes tienen la responsabilidad de alentarlos para que participen en actividades durante su tiempo libre, garantizar que cumplan con todas las reglas del Centro, entre ellas, respetar el espacio personal de los demás y no hostigar a sus compañeros.

REGLAS DE LOS PROGRAMAS PARA RESIDENTES

- Cumplir con las directivas que reciban del personal del Centro;
- Usar la tarjeta de identificación del Centro de modo que sea visible en todo momento, salvo cuando lo indique el personal;
- Tratar a todos los residentes y al personal con respeto y cortesía, con independencia de raza, religión, etnia, sexo o edad;
- Ocuparse de las necesidades físicas y emocionales de sus hijos y sean un ejemplo de comportamiento correcto para ellos.
- Controlar el comportamiento de sus hijos y usar técnicas aprobadas para modificar su conducta solo cuando sea necesario. Está prohibido el castigo corporal o físico.
- No presentar a sabiendas reclamos, quejas u otros informes falsos.
- No hablar con otros residentes o con el personal de manera irrespetuosa ni verbal o físicamente agresiva. Si encuentran a otras personas que se comporten de esta manera, deben avisar de inmediato al personal.
- Mientras se encuentren en el Centro, no mantener contacto físico o íntimo con su cónyuge o con otros residentes. Para más información, vean la sección sobre prevención de abusos o ataques sexuales.
- No tener artículos de contrabando en su poder mientras estén en el Centro.
- Respetar los derechos de los demás residentes y del personal.
- No tomar ni pedir prestados objetos de otros residentes.
- Cumplir con los procedimientos de censo.
- Hacer las tareas que se le asignen.
- Mantener una higiene adecuada.
- Limpiar su dormitorio y su baño privado todas las mañanas.
- Lavar su ropa en el día asignado.
- Comportarse correctamente durante las comidas, limpiar el lugar donde comieron luego de hacerlo y comprobar que el lugar de sus hijos también quede limpio.
- Los estudiantes deben cumplir con las reglas que los profesores y el personal del Centro establezcan.
- Informar de inmediato al personal si se rompe o daña algo.
- Avisar de inmediato al personal si existe algún problema o motivo de preocupación.
- Si no comprenden o no recuerdan las reglas del Centro, pregunten al personal.

- Cumplir la política de visitas en la habitación. Para más información, vean la sección sobre los dormitorios.
- No pedir prestado ni intercambiar su ropa, los productos de higiene, las joyas o el maquillaje.
- No alterar ni dañar de manera alguna la propiedad del Centro.
- Cumplir con el código de ropa que se indica en el manual.
- No consumir tabaco, alcohol ni chicle.
- No desperdiciar los alimentos.
- No decir groserías.

El incumplimiento de las reglas mencionadas puede dar lugar a la iniciación de procedimientos disciplinarios. Las infracciones graves y/o continuas pueden dar lugar a la revisión de su situación, para determinar si todavía son aptos para vivir en esta residencia. Para más información, vean la sección sobre procedimientos disciplinarios. Los residentes que actúen de manera agresiva y/o traten de dañarse a sí mismos o a otras personas, pueden quedar sujetos a contención pasiva, para protegerlos de sí mismos y proteger a los demás.

SOLICITUDES DE LOS RESIDENTES

Por lo general, los residentes pueden obtener servicios y respuestas a sus preguntas mediante un simple pedido verbal al personal. Para quienes prefieran solicitar información formalmente, el método oficial consiste en llenar un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están disponibles en el Centro de Información para Residentes (Resident Information Center). Complete toda la información que se solicita en los formularios. Puede obtener ayuda de otro residente o de un miembro del personal para preparar el formulario de su solicitud. Estos formularios se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes), ubicado en el Centro de Información para Residentes. Los formularios se recogen todos los días hábiles y se dirigen a un asistente social para que los resuelva. Este procedimiento no se debe usar para presentar quejas formales. Para más información, vean la sección sobre procedimientos de quejas.

CÓMO COMUNICARSE CON INMIGRACIÓN

El personal de la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement) que está asignado para su caso de inmigración lleva a cabo visitas anunciadas y no anunciadas (no programadas) al Centro. El fin de estas visitas es hablar a los residentes sobre sus problemas de inmigración y observar las condiciones en que viven. Ustedes pueden estar presentes durante las visitas anunciadas del ICE e incluso pueden hacer preguntas, pedidos o presentar inquietudes por escrito. Para hacerlo, debe llenar un formulario de comunicación a la ICE (ICE communication form). Estos formularios están disponibles en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "ICE". Estos formularios se recogen todos los días hábiles y se dirigen a la ICE sin leerlos o modificarlos. Pueden obtener ayuda de otro residente o de un miembro del personal para preparar el formulario de su solicitud. El personal de la ICE que reciba su solicitud les responderá directamente. Los funcionarios de la ICE son el único personal que puede dar respuesta a preguntas relacionadas con inmigración. Vea el programa de visitas de la ICE que se exhibe en el Centro de Información para Residentes. El personal del

condado, vestido con camisas azules y pantalones largos o cortos de color caqui, con quienes ustedes interactúan en el Centro, no pueden responder a ninguna pregunta relacionada con inmigración.

ASISTENTES SOCIALES

A cada familia que ingresa en el Centro se le asigna un asistente social específico, aunque las preguntas se pueden dirigir a cualquiera de los asistentes sociales, si fuera necesario. Estos asistentes sociales atienden a los residentes que tienen preguntas sobre derechos, reglas, obligaciones, programas y servicios, alojamiento y educación, cuestiones de pertenencias, números de teléfonos y domicilios de familiares y amigos, derivaciones para tratamientos y otros asuntos que se presenten mientras vivan en el Centro. Los residentes pueden hablar con los asistentes sociales en su oficina, ubicada en el piso de actividades, durante el horario de libertad de movimiento. También pueden comunicarse con ellos mediante el uso de un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). Las hojas para solicitar servicios de peluquería, asistencia legal y tarjetas telefónicas, entre otros artículos, están ubicadas a la salida de la oficina de los asistentes sociales.

ARREGLOS PARA LA VIDA DIARIA

Los residentes deben compartir los equipos de uso común como teléfonos, televisores, mesas, juegos recreativos y otros equipos. Las horas de silencio van desde las 10:30 p.m. hasta las 6:30 a.m. los días de semana (domingo por la noche hasta el jueves por la noche) y desde las 12 de la noche hasta las 6:30 a.m. los fines de semana (viernes y sábado por la noche) y los feriados. Durante las horas de silencio los residentes deben abstenerse de realizar actividades que puedan interferir con el sueño de los demás.

DORMITORIOS

A los niños menores de 12 años se les asignará un dormitorio con sus padres. A los niños de 12 años o más se les asignará un dormitorio con otros niños del mismo sexo y edad similar. A cada residente se le proporciona una cama para uso propio. Los residentes deben tender sus camas y ordenar la zona inmediata todas las mañanas. Cuando no estén en uso, las camas deben estar tendidas. Las camas no se deben mover. Debido a la naturaleza comunitaria del Centro, donde niños de diferentes familias podrían compartir el dormitorio, y adultos que no son parientes también deben compartir dormitorios, los residentes deben cumplir las siguientes políticas de visitas en las habitaciones, para garantizar la privacidad y la seguridad de todos los residentes. Cuando un niño que no pertenece a la familia esté presente en un dormitorio, los residentes adultos deben tener supervisión del personal mientras se encuentren en ese dormitorio. Los niños pueden entrar al dormitorio de sus padres solo con sus padres. Debido a que existen muchos lugares del Centro para conversar con tranquilidad con otros residentes, los adultos no pueden reunirse en los dormitorios. Se permite que los residentes decoren sus habitaciones con objetos personales, siempre que esto no presente riesgos para la salud o la seguridad y no despierte las paredes o dañe de alguna otra manera la propiedad del Centro. No se permite que se cubran las lámparas, las puertas o las ventanas con ningún tipo de artículo. No deben colgarse artículos de las camas o los conductos de ventilación. Debido a la naturaleza

comunitaria del Centro, se recomienda a los residentes que se cambien de ropa solo en las salas de duchas o en sus baños. Las pertenencias aprobadas se guardarán en los clósets de los dormitorios asignados. Para más información, vea la sección sobre pertenencias personales. Los clósets se deben mantener en orden. No se permite guardar alimentos o bebidas abiertos en los dormitorios. Los objetos cerrados que se compran en la tienda del Centro se pueden guardar en los dormitorios, siempre que se guarden en un recipiente cerrado para evitar la entrada de insectos. Todos los artículos de higiene se deben guardar en cajas apropiadas, en los clósets de los dormitorios asignados. Se permite tener juguetes en los dormitorios durante las horas de libertad de movimiento. Luego de ese horario, todos los juguetes se deben regresar a los espacios comunes, a fin de que se desinfecten para el día siguiente. Para más información, vea la sección sobre libertad de movimiento.

HORARIOS DE DORMIR PARA LOS NIÑOS

Los horarios de dormir para los niños se establecieron a fin de fomentar una rutina para los niños del Centro, y para lograr que atiendan sus clases descansados. El horario general para que los niños de hasta 4 años vayan a dormir es a las 8:30 p.m. de domingo a jueves. El horario general para que los niños de 5 años a 18 años vayan a dormir es a las 9:00 p.m. de domingo a jueves. Las luces se apagan 15 minutos después de esos horarios. No se establece un horario general para que los niños vayan a dormir los viernes y sábados. Se recomienda a los padres que sigan (o inicien) las rutinas de horario de dormir para sus niños mientras estén en el Centro.

CONTROLES DURANTE LA NOCHE

Las reglamentaciones del estado exigen que el personal controle los dormitorios cada quince minutos como mínimo todas las noches, para garantizar la seguridad de los residentes. Durante estos controles, el personal debe llevar una linterna encendida, y los controles se realizarán sin causar mayores molestias.

LIBERTAD DE MOVIMIENTO

Salvo restricciones temporales debido a razones médicas o de seguridad, el horario de libertad de movimiento es desde las 8:00 a.m. hasta las 8:00 p.m., todos los días. Durante este tiempo, los residentes adultos pueden moverse libremente por todos los espacios de programas del Centro, sin pedir el permiso previo del personal y sin necesidad de decirle a dónde se dirigen. Los niños de 10 años o más pueden participar en esta libertad de movimiento si sus padres les dan un pase. Para más información, vea la sección sobre pases para libre movimiento. Cuando no estén en la escuela o participando en una actividad organizada, los niños de más de 10 años que no tengan el pase y todos los niños menores de 10 años deben estar bajo la supervisión directa de sus padres en todo momento. Fuera del horario de libertad de movimiento, los residentes deben permanecer en el piso de dormitorios. En este piso se encuentran los dormitorios, una sala de estar comunitaria, la biblioteca legal, la sala de teléfonos, el departamento médico, los baños y las salas de duchas, a los que se puede acceder libremente durante las 24 horas del día.

ACCESO AL SITIO AL AIRE LIBRE

El sitio al aire libre se puede usar desde las 8:00 a.m. hasta las 8:00 p.m. o el anochecer, lo que ocurra primero. Las actividades recreativas al aire libre incluyen el fútbol, voleibol, pelota colgante (tether ball), bádminton y actividades para niños pequeños. Los equipos de recreación para el aire libre (bicicletas, pelotas, cuerdas para saltar, aros, etc.) se pueden retirar del carrito ubicado en el lobby contiguo a la puerta del espacio recreativo. Estos

artículos se deben regresar antes de entrar nuevamente al Centro. Los residentes deben avisar al personal de toda pérdida o rotura para mantener el equipo en buenas condiciones de funcionamiento o para que se reemplace, si fuera necesario. Afuera hay agua para beber y baños disponibles. Para acceder al sitio al aire libre, los residentes deben avisar con anticipación al personal que está cerca de la puerta de salida al espacio de recreación y luego pueden salir sin necesidad de que el personal los acompañe. Esta es la única puerta que los residentes pueden usar sin estar acompañados por el personal (salvo en situaciones de emergencia). Habrá personal afuera para controlar la seguridad de los residentes. Cuando no estén participando en una actividad organizada, los residentes deben permanecer dentro de los límites de la cerca. Si usted necesita salir de esta área, por ejemplo, para buscar una pelota, antes debe notificar al personal que supervisa el lugar. Se puede suspender temporariamente el acceso al sitio al aire libre debido a condiciones ambientales o por razones de seguridad.

PASE PARA LA LIBERTAD DE MOVIMIENTO DE LOS NIÑOS

Los niños de 10 años o más pueden recibir de sus padres un pase que los autorice a participar en el programa de libertad de movimiento. Los padres pueden dar, suspender y otorgar nuevamente este pase, en cualquier momento que lo deseen. Los residentes que no reciban pases de libertad de movimiento para sus hijos en el momento del ingreso deben hablar con un asistente social para obtenerlos.

ROPA

Los residentes deben estar correctamente vestidos cuando están fuera de sus dormitorios. Para más información, vea la sección sobre código de ropa de los residentes. Está permitido que cada residente tenga 10 juegos de ropa personal en su dormitorio. Los niños recién nacidos hasta 5 años de edad pueden tener 12 juegos de ropa. Estos juegos pueden ser de ropa que hayan traído al Centro, ropa que haya provisto el Centro o ropa que usted haya comprado durante su estadía. Se entregará nueva ropa interior, sostenes y medias según sea necesario. Los residentes que necesiten ropa interior o de vestir nuevas deben hablar con el personal o presentar un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). Los residentes no están autorizados a tener más artículos que los detallados anteriormente, salvo que estén autorizados por el director ejecutivo (Executive Director).

SALA DE ROPA DEL CENTRO

Los residentes que lleguen al Centro sin una cantidad adecuada de ropa para la temporada, pueden pedir ropa en la sala de ropa (Clothing Room) del Centro. La ropa que se obtiene en el sala de ropa del Centro no se cobra. No obstante, antes de dejar el Centro deberá regresarse toda esa ropa. Para ir a la sala de ropa, solicite autorización al personal, hable con el asistente social o presente un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

COMPRA DE ROPA

En la tienda del Centro se puede comprar ropa. Si un residente no puede encontrar ropa adecuada por esos medios, se le autorizará a comprarlas en una tienda de la zona.

ROPA PARA RESIDENTES SIN RECURSOS

El Centro proveerá ropa a los residentes sin recursos que hayan llegado al Centro sin una cantidad de ropa adecuada para la estación. Si necesita ropa, hable con el asistente social o presente un formulario de solicitud para el programa (Program Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

Residente Dress Code - Residentes 5 años de edad:

- Los residentes deben usar camisas que cubren sus hombros, el pecho, el estómago y la espalda baja.
- Tops no se pueden usar donde se expone la hendidura.
- Ropa que sea muy fina y expone su cuerpo, no es permitido.
- Todos los tipos de ropa interior están permitidos siempre y cuando no sean visibles en cualquier área o en cualquier momento.
- No se permiten ropas aprietas (causa, pantalones y pantalones cortos).
- Pantalones cortos no deben ser cualquier más alto que la mitad del muslo.
- No se permiten los vestidos y faldas, menos que sea aprobado por razones religiosas.
- Zapatos o sandalias deben ser usados en todo momento
- Si una prenda de vestir se considera inadecuado durante el día, todavía es inadecuado para las horas de la noche / de dormir.
- Pendientes, collares y alianzas de boda basados religiosos son los únicos artículos de joyería permitidos.

ROPA DE CAMA

En el momento de su ingreso al Centro, cada residente recibe la siguiente ropa de cama:

- 2 sábanas
- 1 funda para almohada,
- 1 manta,
- 1 bolsa para ropa sucia

Esta ropa de cama se puede cambiar por ropa limpia una vez por semana o con mayor frecuencia si fuera necesario. Hable con el personal si necesita ropa de cama limpia un día que no sea el día fijado para cambiarla.

LAVANDERÍA

Los servicios de lavandería están disponibles los 7 días de la semana. Se asigna un día a cada familia para el lavado de su ropa. El programa de lavandería se exhibe cerca de la puerta de la lavandería, en el piso de dormitorios. En caso de que la ropa se ensucie fuera del horario de lavado que les corresponda, soliciten al personal que les entregue otra ropa o un horario adicional para lavar la suya. Hablen con el personal de la mesa de atención que se encuentra en el piso de dormitorios para que les entreguen jabón para las máquinas de lavar y le den instrucciones para usarlas. Informe cualquier problema de las máquinas al personal que se encuentra en la mesa de atención, en el piso de dormitorios.

HIGIENE PERSONAL

La higiene personal es fundamental en el Centro, debido a que ustedes vivirán muy cerca de otras familias. Se le recomienda bañarse regularmente y mantener el cabello limpio. A su llegada al Centro, cada residente recibe productos de higiene. Estos artículos se deben reemplazar según las necesidades. Para hacerlo, presente un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). También pueden comprar artículos de higiene en la tienda del Centro. Los artículos de higiene femenina están disponibles en la sala de duchas para mujeres, en el piso de dormitorios. Los residentes tienen libre acceso a las duchas durante el horario de libertad de movimiento, los 7 días de la semana. Si usted necesita ducharse fuera del horario de libertad de movimiento, hable con el personal. Las salas de duchas tienen carteles según el sexo (hombres y mujeres). Los niños de 9 años o más se ducharán de acuerdo con su sexo. Si su hijo es mayor de 9 años y necesita ayuda para bañarse, hable con el personal para hacer los arreglos necesarios. Los niños de hasta 8 años inclusive se ducharán solo bajo supervisión directa de los padres, sin molestar o otros residentes que estén usando la sala de duchas. Las personas adultas pueden usar su propio maquillaje. Todo el maquillaje se debe guardar en una caja de productos de higiene o se colocará en un lugar de almacenamiento. Las navajas de rasurar están siempre disponibles. Hable con el personal que se encuentra en la mesa de atención, en el piso de dormitorios. Cuando tomen una navaja de rasurar, los residentes entregarán su identificación del Centro. Una vez que hayan usado la navaja de rasurar la regresarán de inmediato a la mesa de atención. Los cortauñas y las pinzas de cejas están disponibles en la tienda del Centro.

PROPIEDAD PERSONAL PERMITIDA

Mientras esté en el Centro, se permite que tenga en su dormitorio:

- 10 juegos de ropa por residente (antes descritos)
- Elementos de higiene personal
- Papeles, documentos e información de tipo legal
- Fotografías
- Prótesis médicas (por ejemplo, anteojos, dentadura postiza, etc.) ;
- Material de referencia personal (por ejemplo, libretas de direcciones y teléfonos, listas de familiares y amigos y otros tipos de correspondencia)
- Artículos religiosos (con aprobación previa del capellán del Centro) Para más información, vea la sección sobre el capellán.
- Diarios, revistas, libros y otras publicaciones (hasta cualquier combinación de tres de ellos por vez, para evitar acumulación y cumplir las normas de seguridad contra incendios)
- Artículos detallados en la planilla de la tienda
- Ilustraciones, artesanías, etc., acumuladas durante su estadía en el Centro.

Se considerará que los artículos no incluidos en esta lista son contrabando. Antes de comprar o tener otros artículos personales, deberá contar con la aprobación del director de programa (Program Director).

INSTRUMENTOS DE ESCRITURA

Se entregará a los residentes de 12 años o más una pluma y un lápiz para su uso personal durante el tiempo de residencia en el Centro. Se les entregará a los niños de 5 a 11 años un lápiz para su uso personal durante el tiempo de residencia en el Centro. Los padres son responsables de los lápices y plumas que se entreguen a sus hijos. Para obtener nuevos lápices o plumas cuando se pierden o rompen, hable con el personal o presente un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). El papel para escribir está disponible en las mesas de atención de los pisos de actividades y dormitorios. Para obtenerlo, deberá presentar un formulario de solicitudes de los residentes. Los artículos para dibujo (lápices de colores, crayones) están disponibles en los pisos de actividades y dormitorios, en las mesas de atención. Los padres deben supervisar a los niños pequeños que usen artículos de dibujo, para que no dañen la propiedad del Centro. Los residentes también pueden comprar artículos y papel para escribir en la tienda del Centro.

SEGURIDAD GENERAL Y SIMULACROS DE EVACUACIÓN

El personal del Centro hace todos los esfuerzos posibles para garantizar la seguridad de todos los residentes y el personal. Los residentes también tienen la obligación de contribuir a la seguridad de la familia de las siguientes formas:

- Limpiar las sustancias que usted o su familia derramen o solicitar al personal que lo haga.
- Prestar atención a los carteles de advertencia (por ejemplo, indicaciones de piso mojado) y tener cuidado en esos lugares.
- Informar de inmediato al personal si observan fuego, una emergencia u cualquier otro peligro.

Durante una emergencia, se oirán alarmas muy ruidosas y se encenderán luces intermitentes brillantes. En esos momentos, los residentes deben abstenerse de conversar, salvo para dirigirse al personal por motivos directamente relacionados con el problema. Su seguridad y la de su familia dependen de su capacidad de oír comprender y seguir las directivas del personal durante una emergencia. Durante una emergencia, el personal debe evacuar a todos los residentes y al personal a un lugar de evacuación predeterminado, fuera del Centro. En el lugar de evacuación, el personal realizará un recuento de los residentes y del personal para confirmar que todos hayan abandonado el edificio. Si sus hijos no estaban con ustedes cuando ocurrió la emergencia, se reunirán con ellos en el lugar de evacuación fuera del edificio. El lugar de evacuación fuera del edificio está al lado del campo de fútbol para residentes. Familiarícese con el diagrama que se exhibe en la puerta de salida a la zona de recreación, donde se muestra la ubicación del lugar de evacuación fuera del edificio. Se exhiben diagramas de salida en diversos lugares del Centro, donde se muestra la ubicación de todas las salidas de emergencia. Estudien cuidadosamente estos diagramas y familiarícese con las ubicaciones. Si ocurre una emergencia y usted está cerca de una salida de incendio, no espere al personal; salga por la salida de incendio y diríjase al lugar de evacuación fuera del edificio. Allí espere la llegada del personal. De acuerdo con las leyes locales, estatales y federales, el Centro tiene la obligación de realizar simulacros de evacuación. En el Centro se realizan varios simulacros por mes, a diversas horas del día y de la noche. Estos simulacros no están diseñados para molestar a los residentes, sino para cumplir con las reglamentaciones y garantizar la seguridad de los

residentes y del personal en caso de que ocurra una emergencia real. Los padres deben explicar estos simulacros a sus hijos y hablar con ellos del tema.

CENSO DE RESIDENTES

En este Centro, el censo de residentes se realiza de la siguiente manera: cada residente debe presentarse 3 veces en cada período de 24 horas. Horarios de censo:

6:30 a.m. HASTA 7:30 a.m.

3:00 p.m. HASTA 4:00 p.m.

7:30 p.m. HASTA 8:00 p.m.

Los residentes se presentarán a la mesa de atención del piso de dormitorios, como unidades familiares, en los horarios citados. Si los residentes tienen una cita a la hora del censo o cerca de ese horario, el personal que supervisa la cita informará de la ubicación de esos residentes. Los residentes que no se presenten durante el horario del censo, recibirán orientación con respecto a esta obligación.

DISTRIBUCIÓN DEL CENTRO

El Centro consta de dos pisos y un sitio al aire libre. La planta baja, que es por donde ustedes ingresaron al Centro cuando llegaron, es el piso de actividades (A), y el primer piso, es el piso de dormitorios (B). El sitio al aire libre está limitado por una cerca.

Piso de actividades (Piso A):

- Administración del Centro (Center Administration)
- Sala de visitas
- Patio
- Biblioteca
- Café con acceso a Internet
- Educación para niños
- Capilla
- Oficina de los asistentes sociales
- Oficina de los supervisores
- Educación para adultos
- Sala de teléfono
- Salón interior para recreación
- Salón de gimnasia para residentes
- Salón para niños pequeños
- Salas de cultura y artesanías y de actividades
- Sala de cine
- Lavandería adicional (uso con aprobación del supervisor)
- Duchas adicionales (uso con aprobación del supervisor)
- Sala de estar comunal
- Clóset para guardar juegos
- Cocineta
- Juegos de mesa
- Sitio al aire libre

Piso de dormitorios (Piso B):

- Dormitorios
- Sala de teléfono (abierta las 24 horas, todos los días)
- Biblioteca legal (abierta las 24 horas, todos los días)
- Sala de estar comunal
- Clóset para guardar juegos
- Juegos de mesa
- Salón comedor
- Consultorio médico
- Duchas
- Lavandería
- Cocineta

COMIDAS

Todos los menús están programados para una nutrición equilibrada y están aprobados por un nutricionista certificado. A los residentes se les sirven 3 comidas diarias en el salón comedor, ubicado en el piso de dormitorios: Desayuno de 06:30:00 a.m. a 8:00 a.m.

Almuerzo de 12:00 p.m. a 1:00 p.m.

Cena de 5:30 p.m. a 6:30 p.m.

En el salón comedor no hay lugares asignados. Los residentes se pueden sentar donde quieran para cada comida. Hay sillas altas y asientos elevadores disponibles en el salón comedor. Los niños pequeños deben permanecer sentados durante las comidas, para crear buenos hábitos para comer. Los residentes deben estar presentes en el salón comedor en los siguientes horarios:

7:30 a.m. hasta 8:00 a.m.

12:00 p.m. hasta 1:00 p.m.

5:30:00 p.m. hasta 6:30 p.m.

Los utensilios y bandejas que se usan en el salón comedor no son descartables. Al final de cada comida, los residentes deben limpiar el lugar donde comió su familia y regresar todos los utensilios y las bandejas para lavarlas. Los residentes pueden dirigirse a las barras de autoservicio del salón comedor tantas veces como lo deseen, pero deben comer lo que escogieron, para evitar el desperdicio de alimentos. Todos los alimentos y bebidas se deben consumir durante la comida, y no se pueden sacar del salón comedor.

COCINETAS

En las cocinetas de los pisos de actividades y de dormitorios hay frutas, refrigerios y bebidas disponibles durante las 24 horas del día. Los residentes no están autorizados a llevar más alimentos o bebidas de las cocinetas que los que consumirán de una vez. Estos alimentos se reponen varias veces al día, así que no hay necesidad de acumular alimentos de la cocineta.

DIETAS ESPECIALES

Las dietas terapéuticas o médicas se prepararán y proveerán de acuerdo con las indicaciones del médico del departamento médico del Centro. Las dietas religiosas se prepararán y proveerán a los residentes cuyas creencias religiosas les exijan cumplir con las reglamentaciones dietarias de su religión. Los residentes deben reunirse con el capellán del Centro para solicitarle la aprobación de la dieta. Para más información, vea la sección sobre el capellán.

SERVICIOS RELIGIOSOS

Todos los residentes tienen acceso a recursos, servicios, instrucciones y orientación religiosos durante su residencia en el centro. Estos servicios incluyen orientación individual, grupos de oración, estudios bíblicos y diversos servicios de iglesias y cultos. Organizaciones religiosas externas y voluntarios de la comunidad proporcionan los servicios religiosos en el sitio. El capellán del Centro se ocupa de todas las preguntas e inquietudes relacionadas con oportunidades y prácticas religiosas, y asistirá a los residentes para obtener material sobre diversos cultos. Asimismo, podrá facilitar la visita de pastores de diversas religiones. Las personas religiosas ajenas al Centro también pueden visitar a los residentes mediante una cita concertada con el capellán o durante las horas de visita. Para más información, vea la sección sobre visitas. En el piso de actividades existe una capilla sin denominación que está abierta durante el horario de libertad de movimiento, para que todos los residentes puedan practicar su culto. Si desean practicar su culto fuera del horario de libertad de movimiento, hable con el capellán para que, si es posible, haga los arreglos necesarios. La lista de servicios programados se exhibe en el Centro de Información para Residentes (Resident Information Center) y a la salida de la capilla. Estos servicios están abiertos para todos los que deseen asistir y están limitados solo por la capacidad de la capilla. Si la capacidad no es suficiente, se pueden hacer otros arreglos. En algunas situaciones, los residentes podrán salir del sitio para concurrir a servicios religiosos. Si necesitan arreglos para prácticas religiosas especiales, hablen con el capellán para que, si es posible, coordine lo que le pidan.

CAPELLÁN

El capellán se encuentra en el Centro de lunes a viernes, desde las 9:00 a.m. hasta las 3:00 p.m. Para hablar con él, deben concertar una cita. Para solicitar una cita con el capellán, los residentes pueden hablar con él o llenar un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

SERVICIOS MÉDICOS

Deseamos que durante su estadía se mantengan en buen estado de salud. El Centro brinda la atención médica adecuada y necesaria en el sitio, durante las 24 horas del día, en el consultorio médico ubicado en el piso de dormitorios. El consultorio médico del Centro se administra por medio de la división denominada Cuerpo de Servicios Médicos para Inmigración (Immigration Health Services Corps) del Servicio de Salud Pública (Public Health Service) de EE. UU.

SITUACIONES DE EMERGENCIA MÉDICA

Si durante su estadía en el Centro, alguna vez sienten que tienen una emergencia médica o necesitan atención médica inmediata, avisen a cualquiera de los miembros del personal y el servicio médico le atenderá. Si debido a su situación médica no pueden comunicarse con el personal, pidan a cualquier residente que se encuentre cerca que llame al personal para que les ayude.

CITAS POR ENFERMEDAD

Las citas por enfermedad se llevan a cabo los 7 días de la semana. Para solicitar una cita para atención de la salud física o mental, completen un formulario para citas por enfermedad (Sick Call form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Red Cross" (Cruz Roja). El personal médico retirará los formularios diariamente, a las 7:30 a.m. Si el formulario para citas por enfermedad se coloca en el buzón para atención médica después de ese horario, es posible que se retire hasta el día siguiente. Cuando se reciba el formulario para citas por enfermedad, se programará una cita para atención de la salud física o mental. Es importante llegar puntualmente a la cita, para evitar demoras en la atención de pacientes. Cuando llenen el formulario para citas por enfermedad, compruebe que esté completo e incluya el nombre, el número de registro de extranjeros (A number), la fecha y una descripción precisa del problema. Escriban con letra legible.

SERVICIOS DENTALES

Cuando ingresan, el personal médico hace un examen dental inicial a todos los residentes. Además, a todos los niños se les hace una limpieza dental completa dentro del primer mes a partir del ingreso. A los residentes adultos que permanecen en el Centro por un mínimo de 6 meses, se les hace una limpieza dental completa. Si durante el examen dental inicial o la limpieza dental se detecta algún problema dental, se programarán servicios dentales adicionales. Además, todos los residentes que tengan nuevos problemas dentales durante su estadía deben presentar un formulario para cita por enfermedad como se indicó antes o, si el caso es urgente, deben avisar de inmediato al personal para obtener atención médica. Algunos ejemplos de urgencias dentales son las infecciones dentales, el dolor de muelas, hinchazón en la cara o golpes en los dientes.

SERVICIOS DE SALUD MENTAL

Las normas de inmigración exigen que el departamento médico examine regularmente a todos los niños para garantizar su bienestar mental. Además, se puede pedir a los asistentes sociales orientación para adultos y niños. Los residentes pueden presentar una solicitud para ver a un asistente social especialista en salud mental. Para hacerlo, deben llenar un formulario para citas por enfermedad (sick call slip) como se indicó antes. Los residentes que tengan inquietudes sobre el desarrollo o el progreso de sus hijos pueden presentarlas al personal médico o al asistente social.

MEDICAMENTOS DE VENTA LIBRE DE ADMINISTRACIÓN DE RUTINA

Si tienen una situación como dolor de cabeza, dolor de estómago u otra dolencia para la que piensan que se necesita medicamentos de inmediato (Tylenol, Advil, medicamentos para el resfrío y la gripe, etc.), vean a un miembro del personal para que los lleve al servicio médico. Podrán recibir una dosis de medicamento y se les darán instrucciones para solicitar más si la situación continúa.

MEDICAMENTOS

Si al llegar traían medicamentos, se remitieron al departamento médico. El personal médico les recetará nuevos medicamentos según sea necesario para su situación médica. Todos los medicamentos recetados se distribuirán durante el día en el departamento médico en los horarios que fije el médico. Actualmente, los horarios establecidos para retirar medicamentos son los siguientes:

6:00 a.m. a 8:00 a.m.
11:00 a.m. a 1:00 p.m.
4:00 p.m. a 6:00 p.m.
7:00 p.m. a 9:00 p.m.

Cuando el médico receta un medicamento para un residente "según la necesidad", el residente tiene la obligación de hablar con un miembro del personal a fin de que lo acompañe al servicio médico para tomar su medicamento.

CONDUCTA EN EL DEPARTAMENTO MÉDICO

Cuando esté en el departamento médico, deberá seguir las mismas reglas generales de conducta del Centro. Los padres deben supervisar en todo momento a sus hijos. El consultorio médico es un lugar con muchas personas, por lo cual los padres deben tener a sus hijos a la vista en todo momento y controlarlos para que no lleven a cabo actividades que puedan causarles lesiones, como correr o saltar de las sillas. En el lugar puede haber equipos médicos como básculas. Los padres deben garantizar que sus hijos no jueguen con estos artículos.

QUEJAS SOBRE LA ATENCIÓN MÉDICA

Se recomienda a los residentes que hablen de su atención médica con el personal médico y que les hagan preguntas. Los residentes con inquietudes acerca de su atención deben llenar un formulario de cita por enfermedad (sick call slip) para hablar con un médico. Si después de hablar con el médico o con el personal los residentes no están satisfechos con los resultados, pueden presentar una queja por atención médica. Estas quejas se presentan al Administrador de Servicios Médicos (HSA, Health Service Administrator). Para más información, vea la sección sobre quejas. El HSA dará una respuesta escrita dentro de los 5 días.

PREVENCIÓN E INTERVENCIÓN PARA CASOS DE ABUSOS Y ATAQUES SEXUALES

El centro cuenta con un Programa de Prevención e Intervención para Casos de Abusos y Ataques Sexuales (Sexual Abuse and Assault Prevention and Intervention Program), para proteger a los residentes y al personal. Si se sienten inseguros en cualquier momento de su estadía en el Centro, debido a amenazas de abusos o ataques sexuales, o si sufren abusos o ataques sexuales, deben avisar de inmediato a cualquier miembro del personal y solicitar su ayuda. El departamento médico les dará tratamiento y orientación apropiados si sufren de un abuso o ataque sexual. También hay información sobre abusos y ataques sexuales en el Centro de Información para Residentes (Resident Information Center). Los asistentes sociales de la división denominada Cuerpo de Servicios Médicos para Inmigración (IHSC, Immigration Health Services Corps) ofrecen orientación o asistencia a solicitud de los residentes. Asimismo, los residentes que sientan que están en peligro pueden seguir uno de estos pasos o todos ellos:

- Informar de su inquietud a cualquier miembro del personal.
- Presentar una queja de emergencia donde establezcan la naturaleza del problema y las necesidades que surjan. Para más información, vea la sección sobre quejas.
- Cómo comunicarse con la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement). Para ello deberá llenar un formulario de comunicación a la ICE (ICE communication form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "ICE".
- Cómo presentar una queja directamente al Departamento de Seguridad Nacional (Department of Homeland Security).
- Cómo comunicarse con la Oficina del Inspector General (OIG, Office of the Inspector General) por medio del sistema de llamadas gratuitas o de las siguientes maneras:

Escribir a **DHS OIG HOTLINE**
245 Murray Drive, S.E., Building 410
Washington, D.C. 20538

Enviar un mensaje de correo electrónico a **DHSOIGHOTLINE@DHS.GOV**

Llamar por teléfono al: **1-800-323-8603**

- Avisar a un familiar, a un amigo o a su abogado y solicitarles que se comuniquen con la ICE o la OIG en su nombre.

ICE tiene una poliza de cero tolerancia contra asaltos y abusos sexuales.

TAREAS DE LOS RESIDENTES

Los baños comunes de la residencia, las salas de duchas y otras áreas de programas para residentes se limpian diariamente según un programa de tareas que se exhibe al lado de la puerta de la lavandería, en el piso de dormitorios. Estas tareas son similares a las que usted haría a cabo si viviera en una comunidad regular. Usualmente, las tareas se realizan después del desayuno o del almuerzo. El personal recordará a los residentes el momento de inicio de las tareas. Al comienzo de cada turno de limpieza, el personal entregará a los residentes los artículos de limpieza y el equipo de protección necesarios. Cuando no se usen, todos los artículos de limpieza se deben colocar en los lugares de almacenamiento adecuados. No se

permite que los residentes tengan productos químicos de limpieza en sus dormitorios o que los coloquen en otro recipiente como envases de leche, agua o jugo.

ACCESO AL TELÉFONO

Hay teléfonos en los dos pisos del Centro. Los teléfonos del piso de actividades están disponibles durante el horario de libertad de movimiento, y los teléfonos del piso de dormitorios están disponibles las 24 horas del día. Las llamadas por cobrar, las llamadas con tarjetas telefónicas y las llamadas gratuitas a la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement) se pueden hacer desde cualquiera de los teléfonos. El Centro no controla ni graba las conversaciones en ningún teléfono. Para comprar tarjetas telefónicas, usted se debe anotar en la hoja de solicitudes de tarjetas telefónicas que está a la salida de la oficina de los asistentes sociales, en el piso de actividades. Los residentes también pueden recibir tarjetas telefónicas por correo postal. Hay toallitas desinfectantes disponibles para limpiar los teléfonos antes y después de usarlos. Se harán todos los arreglos para los residentes que tengan impedimentos para comunicarse (por ejemplo, problemas de habla o audición) o para residentes que deseen comunicarse con personas que tengan esos impedimentos. Para obtener estos arreglos, hable con el asistente social o llene un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). Para garantizar que todos los residentes tengan la oportunidad de usar los teléfonos, las llamadas no podrán durar más de 20 minutos si hay otros residentes que esperan. Si tiene problemas para usar el sistema de teléfonos, si un teléfono no funciona bien o si las llamadas gratuitas a la ICE no funcionan, infórmelo al personal, que lo ayudará a solucionar la situación. Los amigos y familiares pueden llamar al Centro para dejar mensajes a los residentes. El número para llamar es 610.396.0310, extensión 2400. Los mensajes urgentes se entregarán al residente tan pronto como sea posible, y los mensajes que no sean urgentes se entregarán dentro de las 24 horas.

LLAMADAS TELEFÓNICAS GRATUITAS A LA ICE

Los residentes pueden comunicarse sin costo alguno con diversas organizaciones, por medio del sistema de llamadas telefónicas gratuitas de la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement). Vea la información exhibida en las salas de teléfonos y en el Centro de Información para Residentes (Resident Information Center) donde encontrará instrucciones para llamar a consulados, tribunales de inmigración, la Asociación Estadounidense de Colegios de Abogados (American Bar Association), la Línea Directa del Defensor Público (Public Advocate Hotline) de la ICE, la Oficina del Inspector General (Office of the Inspector General), y otras oficinas, ya sean gubernamentales o no gubernamentales. Si necesita ayuda para usar el sistema, hable con el asistente social o llene un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

ACCESO TELEFÓNICO PARA RESIDENTES SIN RECURSOS

Además de las llamadas gratuitas con el sistema de llamadas telefónicas de la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement), los residentes sin recursos también pueden hacer llamadas gratuitas a organizaciones de asistencia legal y a familiares, así como otras llamadas necesarias. Para hacer estas llamadas, hable con el asistente social o llene un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

LLAMADAS TELEFÓNICAS PARA ASISTENCIA LEGAL

Las llamadas telefónicas a su asesor legal y a los tribunales no se controlan ni se graban en ningún momento. Para hacer llamadas de asesoría legal en un lugar con mayor privacidad, hable con un asistente social o llene un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

PROCEDIMIENTOS PARA QUEJAS Y RECLAMOS

El personal de Berks Family Residential Center (el Centro) no acosará, aplicará medidas disciplinarias, castigará ni tomará represalia alguna contra un residente que presente una queja o un reclamo. El director ejecutivo (Executive Director) investigará a fondo las acusaciones de esta naturaleza. Aunque los residentes siempre tienen acceso al sistema de presentación formal de quejas, se les recomienda tratar de resolver las pequeñas quejas de manera informal.

Proceso informal: la vía informal busca la discusión del problema con el personal, para intentar resolver la cuestión. Usted puede hablar con el personal, con el asistente social o con el supervisor. También puede presentar su queja en un formulario de solicitudes de los residentes (Resident Request form). Los asistentes sociales la analizarán y tratarán de darle una solución. La vía informal lleva menos tiempo que la vía formal, y se puede llegar a una solución más rápidamente. Si no está satisfecho con la respuesta, puede presentar una queja formal, como se indica a continuación.

Proceso formal: si no logra una solución por medio del proceso informal o desea pasar por alto el proceso informal, puede presentar una queja en un formulario de quejas (grievance form). Estos formularios están disponibles en el Centro de Información para Residentes (Resident Information Center). Si primero trató de resolver la cuestión informalmente, indique en el formulario de quejas con quién habló informalmente. Los formularios de queja se deben llenar y colocar en el buzón cerrado ubicado en el Centro de Información para Residentes (Resident Information Center) con la etiqueta "Grievance" (Quejas). Solo el funcionario que se encarga de las quejas tiene acceso a este buzón y, mantendrá la confidencialidad de su queja tanto como sea posible. Este buzón se controla y se vacía todos los días hábiles. Si un residente piensa que la queja es delicada o que pondría en peligro su seguridad o bienestar si otras personas la leyeran, pueden colocar el formulario en un sobre cerrado y entregarlo directamente al director ejecutivo. Si lo necesita, pida un sobre a un asistente social o pídale que lo ayude para hablar con el director ejecutivo. Las quejas se deben presentar tan pronto como sea posible después de ocurrido el incidente que

se denuncia. Las demoras en la presentación pueden dificultar la investigación del problema. Para completar el formulario de quejas, el residente puede pedir ayuda a miembros de su familia, a sus representantes legales o al personal. No se permite que los residentes presenten una queja en nombre de otro residente, salvo que sean los padres del residente que tiene el problema. En el formulario de quejas, los residentes pueden escribir con respecto a un solo reclamo o a varios reclamos estrechamente relacionados, concernientes al mismo tema. Para llenar el formulario, los residentes deben tratar de describir claramente el problema, el reclamo o el tema que les preocupa. Si la información no está clara, se regresará el formulario para que agreguen más datos. El funcionario a cargo de las quejas se reunirá con el residente, llevará a cabo una investigación y le entregará una resolución escrita, dentro de los 5 días hábiles de recibida la queja. Si el residente no está de acuerdo con la determinación del funcionario a cargo de las quejas, el funcionario enviará la queja y su decisión al director ejecutivo dentro de los 5 días hábiles de haber dictado su resolución sobre el residente. Antes de enviarla, el residente debe completar la parte del formulario de quejas titulada "Describa los motivos de la apelación" (State Reason(s) for Appeal) y regresará el formulario al funcionario a cargo de las quejas o lo colocará en el buzón cerrado ubicado en el Centro de Información para Residentes con la etiqueta "Grievance" (Quejas). El director ejecutivo tomará una decisión por escrito sobre la apelación dentro de los 5 días hábiles de recibirla. Los residentes que no estén satisfechos con la respuesta del director ejecutivo a su queja, pueden apelar la decisión ante el Comité para Quejas de los Residentes (RGC, Resident Grievance Committee). El RGC analizará la información, y se ofrecerá al residente la oportunidad de presentar su caso ante el comité. Dentro de los 5 días hábiles de haber tomado una decisión, el RGC notificará por escrito al residente la resolución y sus razones. Si el residente no está de acuerdo con la decisión del RGC, puede apelar a la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement) por medio de un formulario de comunicación a la ICE (ICE communication form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "ICE".

PROCEDIMIENTOS PARA QUEJAS DE URGENCIA

Cuando un residente informa verbalmente al personal que tiene un reclamo que afecta de modo inmediato su seguridad o bienestar, se inicia una queja de urgencia. El personal que reciba la denuncia del residente llevará el asunto al director ejecutivo (Executive Director) y a la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement) para que la analicen de inmediato y tomen las medidas necesarias.

ASUNTOS QUE NO SON MOTIVO DE QUEJA

Los siguientes asuntos no son motivo para presentar quejas por medio del procedimiento de quejas del Centro:

- Resoluciones de los tribunales estatales y federales.
- Leyes y reglamentaciones estatales y federales.
- Resoluciones de última instancia sobre las quejas.
- Políticas, procedimientos o decisiones de la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement), como traslados a otra institución, liberaciones, remociones, etc.;

- Resoluciones de audiencias para aplicación de medidas disciplinarias. Las apelaciones sobre medidas disciplinarias se pueden presentar en el formulario para asuntos disciplinarios (disciplinary form), después de la audiencia.

Se podrán regresar sin examinar las quejas de residentes que presenten quejas por molestar o que abusen del sistema de presentación de quejas.

MALA CONDUCTA DEL PERSONAL

Los residentes pueden denunciar la mala conducta del personal directamente a la Oficina del Inspector General (Office of Inspector General) del Departamento de Seguridad Nacional (Department of Homeland Security). Para hacerlo, podrán usar el sistema de llamadas gratuitas programado en los teléfonos y llamar al 1-800-323-8603 o escribir a:

**Department of Homeland Security
Office of the Inspector General
245 Murray Drive, S.E., Building 410
Washington, D.C. 20538**

CONTRABANDO

Contrabando es todo material que esté prohibido por la ley o las reglamentaciones, o que pueda provocar lesiones físicas, que sea esencialmente peligroso (armas o herramientas de violencia), que afecte la seguridad de los residentes o el personal del Centro, o que genere condiciones peligrosas o insalubres en el Centro. Por ejemplo: cuchillos, armas, líquidos inflamables, llaves, bebidas alcohólicas o estupefacientes, moneda prohibida, medicamentos controlados, cigarrillos, alcohol, tijeras, pornografía, medicamentos de cualquier clase, comida o bebida que se lleve al Centro, etc. El personal va a confiscar todo artículo que considere como contrabando. Si el contrabando no es ilegal según las leyes penales y no significa un riesgo para la seguridad, el personal lo pasa al inventario y entregará un recibo por el objeto, y luego lo guarda junto con el resto de las pertenencias personales del residente almacenadas. Las pertenencias religiosas ni se tratan como contrabando ni se confiscan sin consultar con el capellán del Centro y el director ejecutivo (Executive Director). No obstante, si se considera que un artículo religioso es contrabando, se le confisca y se va a tratar según los procedimientos para deshacerse del contrabando. El personal desechará todos los alimentos (por ejemplo, comidas rápidas, bebidas, alimentos o leche de fórmula para bebés con envases abiertos) en el momento del ingreso al Centro. Cuando haya una duda sobre el propietario del artículo de contrabando, se llevará a cabo una investigación para determinar a quién pertenece. El personal pasa al inventario y guarda los artículos mientras esté pendiente la verificación para determinar a quién pertenece. El residente tendrá 7 días para probar que es propietario de los artículos inventariados. Si un residente no puede probar que es propietario o no se puede establecer razonablemente la propiedad, el artículo se podrá destruir.

PROCEDIMIENTOS DISCIPLINARIOS

Los actos prohibidos se dividen en tres categorías: "grave", "moderado" y "leve". Las sanciones que se determinen para cada categoría se aplicarán solo si se encuentra al

residente culpable de haber cometido un acto prohibido y no se logró modificar su conducta por ningún otro método. Debido a la naturaleza de residencia familiar del Centro, las sanciones se usan como último recurso y solo como un medio de corregir comportamientos que amenacen la seguridad y el bienestar de los residentes, el personal y los visitantes. Cuando los residentes cometan o intenten cometer actos que violen las reglas establecidas en el Centro o que signifiquen una amenaza para la seguridad y el correcto funcionamiento del Centro, cada caso se tratará según las acciones disciplinarias que correspondan. Cuando un residente cometa o intente cometer actos que violen las leyes de Estados Unidos, se le podría someter a las acciones en un tribunal penal de Estados Unidos.

Siempre que sea posible, el personal tratará de corregir las infracciones menores de las reglas del Centro informalmente, por medio de conversaciones y orientación. Este procedimiento informal puede incluir consecuencias que sean aceptables para el residente y para el personal, por ejemplo, restricciones temporales para un piso, pérdida de privilegios y, para los niños, tiempo de inactividad. Los padres deberán estar presentes durante las entrevistas a los niños por motivos de infracciones, (salvo que la acusación se relacione con un incidente entre los padres y el hijo). Las medidas disciplinarias nunca tendrán un carácter degradante o humillante para los residentes ni se administrarán de esa manera. El personal nunca aplicará las siguientes sanciones: castigo corporal; cambios en los servicios de comida habituales; negación de asistencia legal; privación de correspondencia, teléfono o privilegios de visitas; privación de ejercicio físico o acceso a la recreación; privación de asistir a la escuela o de recibir educación. Ningún castigo incluirá el encerramiento en habitaciones o espacios cerrados y bajo llave. Solo en situaciones de salud mental se puede privar a los residentes de ropa, ropa de cama o artículos de higiene personal. El departamento médico tomará estas decisiones. En caso de que un miembro del personal piense que un residente está cometiendo una infracción que no se puede tratar por medio del procedimiento informal, ese miembro del personal debe completar un informe de incidente (incident report). Un supervisor comenzará la investigación de los informes de incidentes dentro de las 24 horas de recibirlos. Los residentes que estén bajo investigación tienen los siguientes derechos:

- Estar callado durante todas las etapas del proceso disciplinario. El silencio no se usará para respaldar una conclusión en contra del residente.
- Recibir el informe de incidente y la notificación de cargos (Notice of Charges) con un mínimo de 24 horas antes del inicio del procedimiento administrativo.
- Tener una audiencia inicial ante el Comité de Revisión de la Administración (MRC, Management Review Committee) dentro de las 24 horas de recibir la notificación de cargos por infracciones leves a moderadas.

Durante las audiencias ante el MRC, los residentes tienen los siguientes derechos:

- Presentar pruebas y declaraciones en su propio nombre.
- Asistir a la audiencia (pero no a la deliberación), salvo que su comportamiento signifique un riesgo para la seguridad.
- Tener un intérprete presente si la audiencia se lleva a cabo en un idioma que el residente no comprende.
- Apelar la decisión del comité por medio del proceso de apelaciones.

Los incidentes que incluyan violaciones graves de las reglas del Centro o los casos sin resolver se remitirán a un Panel Ejecutivo de Revisión (ERP, Executive Review Panel).

Durante las audiencias ante el ERP, los residentes tienen los siguientes derechos:

- Llamar a testigos, y presentar pruebas y declaraciones en su propio nombre.
- Asistir a la audiencia (pero no a la deliberación), salvo que su comportamiento signifique un riesgo para la seguridad.
- Tener un intérprete presente si la audiencia se lleva a cabo en un idioma que el residente no comprende.
- Solicitar que un representante del personal lo asista en el caso.
- Renunciar a la audiencia y admitir haber cometido la infracción en cuestión.
- Apelar la decisión del comité por medio del proceso de apelaciones.

APELACIONES CONTRA LAS AUDIENCIAS PARA APLICACIÓN DE MEDIDAS DISCIPLINARIAS

Después de la audiencia, los residentes pueden apelar las resoluciones del panel de disciplina, mediante la entrega de una apelación escrita a uno de los miembros del panel. El panel enviará la apelación al director ejecutivo (Executive Director), quien dará una respuesta escrita inmediata.

POSTERGACIÓN DE LOS PROCEDIMIENTOS DISCIPLINARIOS

Los procedimientos disciplinarios se podrán posponer por razones como preparación para la defensa, enfermedad física o mental, problemas de seguridad, fuga, traslado disciplinario, acciones penales pendientes, etc.

SANCIONES CORRECTIVAS PARA NIÑOS

El Comité de Revisión de la Administración (MRC, Management Review Committee) podrá aplicar las sanciones 1 a 4. El Panel Ejecutivo de Revisión (ERP, Executive Review Panel) podrá aplicar las sanciones 1 a 5.

1. Derivación a orientación.
2. Prohibición de salir del área de alojamiento (Housing Area), durante un máximo de 72 horas.
 - a. Cuando se prohíbe a un niño salir del edificio, se le debe otorgar un mínimo de una hora de actividad diaria al aire libre.
 - b. Se puede obligar al niño a permanecer en la sala de estar comunitaria, pero no se lo puede obligar a permanecer en su dormitorio, salvo durante el período de inactividad.
 - c. Ninguna sanción puede prohibir al niño asistir a las clases obligatorias de la escuela o a las prácticas religiosas.
3. A los niños de 12 años o más se les puede suspender el privilegio de libertad de movimiento hasta por 14 días. Dicha suspensión exige que los padres supervisen todas las actividades del niño durante ese período.
4. Pérdida del tiempo dedicado a actividades extracurriculares, como la noche de cine.
5. Pérdida de privilegios de viajes de estudio por hasta 45 días.

Las medidas correctivas no deben interferir con actividades diarias como comer y dormir. Las medidas disciplinarias no deben tener efectos negativos sobre la salud o el bienestar

físico y psicológico del niño, ni negarle las comidas habituales, las horas de sueño suficientes, ejercicio, atención médica, el derecho a correspondencia o asistencia legal.

SANCIONES CORRECTIVAS PARA ADULTOS

El Comité de Revisión de la Administración (MRC, Management Review Committee) podrá aplicar las sanciones 1 a 4.

El Panel Ejecutivo de Revisión (ERP, Executive Review Panel) podrá aplicar las sanciones 1 a 5.

1. Derivación a orientación.
2. Exigir la asistencia a clases para padres (Parenting Classes).
3. Trabajos adicionales como los siguientes; Tareas domésticas generales
4. Pérdida del derecho a compras en la tienda del Centro.
5. Prohibición de salir del área de alojamiento (Housing Area), durante un máximo de 72 horas.
 - a) La imposición de esta sanción debe tener en cuenta las edades de los niños y el efecto negativo que puede tener en un menor que no tuvo nada que ver con la infracción.

DESCRIPCIÓN DE LAS INFRACCIONES

INFRACCIONES LEVES

(101) Estar en un área no autorizada: estar en un área que está señalada como "prohibida" (off limits) para los residentes, mediante órdenes verbales, escritas o publicadas.

(102) Trastornos de conducta: comportamientos como hablar en voz muy alta, gritar o empujar, que impiden el funcionamiento ordenado del establecimiento.

(103) Falta de control del comportamiento de los niños por parte de sus padres o tutor legal: para padres que permiten que sus niños sean indisciplinados o irrespetuosos, o puedan insubordinarse en su presencia.

(104) Falta de cumplimiento de reglas o reglamentaciones verbales o publicadas: incumplimiento de órdenes o reglas para el funcionamiento del establecimiento en condiciones de limpieza, seguridad y orden, que se hayan anunciado con anterioridad para conocimiento de los residentes, o que algún empleado del establecimiento o persona encargada del residente en ese momento le haya transmitido. Esto incluye incumplimiento de los procedimientos establecidos en la residencia para contar los residentes.

(105) Peleas: intercambio de palabras o contacto físico por enojo, pero sin que ocurran lesiones que necesiten de atención médica; por ejemplo, bromas o juegos bruscos.

(106) Juegos de azar: operar o jugar juegos de azar, cuando existan apuestas y pagos por medio de mercancías u otros objetos de valor.

(107) Posesión de artículos para juegos de azar: controlar artículos para operar o jugar cualquier juego de azar en los que se apueste y se pague con mercancías u otros objetos de valor.

(108) Automutilación: provocarse heridas a sí mismo, como cortarse o tatuarse el cuerpo.

(109) Fumar: fumar tabaco en cualquiera de sus formas en cualquier lugar del establecimiento.

(110) Recibir o poseer sin autorización cualquier artículo de valor: recibir o tener en su poder cualquier artículo de valor que haya obtenido por medio de fraude, amenazas o robo.

(111) Ausencia injustificada del lugar asignado: no estar en el lugar asignado, como el área de alojamiento, el área de recreación o de servicios médicos, sin autorización del supervisor correspondiente.

(112) Uso de frases o lenguaje vulgar, abusivo o grosero.

(113) No mantener la propia higiene personal o la higiene personal de un hijo: estar desaseado o tener ropas sucias.

(114) Falta de higiene y orden en su lugar de alojamiento: no mantener la limpieza y el orden del lugar donde vive. El lugar debe mantenerse de modo que todas sus posesiones se guarden apropiadamente, en los lugares designados. No debe haber polvo ni desorden en el lugar.

(115) Posesión de contrabando no peligroso (contrabando "blando"): posesión de artículos de contrabando que no se permiten en el establecimiento, pero que no pueden causar lesiones o daños graves al propietario o a otras personas, incluidos los productos del tabaco.

(116) Uso no autorizado del teléfono: uso del teléfono durante horarios no autorizados.

(201) Negativa a someterse a una prueba para detectar drogas ante una sospecha razonable: no entregar una muestra de orina para hacer una prueba para detectar drogas ante una sospecha razonable.

INFRACCIONES MODERADAS

(202) Prueba para detectar drogas, ante una sospecha razonable, con resultado positivo de detección de drogas ilegales o medicamentos controlados tomados sin receta.

(203) Robo: tomar algo que pertenece a otra persona, sin autorización.

(204) Destruir, alterar o dañar la propiedad (monto menor de \$1,000.00): destruir, modificar o perjudicar la propiedad del establecimiento o de otra persona.

(205) Falsificación o reproducción no autorizada de documentos o artículos (excluido el dinero): falsear, falsificar o reproducir sin aprobación cualquier documento, artículo, identificación o documentos de seguridad.

(206) Obstaculizar las tareas de un empleado: actuar para interrumpir a un empleado durante su horario de trabajo, por ejemplo, causar demoras o dar información falsa.

(207) Negativa para someterse a un cacheo ante una sospecha razonable.

(208) Descuido de los hijos: falta de cuidado y atención adecuados para un hijo (que no sean lesiones).

(209) Acoso sexual verbal a un residente. Actuar de manera de crear un ambiente residencial hostil para otros residentes, sin importar la edad o el sexo.

INFRACCIONES GRAVES

(301) Provocar incendios: iniciar o hacer que se inicie un incendio que pueda causar o cause daños a las personas o a la propiedad.

★ (302) Ataques y lesiones: ataques sin intención sexual al cuerpo de otra persona, pero con intención de causar daño o lesiones graves.

★ (303) Violar a una persona o tener contacto sexual con ella sin su consentimiento, violar a una persona incapaz de consentir o rechazar o tener contacto con ella; contacto del pene con la vagina o del pene con el ano, incluida la penetración, aunque sea leve; contacto entre la boca y el pene, la vagina o el ano, o penetración de los orificios anales o genitales de otra persona con la mano, los dedos u otro objeto (por ejemplo, penetración o sodomía oral).

★ (303) Ataque sexual contra cualquier persona y contacto abusivo con ella sin su consentimiento, con el fin de obtener gratificación o excitación sexual; ataque sexual contra una persona incapaz de consentir o rechazar, o contacto abusivo con ella; tocar a esas

personas de manera intencional, ya sea directa o indirectamente, o a través de la ropa, en sus genitales, el ano, la ingle, el pecho, la parte interna de los muslos o las nalgas. El ataque sexual excluye los incidentes que involucren penetración o sodomía oral.

- (304) Intento o conspiración para cometer una infracción grave: una infracción de residentes que no cometen realmente la infracción, pero participan en ella de una (1) o más de las maneras que se detallan a continuación.
- (304a) Intentos de cometer la infracción grave.
 - (304b) Solicitar a otras personas que cometan la infracción grave.
 - (304c) Conspirar con otras personas para cometer la infracción grave.
 - (304d) Facilitar la acción de otras personas para cometer la infracción grave.
- (305) Maltrato a menores: tratar a un niño con crueldad, dureza o de manera inadecuada o insultante.
- (306) Descuido de los hijos: falta de cuidado y atención adecuados para un hijo, que lo ponga en peligro o le cause lesiones.
- (307) Afiliación confirmada a un grupo de riesgo para la seguridad (STG, Security Threat Group) y asociación o participación en actividades relacionadas con pandillas.
- (308) Adulteración, falsificación o reproducción de dinero no autorizada.
- (309) Muerte de una persona: todo acto cuyo resultado final sea la muerte de una persona, ya sean empleados, visitantes y voluntarios u otros residentes, entre otros.
- (310) Destruir, alterar o dañar la propiedad (monto de \$1,000.00 o más): destruir, modificar o perjudicar la propiedad del establecimiento o de otra persona.
- (311) Tomar rehenes: retener a una o más personas en contra de su voluntad como garantía para que se satisfagan determinadas condiciones.
- (312) Escapar: abandono del establecimiento o alejamiento de la custodia de un empleado sin permiso.
- (313) Insurrección: participar o inducir a otro a participar en actividades no autorizadas, como protestas o disturbios.
- (314) Posesión de contrabando peligroso (contrabando "duro"): posesión de artículos de contrabando que no se permiten en el establecimiento y que pueden causar lesiones o daños graves al propietario del contrabando o a otras personas. Esto incluye armas mortales, artículos modificados para usarlos como armas, drogas y artículos para drogarse.
- (315) Mal comportamiento sexual: esto incluye, entre otros, los siguientes actos:
- (315a) Exponer los genitales o las nalgas a un empleado, visitante, voluntario o residente, con el fin de obtener gratificación o excitación sexual.
 - (315b) Masturbarse donde un empleado, visitante, voluntario u otro residente pueda verlo.
- (316) Intimidar o amenazar a otras personas con hacerles daño: decirle a una persona, por medio de acciones o palabras, que sufrirá algún daño.
- (317) Posesión de estupefacientes o bebidas alcohólicas: posesión de cualquier droga o estupefacientes que no le hayan recetado o cuyo uso no esté aprobado por el departamento de servicios médicos.
- (318) Violación de cualquier ley federal, estatal o local: todo acto, aunque no esté especificado en esta política, que se pueda considerar como delito grave o falta menor según las leyes federales, o según las leyes del estado donde el residente esté alojado.

EDUCACIÓN

El Centro dirige una escuela en el sitio cuyas clases están a cargo de la Unidad Intermedia del Condado de Berks (Berks County Intermediate Unit). Los salones de clases se ubican en el piso de actividades del Centro. La escuela del Centro brinda servicios educativos a todos los niños que cumplen 4 años, como mínimo, el 1 de septiembre del año lectivo vigente. Es obligatorio participar en el programa educativo, y funciona en un ambiente de salón de clase estructurado, de lunes a viernes. Las materias académicas básicas incluyen Ciencias, Estudios Sociales, Matemáticas, Lectura, Escritura y Educación Física. Por lo general, los niños de 4 a 5 años participarán en un programa preescolar de media jornada, y los niños de 5 a 18 años participarán en un programa académico de jornada completa. Todos los niños de 5 años o más deben presentar un examen en el momento del ingreso al Centro, y se les ubicará en la clase adecuada. Los padres deben llevar a sus hijos hasta la sala de clases que les corresponda, de lunes a viernes a las 8:40 a.m., cuando la escuela comienza a funcionar. Los padres deben regresar a la sala de clases a las 3:15 p.m. todos los días para buscar a sus hijos, salvo que el personal les informe de algún cambio. Los feriados y los horarios de descanso se anunciarán y publicarán.

INFORMACIÓN PARA NECESIDADES ESPECIALES

Aunque después del ingreso al Centro se evalúa a cada niño para detectar necesidades especiales, los padres que piensen que sus hijos puedan tener deficiencias educativas o problemas de aprendizaje pueden solicitar que se evalúe a los niños, a fin de detectar necesidades especiales. Para solicitar esta evaluación, los padres pueden hablar con el maestro del niño, un asistente social, un asistente social de la división Cuerpo de Servicios Médicos para Inmigración (IHSC, Immigration Health Services Corps) o pueden llenar un formulario de solicitud para el programa (Program Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). La unidad educacional se va a reunir con los padres y para evaluar al niño. Si se concluye que el niño es elegible para educación para necesidades especiales, el niño tendrá un Plan de Educación Individualizado (IEP, Individual Educational Plan). El programa de educación del niño y las modificaciones necesarias se registrarán por el IEP correspondiente.

MATRIMONIOS

Usted o su representante legal pueden solicitar por escrito un permiso para contraer matrimonio durante su estadía en el Centro, al jefe (Chief) de la Unidad de Administración de Residencias para Jóvenes y Familias (JFRMU, Juvenile and Family Residential Management Unit). En la solicitud se deberá manifestar específicamente lo siguiente:

- Que el o la residente tiene capacidad legal para contraer matrimonio.
- Que el o la residente tiene capacidad mental, según lo certifique un médico.
- Que el futuro cónyuge desea contraer matrimonio con el o la residente, y que afirme por escrito tal intención.

Dicha afirmación debe estar incluida como parte de la solicitud. Si no se obtiene la aprobación del jefe, la JFRMU puede demorar o cancelar las ceremonias o las visitas con fines de contraer matrimonio que se hayan aprobado. Para más información, vean la sección sobre la ICE.

TIENDA DEL CENTRO

Si tienen fondos en su cuenta en el Centro, pueden comprar artículos en la tienda del Centro. Para hacerlo, deben completar un formulario de pedido a la tienda (commissary order form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Commissary" (tienda del Centro). Una vez confirmado y aprobado su pedido, el paquete estará disponible para que lo retire. Para conocer más detalles sobre la tienda del Centro y los días para recibir y entregar pedidos, vean la información de servicios para residentes (Resident Services Information) en el Centro de Información para Residentes (Resident Information Center).

PAUTAS DE LA TIENDA DEL CENTRO

Solo el jefe de la familia puede presentar un pedido a la tienda del Centro. Una vez recibido el pedido, es su responsabilidad verificar que los artículos sean los que pidió. Se debe avisar al supervisor de cualquier problema con el pedido inmediatamente después de recibirlo. Una vez completadas, todas las transacciones de la tienda del Centro son definitivas. Una transacción se completa cuando el residente comprueba su mercancía y firma el recibo. No se permiten cambios. La tienda del Centro no da crédito. Los residentes deben tener fondos suficientes en su cuenta en el Centro para pagar los artículos solicitados. Una vez que el residente coloca el formulario para la tienda en el buzón de la tienda del Centro, no podrá cambiarlo. Hay un límite de \$100.00 para gastos por familia y por semana (excluidas las compras especiales). Todo artículo que se compre en la tienda del Centro debe ser para uso de la familia que hace la compra.

FINANZAS

No se permite que los residentes tengan en su poder dinero o fondos mientras estén en el Centro. Cuando ingresan, toda la moneda de EE. UU. se deposita en una cuenta a la que ustedes tienen acceso durante su estadía en el Centro. La moneda que no sea de EE. UU. se coloca junto con sus pertenencias almacenadas. Usted recibirá un recibo por los fondos que ingresen durante su estadía en el Centro. Los residentes pueden recibir fondos (dinero en efectivo, o cheques o giros a la orden del residente) procedentes de sus familiares o amigos, quienes deberán enviarlos a la dirección del Centro, ubicada en la portada de este manual. (Se recomienda enviar cheques de caja). Si deciden participar en el programa de trabajo, esos pagos también se depositarán en su cuenta. Asimismo, podrán recibir fondos durante las visitas. Estos fondos se deben entregar al personal antes de la visita, para depositarlos en su cuenta. Usted puede usar estos fondos para comprar tarjetas telefónicas, artículos de la tienda del Centro y otros artículos que necesite durante su estadía en el Centro. Los fondos de residentes que vengan de otro centro se acreditarán a su cuenta en un plazo de 24 horas a partir de la llegada de dichos fondos. Cuando se les dé el alta, los residentes recibirán el saldo de los fondos que tengan en su cuenta en el Centro, mediante un cheque.

PROGRAMA DE TRABAJO VOLUNTARIO

Los adultos residentes pueden participar en el programa de trabajo voluntario del Centro. Antes de comenzar el programa de trabajo voluntario, los residentes deben obtener un

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certificado médico de aptitud. Para obtener el certificado, hable con el departamento médico. Los residentes recibirán la capacitación necesaria y deberán firmar una declaración para el programa de trabajo voluntario, antes de comenzar a trabajar. Los residentes que participen en el programa de trabajo voluntario recibirán \$1.00 de paga por día de participación. Vea al asistente social para inscribirse en el programa de trabajo voluntario o complete un formulario de solicitud para el programa (Program Request Form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). Los residentes también pueden ser voluntarios para tareas temporales que se presenten ocasionalmente. Por lo general, el trabajo temporal dura desde varias horas hasta varios días. Los residentes asignados a áreas de trabajos especiales recibirán la ropa de protección adecuada e instrucciones acordes a las exigencias del trabajo. Las tareas asignadas son estrictamente voluntarias. El desempeño insatisfactorio del trabajo y los casos de indisciplina pueden dar lugar a que se le elimine del programa de trabajo voluntario. La siguiente es una lista de algunas de las tareas y los trabajos temporales disponibles en el programa de trabajo voluntario:

- Cocina y comedor
- Área de limpieza (dentro del Centro)
- Área de limpieza (fuera del Centro)
- Lavandería
- Limpieza del área de estar
- Recreación
- Biblioteca
- Jardín
- Costura
- Equipo de pintores
- Salón de ropas

VISITAS

Los residentes tienen permitidas visitas sociales, legales y consulares, según se describe en las secciones relacionadas del manual. A su llegada al Centro, todos los visitantes deben presentar una identificación con foto, emitida por el gobierno de EE. UU. A criterio del supervisor, un menor que no posea una identificación aceptable puede ser admitido en compañía de un visitante adulto que se responsabiliza de su identidad. Los menores permanecerán bajo la supervisión de un visitante adulto, para no molestar a otros visitantes. Cuando los visitantes o los residentes se comporten de manera que cause molestias, se podrá dar por terminada la visita. Los visitantes que traigan cualquier artículo para los residentes deben entregarlo al personal, que lo recibirá y les entregará un recibo. Ningún artículo se puede entregar directamente al residente durante la visita. Los residentes no están autorizados a recibir contrabando o alimentos perecederos. Para más información, vean la sección sobre pertenencias personales permitidas y contrabando.

INSTRUCCIONES PARA LLEGAR AL CENTRO

Desde la Ruta 222 (no la ruta comercial 222), tome la salida 183 North. Siga hasta el primer semáforo (hay una farmacia CVS en la esquina) y doble a la izquierda por Leesport Road. En el primer cartel de detenerse, doble a la derecha por County Road. Siga aproximadamente 1 milla hasta Berks Road y doble a la izquierda. Siga hasta el primer estacionamiento a la izquierda. La entrada al Centro para visitantes está en la parte superior de la rampa, al lado del mástil de la bandera.

VISITAS SOCIALES

Las visitas sociales se llevan a cabo los 7 días de la semana incluidos los feriados, desde las 8:00 a.m. hasta las 8:00 p.m. No hay restricciones para la cantidad de visitas que reciben los residentes. Por lo general, las visitas durarán un mínimo de 60 minutos. Las visitas se podrán llevar a cabo solo con cita previa. Las citas se hacen llamando a los asistentes sociales a las extensiones 2360 y 2361, de lunes a viernes desde las 9:00 a.m. hasta las 3:00 p.m. Se podrá restringir la cantidad de visitantes por visita, según la cantidad de visitantes previstos para esa hora. Debido a la cantidad de personal disponible, las citas médicas de los residentes y los programas de actividades, los visitantes no podrán presentarse sin la aprobación previa, salvo que los autorice el director de programa (Program Director). Los visitantes también pueden solicitar arreglos especiales para la visita si viajan desde lugares alejados o existe alguna otra circunstancia especial. Los familiares, amigos y otras personas pueden programar visitas sociales a los residentes.

VISITAS DE ASESORES LEGALES

El Centro permite las visitas de asesores legales los 7 días de la semana, incluidos los feriados, desde las 8:00 a.m. hasta las 8:00 p.m. Las visitas legales se podrán llevar a cabo solo con cita previa. Las citas se hacen llamando a los asistentes sociales a las extensiones 2360 y 2361, de lunes a viernes desde las 9:00 a.m. hasta las 3:00 p.m. Si un asesor legal necesitara concertar una cita en un horario que no sea el indicado anteriormente, puede comunicarse con un supervisor para solicitarla. Las visitas legales pueden llevarse a cabo durante un período programado de comida. En tales casos, el residente recibirá una bandeja o una bolsa con su comida después de la visita, o puede comer durante la visita. Los abogados deben presentar una tarjeta de membresía otorgada por un colegio de abogados estatal de EE. UU. Las personas autorizadas para llevar a cabo una visita legal son las siguientes:

- Abogados y otros representantes legales.
- Asistentes legales.
- Un asistente legal podrá visitar, sin estar acompañado, a un residente durante el horario de visitas legales siempre que presente una carta de autorización del representante legal bajo quien trabaja. En la carta se deberá manifestar que el asistente legal nombrado presta servicio en nombre del representante legal bajo quien trabaja con el fin de reunirse con el residente que aloja la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement).
- Intérpretes para colaborar con los representantes o asistentes legales.

- Un asistente legal podrá visitar, sin estar acompañado, a un residente durante el horario de visitas legales siempre que presente una carta de autorización del representante legal bajo quien trabaja. En la carta se deberá manifestar que el asistente legal nombrado presta servicio en nombre del representante legal bajo quien trabaja con el fin de reunirse con el residente que aloja la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement).
- Intérpretes para colaborar con los representantes o asistentes legales.

VISITAS CONSULARES

El Centro permite la visita de funcionarios consulares en todo momento. Las citas se hacen llamando a los asistentes sociales a las extensiones 2360 y 2361, de lunes a viernes desde las 9:00 a.m. hasta las 3:00 p.m. Si un funcionario consular necesitara concertar una cita en un horario que no sea el indicado anteriormente, puede comunicarse con un supervisor para solicitarla.

CÓDIGO DE VESTIR DE LOS VISITANTES

Visitantes de 12 años o más:

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- Deben usar ropa que les cubra los hombros, el pecho, el estómago y todas las partes del cuerpo entre el ombligo y la mitad del muslo, cuando estén sentados.
- El escote de la ropa no será más bajo que la axila, tanto en el frente como en la espalda.
- Está prohibido usar ropa transparente.
- Siempre se deberá usar calzado.
- Siempre se deberá usar camisa.
- Está prohibido usar colores que identifiquen a "pandillas".

INFORMACIÓN LEGAL

BIBLIOTECA LEGAL Y ACCESO A MATERIAL LEGAL

La biblioteca legal está ubicada en el piso de dormitorios y está abierta las 24 horas del día. No se permitirá el uso de la biblioteca a más de 5 residentes al mismo tiempo. Si no puede acceder a la biblioteca legal debido a la limitación de cantidad de residentes, hable con un supervisor para que haga los arreglos a fin de que pueda usar la biblioteca. Se solicitará que abandonen el lugar a los residentes que no usen la biblioteca legal para los fines por los que funciona. En la biblioteca legal hay máquinas de escribir y computadores disponibles, para la elaboración de documentos legales y para investigación de cuestiones legales. Las computadoras contienen una aplicación "Lexus Nexus" que tiene diversas publicaciones sobre la ley de inmigración y otras publicaciones relacionadas. En la biblioteca legal también puede haber material de organizaciones no gubernamentales sobre investigaciones de asuntos legales e inmigración. Los residentes pueden solicitar materiales legales existentes fuera del sitio. Para solicitarlo, pueden hablar con un asistente social o llenar un formulario de solicitud para el programa (Program Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). Para recibir instrucciones a fin de usar la aplicación Lexus Nexus, para inscribirse para la orientación o para hacer preguntas sobre el uso del equipo de la biblioteca, hable con un asistente social o llene un formulario de solicitud para el programa. Para solicitar papel o discos de almacenamiento de la computadora para guardar documentos y para avisar del mal funcionamiento del equipo de la biblioteca legal, hable con el personal de la mesa de atención del piso de dormitorios.

MATERIAL PROVISTO POR REPRESENTANTES LEGALES

Los documentos y demás material escrito que se entregan a un residente durante una visita legal, se inspeccionarán, pero no se leerán. Los residentes pueden mantener material legal en sus dormitorios. Si un residente tiene una cantidad de formularios en blanco o de material de autoayuda que excede la cantidad necesaria para uso personal, dicho material se podrá guardar con sus pertenencias. Para tener acceso a estos documentos, el residente deberá hablar con el personal o completar un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

PLÁTICAS PARA ORIENTACIÓN LEGAL

Voluntarios de organizaciones de asistencia legal dan pláticas para orientación legal (LOP, Legal Orientation Presentations) en el Centro. Las pláticas están abiertas para todos los residentes, independientemente del público al que se dirija el orador, salvo cuando la asistencia de algún residente en particular pueda significar un riesgo para la seguridad. Por lo general, las LOP se llevan a cabo una vez por mes. Vea la información y el programa de las LOP que se exhiben en el Centro de Información para Residentes (Centro de Información para Residentes). Para asistir, consulte con un asistente social o llene un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

ASISTENCIA LEGAL GRATUITA

Se puede solicitar asistencia legal gratuita (pro bono) a las organizaciones de asistencia legal gratuita que figuran en la lista que está en el Centro de Información para Residentes (Resident Information Center). La Oficina Ejecutiva de Revisión de Inmigración (Executive Office for Immigration Review) les proporciona la lista. También puede solicitar hablar con el grupo de asistencia legal local del Centro. La hoja para inscribirse está a la salida de la oficina de los asistentes sociales, en el piso de actividades.

INSPECCIONES DE RUTINA DE HIGIENE, SALUBRIDAD Y SEGURIDAD

Las inspecciones de higiene y salubridad, y de seguridad contra incendios se llevan a cabo semanalmente en todas las áreas de programas del Centro. El personal hace estas inspecciones para verificar las condiciones sanitarias y para cumplir con otras reglamentaciones. Cuando durante estas inspecciones se inspeccionan los dormitorios, los residentes que los ocupan deben estar presentes. Los padres deben estar presentes cuando el personal inspecciona los dormitorios de sus hijos.

BÚSQUEDAS NO RUTINARIAS

Ante una sospecha razonable de que puede existir contrabando o un peligro para la seguridad de los residentes o del personal, se hace una búsqueda especial o no rutinaria. Una búsqueda no rutinaria en el dormitorio o entre las pertenencias de un residente se llevará a cabo solo después de haber notificado al residente y en su presencia, salvo que existan circunstancias apremiantes (por ejemplo, una situación de auto lesión). En estos casos, se notificará al residente una vez efectuada la búsqueda.

CACHEOS DE PERSONAS:

- Inspección visual: búsqueda visual de contrabando, sin contacto físico.
- Palpación: inspección física de un residente cuando está vestido. Solo la llevará a cabo un miembro del personal del mismo sexo. El inspector usa su sentido del tacto cuando palpa el cuerpo del residente o lo recorre con las manos. Para hacer

una búsqueda con palpación no es necesario que el residente se saque la ropa, aunque la inspección puede incluir una búsqueda en la ropa y los efectos personales del residente. La búsqueda por palpación se llevará a cabo si existe una sospecha razonable y fundamentada de que el residente tiene contrabando en su poder. Ningún niño menor de 15 años será sometido a una búsqueda mediante palpación sin la autorización explícita del director ejecutivo (Executive Director) o de la Unidad de Administración de Residencias para Jóvenes y Familias (JFRMU, Juvenile and Family Residential Management Unit).

CORREO Y CORRESPONDENCIA

Los residentes pueden enviar y recibir correspondencia y una variedad de otros artículos por correo, incluidos tarjetas telefónicas, giros postales, libros, ropa y otros artículos "permitidos". Para más información, vean las secciones relacionadas. Se permitirá a los residentes recibir y enviar a su propio costo lo siguiente:

- Una cantidad ilimitada de correspondencia general por correo. La cantidad se limitará únicamente cuando exista una situación de seguridad pública o de seguridad y orden del Centro.
- Una cantidad ilimitada de correspondencia especial, incluida la correspondencia con el representante legal, con un posible representante legal, con tribunales y otros organismos gubernamentales y con organizaciones de noticias. Para más información, vean la sección sobre correspondencia especial.
- Paquetes con artículos personales. Para enviar o recibir paquetes, hable con un asistente social o llene un formulario de solicitud para el programa (Program Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

CORREO PARA RESIDENTES SIN RECURSOS

Los residentes que no tengan los fondos necesarios para pagar el franqueo podrán enviar lo siguiente sin costo:

- Una cantidad razonable de "correspondencia especial" por correo. Si el centro considera que la cantidad no es razonable, se consultará a la Oficina del Jefe de Abogados (Chief Counsel) de la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement) antes de suspender el envío de correspondencia.
- Cinco cartas de correspondencia general, como mínimo, por semana.
- Paquetes que la ICE y la Oficina de Operaciones de Aplicación de la Ley y Traslados (ERO, Enforcement and Removal Operations) consideren necesarios, como los que contengan ropa, artículos personales y artículos necesarios para regresar al país de origen.
- Paquetes que contengan artículos personales, cuando se determine que el espacio es insuficiente para almacenarlos adecuadamente.

CORRESPONDENCIA ESPECIAL

La correspondencia especial es correspondencia escrita a, o de los abogados y otros representantes legales, jueces, tribunales, embajadas y consulados, Presidente y al

Vicepresidente de Estados Unidos, miembros del Congreso, Departamento de Justicia (Department of Justice), Departamento de Seguridad Nacional (Department of Homeland Security), Servicio de Salud Pública de EE. UU. (U.S. Public Health Service) y representantes de los medios de comunicación de noticias.

- La correspondencia se tratará como correspondencia especial si el título y la oficina del remitente (para correo entrante) o el destinatario (para correo saliente) están nombrados claramente en el sobre, y el sobre tiene la etiqueta "Special Correspondence" (correspondencia especial). La correspondencia especial entrante también debe estar marcada como "Special Correspondence" (correspondencia especial) en el sobre o el paquete. Los residentes deben avisar a toda persona que envíe correspondencia especial al Centro las reglas que se aplican y los requisitos para enviarla.



- La correspondencia especial solo puede abrirse en presencia del residente y solo se puede controlar para detectar contrabando, sin leerla.
- Los paquetes de correspondencia especial solo se pueden enviar o recibir con arreglos previos. Para enviar o recibir dichos paquetes, hable con un asistente social o llene un formulario de solicitud para el programa (Program Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

FRANQUEO Y SOBRES

El franqueo se puede comprar en la tienda del Centro. Para más información, vean la sección sobre procedimientos de compras en la tienda del Centro y correspondencia de residentes sin recursos. Se proveerán sobres sin costo a los residentes. Para solicitarlos hable con un asistente social o llene un formulario de solicitud para el programa (Program Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

DISTRIBUCIÓN DEL CORREO ENTRANTE

Los sobres planos de correo entrante se distribuirán dentro de las 24 horas, y los paquetes, dentro de las 48 horas de recibidos, cuando lleguen en horario normal de operaciones. Los paquetes entrantes que se reciban en fines de semana y feriados se distribuirán el próximo día hábil administrativo. Todo el correo entrante debe tener el nombre del residente, el número de registro de extranjero (A number) y una dirección precisa del remitente. El correo general entrante se abrirá e inspeccionará para detectar contrabando, solo si el residente está presente, salvo que renuncie a ese derecho o que el director ejecutivo (Executive Director) autorice la inspección por razones de seguridad. El correo general entrante también se podrá leer cuando surja un motivo documentado de preocupación por la seguridad, con respecto a un residente en particular. Se podrá rechazar el correo si contiene contrabando u otros artículos que pongan en riesgo la seguridad o que sean percederos. Tanto el remitente como el destinatario recibirán una explicación escrita

sobre el motivo del rechazo del correo, y la correspondencia se descartará de acuerdo con lo dispuesto en la sección sobre contrabando de este manual. Antes de confiscar artículos religiosos, se consultará al residente y al capellán del Centro. Los documentos de identidad enviados por correo al residente se remitirán a la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement) para colocarlos en el archivo de extranjero (A file) del residente. Para solicitar una copia certificada del documento, los residentes deberán comunicarse con la ICE. Para más información, vean la sección sobre comunicación con inmigración.

ENVÍO DEL CORREO SALIENTE

No se abrirá, inspeccionará ni censurará el correo saliente, salvo que esté dirigido a otro residente o extranjero que se encuentren en un establecimiento de detención o si existen razones para creer que el artículo puede significar un riesgo para la administración segura y ordenada del establecimiento, que puede poner en peligro al remitente o al público, o que puede facilitar actividades delictivas. El correo saliente se enviará dentro de las 24 horas a partir de que el residente entregue la correspondencia en el Centro, excluidos los fines de semana y feriados. En estos casos, la correspondencia se enviará el día hábil administrativo siguiente. El correo saliente (con el debido franqueo) se puede colocar en el buzón de "Mail" (Correo), en el Centro de Información para Residentes (Resident Information Center). Si la correspondencia se coloca en el buzón sin el franqueo correspondiente, se regresará al residente, salvo que sea una persona sin recursos. Para más información, vean la sección sobre correo para personas sin recursos. La correspondencia que no pase por la ranura se puede entregar a un asistente social o a un supervisor, para que gestione el envío. Todo el correo saliente debe indicar, en el lugar del remitente, el nombre del residente, su número de registro de extranjero (A number) y la dirección del Centro. Para conocer los requisitos de franqueo, los residentes pueden hablar con un asistente social.

NOTARIO PÚBLICO

Para obtener asistencia de un notario público, se puede llenar un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

FOTOCOPIAS

Para obtener fotocopias, se puede hablar con un miembro del personal o con un asistente social, o llenar un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). Los servicios de fotocopiado para material legal están disponibles sin cargo.

GIROS POSTALES

Los residentes que deseen enviar giros postales deberán hablar con el asistente social o llenar un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

SERVICIOS DE PELUQUERÍA

Los residentes pueden hacerse cortar el pelo o tener otros servicios de peluquería una vez por semana. La información sobre servicios de peluquería, incluida la lista de precios, está en el Centro de Información para Residentes (Resident Information Center). La hoja para inscribirse está a la salida de la oficina de los asistentes sociales, en el piso de actividades. Para información sobre los servicios de peluquería, hable con un asistente social o llene un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

PROGRAMA RECREATIVO

Se ofrecen actividades de recreación variadas para los residentes durante su estadía en el Centro. Los residentes deben cuidar los artículos y equipos que se les entreguen y regresarlos luego de usarlos. Los residentes serán responsables de los artículos de recreación o de uso en el tiempo libre hasta que los regresen. El personal programa actividades específicas para diversión o gimnasia y solicita a los residentes que cooperen con estas actividades, que participen en ellas y que inviten a sus hijos a participar. Algunas de las actividades son los viajes de estudio fuera del sitio, que se programan con anticipación; otras son actividades en el sitio, que se programan para días y horarios específicos, y otras están disponibles para hacerlas de manera independiente. Para mayor información, lea los anuncios, la información y los programas para recreación en el Centro de Información para Residentes (Resident Information Center).

OPORTUNIDADES DE RECREACIÓN

- **Televisores:** hay varios televisores ubicados en el Centro para entretenimiento de los residentes. Los televisores permiten ver programas en inglés y en español, y también se puede escuchar música. Aunque no hay reglas específicas para determinar qué programas se pueden ver, los residentes deberán ser considerados con los demás y evitar problemas innecesarios por el uso de los televisores. En caso de que surja un problema, el personal tratará de resolverlo y puede decidir suspender el uso del televisor hasta que se pueda resolver la situación. El volumen de los televisores se mantendrá en un nivel razonable, para no molestar a otros residentes o las operaciones del Centro. Durante las horas de silencio, el volumen se debe mantener al mínimo. Los televisores no se deben cambiar de lugar ni manipular por ninguna razón. Si un televisor no funciona bien, los residentes deben avisar al personal para que lo solucionen.

- **Librería social:** la librería social está ubicada en el piso de actividades y está abierta los 7 días de la semana, durante el horario de libertad de movimiento. Los residentes pueden leer en la biblioteca o llevar los libros a la mesa de atención del piso de actividades para pedirlos prestados. Hay libros disponibles en inglés, español y otros idiomas para niños, jóvenes adultos, adolescentes y adultos. También hay computadoras disponibles en la biblioteca social, solo para lectura electrónica. Por medio de estas computadoras, los residentes pueden acceder a material de lectura en su propio idioma. Para informarse sobre el uso de estas computadoras, vean al personal de la mesa de atención, hablen con un asistente social o llenen un formulario de solicitud para el programa (Program Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).
- **Salón de actividades para niños pequeños:** el salón de actividades para niños pequeños está ubicado en el piso de actividades. Los residentes encontrarán una gran cantidad de juguetes, juegos, películas, libros multilingües con hojas de cartón y actividades educativas para que los niños pequeños jueguen en este salón.
- **Juegos electrónicos (Wii, Xbox etc.):** por lo general, el personal ofrece los juegos electrónicos como parte de una actividad organizada, pero se pueden pedir prestados si están disponibles. Hable con el personal de la mesa de atención de cualquiera de los pisos para conocer información sobre cómo pedir prestados los juegos electrónicos. Lea en el Centro de Información para Residentes (Resident Information Center), la información publicada sobre actividades organizadas con juegos electrónicos. En caso de que surja un problema cuando los residentes estén jugando con juegos electrónicos, el personal tratará de resolverlo y puede decidir suspender el uso de los juegos hasta que se pueda resolver la situación.
- **Música y equipo para escucharla:** los equipos de música se pueden pedir prestados al personal de la mesa de atención de cualquiera de los pisos.
- **Actividades para el tiempo libre:** el Centro brinda actividades para el tiempo libre en las salas de estar comunitarias de ambos pisos. Las actividades para el tiempo libre incluyen tareas de artesanías, juegos de mesa, juegos de tablero, cartas, juegos pedagógicos con tarjetas, etc. Se les pide que manejen estos artículos con cuidado y que sean considerados con otras personas que deseen usarlos. Estos artículos se pueden pedir prestados; hable con el personal de la mesa de atención de cualquiera de los pisos. Los residentes deben avisar al personal de toda pérdida o rotura de los artículos, para que los reemplacen. Estos artículos se deben regresar antes de hacer otra actividad (por ejemplo, ir a comer, recibir visitas, concurrir a una cita médica, etc.) o cuando finaliza el horario de libertad de movimiento.
- **Viajes de estudio fuera del sitio:** los viajes de estudio fuera del sitio se programan regularmente para ir a diversos lugares como parques, centros comerciales, librerías, tiendas de mascotas, eventos de artesanías, actividades festivas. Para más información, vean los anuncios en el Centro de Información para Residentes (Resident Information Center) o hablen con un asistente social.
- **Actividades en el sitio:** las actividades en el sitio se programan regularmente, por ejemplo, actividades para niños pequeños, noches de cine, torneos de juegos de mesa, torneos de deportes al aire libre y juegos electrónicos. Para más

información, vean los anuncios en el Centro de Información para Residentes (Resident Information Center) o hablen con un asistente social.

- **Eventos especiales:** durante todo el año, el Centro organiza bailes, carnavales, comidas al aire libre, fiestas de celebraciones y cumpleaños. Para más información, vean los anuncios en el Centro de Información para Residentes (Resident Information Center) o hablen con un asistente social.
- **Café Internet:** la sala de computadoras con acceso a Internet está ubicada en el lobby del piso de actividades y está abierta durante el horario de libertad de movimiento. Esta sala de computadoras le permite el acceso a Internet y al correo electrónico. Cada computadora cuenta con programas de procesadores de texto, planillas de cálculo y bases de datos. Cuando la demanda es alta, los residentes pueden usar una máquina durante un período limitado por día. Para más información, vean las reglas para uso de Internet en los anuncios publicados en el Centro de Información para Residentes (Resident Information Center) o hablen con un asistente social.
- **Instrumentos musicales:** en el espacio de programas hay un piano para uso del personal y de los residentes. Los padres deben controlar a sus hijos para que no dañen el piano. Se pueden pedir y usar otros instrumentos musicales. Para más información, vean al personal en cualquiera de las mesas de atención.
- **Proyectos para cocinar:** los residentes adultos pueden inscribirse en los proyectos para cocinar que se anuncian en el Centro de Información para Residentes (Resident Information Center). El personal habitualmente ofrece a los niños la oportunidad de participar en proyectos para cocinar (no es necesario que se inscriban).
- **Artesanías:** los residentes no solo pueden pedir prestados útiles para artesanías, sino que el personal habitualmente les ofrece la oportunidad de hacer objetos determinados que luego se exhiben en el Centro. Para más información, vean al asistente social.
- **Croché (ganchillo):** el Centro provee lana, agujas y ganchillos para tejer croché. Para más información, vean al asistente social.
- **Clases organizadas:** el Centro organiza clases sobre una variedad de temas, por ejemplo, inglés como segundo idioma y gimnasia. Para más información, vean los anuncios en el Centro de Información para Residentes (Resident Information Center) o hablen con un asistente social.
- **Conferencias:** en ocasiones, el Centro organiza conferencias sobre diversos temas, como nutrición, finanzas y estilo de vida. Para más información, vean los anuncios en el Centro de Información para Residentes (Resident Information Center) o hablen con un asistente social.

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Este manual fue revisado y aprobado por:

Diane Edwards
Diane Edwards
Directora Ejecutiva (Executive Director)

8/16/13
Fecha

Pa De Reiser
Representante de la Unidad de Administración
de Residencias para Jóvenes y Familias
(JFRMU Representative)

8/16/13
Fecha

Berks Family Residential Center
Manual para residentes



Berks Family Residential Center

**Manual para los
residentes**

**1040 Berks Road
Leesport, PA 19533
610.396.0310**

Berks 02818

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INTRODUCCIÓN

El Berks Family Residential Center (el Centro) celebró un contrato con la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement) de EE. UU. La operación del Centro está a cargo del Condado de Berks, bajo un contrato intergubernamental de servicios (Intergovernmental Service Agreement). La misión del centro es posibilitar que las familias se mantengan unidas mientras estén bajo la custodia de la ICE, en el entorno disponible que sea lo menos restrictivo posible y, a la vez, hacer cumplir las normas necesarias para garantizar la seguridad y el bienestar, tanto de los residentes como del personal. Las decisiones sobre asuntos relacionados con inmigración y toda determinación de liberar a los residentes del Centro o deportarlos de Estados Unidos es de responsabilidad de la ICE, no del Condado de Berks. La Unidad de Administración de Residencias para Jóvenes y Familias (JFRMU, Juvenile and Family Residential Management Unit) controla la actividad de este Centro. La JFRMU es una unidad perteneciente a la Agencia de Aplicación de Leyes de Inmigración y Aduanas de EE. UU. y es responsable de todas las operaciones en lugares donde se alojen las familias que determine la ICE. El funcionario de la JFRMU que actúe en dicho lugar es responsable del control de la salud y la seguridad de los residentes alojados. Este funcionario garantiza que el Centro cumpla con las normas federales relacionadas con diversos asuntos, como servicio de comidas, condiciones de higiene y salubridad, atención médica, visitas y derecho legales. El funcionario de la JFRMU recibe de buen grado a los residentes que deseen conversar sobre este y otros asuntos relacionados con el Centro.

DIRECCIÓN POSTAL Y NÚMERO DE TELÉFONO

Berks Family Residential Center
1040 Berks Road
Leesport, PA 19533
610-396-0310 extensión 2400

CENTRO DE INFORMACIÓN PARA RESIDENTES

El Centro de Información para Residentes (Resident Information Center) está ubicado al lado del salón comedor, en el piso de los dormitorios, y tiene acceso libre durante las 24 horas del día. También se encuentran allí los formularios y los buzones para cuestiones de asistencia legal, solicitudes de comunicación con la ICE, quejas, citas por enfermedad, correo, tienda, ayuda de los asistentes sociales, actividades recreativas, copias del manual actualizado para residentes y publicación de los avisos necesarios, entre otras cosas.

MANUAL PARA RESIDENTES

El propósito de este manual es dar a conocer a los residentes las reglas, reglamentaciones, políticas y procedimientos específicos que se deben seguir durante la residencia en el Centro. En el manual también se provee un panorama general de los programas y servicios que se ofrecen en el Centro. En el momento del ingreso al Centro, se entrega a cada familia una copia del manual para residentes. Usted y su familia tienen la obligación de familiarizarse con el contenido de este manual. Y, si hay algo que no comprenden, deberán preguntar al personal. Las preguntas se pueden dirigir a cualquier miembro del personal o a la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement). En el Centro de Información para Residentes (Resident Information Center) también se exhibe una copia del manual actualizado. En ocasiones es necesario hacer cambios en el manual para residentes. Cuando esto suceda, se les entregarán a los residentes las actualizaciones, que también se exhibirán en el Centro de Información para Residentes.

DERECHOS Y OBLIGACIONES DE LOS RESIDENTES

Es política del Centro tratar a los residentes con dignidad y respeto, como también mantener un centro residencial seguro, salubre e higiénico. Se espera su total cooperación con el personal durante su residencia en este lugar. Aunque es posible que el personal no conozca los nombres de las personas recién ingresadas, siempre deben dirigirse a ustedes en forma adecuada y respetuosa. Ustedes deben dirigirse de la misma manera a los demás residentes y al personal.

- Tienen derecho a que les informen sobre las reglas, los procedimientos y los horarios de operaciones del Centro. Tienen la responsabilidad de conocerlos y cumplirlos.
- Tienen derecho a profesar y practicar voluntariamente y con libertad su religión. Con respecto a la religión, tienen el deber de reconocer y respetar los derechos de los demás.
- Tienen derecho a comunicarse con los funcionarios de su consulado o embajada y a que ellos les llamen o visiten durante su residencia en el Centro. Para más información, vean las secciones sobre uso del teléfono y visitas.
- Tienen derecho a recibir atención médica regular, comidas nutritivas, ropa de cama y de vestido adecuadas, oportunidad de ducharse regularmente, productos para la higiene personal, control adecuado de la temperatura interior y oportunidades regulares para hacer ejercicio, entre otras cosas. Ustedes tienen la responsabilidad de pedir atención médica cuando la necesiten y de no desperdiciar los alimentos. Asimismo, deben respetar el horario de la lavandería, mantener una higiene adecuada y mantener limpias sus habitaciones.
- Tienen derecho a protección contra todo aquello que constituya maltrato personal, castigos corporales, uso innecesario y excesivo de la fuerza, lesiones personales, enfermedades, daño a la propiedad y acoso.

- Tienen derecho a que no se les discrimine por razones de raza, religión, nacionalidad de origen, sexo, discapacidad o ideas políticas.
- Tienen derecho a presentar quejas de acuerdo con los procedimientos escritos que se establecen en este manual.
- Tienen derecho al debido proceso, incluida la pronta resolución de cuestiones administrativas de disciplina, según se establece en este manual.
- Tienen derecho al acceso confidencial y sin restricciones a los tribunales.
- Tienen derecho a solicitar al gobierno de Estados Unidos asistencia legal sin costo.
- Tienen derecho a usar la biblioteca legal. Tienen la obligación de usar esos recursos de manera responsable y de respetar los derechos de otros residentes para el uso del espacio y los materiales.
- Tienen derecho a mantener correspondencia con toda libertad con personas y organizaciones.
- Tienen derecho a que sus familiares y amigos les visiten. Tienen la responsabilidad de comportarse correctamente durante las visitas.
- Tienen derecho a participar en actividades y programas, que pueden ayudarles a sentirse bien durante la estadía en el Centro. Tienen la responsabilidad de cumplir las reglas que rigen la participación en dichas actividades y programas.
- Los niños en edad escolar tienen derecho a asistir a la escuela y recibir una educación igual que sus pares. Ustedes tienen la obligación de garantizar que los niños asistan a la escuela, estudien el material que reciben en clase y hagan sus tareas.
- Cuando los niños no están en la escuela, tienen derecho a participar en todas las actividades y programas adecuados a su edad. Ustedes tienen la responsabilidad de alentarlos para que participen en actividades durante su tiempo libre, garantizar que cumplan con todas las reglas del Centro, entre ellas, respetar el espacio personal de los demás y no hostigar a sus compañeros.

REGLAS DE LOS PROGRAMAS PARA RESIDENTES

- Cumplir con las directivas que reciban del personal del Centro;
- Usar la tarjeta de identificación del Centro de modo que sea visible en todo momento, salvo cuando lo indique el personal;
- Tratar a todos los residentes y al personal con respeto y cortesía, con independencia de raza, religión, etnia, sexo o edad;
- Ocuparse de las necesidades físicas y emocionales de sus hijos y sean un ejemplo de comportamiento correcto para ellos.
- Controlar el comportamiento de sus hijos y usar técnicas aprobadas para modificar su conducta solo cuando sea necesario. Está prohibido el castigo corporal o físico.
- No presentar a sabiendas reclamos, quejas u otros informes falsos.

- No hablar con otros residentes o con el personal de manera irrespetuosa ni verbal o físicamente agresiva. Si encuentran a otras personas que se comporten de esta manera, deben avisar de inmediato al personal.
- Mientras se encuentren en el Centro, no mantener contacto físico o íntimo con su cónyuge o con otros residentes. Para más información, vean la sección sobre prevención de abusos o ataques sexuales.
- No tener artículos de contrabando en su poder mientras estén en el Centro.
- Respetar los derechos de los demás residentes y del personal.
- No tomar ni pedir prestados objetos de otros residentes.
- Cumplir con los procedimientos de censo.
- Hacer las tareas que se le asignen.
- Mantener una higiene adecuada.
- Limpiar su dormitorio y su baño privado todas las mañanas.
- Lavar su ropa en el día asignado.
- Comportarse correctamente durante las comidas, limpiar el lugar donde comieron luego de hacerlo y comprobar que el lugar de sus hijos también quede limpio.
- Los estudiantes deben cumplir con las reglas que los profesores y el personal del Centro establezcan.
- Informar de inmediato al personal si se rompe o daña algo.
- Avisar de inmediato al personal si existe algún problema o motivo de preocupación.
- Si no comprenden o no recuerdan las reglas del Centro, pregunten al personal.
- Cumplir la política de visitas en la habitación. Para más información, vean la sección sobre los dormitorios.
- No pedir prestado ni intercambiar su ropa, los productos de higiene, las joyas o el maquillaje.
- No alterar ni dañar de manera alguna la propiedad del Centro.
- Cumplir con el código de ropa que se indica en el manual.
- No consumir tabaco, alcohol ni chicle.
- No desperdiciar los alimentos.
- No decir groserías.

El incumplimiento de las reglas mencionadas puede dar lugar a la iniciación de procedimientos disciplinarios. Las infracciones graves y/o continuas pueden dar lugar a la revisión de su situación, para determinar si todavía son aptos para vivir en esta residencia. Para más información, vean la sección sobre procedimientos disciplinarios. Los residentes que actúen de manera agresiva y/o traten de dañarse a sí mismos o a otras personas, pueden quedar sujetos a contención pasiva, para protegerlos de sí mismos y proteger a los demás.

SOLICITUDES DE LOS RESIDENTES

Por lo general, los residentes pueden obtener servicios y respuestas a sus preguntas mediante un simple pedido verbal al personal. Para quienes prefieran solicitar información formalmente, el método oficial consiste en llenar un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están disponibles en el Centro de Información para Residentes (Resident Information Center). Complete toda la información que se solicita en los formularios. Puede obtener ayuda de otro residente o de un miembro del personal para preparar el formulario de su solicitud. Estos formularios se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes), ubicado en el Centro de Información para Residentes. Los formularios se recogen todos los días hábiles y se dirigen a un asistente social para que los resuelva. Este procedimiento no se debe usar para presentar quejas formales. Para más información, vean la sección sobre procedimientos de quejas.

CÓMO COMUNICARSE CON INMIGRACIÓN

El personal de la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement) que está asignado para su caso de inmigración lleva a cabo visitas anunciadas y no anunciadas (no programadas) al Centro. El fin de estas visitas es hablar a los residentes sobre sus problemas de inmigración y observar las condiciones en que viven. Ustedes pueden estar presentes durante las visitas anunciadas del ICE e incluso pueden hacer preguntas, pedidos o presentar inquietudes por escrito. Para hacerlo, debe llenar un formulario de comunicación a la ICE (ICE communication form). Estos formularios están disponibles en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "ICE". Estos formularios se recogen todos los días hábiles y se dirigen a la ICE sin leerlos o modificarlos. Pueden obtener ayuda de otro residente o de un miembro del personal para preparar el formulario de su solicitud. El personal de la ICE que reciba su solicitud les responderá directamente. Los funcionarios de la ICE son el único personal que puede dar respuesta a preguntas relacionadas con inmigración. Vea el programa de visitas de la ICE que se exhibe en el Centro de Información para Residentes. El personal del condado, vestido con camisas azules y pantalones largos o cortos de color caqui, con quienes ustedes interactúan en el Centro, no pueden responder a ninguna pregunta relacionada con inmigración.

ASISTENTES SOCIALES

A cada familia que ingresa en el Centro se le asigna un asistente social específico, aunque las preguntas se pueden dirigir a cualquiera de los asistentes sociales, si fuera necesario. Estos asistentes sociales atienden a los residentes que tienen preguntas sobre derechos, reglas, obligaciones, programas y servicios, alojamiento y educación, cuestiones de pertenencias, números de teléfonos y domicilios de familiares y amigos, derivaciones

para tratamientos y otros asuntos que se presenten mientras vivan en el Centro. Los residentes pueden hablar con los asistentes sociales en su oficina, ubicada en el piso de actividades, durante el horario de libertad de movimiento. También pueden comunicarse con ellos mediante el uso de un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). Las hojas para solicitar servicios de peluquería, asistencia legal y tarjetas telefónicas, entre otros artículos, están ubicadas a la salida de la oficina de los asistentes sociales.

ARREGLOS PARA LA VIDA DIARIA

Los residentes deben compartir los equipos de uso común como teléfonos, televisores, mesas, juegos recreativos y otros equipos. Las horas de silencio van desde las 10:30 p.m. hasta las 6:30 a.m. los días de semana (domingo por la noche hasta el jueves por la noche) y desde las 12 de la noche hasta las 6:30 a.m. los fines de semana (viernes y sábado por la noche) y los feriados. Durante las horas de silencio los residentes deben abstenerse de realizar actividades que puedan interferir con el sueño de los demás.

DORMITORIOS

A los niños menores de 12 años se les asignará un dormitorio con sus padres. A los niños de 12 años o más se les asignará un dormitorio con otros niños del mismo sexo y edad similar. A cada residente se le proporciona una cama para uso propio. Los residentes deben tender sus camas y ordenar la zona inmediata todas las mañanas. Cuando no estén en uso, las camas deben estar tendidas. Las camas no se deben mover. Debido a la naturaleza comunitaria del Centro, donde niños de diferentes familias podrían compartir el dormitorio, y adultos que no son parientes también deben compartir dormitorios, los residentes deben cumplir las siguientes políticas de visitas en las habitaciones, para garantizar la privacidad y la seguridad de todos los residentes. Cuando un niño que no pertenezca a la familia esté presente en un dormitorio, los residentes adultos deben tener supervisión del personal mientras se encuentren en ese dormitorio. Los niños pueden entrar al dormitorio de sus padres solo con sus padres. Debido a que existen muchos lugares del Centro para conversar con tranquilidad con otros residentes, los adultos no pueden reunirse en los dormitorios. Se permite que los residentes decoren sus habitaciones con objetos personales, siempre que esto no presente riesgos para la salud o la seguridad y no despinte las paredes o dañe de alguna otra manera la propiedad del Centro. No se permite que se cubran las lámparas, las puertas o las ventanas con ningún tipo de artículo. No deben colgarse artículos de las camas o los conductos de ventilación. Debido a la naturaleza comunitaria del Centro, se recomienda a los residentes que se cambien de ropa solo en las salas de duchas o en sus baños. Las pertenencias aprobadas se guardarán en los clósets de los dormitorios asignados. Para más información, vea la sección sobre pertenencias personales. Los clósets se deben mantener en orden. No se permite guardar alimentos o bebidas abiertos en los dormitorios. Los objetos cerrados que

se compren en la tienda del Centro se pueden guardar en los dormitorios, siempre que se guarden en un recipiente cerrado para evitar la entrada de insectos. Todos los artículos de higiene se deben guardar en cajas apropiadas, en los clósets de los dormitorios asignados. Se permite tener juguetes en los dormitorios durante las horas de libertad de movimiento. Luego de ese horario, todos los juguetes se deben regresar a los espacios comunes, a fin de que se desinfecten para el día siguiente. Para más información, vea la sección sobre libertad de movimiento.

HORARIOS DE DORMIR PARA LOS NIÑOS

Los horarios de dormir para los niños se establecieron a fin de fomentar una rutina para los niños del Centro, y para lograr que atiendan sus clases descansados. El horario general para que los niños de hasta 4 años vayan a dormir es a las 8:30 p.m. de domingo a jueves. El horario general para que los niños de 5 años a 18 años vayan a dormir es a las 9:00 p.m. de domingo a jueves. Las luces se apagan 15 minutos después de esos horarios. No se establece un horario general para que los niños vayan a dormir los viernes y sábados. Se recomienda a los padres que sigan (o inicien) las rutinas de horario de dormir para sus niños mientras estén en el Centro.

CONTROLES DURANTE LA NOCHE

Las reglamentaciones del estado exigen que el personal controle los dormitorios cada quince minutos como mínimo todas las noches, para garantizar la seguridad de los residentes. Durante estos controles, el personal debe llevar una linterna encendida, y los controles se realizarán sin causar mayores molestias.

LIBERTAD DE MOVIMIENTO

Salvo restricciones temporales debido a razones médicas o de seguridad, el horario de libertad de movimiento es desde las 8:00 a.m. hasta las 8:00 p.m., todos los días. Durante este tiempo, los residentes adultos pueden moverse libremente por todos los espacios de programas del Centro, sin pedir el permiso previo del personal y sin necesidad de decirle a dónde se dirigen. Los niños de 10 años o más pueden participar en esta libertad de movimiento si sus padres les dan un pase. Para más información, vea la sección sobre pases para libre movimiento. Cuando no estén en la escuela o participando en una actividad organizada, los niños de más de 10 años que no tengan el pase y todos los niños menores de 10 años deben estar bajo la supervisión directa de sus padres en todo momento. Fuera del horario de libertad de movimiento, los residentes deben permanecer en el piso de dormitorios. En este piso se encuentran los dormitorios, una sala de estar comunitaria, la biblioteca legal, la sala de teléfonos, el departamento médico, los baños y las salas de duchas, a los que se puede acceder libremente durante las 24 horas del día.

ACCESO AL SITIO AL AIRE LIBRE

El sitio al aire libre se puede usar desde las 8:00 a.m. hasta las 8:00 p.m. o el anochecer, lo que ocurra primero. Las actividades recreativas al aire libre incluyen el fútbol, voleibol, pelota colgante (tether ball), bádminton y actividades para niños pequeños. Los

equipos de recreación para el aire libre (bicicletas, pelotas, cuerdas para saltar, aros, etc.) se pueden retirar del carrito ubicado en el lobby contiguo a la puerta del espacio recreativo. Estos artículos se deben regresar antes de entrar nuevamente al Centro. Los residentes deben avisar al personal de toda pérdida o rotura para mantener el equipo en buenas condiciones de funcionamiento o para que se reemplace, si fuera necesario. Afuera hay agua para beber y baños disponibles. Para acceder al sitio al aire libre, los residentes deben avisar con anticipación al personal que está cerca de la puerta de salida al espacio de recreación y luego pueden salir sin necesidad de que el personal los acompañe. Esta es la única puerta que los residentes pueden usar sin estar acompañados por el personal (salvo en situaciones de emergencia). Habrá personal afuera para controlar la seguridad de los residentes. Cuando no estén participando en una actividad organizada, los residentes deben permanecer dentro de los límites de la cerca. Si usted necesita salir de esta área, por ejemplo, para buscar una pelota, antes debe notificar al personal que supervisa el lugar. Se puede suspender temporariamente el acceso al sitio al aire libre debido a condiciones ambientales o por razones de seguridad.

PASE PARA LA LIBERTAD DE MOVIMIENTO DE LOS NIÑOS

Los niños de 10 años o más pueden recibir de sus padres un pase que los autorice a participar en el programa de libertad de movimiento. Los padres pueden dar, suspender y otorgar nuevamente este pase, en cualquier momento que lo deseen. Los residentes que no reciban pases de libertad de movimiento para sus hijos en el momento del ingreso deben hablar con un asistente social para obtenerlos.

ROPA

Los residentes deben estar correctamente vestidos cuando están fuera de sus dormitorios. Para más información, vea la sección sobre código de ropa de los residentes. Está permitido que cada residente tenga 10 juegos de ropa personal en su dormitorio. Los niños recién nacidos hasta 5 años de edad pueden tener 12 juegos de ropa. Estos juegos pueden ser de ropa que hayan traído al Centro, ropa que haya provisto el Centro o ropa que usted haya comprado durante su estadía. Se entregará nueva ropa interior, sostenes y medias según sea necesario. Los residentes que necesiten ropa interior o de vestir nuevas deben hablar con el personal o presentar un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). Los residentes no están autorizados a tener más artículos que los detallados anteriormente, salvo que estén autorizados por el director ejecutivo (Executive Director).

SALA DE ROPA DEL CENTRO

Los residentes que lleguen al Centro sin una cantidad adecuada de ropa para la temporada, pueden pedir ropa en la sala de ropa (Clothing Room) del Centro. La ropa que se obtiene en el sala de ropa del Centro no se cobra. No obstante, antes de dejar el Centro

deberá regresarse toda esa ropa. Para ir a la sala de ropa, solicite autorización al personal, hable con el asistente social o presente un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

COMPRA DE ROPA

En la tienda del Centro se puede comprar ropa. Si un residente no puede encontrar ropa adecuada por esos medios, se le autorizará a comprarlas en una tienda de la zona.

ROPA PARA RESIDENTES SIN RECURSOS

El Centro proveerá ropa a los residentes sin recursos que hayan llegado al Centro sin una cantidad de ropa adecuada para la estación. Si necesita ropa, hable con el asistente social o presente un formulario de solicitud para el programa (Program Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

CÓDIGO DE ROPA DE LOS RESIDENTES

Residentes de 12 años o más:

- Solo usarán ropa que, cuando estén sentados, les cubra los hombros, el pecho, el estómago y todas las partes del cuerpo entre el ombligo y la mitad del muslo;
- El escote de la ropa no será más bajo que la axila, tanto en el frente como en la espalda;
- Está prohibido usar ropa transparente;
- Siempre se deberá usar calzado;
- Siempre se deberá usar camisa;
- Está prohibido usar colores que identifiquen a "pandillas".

ROPA DE CAMA

En el momento de su ingreso al Centro, cada residente recibe la siguiente ropa de cama:

- 2 sábanas
- 1 funda para almohada,
- 1 manta,
- 1 bolsa para ropa sucia

Esta ropa de cama se puede cambiar por ropa limpia una vez por semana o con mayor frecuencia si fuera necesario. Hable con el personal si necesita ropa de cama limpia un día que no sea el día fijado para cambiarla.

LAVANDERÍA

Los servicios de lavandería están disponibles los 7 días de la semana. Se asigna un día a cada familia para el lavado de su ropa. El programa de lavandería se exhibe cerca de la puerta de la lavandería, en el piso de dormitorios. En caso de que la ropa se ensucie fuera del horario de lavado que les corresponda, soliciten al personal que les entregue otra ropa o un horario adicional para lavar la suya. Hablen con el personal de la mesa de atención que se encuentra en el piso de dormitorios para que les entreguen jabón para las máquinas de lavar y le den instrucciones para usarlas. Informe cualquier problema de las máquinas al personal que se encuentra en la mesa de atención, en el piso de dormitorios.

HIGIENE PERSONAL

La higiene personal es fundamental en el Centro, debido a que ustedes vivirán muy cerca de otras familias. Se le recomienda bañarse regularmente y mantener el cabello limpio. A su llegada al Centro, cada residente recibe productos de higiene. Estos artículos se deben reemplazar según las necesidades. Para hacerlo, presente un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). También pueden comprar artículos de higiene en la tienda del Centro. Los artículos de higiene femenina están disponibles en la sala de duchas para mujeres, en el piso de dormitorios. Los residentes tienen libre acceso a las duchas durante el horario de libertad de movimiento, los 7 días de la semana. Si usted necesita ducharse fuera del horario de libertad de movimiento, hable con el personal. Las salas de duchas tienen carteles según el sexo (hombres y mujeres). Los niños de 9 años o más se ducharán de acuerdo con su sexo. Si su hijo es mayor de 9 años y necesita ayuda para bañarse, hable con el personal para hacer los arreglos necesarios. Los niños de hasta 8 años inclusive se ducharán solo bajo supervisión directa de los padres, sin molestar o otros residentes que estén usando la sala de duchas. Las personas adultas pueden usar su propio maquillaje. Todo el maquillaje se debe guardar en una caja de productos de higiene o se colocará en un lugar de almacenamiento. Las navajas de rasurar están siempre disponibles. Hable con el personal que se encuentra en la mesa de atención, en el piso de dormitorios. Cuando tomen una navaja de rasurar, los residentes entregarán su identificación del Centro. Una vez que hayan usado la navaja de rasurar la regresarán de inmediato a la mesa de atención. Los cortaúñas y las pinzas de cejas están disponibles en la tienda del Centro.

PROPIEDAD PERSONAL PERMITIDA

Mientras esté en el Centro, se permite que tenga en su dormitorio:

- 10 juegos de ropa por residente (antes descritos)
- Elementos de higiene personal
- Papeles, documentos e información de tipo legal

- Fotografías
- Prótesis médicas (por ejemplo, anteojos, dentadura postiza, etc.) ;
- Material de referencia personal (por ejemplo, libretas de direcciones y teléfonos, listas de familiares y amigos y otros tipos de correspondencia)
- Artículos religiosos (con aprobación previa del capellán del Centro) Para más información, vea la sección sobre el capellán.
- Diarios, revistas, libros y otras publicaciones (hasta cualquier combinación de tres de ellos por vez, para evitar acumulación y cumplir las normas de seguridad contra incendios)
- Artículos detallados en la planilla de la tienda
- Ilustraciones, artesanías, etc., acumuladas durante su estadía en el Centro.

Se considerará que los artículos no incluidos en esta lista son contrabando. Antes de comprar o tener otros artículos personales, deberá contar con la aprobación del director de programa (Program Director).

INSTRUMENTOS DE ESCRITURA

Se entregará a los residentes de 12 años o más una pluma y un lápiz para su uso personal durante el tiempo de residencia en el Centro. Se les entregará a los niños de 5 a 11 años un lápiz para su uso personal durante el tiempo de residencia en el Centro. Los padres son responsables de los lápices y plumas que se entreguen a sus hijos. Para obtener nuevos lápices o plumas cuando se pierden o rompen, hable con el personal o presente un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). El papel para escribir está disponible en las mesas de atención de los pisos de actividades y dormitorios. Para obtenerlo, deberá presentar un formulario de solicitudes de los residentes. Los artículos para dibujo (lápices de colores, crayones) están disponibles en los pisos de actividades y dormitorios, en las mesas de atención. Los padres deben supervisar a los niños pequeños que usen artículos de dibujo, para que no dañen la propiedad del Centro. Los residentes también pueden comprar artículos y papel para escribir en la tienda del Centro.

SEGURIDAD GENERAL Y SIMULACROS DE EVACUACIÓN

El personal del Centro hace todos los esfuerzos posibles para garantizar la seguridad de todos los residentes y el personal. Los residentes también tienen la obligación de contribuir a la seguridad de la familia de las siguientes formas:

- Limpiar las sustancias que usted o su familia derramen o solicitar al personal que lo haga.
- Prestar atención a los carteles de advertencia (por ejemplo, indicaciones de piso mojado) y tener cuidado en esos lugares.

- Informar de inmediato al personal si observan fuego, una emergencia u cualquier otro peligro.

Durante una emergencia, se oirán alarmas muy ruidosas y se encenderán luces intermitentes brillantes. En esos momentos, los residentes deben abstenerse de conversar, salvo para dirigirse al personal por motivos directamente relacionados con el problema. Su seguridad y la de su familia dependen de su capacidad de oír comprender y seguir las directivas del personal durante una emergencia. Durante una emergencia, el personal debe evacuar a todos los residentes y al personal a un lugar de evacuación predeterminado, fuera del Centro. En el lugar de evacuación, el personal realizará un recuento de los residentes y del personal para confirmar que todos hayan abandonado el edificio. Si sus hijos no estaban con ustedes cuando ocurrió la emergencia, se reunirán con ellos en el lugar de evacuación fuera del edificio. El lugar de evacuación fuera del edificio está al lado del campo de fútbol para residentes. Familiarícense con el diagrama que se exhibe en la puerta de salida a la zona de recreación, donde se muestra la ubicación del lugar de evacuación fuera del edificio. Se exhiben diagramas de salida en diversos lugares del Centro, donde se muestra la ubicación de todas las salidas de emergencia. Estudien cuidadosamente estos diagramas y familiarícense con las ubicaciones. Si ocurre una emergencia y usted está cerca de una salida de incendio, no espere al personal; salga por la salida de incendio y diríjase al lugar de evacuación fuera del edificio. Allí espere la llegada del personal. De acuerdo con las leyes locales, estatales y federales, el Centro tiene la obligación de realizar simulacros de evacuación. En el Centro se realizan varios simulacros por mes, a diversas horas del día y de la noche. Estos simulacros no están diseñados para molestar a los residentes, sino para cumplir con las reglamentaciones y garantizar la seguridad de los residentes y del personal en caso de que ocurra una emergencia real. Los padres deben explicar estos simulacros a sus hijos y hablar con ellos del tema.

CENSO DE RESIDENTES

En este Centro, el censo de residentes se realiza de la siguiente manera: cada residente debe presentarse 3 veces en cada periodo de 24 horas. Horarios de censo:

6:30 a.m. HASTA 7:30 a.m.

3:00 p.m. HASTA 4:00 p.m.

7:30 p.m. HASTA 8:00 p.m.

Los residentes se presentarán a la mesa de atención del piso de dormitorios, como unidades familiares, en los horarios citados. Si los residentes tienen una cita a la hora del censo o cerca de ese horario, el personal que supervisa la cita informará de la ubicación de esos residentes. Los residentes que no se presenten durante el horario del censo, recibirán orientación con respecto a esta obligación.

DISTRIBUCIÓN DEL CENTRO

El Centro consta de dos pisos y un sitio al aire libre. La planta baja, que es por donde ustedes ingresaron al Centro cuando llegaron, es el piso de actividades (A), y el primer piso, es el piso de dormitorios (B). El sitio al aire libre está limitado por una cerca.

Piso de actividades (Piso A):

- Administración del Centro (Center Administration)
- Sala de visitas
- Patio
- Biblioteca
- Café con acceso a Internet
- Educación para niños
- Capilla
- Oficina de los asistentes sociales
- Oficina de los supervisores
- Educación para adultos
- Sala de teléfono
- Salón interior para recreación
- Salón de gimnasia para residentes
- Salón para niños pequeños
- Salas de cultura y artesanías y de actividades
- Sala de cine
- Lavandería adicional (uso con aprobación del supervisor)
- Duchas adicionales (uso con aprobación del supervisor)
- Sala de estar comunal
- Clóset para guardar juegos
- Cocineta
- Juegos de mesa
- Sitio al aire libre

Piso de dormitorios (Piso B):

- Dormitorios
- Sala de teléfono (abierta las 24 horas, todos los días)
- Biblioteca legal (abierta las 24 horas, todos los días)
- Sala de estar comunal
- Clóset para guardar juegos
- Juegos de mesa
- Salón comedor
- Consultorio médico
- Duchas
- Lavandería
- Cocineta

COMIDAS

Todos los menús están programados para una nutrición equilibrada y están aprobados por un nutricionista certificado. A los residentes se les sirven 3 comidas diarias en el salón comedor, ubicado en el piso de dormitorios: Desayuno de 06:30:00 a.m. a 8:00 a.m.

Almuerzo de 12:00 p.m. a 1:00 p.m.

Cena de 5:30 p.m. a 6:30 p.m.

En el salón comedor no hay lugares asignados. Los residentes se pueden sentar donde quieran para cada comida. Hay sillas altas y asientos elevadores disponibles en el salón comedor. Los niños pequeños deben permanecer sentados durante las comidas, para crear buenos hábitos para comer. Los residentes deben estar presentes en el salón comedor en los siguientes horarios:

7:30 a.m. hasta 8:00 a.m.

12:00 p.m. hasta 1:00 p.m.

5:30:00 p.m. hasta 6:30 p.m.

Los utensilios y bandejas que se usan en el salón comedor no son descartables. Al final de cada comida, los residentes deben limpiar el lugar donde comió su familia y regresar todos los utensilios y las bandejas para lavarlas. Los residentes pueden dirigirse a las barras de autoservicio del salón comedor tantas veces como lo deseen, pero deben comer lo que escogieron, para evitar el desperdicio de alimentos. Todos los alimentos y bebidas se deben consumir durante la comida, y no se pueden sacar del salón comedor.

COCINETAS

En las cocinetas de los pisos de actividades y de dormitorios hay frutas, refrigerios y bebidas disponibles durante las 24 horas del día. Los residentes no están autorizados a llevar más alimentos o bebidas de las cocinetas que los que consumirán de una vez. Estos alimentos se reponen varias veces al día, así que no hay necesidad de acumular alimentos de la cocineta.

DIETAS ESPECIALES

Las dietas terapéuticas o médicas se prepararán y proveerán de acuerdo con las indicaciones del médico del departamento médico del Centro. Las dietas religiosas se prepararán y proveerán a los residentes cuyas creencias religiosas les exijan cumplir con las reglamentaciones dietarias de su religión. Los residentes deben reunirse con el

capellán del Centro para solicitarle la aprobación de la dieta. Para más información, vea la sección sobre el capellán.

SERVICIOS RELIGIOSOS

Todos los residentes tienen acceso a recursos, servicios, instrucciones y orientación religiosos durante su residencia en el centro. Estos servicios incluyen orientación individual, grupos de oración, estudios bíblicos y diversos servicios de iglesias y cultos. Organizaciones religiosas externas y voluntarios de la comunidad proporcionan los servicios religiosos en el sitio. El capellán del Centro se ocupa de todas las preguntas e inquietudes relacionadas con oportunidades y prácticas religiosas, y asistirá a los residentes para obtener material sobre diversos cultos. Asimismo, podrá facilitar la visita de pastores de diversas religiones. Las personas religiosas ajenas al Centro también pueden visitar a los residentes mediante una cita concertada con el capellán o durante las horas de visita. Para más información, vea la sección sobre visitas. En el piso de actividades existe una capilla sin denominación que está abierta durante el horario de libertad de movimiento, para que todos los residentes puedan practicar su culto. Si desean practicar su culto fuera del horario de libertad de movimiento, hable con el capellán para que, si es posible, haga los arreglos necesarios. La lista de servicios programados se exhibe en el Centro de Información para Residentes (Resident Information Center) y a la salida de la capilla. Estos servicios están abiertos para todos los que deseen asistir y están limitados solo por la capacidad de la capilla. Si la capacidad no es suficiente, se pueden hacer otros arreglos. En algunas situaciones, los residentes podrán salir del sitio para concurrir a servicios religiosos. Si necesitan arreglos para prácticas religiosas especiales, hablen con el capellán para que, si es posible, coordine lo que le pidan.

CAPELLÁN

El capellán se encuentra en el Centro de lunes a viernes, desde las 9:00 a.m. hasta las 3:00 p.m. Para hablar con él, deben concertar una cita. Para solicitar una cita con el capellán, los residentes pueden hablar con él o llenar un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

SERVICIOS MÉDICOS

Deseamos que durante su estadía se mantengan en buen estado de salud. El Centro brinda la atención médica adecuada y necesaria en el sitio, durante las 24 horas del día, en el consultorio médico ubicado en el piso de dormitorios. El consultorio médico del Centro se administra por medio de la división denominada Cuerpo de Servicios Médicos para Inmigración (Immigration Health Services Corps) del Servicio de Salud Pública (Public Health Service) de EE. UU.

SITUACIONES DE EMERGENCIA MÉDICA

Si durante su estadía en el Centro, alguna vez sienten que tienen una emergencia médica o necesitan atención médica inmediata, avisen a cualquiera de los miembros del personal y el servicio médico le atenderá. Si debido a su situación médica no pueden comunicarse con el personal, pidan a cualquier residente que se encuentre cerca que llame al personal para que les ayude.

CITAS POR ENFERMEDAD

Formas de consulta médica ya no se utilizan en esta instalación. Si tiene que solicitar una cita para recibir atención médica o mental, por favor repórtese a la clínica médica entre 7:30 y 8:00 de la mañana, 7 días de la semana. Por favor, vaya al oficial que se encuentra en frente de la clínica y traiga su identificación.

SERVICIOS DENTALES

Cuando ingresan, el personal médico hace un examen dental inicial a todos los residentes. Además, a todos los niños se les hace una limpieza dental completa dentro del primer mes a partir del ingreso. A los residentes adultos que permanecen en el Centro por un mínimo de 6 meses, se les hace una limpieza dental completa. Si durante el examen dental inicial o la limpieza dental se detecta algún problema dental, se programarán servicios dentales adicionales. Además, todos los residentes que tengan nuevos problemas dentales durante su estadía deben presentar un formulario para cita por enfermedad como se indicó antes o, si el caso es urgente, deben avisar de inmediato al personal para obtener atención médica. Algunos ejemplos de urgencias dentales son las infecciones dentales, el dolor de muelas, hinchazón en la cara o golpes en los dientes.

SERVICIOS DE SALUD MENTAL

Las normas de inmigración exigen que el departamento médico examine regularmente a todos los niños para garantizar su bienestar mental. Además, se puede pedir a los asistentes sociales orientación para adultos y niños. Los residentes pueden presentar una solicitud para ver a un asistente social especialista en salud mental. Para hacerlo, deben para citas por enfermedad (sick call) como se indicó antes. Los residentes que tengan inquietudes sobre el desarrollo o el progreso de sus hijos pueden presentarlas al personal médico o al asistente social.

MEDICAMENTOS DE VENTA LIBRE DE ADMINISTRACIÓN DE RUTINA

Si tienen una situación como dolor de cabeza, dolor de estómago u otra dolencia para la que piensan que se necesita medicamentos de inmediato (Tylenol, Advil, medicamentos para el resfrío y la gripe, etc.), vean a un miembro del personal para que los lleve al servicio médico. Podrán recibir una dosis de medicamento y se les darán instrucciones para solicitar más si la situación continúa.

MEDICAMENTOS

Si al llegar traían medicamentos, se remitieron al departamento médico. El personal médico les recetará nuevos medicamentos según sea necesario para su situación médica. Todos los medicamentos recetados se distribuirán durante el día en el departamento médico en los horarios que fije el médico. Actualmente, los horarios establecidos para retirar medicamentos son los siguientes:

6:00 a.m. a 8:00 a.m.
11:00 a.m. a 1:00 p.m.
4:00 p.m. a 6:00 p.m.
7:00 p.m. a 9:00 p.m.

Cuando el médico receta un medicamento para un residente "según la necesidad", el residente tiene la obligación de hablar con un miembro del personal a fin de que lo acompañe al servicio médico para tomar su medicamento.

CONDUCTA EN EL DEPARTAMENTO MÉDICO

Cuando esté en el departamento médico, deberá seguir las mismas reglas generales de conducta del Centro. Los padres deben supervisar en todo momento a sus hijos. El consultorio médico es un lugar con muchas personas, por lo cual los padres deben tener a sus hijos a la vista en todo momento y controlarlos para que no lleven a cabo actividades que puedan causarles lesiones, como correr o saltar de las sillas. En el lugar puede haber equipos médicos como básculas. Los padres deben garantizar que sus hijos no jueguen con estos artículos.

QUEJAS SOBRE LA ATENCIÓN MÉDICA

Se recomienda a los residentes que hablen de su atención médica con el personal médico y que les hagan preguntas. Los residentes con inquietudes acerca de su atención deben llenar un formulario de cita por enfermedad (sick call slip) para hablar con un médico. Si después de hablar con el médico o con el personal los residentes no están satisfechos con los resultados, pueden presentar una queja por atención médica. Estas quejas se presentan al Administrador de Servicios Médicos (HSA, Health Service Administrator). Para más información, vea la sección sobre quejas. El HSA dará una respuesta escrita dentro de los 5 días.

PREVENCIÓN E INTERVENCIÓN PARA CASOS DE ABUSOS Y ATAQUES SEXUALES

ICE tiene una política de cero tolerancia contra asaltos y abusos sexuales. El centro cuenta con un Programa de Prevención e Intervención para Casos de Abusos y Ataques Sexuales (Sexual Abuse and Assault Prevention and Intervention Program), para proteger a los residentes y al personal. Si se sienten inseguros en cualquier momento de su estadía en el Centro, debido a amenazas de abusos o ataques sexuales, o si sufren abusos o ataques sexuales, deben avisar de inmediato a cualquier miembro del personal y solicitar su ayuda. El departamento médico les dará tratamiento y orientación apropiados si sufren de un abuso o ataque sexual. También hay información sobre abusos y ataques sexuales en el Centro de Información para Residentes (Resident Information Center). Los asistentes sociales de la división denominada Cuerpo de Servicios Médicos para Inmigración (IHSC, Immigration Health Services Corps) ofrecen orientación o asistencia a solicitud de los residentes. Asimismo, los residentes que sientan que están en peligro pueden seguir uno de estos pasos o todos ellos:

- Informar de su inquietud a cualquier miembro del personal.
- Presentar una queja de emergencia donde establezcan la naturaleza del problema y las necesidades que surjan. Para más información, vea la sección sobre quejas.
- Cómo comunicarse con la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement). Para ello deberá llenar un formulario de comunicación a la ICE (ICE communication form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "ICE".
- Cómo presentar una queja directamente al Departamento de Seguridad Nacional (Department of Homeland Security).
- Cómo comunicarse con la Oficina del Inspector General (OIG, Office of the Inspector General) por medio del sistema de llamadas gratuitas o de las siguientes maneras:

Escribir a **DHS OIG HOTLINE**
245 Murray Drive, S.E., Building 410
Washington, D.C. 20538

Enviar un mensaje de correo electrónico a DHSOIGHOTLINE@DHS.GOV

Llamar por teléfono al: **1-800-323-8603**

- Avisar a un familiar, a un amigo o a su abogado y solicitarles que se comuniquen con la ICE o la OIG en su nombre.

TAREAS DE LOS RESIDENTES

Los baños comunes de la residencia, las salas de duchas y otras áreas de programas para residentes se limpian diariamente según un programa de tareas que se exhibe al lado de la puerta de la lavandería, en el piso de dormitorios. Estas tareas son similares a las que usted haría a cabo si viviera en una comunidad regular. Usualmente, las tareas se realizan después del desayuno o del almuerzo. El personal recordará a los residentes el momento de inicio de las tareas. Al comienzo de cada turno de limpieza, el personal entregará a los

residentes los artículos de limpieza y el equipo de protección necesarios. Cuando no se usen, todos los artículos de limpieza se deben colocar en los lugares de almacenamiento adecuados. No se permite que los residentes tengan productos químicos de limpieza en sus dormitorios o que los coloquen en otro recipiente como envases de leche, agua o jugo.

ACCESO AL TELÉFONO

Hay teléfonos en los dos pisos del Centro. Los teléfonos del piso de actividades están disponibles durante el horario de libertad de movimiento, y los teléfonos del piso de dormitorios están disponibles las 24 horas del día. Las llamadas por cobrar, las llamadas con tarjetas telefónicas y las llamadas gratuitas a la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement) se pueden hacer desde cualquiera de los teléfonos. El Centro no controla ni graba las conversaciones en ningún teléfono. Para comprar tarjetas telefónicas, usted se debe anotar en la hoja de solicitudes de tarjetas telefónicas que está a la salida de la oficina de los asistentes sociales, en el piso de actividades. Los residentes también pueden recibir tarjetas telefónicas por correo postal. Hay toallitas desinfectantes disponibles para limpiar los teléfonos antes y después de usarlos. Se harán todos los arreglos para los residentes que tengan impedimentos para comunicarse (por ejemplo, problemas de habla o audición) o para residentes que deseen comunicarse con personas que tengan esos impedimentos. Para obtener estos arreglos, hable con el asistente social o llene un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). Para garantizar que todos los residentes tengan la oportunidad de usar los teléfonos, las llamadas no podrán durar más de 20 minutos si hay otros residentes que esperan. Si tiene problemas para usar el sistema de teléfonos, si un teléfono no funciona bien o si las llamadas gratuitas a la ICE no funcionan, infórmelo al personal, que lo ayudará a solucionar la situación. Los amigos y familiares pueden llamar al Centro para dejar mensajes a los residentes. El número para llamar es 610.396.0310, extensión 2400. Los mensajes urgentes se entregarán al residente tan pronto como sea posible, y los mensajes que no sean urgentes se entregarán dentro de las 24 horas.

LLAMADAS TELEFÓNICAS GRATUITAS A LA ICE

Los residentes pueden comunicarse sin costo alguno con diversas organizaciones, por medio del sistema de llamadas telefónicas gratuitas de la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement). Vea la información exhibida en las salas de teléfonos y en el Centro de Información para Residentes (Resident Information Center) donde encontrará instrucciones para llamar a consulados, tribunales de inmigración, la Asociación Estadounidense de Colegios de Abogados (American Bar Association), la Línea Directa del Defensor Público (Public Advocate Hotline) de la ICE, la Oficina del Inspector General (Office of the Inspector General), y otras oficinas, ya sean gubernamentales o no gubernamentales. Si necesita ayuda para usar el sistema, hable con el asistente social o llene un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el

Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

ACCESO TELEFÓNICO PARA RESIDENTES SIN RECURSOS

Además de las llamadas gratuitas con el sistema de llamadas telefónicas de la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement), los residentes sin recursos también pueden hacer llamadas gratuitas a organizaciones de asistencia legal y a familiares, así como otras llamadas necesarias. Para hacer estas llamadas, hable con el asistente social o llene un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

LLAMADAS TELEFÓNICAS PARA ASISTENCIA LEGAL

Las llamadas telefónicas a su asesor legal y a los tribunales no se controlan ni se graban en ningún momento. Para hacer llamadas de asesoría legal en un lugar con mayor privacidad, hable con un asistente social o llene un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

PROCEDIMIENTOS PARA QUEJAS Y RECLAMOS

El personal de Berks Family Residential Center (el Centro) no acosará, aplicará medidas disciplinarias, castigará ni tomará represalia alguna contra un residente que presente una queja o un reclamo. El director ejecutivo (Executive Director) investigará a fondo las acusaciones de esta naturaleza. Aunque los residentes siempre tienen acceso al sistema de presentación formal de quejas, se les recomienda tratar de resolver las pequeñas quejas de manera informal.

Proceso informal: la vía informal busca la discusión del problema con el personal, para intentar resolver la cuestión. Usted puede hablar con el personal, con el asistente social o con el supervisor. También puede presentar su queja en un formulario de solicitudes de los residentes (Resident Request form). Los asistentes sociales la analizarán y tratarán de darle una solución. La vía informal lleva menos tiempo que la vía formal, y se puede llegar a una solución más rápidamente. Si no está satisfecho con la respuesta, puede presentar una queja formal, como se indica a continuación.

Proceso formal: si no logra una solución por medio del proceso informal o desea pasar por alto el proceso informal, puede presentar una queja en un formulario de quejas (grievance form). Estos formularios están disponibles en el Centro de Información para Residentes (Resident Information Center). Si primero trató de resolver la cuestión informalmente, indique en el formulario de quejas con quién habló informalmente. Los formularios de queja se deben llenar y colocar en el buzón cerrado ubicado en el Centro de Información para Residentes (Resident Information Center) con la etiqueta "Grievance" (Quejas). Solo el funcionario que se encarga de las quejas tiene acceso a este buzón y, mantendrá la confidencialidad de su queja tanto como sea posible. Este buzón se controla y se vacía todos los días hábiles. Si un residente piensa que la queja es delicada o

que pondría en peligro su seguridad o bienestar si otras personas la leyeran, pueden colocar el formulario en un sobre cerrado y entregarlo directamente al director ejecutivo. Si lo necesita, pida un sobre a un asistente social o pídale que lo ayude para hablar con el director ejecutivo. Las quejas se deben presentar tan pronto como sea posible después de ocurrido el incidente que se denuncia. Las demoras en la presentación pueden dificultar la investigación del problema. Para completar el formulario de quejas, el residente puede pedir ayuda a miembros de su familia, a sus representantes legales o al personal. No se permite que los residentes presenten una queja en nombre de otro residente, salvo que sean los padres del residente que tiene el problema. En el formulario de quejas, los residentes pueden escribir con respecto a un solo reclamo o a varios reclamos estrechamente relacionados, concernientes al mismo tema. Para llenar el formulario, los residentes deben tratar de describir claramente el problema, el reclamo o el tema que les preocupa. Si la información no está clara, se regresará el formulario para que agreguen más datos. El funcionario a cargo de las quejas se reunirá con el residente, llevará a cabo una investigación y le entregará una resolución escrita, dentro de los 5 días hábiles de recibida la queja. Si el residente no está de acuerdo con la determinación del funcionario a cargo de las quejas, el funcionario enviará la queja y su decisión al director ejecutivo dentro de los 5 días hábiles de haber dictado su resolución sobre el residente. Antes de enviarla, el residente debe completar la parte del formulario de quejas titulada "Describa los motivos de la apelación" (State Reason(s) for Appeal) y regresará el formulario al funcionario a cargo de las quejas o lo colocará en el buzón cerrado ubicado en el Centro de Información para Residentes con la etiqueta "Grievance" (Quejas). El director ejecutivo tomará una decisión por escrito sobre la apelación dentro de los 5 días hábiles de recibirla. Los residentes que no estén satisfechos con la respuesta del director ejecutivo a su queja, pueden apelar la decisión ante el Comité para Quejas de los Residentes (RGC, Resident Grievance Committee) El RGC analizará la información, y se ofrecerá al residente la oportunidad de presentar su caso ante el comité. Dentro de los 5 días hábiles de haber tomado una decisión, el RGC notificará por escrito al residente la resolución y sus razones. Si el residente no está de acuerdo con la decisión del RGC, puede apelar a la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement) por medio de un formulario de comunicación a la ICE (ICE communication form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "ICE".

PROCEDIMIENTOS PARA QUEJAS DE URGENCIA

Cuando un residente informa verbalmente al personal que tiene un reclamo que afecta de modo inmediato su seguridad o bienestar, se inicia una queja de urgencia. El personal que reciba la denuncia del residente llevará el asunto al director ejecutivo (Executive Director) y a la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement) para que la analicen de inmediato y tomen las medidas necesarias.

ASUNTOS QUE NO SON MOTIVO DE QUEJA

Los siguientes asuntos no son motivo para presentar quejas por medio del procedimiento de quejas del Centro:

- Resoluciones de los tribunales estatales y federales.
- Leyes y reglamentaciones estatales y federales.
- Resoluciones de última instancia sobre las quejas.
- Políticas, procedimientos o decisiones de la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement), como traslados a otra institución, liberaciones, remociones, etc.;
- Resoluciones de audiencias para aplicación de medidas disciplinarias. Las apelaciones sobre medidas disciplinarias se pueden presentar en el formulario para asuntos disciplinarios (disciplinary form), después de la audiencia.

Se podrán regresar sin examinar las quejas de residentes que presenten quejas por molestar o que abusen del sistema de presentación de quejas.

MALA CONDUCTA DEL PERSONAL

Los residentes pueden denunciar la mala conducta del personal directamente a la Oficina del Inspector General (Office of Inspector General) del Departamento de Seguridad Nacional (Department of Homeland Security). Para hacerlo, podrán usar el sistema de llamadas gratuitas programado en los teléfonos y llamar al 1-800-323-8603 o escribir a:

**Department of Homeland Security
Office of the Inspector General
245 Murray Drive, S.E., Building 410
Washington, D.C. 20538**

CONTRABANDO

Contrabando es todo material que esté prohibido por la ley o las reglamentaciones, o que pueda provocar lesiones físicas, que sea esencialmente peligroso (armas o herramientas de violencia), que afecte la seguridad de los residentes o el personal del Centro, o que genere condiciones peligrosas o insalubres en el Centro. Por ejemplo: cuchillos, armas, líquidos inflamables, llaves, bebidas alcohólicas o estupefacientes, moneda prohibida, medicamentos controlados, cigarrillos, alcohol, tijeras, pornografía, medicamentos de cualquier clase, comida o bebida que se lleve al Centro, etc. El personal va a confiscar todo artículo que considere como contrabando. Si el contrabando no es ilegal según las leyes penales y no significa un riesgo para la seguridad, el personal lo pasa al inventario y entregará un recibo por el objeto, y luego lo guarda junto con el resto de las pertenencias personales del residente almacenadas. Las pertenencias religiosas ni se tratan como contrabando ni se confiscan sin consultar con el capellán del Centro y el director ejecutivo (Executive Director). No obstante, si se considera que un artículo religioso es contrabando, se le confisca y se va a tratar según los procedimientos para deshacerse del contrabando. El personal desechará todos los alimentos (por ejemplo, comidas rápidas, bebidas, alimentos o leche de fórmula para bebés con envases abiertos) en el momento del ingreso al Centro. Cuando haya una duda sobre el propietario del artículo de contrabando, se llevará a cabo una investigación para determinar a quién pertenece. El personal pasa al inventario y guarda los artículos mientras esté pendiente la verificación para determinar a quién pertenece. El residente tendrá 7 días para probar que es

propietario de los artículos inventariados. Si un residente no puede probar que es propietario o no se puede establecer razonablemente la propiedad, el artículo se podrá destruir.

PROCEDIMIENTOS DISCIPLINARIOS

Los actos prohibidos se dividen en tres categorías: "grave", "moderado" y "leve". Las sanciones que se determinen para cada categoría se aplicarán solo si se encuentra al residente culpable de haber cometido un acto prohibido y no se logró modificar su conducta por ningún otro método. Debido a la naturaleza de residencia familiar del Centro, las sanciones se usan como último recurso y solo como un medio de corregir comportamientos que amenacen la seguridad y el bienestar de los residentes, el personal y los visitantes. Cuando los residentes cometan o intenten cometer actos que violen las reglas establecidas en el Centro o que signifiquen una amenaza para la seguridad y el correcto funcionamiento del Centro, cada caso se tratará según las acciones disciplinarias que correspondan. Cuando un residente cometa o intente cometer actos que violen las leyes de Estados Unidos, se le podría someter a las acciones en un tribunal penal de Estados Unidos.

Siempre que sea posible, el personal tratará de corregir las infracciones menores de las reglas del Centro informalmente, por medio de conversaciones y orientación. Este procedimiento informal puede incluir consecuencias que sean aceptables para el residente y para el personal, por ejemplo, restricciones temporales para un piso, pérdida de privilegios y, para los niños, tiempo de inactividad. Los padres deberán estar presentes durante las entrevistas a los niños por motivos de infracciones, (salvo que la acusación se relacione con un incidente entre los padres y el hijo). Las medidas disciplinarias nunca tendrán un carácter degradante o humillante para los residentes ni se administrarán de esa manera. El personal nunca aplicará las siguientes sanciones: castigo corporal; cambios en los servicios de comida habituales; negación de asistencia legal; privación de correspondencia, teléfono o privilegios de visitas; privación de ejercicio físico o acceso a la recreación; privación de asistir a la escuela o de recibir educación. Ningún castigo incluirá el encerramiento en habitaciones o espacios cerrados y bajo llave. Solo en situaciones de salud mental se puede privar a los residentes de ropa, ropa de cama o artículos de higiene personal. El departamento médico tomará estas decisiones. En caso de que un miembro del personal piense que un residente está cometiendo una infracción que no se puede tratar por medio del procedimiento informal, ese miembro del personal debe completar un informe de incidente (incident report). Un supervisor comenzará la investigación de los informes de incidentes dentro de las 24 horas de recibirlos. Los residentes que estén bajo investigación tienen los siguientes derechos:

- Estar callado durante todas las etapas del proceso disciplinario. El silencio no se usará para respaldar una conclusión en contra del residente.
- Recibir el informe de incidente y la notificación de cargos (Notice of Charges) con un mínimo de 24 horas antes del inicio del procedimiento administrativo.
- Tener una audiencia inicial ante el Comité de Revisión de la Administración (MRC, Management Review Committee) dentro de las 24 horas de recibir la notificación de cargos por infracciones leves a moderadas.

Durante las audiencias ante el MRC, los residentes tienen los siguientes derechos:

- Presentar pruebas y declaraciones en su propio nombre.
- Asistir a la audiencia (pero no a la deliberación), salvo que su comportamiento signifique un riesgo para la seguridad.
- Tener un intérprete presente si la audiencia se lleva a cabo en un idioma que el residente no comprende.
- Apelar la decisión del comité por medio del proceso de apelaciones.

Los incidentes que incluyan violaciones graves de las reglas del Centro o los casos sin resolver se remitirán a un Panel Ejecutivo de Revisión (ERP, Executive Review Panel).

Durante las audiencias ante el ERP, los residentes tienen los siguientes derechos:

- Llamar a testigos, y presentar pruebas y declaraciones en su propio nombre.
- Asistir a la audiencia (pero no a la deliberación), salvo que su comportamiento signifique un riesgo para la seguridad.
- Tener un intérprete presente si la audiencia se lleva a cabo en un idioma que el residente no comprende.
- Solicitar que un representante del personal lo asista en el caso.
- Renunciar a la audiencia y admitir haber cometido la infracción en cuestión.
- Apelar la decisión del comité por medio del proceso de apelaciones.

APELACIONES CONTRA LAS AUDIENCIAS PARA APLICACIÓN DE MEDIDAS DISCIPLINARIAS

Después de la audiencia, los residentes pueden apelar las resoluciones del panel de disciplina, mediante la entrega de una apelación escrita a uno de los miembros del panel. El panel enviará la apelación al director ejecutivo (Executive Director), quien dará una respuesta escrita inmediata.

POSTERGACIÓN DE LOS PROCEDIMIENTOS DISCIPLINARIOS

Los procedimientos disciplinarios se podrán posponer por razones como preparación para la defensa, enfermedad física o mental, problemas de seguridad, fuga, traslado disciplinario, acciones penales pendientes, etc.

SANCIONES CORRECTIVAS PARA NIÑOS

El Comité de Revisión de la Administración (MRC, Management Review Committee) podrá aplicar las sanciones 1 a 4. El Panel Ejecutivo de Revisión (ERP, Executive Review Panel) podrá aplicar las sanciones 1 a 5.

1. Derivación a orientación.
2. Prohibición de salir del área de alojamiento (Housing Area), durante un máximo de 72 horas.
 - a. Cuando se prohíbe a un niño salir del edificio, se le debe otorgar un mínimo de una hora de actividad diaria al aire libre.

- b. Se puede obligar al niño a permanecer en la sala de estar comunitaria, pero no se lo puede obligar a permanecer en su dormitorio, salvo durante el período de inactividad.
 - c. Ninguna sanción puede prohibir al niño asistir a las clases obligatorias de la escuela o a las prácticas religiosas.
3. A los niños de 12 años o más se les puede suspender el privilegio de libertad de movimiento hasta por 14 días. Dicha suspensión exige que los padres supervisen todas las actividades del niño durante ese período.
 4. Pérdida del tiempo dedicado a actividades extracurriculares, como la noche de cine.
 5. Pérdida de privilegios de viajes de estudio por hasta 45 días.

Las medidas correctivas no deben interferir con actividades diarias como comer y dormir. Las medidas disciplinarias no deben tener efectos negativos sobre la salud o el bienestar físico y psicológico del niño, ni negarle las comidas habituales, las horas de sueño suficientes, ejercicio, atención médica, el derecho a correspondencia o asistencia legal.

SANCIONES CORRECTIVAS PARA ADULTOS

El Comité de Revisión de la Administración (MRC, Management Review Committee) podrá aplicar las sanciones 1 a 4.

El Panel Ejecutivo de Revisión (ERP, Executive Review Panel) podrá aplicar las sanciones 1 a 5.

1. Derivación a orientación.
2. Exigir la asistencia a clases para padres (Parenting Classes).
3. Trabajos adicionales como los siguientes; Tareas domésticas generales
4. Pérdida del derecho a compras en la tienda del Centro.
5. Prohibición de salir del área de alojamiento (Housing Area), durante un máximo de 72 horas.
 - a) La imposición de esta sanción debe tener en cuenta las edades de los niños y el efecto negativo que puede tener en un menor que no tuvo nada que ver con la infracción.

DESCRIPCIÓN DE LAS INFRACCIONES

INFRACCIONES LEVES

(101) Estar en un área no autorizada: estar en un área que está señalada como "prohibida" (off limits) para los residentes, mediante órdenes verbales, escritas o publicadas.

(102) Trastornos de conducta: comportamientos como hablar en voz muy alta, gritar o empujar, que impiden el funcionamiento ordenado del establecimiento.

(103) Falta de control del comportamiento de los niños por parte de sus padres o tutor legal: para padres que permiten que sus niños sean indisciplinados o irrespetuosos, o puedan insubordinarse en su presencia.

(104) Falta de cumplimiento de reglas o reglamentaciones verbales o publicadas: incumplimiento de órdenes o reglas para el funcionamiento del establecimiento en condiciones de limpieza, seguridad y orden, que se hayan anunciado con anterioridad

para conocimiento de los residentes, o que algún empleado del establecimiento o persona encargada del residente en ese momento le haya transmitido. Esto incluye incumplimiento de los procedimientos establecidos en la residencia para contar los residentes.

- (105) Peleas: intercambio de palabras o contacto físico por enojo, pero sin que ocurran lesiones que necesiten de atención médica; por ejemplo, bromas o juegos bruscos.
- (106) Juegos de azar: operar o jugar juegos de azar, cuando existan apuestas y pagos por medio de mercancías u otros objetos de valor.
- (107) Posesión de artículos para juegos de azar: controlar artículos para operar o jugar cualquier juego de azar en los que se apueste y se pague con mercancías u otros objetos de valor.
- (108) Automutilación: provocarse heridas a sí mismo, como cortarse o tatuarse el cuerpo.
- (109) Fumar: fumar tabaco en cualquiera de sus formas en cualquier lugar del establecimiento.
- (110) Recibir o poseer sin autorización cualquier artículo de valor: recibir o tener en su poder cualquier artículo de valor que haya obtenido por medio de fraude, amenazas o robo.
- (111) Ausencia injustificada del lugar asignado: no estar en el lugar asignado, como el área de alojamiento, el área de recreación o de servicios médicos, sin autorización del supervisor correspondiente.
- (112) Uso de frases o lenguaje vulgar, abusivo o grosero.
- (113) No mantener la propia higiene personal o la higiene personal de un hijo: estar desaseado o tener ropas sucias.
- (114) Falta de higiene y orden en su lugar de alojamiento: no mantener la limpieza y el orden del lugar donde vive. El lugar debe mantenerse de modo que todas sus posesiones se guarden apropiadamente, en los lugares designados. No debe haber polvo ni desorden en el lugar.
- (115) Posesión de contrabando no peligroso (contrabando "blando"): posesión de artículos de contrabando que no se permiten en el establecimiento, pero que no pueden causar lesiones o daños graves al propietario o a otras personas, incluidos los productos del tabaco.
- (116) Uso no autorizado del teléfono: uso del teléfono durante horarios no autorizados.
- (201) Negativa a someterse a una prueba para detectar drogas ante una sospecha razonable: no entregar una muestra de orina para hacer una prueba para detectar drogas ante una sospecha razonable.

INFRACCIONES MODERADAS

- (202) Prueba para detectar drogas, ante una sospecha razonable, con resultado positivo de detección de drogas ilegales o medicamentos controlados tomados sin receta.
- (203) Robo: tomar algo que pertenece a otra persona, sin autorización.
- (204) Destruir, alterar o dañar la propiedad (monto menor de \$1,000.00): destruir, modificar o perjudicar la propiedad del establecimiento o de otra persona.
- (205) Falsificación o reproducción no autorizada de documentos o artículos (excluido el dinero): falsear, falsificar o reproducir sin aprobación cualquier documento, artículo, identificación o documentos de seguridad.
- (206) Obstaculizar las tareas de un empleado: actuar para interrumpir a un empleado durante su horario de trabajo, por ejemplo, causar demoras o dar información falsa.
- (207) Negativa para someterse a un cacheo ante una sospecha razonable.

(208) Descuido de los hijos: falta de cuidado y atención adecuados para un hijo (que no sean lesiones).

(209) Acoso sexual verbal a un residente. Actuar de manera de crear un ambiente residencial hostil para otros residentes, sin importar la edad o el sexo.

INFRACCIONES GRAVES

(301) Provocar incendios: iniciar o hacer que se inicie un incendio que pueda causar o cause daños a las personas o a la propiedad.

(302) Ataques y lesiones: ataques sin intención sexual al cuerpo de otra persona, pero con intención de causar daño o lesiones graves.

(303) Violar a una persona o tener contacto sexual con ella sin su consentimiento, violar a una persona incapaz de consentir o rechazar o tener contacto con ella; contacto del pene con la vagina o del pene con el ano, incluida la penetración, aunque sea leve; contacto entre la boca y el pene, la vagina o el ano, o penetración de los orificios anales o genitales de otra persona con la mano, los dedos u otro objeto (por ejemplo, penetración o sodomía oral).

(303) Ataque sexual contra cualquier persona y contacto abusivo con ella sin su consentimiento, con el fin de obtener gratificación o excitación sexual; ataque sexual contra una persona incapaz de consentir o rechazar, o contacto abusivo con ella; tocar a esas personas de manera intencional, ya sea directa o indirectamente, o a través de la ropa, en sus genitales, el ano, la ingle, el pecho, la parte interna de los muslos o las nalgas. El ataque sexual excluye los incidentes que involucren penetración o sodomía oral.

(304) Intento o conspiración para cometer una infracción grave: una infracción de residentes que no cometen realmente la infracción, pero participan en ella de una (1) o más de las maneras que se detallan a continuación.

(304a) Intentos de cometer la infracción grave.

(304b) Solicitar a otras personas que cometan la infracción grave.

(304c) Conspirar con otras personas para cometer la infracción grave.

(304d) Facilitar la acción de otras personas para cometer la infracción grave.

(305) Maltrato a menores: tratar a un niño con crueldad, dureza o de manera inadecuada o insultante.

(306) Descuido de los hijos: falta de cuidado y atención adecuados para un hijo, que lo ponga en peligro o le cause lesiones.

(307) Afiliación confirmada a un grupo de riesgo para la seguridad (STG, Security Threat Group) y asociación o participación en actividades relacionadas con pandillas.

(308) Adulteración, falsificación o reproducción de dinero no autorizada.

(309) Muerte de una persona: todo acto cuyo resultado final sea la muerte de una persona, ya sean empleados, visitantes y voluntarios u otros residentes, entre otros.

(310) Destruir, alterar o dañar la propiedad (monto de \$1,000.00 o más): destruir, modificar o perjudicar la propiedad del establecimiento o de otra persona.

(311) Tomar rehenes: retener a una o más personas en contra de su voluntad como garantía para que se satisfagan determinadas condiciones.

(312) Escapar: abandono del establecimiento o alejamiento de la custodia de un empleado sin permiso.

(313) Insurrección: participar o inducir a otro a participar en actividades no autorizadas, como protestas o disturbios.

(314) Posesión de contrabando peligroso (contrabando "duro"): posesión de artículos de contrabando que no se permiten en el establecimiento y que pueden causar lesiones o daños graves al propietario del contrabando o a otras personas. Esto incluye armas mortales, artículos modificados para usarlos como armas, drogas y artículos para drogarse.

(315) Mal comportamiento sexual: esto incluye, entre otros, los siguientes actos:

(315a) Exponer los genitales o las nalgas a un empleado, visitante, voluntario o residente, con el fin de obtener gratificación o excitación sexual.

(315b) Masturbarse donde un empleado, visitante, voluntario u otro residente pueda verlo.

(316) Intimidar o amenazar a otras personas con hacerles daño: decirle a una persona, por medio de acciones o palabras, que sufrirá algún daño.

(317) Posesión de estupefacientes o bebidas alcohólicas: posesión de cualquier droga o estupefacientes que no le hayan recetado o cuyo uso no esté aprobado por el departamento de servicios médicos.

(318) Violación de cualquier ley federal, estatal o local: todo acto, aunque no esté especificado en esta política, que se pueda considerar como delito grave o falta menor según las leyes federales, o según las leyes del estado donde el residente esté alojado.

EDUCACIÓN

El Centro dirige una escuela en el sitio cuyas clases están a cargo de la Unidad Intermedia del Condado de Berks (Berks County Intermediate Unit). Los salones de clases se ubican en el piso de actividades del Centro. La escuela del Centro brinda servicios educativos a todos los niños que cumplen 4 años, como mínimo, el 1 de septiembre del año lectivo vigente. Es obligatorio participar en el programa educativo, y funciona en un ambiente de salón de clase estructurado, de lunes a viernes. Las materias académicas básicas incluyen Ciencias, Estudios Sociales, Matemáticas, Lectura, Escritura y Educación Física. Por lo general, los niños de 4 a 5 años participarán en un programa preescolar de media jornada, y los niños de 5 a 18 años participarán en un programa académico de jornada completa. Todos los niños de 5 años o más deben presentar un examen en el momento del ingreso al Centro, y se les ubicará en la clase adecuada. Los padres deben llevar a sus hijos hasta la sala de clases que les corresponda, de lunes a viernes a las 8:40 a.m., cuando la escuela comienza a funcionar. Los padres deben regresar a la sala de clases a las 3:15 p.m. todos los días para buscar a sus hijos, salvo que el personal les informe de algún cambio. Los feriados y los horarios de descanso se anunciarán y publicarán.

INFORMACIÓN PARA NECESIDADES ESPECIALES

Aunque después del ingreso al Centro se evalúa a cada niño para detectar necesidades especiales, los padres que piensen que sus hijos puedan tener deficiencias educativas o problemas de aprendizaje pueden solicitar que se evalúe a los niños, a fin de detectar necesidades especiales. Para solicitar esta evaluación, los padres pueden hablar con el maestro del niño, un asistente social, un asistente social de la división Cuerpo de Servicios Médicos para Inmigración (IHSC, Immigration Health Services Corps) o pueden llenar un formulario de solicitud para el programa (Program Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). La unidad educacional se va a reunir con los padres y para evaluar al niño. Si

se concluye que el niño es elegible para educación para necesidades especiales, el niño tendrá un Plan de Educación Individualizado (IEP, Individual Educational Plan). El programa de educación del niño y las modificaciones necesarias se registrarán por el IEP correspondiente.

MATRIMONIOS

Usted o su representante legal pueden solicitar por escrito un permiso para contraer matrimonio durante su estadía en el Centro, al jefe (Chief) de la Unidad de Administración de Residencias para Jóvenes y Familias (JFRMU, Juvenile and Family Residential Management Unit). En la solicitud se deberá manifestar específicamente lo siguiente:

- Que el o la residente tiene capacidad legal para contraer matrimonio.
- Que el o la residente tiene capacidad mental, según lo certifique un médico.
- Que el futuro cónyuge desea contraer matrimonio con el o la residente, y que afirme por escrito tal intención.

Dicha afirmación debe estar incluida como parte de la solicitud. Si no se obtiene la aprobación del jefe, la JFRMU puede demorar o cancelar las ceremonias o las visitas con fines de contraer matrimonio que se hayan aprobado. Para más información, vean la sección sobre la ICE.

TIENDA DEL CENTRO

Si tienen fondos en su cuenta en el Centro, pueden comprar artículos en la tienda del Centro. Para hacerlo, deben completar un formulario de pedido a la tienda (commissary order form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Commissary" (tienda del Centro). Una vez confirmado y aprobado su pedido, el paquete estará disponible para que lo retire. Para conocer más detalles sobre la tienda del Centro y los días para recibir y entregar pedidos, vean la información de servicios para residentes (Resident Services Information) en el Centro de Información para Residentes (Resident Information Center).

PAUTAS DE LA TIENDA DEL CENTRO

Solo el jefe de la familia puede presentar un pedido a la tienda del Centro. Una vez recibido el pedido, es su responsabilidad verificar que los artículos sean los que pidió. Se debe avisar al supervisor de cualquier problema con el pedido inmediatamente después de recibirlo. Una vez completadas, todas las transacciones de la tienda del Centro son definitivas. Una transacción se completa cuando el residente comprueba su mercancía y firma el recibo. No se permiten cambios. La tienda del Centro no da crédito. Los residentes deben tener fondos suficientes en su cuenta en el Centro para pagar los artículos solicitados. Una vez que el residente coloca el formulario para la tienda en el buzón de la tienda del Centro, no podrá cambiarlo. Hay un límite de \$100.00 para gastos por familia y por semana (excluidas las compras especiales). Todo artículo que se compre en la tienda del Centro debe ser para uso de la familia que hace la compra.

FINANZAS

No se permite que los residentes tengan en su poder dinero o fondos mientras estén en el Centro. Cuando ingresan, toda la moneda de EE. UU. se deposita en una cuenta a la que ustedes tienen acceso durante su estadía en el Centro. La moneda que no sea de EE. UU. se coloca junto con sus pertenencias almacenadas. Usted recibirá un recibo por los fondos que ingresen durante su estadía en el Centro. Los residentes pueden recibir fondos (dinero en efectivo, o cheques o giros a la orden del residente) procedentes de sus familiares o amigos, quienes deberán enviarlos a la dirección del Centro, ubicada en la portada de este manual. (Se recomienda enviar cheques de caja). Si deciden participar en el programa de trabajo, esos pagos también se depositarán en su cuenta. Asimismo, podrán recibir fondos durante las visitas. Estos fondos se deben entregar al personal antes de la visita, para depositarlos en su cuenta. Usted puede usar estos fondos para comprar tarjetas telefónicas, artículos de la tienda del Centro y otros artículos que necesite durante su estadía en el Centro. Los fondos de residentes que vengan de otro centro se acreditarán a su cuenta en un plazo de 24 horas a partir de la llegada de dichos fondos. Cuando se les dé el alta, los residentes recibirán el saldo de los fondos que tengan en su cuenta en el Centro, mediante un cheque.

PROGRAMA DE TRABAJO VOLUNTARIO

Los adultos residentes pueden participar en el programa de trabajo voluntario del Centro. Antes de comenzar el programa de trabajo voluntario, los residentes deben obtener un certificado médico de aptitud. Para obtener el certificado, hable con el departamento médico. Los residentes recibirán la capacitación necesaria y deberán firmar una declaración para el programa de trabajo voluntario, antes de comenzar a trabajar. Los residentes que participen en el programa de trabajo voluntario recibirán \$1.00 de paga por día de participación. Vea al asistente social para inscribirse en el programa de trabajo voluntario o complete un formulario de solicitud para el programa (Program Request Form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). Los residentes también pueden ser voluntarios para tareas temporales que se presenten ocasionalmente. Por lo general, el trabajo temporal dura desde varias horas hasta varios días. Los residentes asignados a áreas de trabajos especiales recibirán la ropa de protección adecuada e instrucciones acordes a las exigencias del trabajo. Las tareas asignadas son estrictamente voluntarias. El desempeño insatisfactorio del trabajo y los casos de indisciplina pueden dar lugar a que se le elimine del programa de trabajo voluntario. La siguiente es una lista de algunas de las tareas y los trabajos temporales disponibles en el programa de trabajo voluntario:

- Cocina y comedor
- Área de limpieza (dentro del Centro)
- Área de limpieza (fuera del Centro)
- Lavandería
- Limpieza del área de estar
- Recreación
- Biblioteca
- Jardín
- Costura
- Equipo de pintores
- Salón de ropas

VISITAS

Los residentes tienen permitidas visitas sociales, legales y consulares, según se describe en las secciones relacionadas del manual. A su llegada al Centro, todos los visitantes deben presentar una identificación con foto, emitida por el gobierno de EE. UU. A criterio del supervisor, un menor que no posea una identificación aceptable puede ser admitido en compañía de un visitante adulto que se responsabiliza de su identidad. Los menores permanecerán bajo la supervisión de un visitante adulto, para no molestar a otros visitantes. Cuando los visitantes o los residentes se comporten de manera que cause molestias, se podrá dar por terminada la visita. Los visitantes que traigan cualquier artículo para los residentes deben entregarlo al personal, que lo recibirá y les entregará un recibo. Ningún artículo se puede entregar directamente al residente durante la visita. Los residentes no están autorizados a recibir contrabando o alimentos perecederos. Para más información, vean la sección sobre pertenencias personales permitidas y contrabando.

INSTRUCCIONES PARA LLEGAR AL CENTRO

Desde la Ruta 222 (no la ruta comercial 222), tome la salida 183 North. Siga hasta el primer semáforo (hay una farmacia CVS en la esquina) y doble a la izquierda por Leesport Road. En el primer cartel de detenerse, doble a la derecha por County Road. Siga aproximadamente 1 milla hasta Berks Road y doble a la izquierda. Siga hasta el primer estacionamiento a la izquierda. La entrada al Centro para visitantes está en la parte superior de la rampa, al lado del mástil de la bandera.

VISITAS SOCIALES

Las visitas sociales se llevan a cabo los 7 días de la semana, desde las 8:00 a.m. hasta las 8:00 p.m. No hay restricciones para la cantidad de visitas que reciben los residentes. Por lo general, las visitas durarán un mínimo de 60 minutos. Las visitas se podrán llevar a cabo solo con cita previa. Las citas se hacen llamando a los asistentes sociales a las extensiones 2360 y 2361, de lunes a viernes desde las 9:00 a.m. hasta las 3:00 p.m. Se podrá restringir la cantidad de visitantes por visita, según la cantidad de visitantes previstos para esa hora. Debido a la cantidad de personal disponible, las citas médicas de los residentes y los programas de actividades, los visitantes no podrán presentarse sin la aprobación previa, salvo que los autorice el director de programa (Program Director). Los visitantes también pueden solicitar arreglos especiales para la visita si viajan desde lugares alejados o existe alguna otra circunstancia especial. Los familiares, amigos y otras personas pueden programar visitas sociales a los residentes.

VISITAS DE ASESORES LEGALES

El Centro permite las visitas de asesores legales los 7 días de la semana, incluidos los feriados. De lunes a viernes, el horario de visitas de asesores legales es desde las 9:00 a.m. hasta las 9:00 p.m. Los sábados, domingos y feriados, el horario es desde las 9:00 a.m. hasta las 5:00 p.m. Las visitas legales se podrán llevar a cabo solo con cita previa. Las citas se hacen llamando a los asistentes sociales a las extensiones 2360 y 2361, de lunes a viernes desde las 9:00 a.m. hasta las 3:00 p.m. Si un asesor legal necesitara concertar una cita en un horario que no sea el indicado anteriormente, puede comunicarse

con un supervisor para solicitarla. Las visitas legales pueden llevarse a cabo durante un período programado de comida. En tales casos, el residente recibirá una bandeja o una bolsa con su comida después de la visita, o puede comer durante la visita. Los abogados deben presentar una tarjeta de membresía otorgada por un colegio de abogados estatal de EE. UU. Las personas autorizadas para llevar a cabo una visita legal son las siguientes:

- Abogados y otros representantes legales.
- Asistentes legales.
- Un asistente legal podrá visitar, sin estar acompañado, a un residente durante el horario de visitas legales siempre que presente una carta de autorización del representante legal bajo quien trabaja. En la carta se deberá manifestar que el asistente legal nombrado presta servicio en nombre del representante legal bajo quien trabaja con el fin de reunirse con el residente que aloja la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement).
- Intérpretes para colaborar con los representantes o asistentes legales.

VISITAS CONSULARES

El Centro permite la visita de funcionarios consulares en todo momento. Las citas se hacen llamando a los asistentes sociales a las extensiones 2360 y 2361, de lunes a viernes desde las 9:00 a.m. hasta las 3:00 p.m. Si un funcionario consular necesitara concertar una cita en un horario que no sea el indicado anteriormente, puede comunicarse con un supervisor para solicitarla.

CÓDIGO DE VESTIR DE LOS VISITANTES

Visitantes de 12 años o más:

- Deben usar ropa que les cubra los hombros, el pecho, el estómago y todas las partes del cuerpo entre el ombligo y la mitad del muslo, cuando estén sentados.
- El escote de la ropa no será más bajo que la axila, tanto en el frente como en la espalda.
- Está prohibido usar ropa transparente.
- Siempre se deberá usar calzado.
- Siempre se deberá usar camisa.
- Está prohibido usar colores que identifiquen a "pandillas".

INFORMACIÓN LEGAL

BIBLIOTECA LEGAL Y ACCESO A MATERIAL LEGAL

La biblioteca legal está ubicada en el piso de dormitorios y está abierta las 24 horas del día. No se permitirá el uso de la biblioteca a más de 5 residentes al mismo tiempo. Si no puede acceder a la biblioteca legal debido a la limitación de cantidad de residentes, hable con un supervisor para que haga los arreglos a fin de que pueda usar la biblioteca. Se solicitará que abandonen el lugar a los residentes que no usen la biblioteca legal para los fines por los que funciona. En la biblioteca legal hay máquinas de escribir y computadores disponibles, para la elaboración de documentos legales y para investigación de cuestiones legales. Las computadoras contienen una aplicación "Lexus Nexus" que tiene diversas publicaciones

sobre la ley de inmigración y otras publicaciones relacionadas. En la biblioteca legal también puede haber material de organizaciones no gubernamentales sobre investigaciones de asuntos legales e inmigración. Los residentes pueden solicitar materiales legales existentes fuera del sitio. Para solicitarlo, pueden hablar con un asistente social o llenar un formulario de solicitud para el programa (Program Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). Para recibir instrucciones a fin de usar la aplicación Lexus Nexus, para inscribirse para la orientación o para hacer preguntas sobre el uso del equipo de la biblioteca, hable con un asistente social o llene un formulario de solicitud para el programa. Para solicitar papel o discos de almacenamiento de la computadora para guardar documentos y para avisar del mal funcionamiento del equipo de la biblioteca legal, hable con el personal de la mesa de atención del piso de dormitorios.

MATERIAL PROVISTO POR REPRESENTANTES LEGALES

Los documentos y demás material escrito que se entregan a un residente durante una visita legal, se inspeccionarán, pero no se leerán. Los residentes pueden mantener material legal en sus dormitorios. Si un residente tiene una cantidad de formularios en blanco o de material de autoayuda que excede la cantidad necesaria para uso personal, dicho material se podrá guardar con sus pertenencias. Para tener acceso a estos documentos, el residente deberá hablar con el personal o completar un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

PLÁTICAS PARA ORIENTACIÓN LEGAL

Voluntarios de organizaciones de asistencia legal dan pláticas para orientación legal (LOP, Legal Orientation Presentations) en el Centro. Las pláticas están abiertas para todos los residentes, independientemente del público al que se dirija el orador, salvo cuando la asistencia de algún residente en particular pueda significar un riesgo para la seguridad. Por lo general, las LOP se llevan a cabo una vez por mes. Vea la información y el programa de las LOP que se exhiben en el Centro de Información para Residentes (Centro de Información para Residentes). Para asistir, consulte con un asistente social o llene un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

ASISTENCIA LEGAL GRATUITA

Se puede solicitar asistencia legal gratuita (pro bono) a las organizaciones de asistencia legal gratuita que figuran en la lista que está en el Centro de Información para Residentes (Resident Information Center). La Oficina Ejecutiva de Revisión de Inmigración (Executive Office for Immigration Review) les proporciona la lista. También puede solicitar hablar con el grupo de asistencia legal local del Centro. La hoja para inscribirse está a la salida de la oficina de los asistentes sociales, en el piso de actividades.

INSPECCIONES DE RUTINA DE HIGIENE, SALUBRIDAD Y SEGURIDAD

Las inspecciones de higiene y salubridad, y de seguridad contra incendios se llevan a cabo semanalmente en todas las áreas de programas del Centro. El personal hace estas inspecciones para verificar las condiciones sanitarias y para cumplir con otras reglamentaciones. Cuando durante estas inspecciones se inspeccionan los dormitorios, los residentes que los ocupan deben estar presentes. Los padres deben estar presentes cuando el personal inspecciona los dormitorios de sus hijos.

BÚSQUEDAS NO RUTINARIAS

Ante una sospecha razonable de que puede existir contrabando o un peligro para la seguridad de los residentes o del personal, se hace una búsqueda especial o no rutinaria. Una búsqueda no rutinaria en el dormitorio o entre las pertenencias de un residente se llevará a cabo solo después de haber notificado al residente y en su presencia, salvo que existan circunstancias apremiantes (por ejemplo, una situación de auto lesión). En estos casos, se notificará al residente una vez efectuada la búsqueda.

CACHEOS DE PERSONAS:

- Inspección visual: búsqueda visual de contrabando, sin contacto físico.
- Palpación: inspección física de un residente cuando está vestido. Solo la llevará a cabo un miembro del personal del mismo sexo. El inspector usa su sentido del tacto cuando palpa el cuerpo del residente o lo recorre con las manos. Para hacer una búsqueda con palpación no es necesario que el residente se saque la ropa, aunque la inspección puede incluir una búsqueda en la ropa y los efectos personales del residente. La búsqueda por palpación se llevará a cabo si existe una sospecha razonable y fundamentada de que el residente tiene contrabando en su poder. Ningún niño menor de 15 años será sometido a una búsqueda mediante palpación sin la autorización explícita del director ejecutivo (Executive Director) o de la Unidad de Administración de Residencias para Jóvenes y Familias (JFRMU, Juvenile and Family Residential Management Unit).

CORREO Y CORRESPONDENCIA

Los residentes pueden enviar y recibir correspondencia y una variedad de otros artículos por correo, incluidos tarjetas telefónicas, giros postales, libros, ropa y otros artículos "permitidos". Para más información, vean las secciones relacionadas. Se permitirá a los residentes recibir y enviar a su propio costo lo siguiente:

- Una cantidad ilimitada de correspondencia general por correo. La cantidad se limitará únicamente cuando exista una situación de seguridad pública o de seguridad y orden del Centro.
- Una cantidad ilimitada de correspondencia especial, incluida la correspondencia con el representante legal, con un posible representante legal, con tribunales y

otros organismos gubernamentales y con organizaciones de noticias. Para más información, vean la sección sobre correspondencia especial.

- Paquetes con artículos personales. Para enviar o recibir paquetes, hable con un asistente social o llene un formulario de solicitud para el programa (Program Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

CORREO PARA RESIDENTES SIN RECURSOS

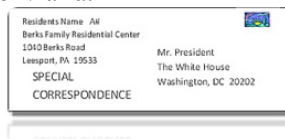
Los residentes que no tengan los fondos necesarios para pagar el franqueo podrán enviar lo siguiente sin costo:

- Una cantidad razonable de "correspondencia especial" por correo. Si el centro considera que la cantidad no es razonable, se consultará a la Oficina del Jefe de Abogados (Chief Counsel) de la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement) antes de suspender el envío de correspondencia.
- Cinco cartas de correspondencia general, como mínimo, por semana.
- Paquetes que la ICE y la Oficina de Operaciones de Aplicación de la Ley y Traslados (ERO, Enforcement and Removal Operations) consideren necesarios, como los que contengan ropa, artículos personales y artículos necesarios para regresar al país de origen.
- Paquetes que contengan artículos personales, cuando se determine que el espacio es insuficiente para almacenarlos adecuadamente.

CORRESPONDENCIA ESPECIAL

La correspondencia especial es correspondencia escrita a, o de los abogados y otros representantes legales, jueces, tribunales, embajadas y consulados, Presidente y al Vicepresidente de Estados Unidos, miembros del Congreso, Departamento de Justicia (Department of Justice), Departamento de Seguridad Nacional (Department of Homeland Security), Servicio de Salud Pública de EE. UU. (U.S. Public Health Service) y representantes de los medios de comunicación de noticias.

- La correspondencia se tratará como correspondencia especial si el título y la oficina del remitente (para correo entrante) o el destinatario (para correo saliente) están nombrados claramente en el sobre, y el sobre tiene la etiqueta "Special Correspondence" (correspondencia especial). La correspondencia especial entrante también debe estar marcada como "Special Correspondence" (correspondencia especial) en el sobre o el paquete. Los residentes deben avisar a toda persona que envíe correspondencia especial al Centro las reglas que se aplican y los requisitos para enviarla.



- La correspondencia especial solo puede abrirse en presencia del residente y solo se puede controlar para detectar contrabando, sin leerla.

- Los paquetes de correspondencia especial solo se pueden enviar o recibir con arreglos previos. Para enviar o recibir dichos paquetes, hable con un asistente social o llene un formulario de solicitud para el programa (Program Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

FRANQUEO Y SOBRES

El franqueo se puede comprar en la tienda del Centro. Para más información, vean la sección sobre procedimientos de compras en la tienda del Centro y correspondencia de residentes sin recursos. Se proveerán sobres sin costo a los residentes. Para solicitarlos hable con un asistente social o llene un formulario de solicitud para el programa (Program Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

DISTRIBUCIÓN DEL CORREO ENTRANTE

Los sobres planos de correo entrante se distribuirán dentro de las 24 horas, y los paquetes, dentro de las 48 horas de recibidos, cuando lleguen en horario normal de operaciones. Los paquetes entrantes que se reciban en fines de semana y feriados se distribuirán el próximo día hábil administrativo. Todo el correo entrante debe tener el nombre del residente, el número de registro de extranjero (A number) y una dirección precisa del remitente. El correo general entrante se abrirá e inspeccionará para detectar contrabando, solo si el residente está presente, salvo que renuncie a ese derecho o que el director ejecutivo (Executive Director) autorice la inspección por razones de seguridad. El correo general entrante también se podrá leer cuando surja un motivo documentado de preocupación por la seguridad, con respecto a un residente en particular. Se podrá rechazar el correo si contiene contrabando u otros artículos que pongan en riesgo la seguridad o que sean perecederos. Tanto el remitente como el destinatario recibirán una explicación escrita sobre el motivo del rechazo del correo, y la correspondencia se descartará de acuerdo con lo dispuesto en la sección sobre contrabando de este manual. Antes de confiscar artículos religiosos, se consultará al residente y al capellán del Centro. Los documentos de identidad enviados por correo al residente se remitirán a la Agencia de Aplicación de Leyes de Inmigración y Aduanas (ICE, Immigration & Customs Enforcement) para colocarlos en el archivo de extranjero (A file) del residente. Para solicitar una copia certificada del documento, los residentes deberán comunicarse con la ICE. Para más información, vean la sección sobre comunicación con inmigración.

ENVÍO DEL CORREO SALIENTE

No se abrirá, inspeccionará ni censurará el correo saliente, salvo que esté dirigido a otro residente o extranjero que se encuentren en un establecimiento de detención o si existen razones para creer que el artículo puede significar un riesgo para la administración segura y ordenada del establecimiento, que puede poner en peligro al remitente o al público, o que puede facilitar actividades delictivas. El correo saliente se enviará dentro de las 24 horas a partir de que el residente entregue la correspondencia en el Centro, excluidos los fines de semana y feriados. En estos casos, la correspondencia se enviará el día hábil

administrativo siguiente. El correo saliente (con el debido franqueo) se puede colocar en el buzón de "Mail" (Correo), en el Centro de Información para Residentes (Resident Information Center). Si la correspondencia se coloca en el buzón sin el franqueo correspondiente, se regresará al residente, salvo que sea una persona sin recursos. Para más información, vean la sección sobre correo para personas sin recursos. La correspondencia que no pase por la ranura se puede entregar a un asistente social o a un supervisor, para que gestione el envío. Todo el correo saliente debe indicar, en el lugar del remitente, el nombre del residente, su número de registro de extranjero (A number) y la dirección del Centro. Para conocer los requisitos de franqueo, los residentes pueden hablar con un asistente social.

NOTARIO PÚBLICO

Para obtener asistencia de un notario público, se puede llenar un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

FOTOCOPIAS

Para obtener fotocopias, se puede hablar con un miembro del personal o con un asistente social, o llenar un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes). Los servicios de fotocopiado para material legal están disponibles sin cargo.

GIROS POSTALES

Los residentes que deseen enviar giros postales deberán hablar con el asistente social o llenar un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

SERVICIOS DE PELUQUERÍA

Los residentes pueden hacerse cortar el pelo o tener otros servicios de peluquería una vez por semana. La información sobre servicios de peluquería, incluida la lista de precios, está en el Centro de Información para Residentes (Resident Information Center). La hoja para inscribirse está a la salida de la oficina de los asistentes sociales, en el piso de actividades. Para información sobre los servicios de peluquería, hable con un asistente social o llene un formulario de solicitudes de los residentes (Resident Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).

PROGRAMA RECREATIVO

Se ofrecen actividades de recreación variadas para los residentes durante su estadía en el Centro. Los residentes deben cuidar los artículos y equipos que se les entreguen y regresarlos luego de usarlos. Los residentes serán responsables de los artículos de recreación o de uso en el tiempo libre hasta que los regresen. El personal programa actividades específicas para diversión o gimnasia y solicita a los residentes que cooperen con estas actividades, que participen en ellas y que inviten a sus hijos a participar. Algunas de las actividades son los viajes de estudio fuera del sitio, que se programan con anticipación; otras son actividades en el sitio, que se programan para días y horarios específicos, y otras están disponibles para hacerlas de manera independiente. Para mayor información, lea los anuncios, la información y los programas para recreación en el Centro de Información para Residentes (Resident Information Center).

OPORTUNIDADES DE RECREACIÓN

- **Televisores:** hay varios televisores ubicados en el Centro para entretenimiento de los residentes. Los televisores permiten ver programas en inglés y en español, y también se puede escuchar música. Aunque no hay reglas específicas para determinar qué programas se pueden ver, los residentes deberán ser considerados con los demás y evitar problemas innecesarios por el uso de los televisores. En caso de que surja un problema, el personal tratará de resolverlo y puede decidir suspender el uso del televisor hasta que se pueda resolver la situación. El volumen de los televisores se mantendrá en un nivel razonable, para no molestar a otros residentes o las operaciones del Centro. Durante las horas de silencio, el volumen se debe mantener al mínimo. Los televisores no se deben cambiar de lugar ni manipular por ninguna razón. Si un televisor no funciona bien, los residentes deben avisar al personal para que lo solucionen.
- **Librería social:** la librería social está ubicada en el piso de actividades y está abierta los 7 días de la semana, durante el horario de libertad de movimiento. Los residentes pueden leer en la biblioteca o llevar los libros a la mesa de atención del piso de actividades para pedirlos prestados. Hay libros disponibles en inglés, español y otros idiomas para niños, jóvenes adultos, adolescentes y adultos. También hay computadoras disponibles en la biblioteca social, solo para lectura electrónica. Por medio de estas computadoras, los residentes pueden acceder a material de lectura en su propio idioma. Para informarse sobre el uso de estas computadoras, vean al personal de la mesa de atención, hablen con un asistente social o llenen un formulario de solicitud para el programa (Program Request form). Estos formularios están en el Centro de Información para Residentes (Resident Information Center). Los formularios completos se deben colocar en el buzón con la etiqueta "Requests" (Solicitudes).
- **Salón de actividades para niños pequeños:** el salón de actividades para niños pequeños está ubicado en el piso de actividades. Los residentes encontrarán una gran cantidad de juguetes, juegos, películas, libros multilingües con hojas de cartón y actividades educativas para que los niños pequeños jueguen en este salón.

- **Juegos electrónicos** (Wii, Xbox etc.): por lo general, el personal ofrece los juegos electrónicos como parte de una actividad organizada, pero se pueden pedir prestados si están disponibles. Hable con el personal de la mesa de atención de cualquiera de los pisos para conocer información sobre cómo pedir prestados los juegos electrónicos. Lea en el Centro de Información para Residentes (Resident Information Center), la información publicada sobre actividades organizadas con juegos electrónicos. En caso de que surja un problema cuando los residentes estén jugando con juegos electrónicos, el personal tratará de resolverlo y puede decidir suspender el uso de los juegos hasta que se pueda resolver la situación.
- **Música y equipo para escucharla:** los equipos de música se pueden pedir prestados al personal de la mesa de atención de cualquiera de los pisos.
- **Actividades para el tiempo libre:** el Centro brinda actividades para el tiempo libre en las salas de estar comunitarias de ambos pisos. Las actividades para el tiempo libre incluyen tareas de artesanías, juegos de mesa, juegos de tablero, cartas, juegos pedagógicos con tarjetas, etc. Se les pide que manejen estos artículos con cuidado y que sean considerados con otras personas que deseen usarlos. Estos artículos se pueden pedir prestados; hable con el personal de la mesa de atención de cualquiera de los pisos. Los residentes deben avisar al personal de toda pérdida o rotura de los artículos, para que los reemplacen. Estos artículos se deben regresar antes de hacer otra actividad (por ejemplo, ir a comer, recibir visitas, concurrir a una cita médica, etc.) o cuando finaliza el horario de libertad de movimiento.
- **Viajes de estudio fuera del sitio:** los viajes de estudio fuera del sitio se programan regularmente para ir a diversos lugares como parques, centros comerciales, librerías, tiendas de mascotas, eventos de artesanías, actividades festivas. Para más información, vean los anuncios en el Centro de Información para Residentes (Resident Information Center) o hablen con un asistente social.
- **Actividades en el sitio:** las actividades en el sitio se programan regularmente, por ejemplo, actividades para niños pequeños, noches de cine, torneos de juegos de mesa, torneos de deportes al aire libre y juegos electrónicos. Para más información, vean los anuncios en el Centro de Información para Residentes (Resident Information Center) o hablen con un asistente social.
- **Eventos especiales:** durante todo el año, el Centro organiza bailes, carnavales, comidas al aire libre, fiestas de celebraciones y cumpleaños. Para más información, vean los anuncios en el Centro de Información para Residentes (Resident Information Center) o hablen con un asistente social.
- **Café Internet:** la sala de computadoras con acceso a Internet está ubicada en el lobby del piso de actividades y está abierta durante el horario de libertad de movimiento. Esta sala de computadoras le permite el acceso a Internet y al correo electrónico. Cada computadora cuenta con programas de procesadores de texto, planillas de cálculo y bases de datos. Cuando la demanda es alta, los residentes pueden usar una máquina durante un período limitado por día. Para más información, vean las reglas para uso de Internet en los anuncios publicados en el Centro de Información para Residentes (Resident Information Center) o hablen con un asistente social.

- **Instrumentos musicales:** en el espacio de programas hay un piano para uso del personal y de los residentes. Los padres deben controlar a sus hijos para que no dañen el piano. Se pueden pedir y usar otros instrumentos musicales. Para más información, vean al personal en cualquiera de las mesas de atención.
- **Proyectos para cocinar:** los residentes adultos pueden inscribirse en los proyectos para cocinar que se anuncian en el Centro de Información para Residentes (Resident Information Center). El personal habitualmente ofrece a los niños la oportunidad de participar en proyectos para cocinar (no es necesario que se inscriban).
- **Artesanías:** los residentes no solo pueden pedir prestados útiles para artesanías, sino que el personal habitualmente les ofrece la oportunidad de hacer objetos determinados que luego se exhiben en el Centro. Para más información, vean al asistente social.
- **Croché (ganchillo):** el Centro provee lana, agujas y ganchillos para tejer croché. Para más información, vean al asistente social.
- **Clases organizadas:** el Centro organiza clases sobre una variedad de temas, por ejemplo, inglés como segundo idioma y gimnasia. Para más información, vean los anuncios en el Centro de Información para Residentes (Resident Information Center) o hablen con un asistente social.
- **Conferencias:** en ocasiones, el Centro organiza conferencias sobre diversos temas, como nutrición, finanzas y estilo de vida. Para más información, vean los anuncios en el Centro de Información para Residentes (Resident Information Center) o hablen con un asistente social.

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Este manual fue revisado y aprobado por:

Diane Edwards
Directora Ejecutiva (Executive Director)

Fecha

Representante de la Unidad de Administración
de Residencias para Jóvenes y Familias
(JFRMU Representative)

Fecha

EXHIBIT 39



Berks Family Residential Center

Resident Handbook

**1040 Berks Road
Leesport, PA 19533
610.396.0310**

Berks 02779

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INTRODUCTION

The Berks Family Residential Center (The Center) is contracted by U.S. Immigration & Customs Enforcement (ICE) and is operated by the County of Berks under an Intergovernmental Service Agreement. The Center's mission is to allow families to remain together while in ICE custody in the least restrictive setting available while enforcing rules necessary to ensure the safety and well-being of residents and staff alike. Decisions on immigration related matters and any determination to release residents from the Center or remove them from the United States is the responsibility of ICE, not Berks County. The Juvenile and Family Residential Unit (JFRMU) monitors activity at this Center. JFRMU is a unit within U.S. Immigration and Customs Enforcement and is responsible for all operations where ICE families are housed. The JFRMU officer at this site is responsible for monitoring the health, safety and security of residents placed here. This officer ensures the Center is in compliance with federal standards relating to a variety of topics including food service, sanitation, medical care, visitation, and legal rights. The JFRMU officer welcomes resident conversation concerning these and other Center issues.

MAILING ADDRESS AND TELEPHONE NUMBER

Berks Family Residential Center
1040 Berks Road
Leesport, PA 19533
610-396-0310 x2400

THE RESIDENT INFORMATION CENTER

The Resident Information Center is located by the dining room on the bedroom floor and is freely accessible 24 hours a day. Forms and mailboxes are located there relating to legal assistance, ICE communication requests, grievances, sick call, mail, commissary, case worker assistance, recreational activities, a copy of the current resident handbook and required postings among other things.

RESIDENT HANDBOOK

The purpose of this handbook is to provide residents with specific rules, regulations, policies and procedures that must be followed while residing at the Center. The handbook will also provide a general overview of the programs and services offered at the Center. Upon admission to the Center, each family is provided with a copy of the resident handbook. It is your responsibility for you and your family to become familiar with the contents of this handbook and to ask staff questions if there is anything you do not understand. Questions may be directed to any of the staff or ICE. A copy of the current resident handbook is also posted at the Resident Information Center.

Occasionally, changes need to be made to the resident handbook. When this occurs, residents will be given the updates and the updates will also be posted at the Resident Information Center.

RESIDENT RIGHTS AND RESPONSIBILITIES

It is Center policy to treat residents with dignity and respect while maintaining a safe, secure, and sanitary residential center. It is expected that staff will receive your full cooperation while you reside here. Although staff may not know newly admitted residents by name, they are always expected to address you in an appropriate and respectful manner. You are expected to address other residents and staff in the same manner.

- You have the right to be informed of the rules, procedures and schedules concerning the operation of the Center. You have the responsibility to know and abide by them;
- You have the right to freedom of religious affiliation and voluntary religious worship. You have the responsibility to recognize and respect the rights of others in this regard;
- You have the right to contact your consulate or embassy and have those officials call and visit you during your stay at the Center. See the sections on telephone usage and visitation for more information;
- You have the right to receive regular health care, nutritious meals, proper bedding and clothing, an opportunity to shower regularly, hygiene products, proper indoor climate control, and regular exercise opportunities among other things. It is your responsibility to seek medical care as needed, to not to waste food, to follow the laundry schedule, to maintain proper hygiene and keep your living quarters clean;
- You have the right to protection from personal abuse, corporal punishment, unnecessary and excessive use of force, personal injury, disease, property damage and harassment;
- You have the right to freedom from discrimination based on race, religion, national origin, sex, handicap or political beliefs;
- You have the right to pursue grievances in accordance with written procedures outlined in this handbook;
- You have the right to due process, including the prompt resolution of administrative disciplinary matters as outlined in this handbook;
- You have the right to unrestricted and confidential access to the courts;
- You have the right to pursue legal assistance at no cost to the United States Government;
- You have the right to use the law library. You have the responsibility to use those resources responsibly and to respect the rights of other residents in the use of the space and materials;
- You have the right to freely correspond with persons or organizations;

- You have the right to have family members and friends visit. You have the responsibility to conduct yourself properly during visits;
- You have the right to take advantage of activities and programming, which may aid in an enjoyable stay at the Center. You have the responsibility to abide by the rules governing the use of such activities and programs;
- School aged children have the right to attend school and receive instruction equal to that of their peers. You have the responsibility to ensure children attend school and study for assigned class work and homework;
- Children have the right to participate in all age appropriate activities and programming when not in school. You have the responsibility to encourage them to participate in leisure activities, ensure they abide by all Center rules including respecting the personal space of others and refraining from bullying behavior.

RESIDENT PROGRAM RULES

- Follow the directives that are given by the Center staff;
- Wear your Center identification card in plain view at all times, except when directed by staff;
- Treat all residents and staff with respect and courtesy, regardless of race, religion, ethnicity, gender or age;
- Attend to the physical and emotional needs of your children while modeling appropriate behavior;
- Monitor your child's behavior and use only approved behavior modification techniques when necessary. Corporal/ physical punishment is prohibited;
- Do not file knowingly false complaints, grievances or other reports;
- Do not speak disrespectfully, or be verbally or physically aggressive towards other residents or staff. Should you encounter others displaying this behavior, report it immediately to staff;
- Do not have physical or intimate contact with your spouse or other residents or staff while at the Center. See the section on sexual abuse and assault prevention for more information;
- Do not possess contraband while at the Center;
- Respect the rights of other residents and staff;
- Do not take or borrow other residents' property;
- Comply with census procedures;
- Perform assigned chores;
- Maintain proper hygiene;
- Clean your bedroom and private bathroom every morning;
- Complete your laundry on the assigned day;
- Conduct yourself in an orderly manner during meals, clear your immediate area after each meal and ensure your children's area is also cleaned;

- For students- follow classroom rules that are established by the teachers and the Center staff;
- Promptly report broken items or damaged property to staff;
- Alert staff immediately of any problems or concerns;
- Ask staff if you do not understand or remember Center rules;
- Abide by the room visitation policy. See the section concerning bedrooms for more information;
- Do not borrow or trade clothing, hygiene products, jewelry or make-up;
- Do not deface or otherwise damage Center property;
- Comply with the dress code found in this handbook;
- Do not use tobacco products, alcohol or gum;
- Do not waste food;
- Do not use profanity.

Failure to follow the above rules may result in the initiation of disciplinary proceedings. Serious and/or continuous infractions may lead to a review of your continued suitability for placement in this residential setting. See the section on disciplinary procedures for more information. Residents who act in an aggressive manner and/or attempt to cause harm to themselves or others, may be passively restrained under the Center restrictive procedure policy to protect themselves and others.

RESIDENT REQUESTS

Generally, residents can have questions answered and obtain services merely by speaking to staff. For those who would rather request information formally, the official method is by completing a Resident Request form. These forms are available at the Resident Information Center. Please complete all the information requested on the forms. You may obtain assistance from another resident or staff member in preparing your request form. Completed forms are to be placed in the mailbox labeled "Requests" located at the Resident Information Center. These forms are collected each business day and routed to a caseworker for resolution. This procedure is not to be used for submitting formal grievances. See the section on grievance procedures for more information.

CONTACTING IMMIGRATION

ICE staff are assigned to your immigration case and conduct announced and unannounced (not scheduled) visits to the Center. The purpose of these visits is to speak to residents about their immigration concerns and observe living conditions. You may visit with ICE during their announced visits and also submit written questions, requests or concerns to them by completing an ICE communication form. These forms are available at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "ICE. These forms are collected each business day and routed to ICE without

being read or altered. You may obtain assistance from another resident or staff member in preparing your request form. The ICE staff receiving your request form will respond to you. ICE officers are the only staff who can answer immigration related questions. See the posted ICE visit schedule at the Resident Information Center. The county staff, in blue shirts and tan pants/shorts you interact with at the Center cannot answer any immigration related questions.

CASEWORKERS

Each family admitted to the Center is assigned a specific caseworker, although questions may be directed to any of the caseworkers as needed. These caseworkers assist residents with questions regarding rights, rules, responsibilities, programming and services, housing and education, property issues, access phone numbers and addresses of family and friends, treatment referrals and other issues that arise while living at the Center. Residents may contact the caseworkers in their office on the activity floor during free movement and through the use of a Resident Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests". Signup sheets for hair care services, legal aid assistance and phone calling cards among other items are located outside of the caseworkers' office.

LIVING ARRANGEMENTS

Residents are expected to share common equipment such as telephones, televisions, tables, recreational games and other equipment. Quiet hours are from 10:30am to 6:30am on weekdays (Sunday night through Thursday night) and at 12:00 midnight to 6:30am on weekends (Friday and Saturday night) and holidays. During quiet hours residents are expected to refrain from activities which would disturb the sleep of others.

BEDROOMS

Children 12 years and under will be assigned a bedroom with their parent. Children 12 years and over will be assigned a bedroom with other children of the same gender and like age. Each resident is provided with their own bed. Residents should make their beds and straighten up their immediate area each morning. When not in use, beds should remain made. Beds are not to be moved. Due to the communal nature of the Center, where children from different families may room together, and non-related adults room together, residents must abide by the following room visitation policies to ensure the privacy and safety of all residents: Anytime an unrelated child is present in a bedroom, adult residents must have staff supervision while in that bedroom. Children may enter their parent's bedroom only in the company of their parents. As there are many areas in the Center to relax with other residents for conversation, adults are not allowed to congregate in bedrooms. Residents are permitted to decorate their rooms with personal items, so long as the decorations do not present a health or safety hazard, do not peel paint off the walls or otherwise deface Center property. No items are allowed to cover

the light fixture, doors or windows. Items are not to be hung from vents or beds. Due to the communal nature of the Center, residents are encouraged to only change their clothes in the shower rooms or in their bathroom. Approved property will be stored inside assigned bedroom closets. See the section on allowed personal property for more information. Closets shall be kept organized. No open food or drinks are allowed to be stored in bedrooms. Unopened commissary purchases may be stored in bedrooms provided they are kept in a closed bin to discourage pests. All hygiene items must be stored hygiene boxes and kept in assigned bedroom closets. Toys are allowed in bedrooms during free movement hours. After free movement, all toys must be taken back to the common areas so that they can be sanitized for the following day. See the section on free movement for more information.

CHILDREN'S BEDTIMES

Children's bedtimes were set to promote a routine for the Center children and to allow for their restful attendance in class. The general bedtime for children 4 years and younger is 8:30pm Sunday through Thursday. The general bedtime for children 5 years to 18 years is 9:00pm Sunday through Thursday. Lights are turned out 15 minutes after these bedtimes. There are no general bedtimes set for children on Friday and Saturdays. Parents are encouraged to continue (or develop) their children's bedtime routines while at the Center.

OVERNIGHT CHECKS

State regulations require staff to conduct room checks at a minimum of every fifteen minutes during each overnight to ensure resident safety. During these checks staff is required to shine a flashlight into your room; the checks will be done with as little disruption as possible.

FREE MOVEMENT

Barring temporary restrictions due to medical or security reasons, free movement hours are from 8:00am to 8:00pm each day. During this time adult residents are allowed to move freely throughout all programing areas of the Center without first asking staff permission or notifying staff where they are going. Children age 10 and older may participate in free movement, when issued a pass by their parent. See the section on free movement passes for more information. Children over 10 who do not currently have a pass and all children under 10 years old are expected to be under the direct supervision of their parent at all times when not in school or participating in an organized activity. Outside of free movement hours, residents are expected to remain on the bedroom floor. This floor has resident bedrooms, dayroom, law library, telephone room, medical department, bathrooms and shower rooms; all of which may be accessed freely 24 hours a day.

OUTDOOR CAMPUS ACCESS

The outdoor campus is open from 8:00am to 8:00pm or dusk, whichever is earlier. Outdoor recreation activities include soccer, tether ball, volleyball, and badminton and toddler activities. Outdoor recreation equipment (bikes, balls, jump ropes, hoops etc.) may be borrowed from the cart in the lobby of the recreation door. These items must be returned prior to going back inside the Center. Residents must report any loss or breakage to staff so the equipment stays in good working order and is replaced as needed. Drinking water and bathrooms are accessible while outside. To access the outdoor campus, residents must first notify staff near the recreation door then may exit out the recreation door without waiting for staff to accompany them. This is the only door that residents may use without being accompanied by staff (except in emergency situations). Staff will join residents who are outside to monitor their safety. When not participating in an organized activity, residents must stay within the boundaries of the post and rail fence. Should you need to leave this area, to retrieve a ball, etc., you must first notify staff supervising the area. Access to the outdoor campus may be temporarily suspended due to environmental conditions or for security reasons.

CHILDREN'S FREE MOVEMENT PASS

Children 10 years and older may receive a free movement pass from their parent which allows them to participate in the free movement program. This pass may be given, suspended and reinstated by the parent at any time of their choosing. Residents not receiving free movement passes for their children at admission should see a caseworker to obtain the passes.

CLOTHING

Residents must be properly dressed when outside of their bedrooms. See the section on resident dress code for more information. Each resident is allowed to keep 10 sets of personal clothing in their rooms. Children newborn to age 5 years may have 12 sets. These sets may be clothing you brought to the Center, clothing provided by the Center or clothing you purchased during your stay. Underwear, bras and socks will be exchanged as needed. Residents in need of new underwear or clothes should speak with staff or submit a Resident Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests". Residents will not be allowed to have more items than those listed above, except when authorized by the Executive Director.

CENTER CLOTHING ROOM

Residents not arriving at the Center with a suitable amount of seasonally appropriate clothing, they may borrow clothing from the Center clothing room to use during their stay. There is no charge for clothing taken from the Center clothing room, but all clothing borrowed must be returned prior to departure. Ask staff to use the clothing

room, speak to your caseworker or submit a Resident Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests".

PURCHASING CLOTHING

Clothing is available for purchase at the Center commissary. If a resident cannot find suitable clothes utilizing the above avenues, they will be allowed to purchase them from a store in the local area.

INDIGENT RESIDENT CLOTHING

The Center will provide clothing to indigent residents who did not arrive at the Center with a suitable amount of seasonally appropriate clothing. Speak with your caseworker or submit a Program Request form if you are in need of clothes. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests".

RESIDENT DRESS CODE

Residents 12 years and older:

- Shall only wear clothing which covers their shoulders, chest, stomach and all areas of the anatomy between the naval (belly button) and mid-thigh when seated;
- The top or neckline of clothing shall be no lower than the underarm in the front and in the back;
- Sheer (see-through) clothing is prohibited;
- Shoes shall be worn at all times;
- Shirts shall be worn at all times;
- "Gang colors" are prohibited.

LINENS

The following linens are provided to each resident upon admission to the Center:

- 2 sheets,
- 1 pillowcase,
- 1 blanket,
- 1 laundry bag

These linens will be exchanged for clean linens once a week, or more frequently as needed. Speak with staff should an occasion arise when you need clean linens outside the normal exchange day.

LAUNDRY

Laundry services are available 7 days a week. Each family is scheduled to wash their laundry on an assigned day. The laundry schedule is posted near the laundry room door on the bedroom floor. In the event clothing become soiled between scheduled laundry

times, ask staff for additional clothing and/or to be given additional time to wash laundry. See staff at the bedroom floor courtesy desk for machine soap and machine use instructions. Report any machine issues to staff at the bedroom floor courtesy desk.

PERSONAL HYGIENE

At the Center, you will be living in close proximity with other families, so personal hygiene is essential. You are expected to bathe regularly and keep your hair clean. Upon arrival to the Center each resident was issued hygiene products. These items may be replaced as needed by submitting a Resident Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests". You are also allowed to purchase hygiene items from the Center commissary. Feminine hygiene items are available in the female shower room on the bedroom floor. Residents have free access to showers during free movement hours, 7 days a week. Should you need to shower at other than free movement times, speak to staff. The shower rooms are labeled according to gender (male and female). Children 9 years and older will shower according to their gender. Should your child need assistance and is older than 9, see staff for accommodations. Children 8 years and younger will shower only under the direct supervision of their parent so as to not disturb other residents using the shower room. Adults may wear their own make-up. All make-up must fit in a hygiene box or it will need to be placed in storage. Razors are available at any time by speaking with staff at the bedroom floor courtesy desk. Residents will exchange their Center identification for a razor and return it to the courtesy desk staff immediately after use. Nail clippers and tweezers are available through the Center commissary.

ALLOWABLE PERSONAL PROPERTY

While at the Center, you are permitted to retain in your bedroom:

- 10 sets of clothes per resident as described above;
- Personal hygiene items;
- Legal documents, legal papers and legal Information;
- Photos;
- Medical prostheses, (i.e. eyeglasses, dentures, etc.);
- Personal reference materials, (i.e. address/phone book and/or list of relatives, friends and/or other correspondence);
- Religious items (approval by the Center chaplain required). See the chaplain section for more information;
- Newspapers, magazines, books and other literature (limited to any combination of 3 at a time to ensure accumulations do not produce and/or effect fire safety standards);
- Items listed on the commissary work sheet;
- Artwork, crafts etc. that you have accumulated during your stay at the Center.

Any items not included on this list will be considered contraband. Additional personal property must be approved by the Program Director prior to purchase/possession.

WRITING INSTRUMENTS

Residents over 12 years shall be issued a pen and pencil for their personal use while residing at the Center. Children 5 years to 11 years shall be issued a pencil for personal use while residing at the Center. Parents are responsible for the pens and pencils issued to their children. Broken and lost pens and pencils may be exchanged for new ones by speaking to staff or completing a Resident Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests". Writing paper is available at the activity and bedroom floor courtesy decks or by completing a Resident Request form. Arts supplies (colored pencils, crayons) are available at the activity floor and bedroom floor courtesy desks. Parents must supervise young children using art supplies so as to not deface Center property. Residents may also purchase writing instruments and paper through the Center commissary.

GENERAL SAFETY/EVACUATION DRILLS

Center staff makes every effort ensure the safety of all residents and staff. Residents also have a responsibility for aiding in their family's safety in the following ways:

- Clean up your and your family's spills or request staff assistance to do so;
- Pay attention to posted warnings, such as wet floor signs and use reasonable care when in these areas;
- Notify staff immediately if a fire, emergency or other possible hazard is observed.

During an emergency, loud alarms may sound and bright lights may flash. At these times, residents must refrain from conversation unless it is directed to staff and concerns the immediate issue at hand. Your and your family's safety depends on your ability to hear, understand and follow staff direction during an emergency. During an emergency, staff is required to evacuate all residents and staff to a predetermined outdoor evacuation location. Staff will confirm everyone has left the building by counting the residents and staff when they arrive at that location. If your children were not in your presence when the emergency occurred, you will reunite with them at the outdoor evacuation location. The outdoor evacuation location is next to the resident soccer field. Please familiarize yourself with the diagram posted at the recreation door which shows the location of the outdoor evacuation location. There are exit diagrams posted around the Center which show the location of all emergency exits. Study these diagrams carefully and become familiar with their locations. Should an emergency occur and you are near a fire exit, do not wait for staff – go down the fire exit to the outdoor evacuation location and wait for staff to arrive. Per local, state and federal laws, the Center is required to perform evacuation drills. The Center performs several drills each month, at varied times of the day and night. These drills are not designed to inconvenience residents, but rather to

comply with regulations and ensure resident and staff safety in the case of an actual emergency. Parents should advise and discuss these drills with their children.

RESIDENT CENSUS

At this Center, resident accountability is done through residents reporting for censuses 3 times during each 24 hour period. Census times are:

6:30am TO 7:30am

3:00pm TO 4:00pm

7:30pm TO 8:00pm

Residents will report to the bedroom floor courtesy desk as family units during the times listed above. If residents are at an appointment near the close of the census time, the staff supervising the appointment will report the resident's location. Residents who do not check in properly during census will be counseled regarding the requirement.

THE CENTER LAYOUT

The Center is comprised of two floors and an outdoor campus. The first floor, where you first entered the Center is the activity (A) floor and the second floor is the bedroom (B) floor. The outdoor campus is outlined by a post and rail fence.

Activity Floor (A Floor):

- Center Administration
- Visitation
- Court
- Library
- Internet Café
- Children Education
- Chapel
- Caseworkers' Office
- Supervisors' Office
- Adult Education
- Phone Room
- Indoor Recreation Room
- Resident Fitness Room
- Toddler Room
- Art and Activity Rooms
- Movie Room
- Additional Laundry (use with supervisor approval)
- Additional Showers (use with supervisor approval)
- Day Room
- Game Closet
- Kitchenette
- Table Games
- Outdoor Campus

Bedroom Floor (B Floor):

- Bedrooms
- Phone Room (open 24/7)
- Law Library (open 24/7)
- Day Room
- Game Closet
- Table Games
- Dining Room
- Medical Clinic
- Showers
- Laundry
- Kitchenette

MEALS

All menus are designed to be nutritionally balanced and are approved by a certified dietician. Residents are provided 3 meals each day in the dining room, located on the bedroom floor:

Breakfast 6:30am -8:00am

Lunch 12:00pm -1:00pm

Dinner 5:30 pm – 6:30 pm

Seating in the dining room is not assigned. Residents may sit wherever they desire for each meal. High chairs and booster seats are available in the dining room. Small children are expected to be seated during meals to encourage sound eating habits.

Residents are required to be present in the dining room from:

7:30am to 8:00am

12:00pm to 1:00pm

5:30pm to 6:30pm

Utensils and trays used in the dining room are not disposable. At the end of each meal, residents are required to clear their family's immediate area and return all utensils and trays to be cleaned. Residents are allowed unlimited trips to the self-service bars in the dining room, and it is your responsibly to eat what you take, to reduce food waste. All food or drink must be consumed during the meal – no food or drink may be taken from the dining room.

KITCHENETTES

Fruit, snacks and drinks are available 24 hours a day at the activity and bedroom floor kitchenettes. Residents are not allowed to take more food or drinks from the kitchenettes than they will consume at one sitting. This food is replenished several times a day so there is no need to hoard kitchenette food.

SPECIAL DIETS

Therapeutic/medical diets shall be prepared and provided according to the orders of the Center medical department physician. Religious diets shall be prepared and provided for residents whose religious beliefs require the adherence to religious dietary laws.

Residents are required to meet with the Center Chaplain for religious diet approval. See the section on the Chaplain for more information.

RELIGIOUS SERVICES

All residents have access to religious resources, services, instructions and counseling while residing at the Center. These services include individual counseling, group prayer, Bible study and various church/worship services. These onsite religious services are provided through outside religious organizations and community volunteers. The Center Chaplain addresses all questions or concerns regarding religious opportunities or practices and will assist in obtaining materials on various faiths and may be able to facilitate visits by ministers of particular faiths. Outside religious persons may also freely visit with residents either by appointment made by the Chaplain, or during visitation hours. See the section on visitation for more information. There is a nondenominational chapel on the activity floor which is open during free movement hours for all residents to worship. Should you wish to worship at other than free movement hours, speak with the chaplain and he will make arrangements if possible. A schedule of scheduled services is posted at the Resident Information Center and outside the chapel. These services are open to all who wish to attend and are only limited by the occupancy of the chapel. If this occurs, additional arrangements will be made. In some situations, it is possible for residents to go off site for religious services. Should you wish accommodation such as for special religious observances, speak to the Chaplain who will coordinate the request if possible.

CHAPLAIN

The Chaplain is available at the Center Monday through Friday, from 9:00am to 3:00pm and by appointment. Residents may request appointments with the Chaplain by speaking with him, or by completing a Resident Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests".

MEDICAL SERVICES

We want you to be healthy during your stay. The Center provides appropriate and necessary health care on site 24 hours a day in the medical clinic located on the bedroom floor. The Center medical clinic is run through the U.S. Public Health Service, by the division called Immigration Health Services Corps.

EMERGENCY MEDICAL SITUATIONS

If you ever feel that you are having a medical emergency and/or need immediate medical attention while at the Center, notify any staff member and medical will respond. If you cannot go to staff due to your medical situation, request any resident in the area to alert staff to help you.

SICK CALL

Sick call forms are no longer used at this facility. If you need to request an appointment for medical or mental health care, please report to the medical clinic between 7:30 AM and 8:00 AM, seven days a week. Please report to the staff located in front of the clinic and bring your ID card.

DENTAL SERVICES

Upon admission, all residents are given an initial dental examination by medical staff. Additionally, all children receive a full dental cleaning within one month of admission. Adult residents who reside at the Center for at least 6 months receive a full dental cleaning. Any dental issues identified during the initial dental examination and/or cleaning will be scheduled for additional dental services. Additionally, any resident experiencing new dental issues during their stay should submit a sick call slip as described above or if urgent, immediately notify staff for medical attention. Examples of dental urgencies are dental infections, painful teeth, facial swelling and trauma to teeth.

MENTAL HEALTH SERVICES

Immigration standards require all children to be seen regularly by the medical department to ensure their continued mental wellness. Additionally, the social workers are available for counseling of adults and children by request. Residents may submit a request to see a mental health social worker by completing a sick call as indicated above. Any residents who have concerns as to their child developmental status or progress may bring these concerns to the attention of medical staff or their caseworker.

ROUTINE OVER THE COUNTER MEDICINES

Should you have a situation such as a headache, stomachache or other situation where you feel you need medication immediately (Tylenol, Advil, cold and flu medications etc.), see a staff member and they will take you to medical. You will be able to receive one dose of medication and will be given instructions on how to request more if the situation continues.

MEDICATIONS

If you arrived with any medications, they were forwarded to the medical department. Medical staff will prescribe and order new medication(s) as needed for your medical condition(s). All prescribed medications will be distributed in the medical department at standard times during the day as directed by the medical provider. The current times designated for medications are:

6:00am - 8:00am
11:00am - 1:00pm
4:00pm - 6:00pm
7:00pm - 9:00pm

When the medical provider prescribes a medication for the resident "as needed" it is the resident's responsibility to speak with a staff member to be escorted to medical to take their medication.

MEDICAL DEPARTMENT CONDUCT

The general rules of conduct at the Center will be followed while in the medical department. Parents are required to supervise their children at all times. The clinic is a busy place, parents are to keep their children in sight at all times and ensure that they are not engaging in any activity that may lead to an injury such as running around or jumping off chairs. There may be medical equipment in the area such as scales; parents are to ensure that their children are not playing with these items.

MEDICAL CARE COMPLAINTS

Residents are encouraged to discuss their medical care with the medical staff and ask questions. Residents with concerns about their care are to complete a sick call slip with a request to speak to the doctor. If, after meeting with the doctor and/or staff, residents not satisfied with the outcome may choose to file a medical grievance. These grievances are submitted to the Health Services Administrator (HSA). See the section on grievances for more information. The HSA will provide a written response within 5 days.

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION

ICE has a zero tolerance policy against sexual abuse and assault. The Center has a Sexual Abuse and Assault Prevention and Intervention Program in place to protect residents and staff. If you feel unsafe at any time during your stay at the Center because of threats of sexual abuse or assault, or if you are sexually abused or assaulted, you should immediately advise any member of the staff for assistance. If you are sexually abused or assaulted, the medical department will provide appropriate treatment and counseling. There is also sexual abuse and assault information at the Resident Information Center. On site IHSC social workers provide counseling and/or assistance at resident request. Additionally, residents feeling in danger may do one or all of the following:

- Report your concern to any member of the staff;
- File an emergency grievance stating the nature of your problems and your emergent needs. See the section on grievances for more information;
- Contact ICE by completing an ICE communication form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "ICE";
- File a complaint directly to the Department of Homeland Security;
- Contact the Office of the Inspector General (OIG) through the free phone call system, or by:

Writing **DHS OIG HOTLINE**
245 Murray Drive, S.E., Building 410
Washington, D.C. 20538
E-mailing **DHSOIGHOTLINE@DHS.GOV**
Telephoning: **1-800-323-8603**

- Notify a relative, friend or your attorney and request contact ICE or OIG on your behalf.

RESIDENT CHORES

Communal residential bathrooms, shower rooms and other resident programming areas are cleaned daily following a chore schedule, which is posted by the laundry room door on the bedroom floor. These chores are similar to activities you would do if you lived in the regular community. Chores are usually done after breakfast or lunch. Staff will remind residents when organized chores begin. Staff will issue residents the proper cleaning supplies and protective equipment at the start of each cleaning session. All cleaning supplies will be placed in appropriate storage locations when not in use. Residents are not allowed to keep cleaning chemicals in their rooms or place them in a secondary container such as a milk carton, water or juice bottle.

TELEPHONE ACCESS

There are telephones on both floors of the Center. Telephones on the activity floor are available during free movement hours and the telephones on the bedroom floor are available 24 hours a day. Collect calls, calling card calls and ICE free access calls may be made from any of the telephones. The Center does not monitor or record conversations on any of the telephones. Phone cards may be purchased by signing up on the phone card request sheet posted outside the caseworkers' office on the activity floor. Residents may also receive phone cards through the mail. There are sanitizing wipes available to clean the phones before or after use. Accommodations shall be made for residents with communication impairments (ex: hearing/speech impaired), or residents who wish to communicate with such persons by speaking with your caseworker or completing a Resident Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests". To ensure that all residents have the opportunity to use the telephones, calls should be no longer than 20 minutes in length when other residents are waiting. If you have any issues using the phone system, if a telephone is not working properly or if the ICE free call access system does not appear to be working, report the issue to staff and they will assist you in rectifying the situation. Friends and family may call the Center to leave messages for residents. The number to call is 610.396.0310 extension 2400. Emergency messages will be delivered to the resident as soon as possible and non-urgent messages will be delivered within 24 hours.

ICE FREE ACCESS TELEPHONE CALLS

Residents may contact a variety of organizations at no cost, through the ICE free access telephone system. See the information posted in the telephone rooms and Resident Information Center for instructions on calling consulates, immigration courts, the American Bar Association, the ICE Public Advocate Hotline, the Office of Inspector General and a variety of other government and non-governmental offices. If you need help using the system speak with your caseworker or complete a Resident Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests".

INDIGENT RESIDENT TELEPHONE ACCESS

In addition to free calls available using the ICE free access telephone system, indigent residents may also make free calls to legal assistance organizations, family and other necessary calls, by speaking to a caseworker or completing a Resident Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests".

LEGAL ASSISTANCE TELEPHONE ACCESS

Telephone calls to your legal provider and courts are not monitored or recorded at any time. To access a more private area from which to make legal assistance calls, speak to a caseworker or complete a Resident Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests".

COMPLAINT AND GRIEVANCE PROCEDURES

Staff will not harass, discipline, punish or otherwise retaliate against a resident who files a grievance or complaint. Any allegations of this nature will be thoroughly investigated by the Executive Director. Residents have access to the formal grievance system at all times, but are encouraged to try to resolve small complaints informally whenever possible.

Informal Process - The informal route involves discussing the issue with staff in an attempt to resolve the matter. You may choose to speak with staff, your caseworker, or supervisor. You may also submit your complaint on a Resident Request form, which the caseworkers will review and attempt to resolve. The informal route is less time consuming than the formal route so may offer resolution more quickly. If you are dissatisfied with the response, you may file a formal grievance as outlined below.

Formal Process - If you do not receive a resolution through the informal process, or wish to bypass the informal process, you may file a grievance on a grievance form. These forms are available at the Resident Information Center. If you attempted to resolve the matter first informally, please indicate on the grievance form who you spoke with informally. Grievance forms should be completed and placed in the locked mailbox at the Resident Information Center marked "Grievance". Only the grievance officer has access to this mailbox, and will keep your grievance as confidential as possible. This mailbox will be checked and emptied each business day. If a resident feels the grievance is of a sensitive nature or that their safety or wellbeing would be jeopardized if others read the grievance, they may seal the form in an envelope and deliver it directly to the Executive Director. See a caseworker for an envelope if needed and their assistance in meeting with the Executive Director. Grievances should be filed as soon as possible after the alleged incident. Delays in filing may make it more difficult to investigate the issue. Residents may ask other residents, family members, legal representatives or staff for assistance in completing the grievance form. Residents are not allowed to submit a grievance on behalf of another resident unless they are the parent of the resident who has a problem. Residents may write about one single complaint, or several closely related complaints concerning a single subject on each grievance form. When completing the form, residents should try to clearly identify the issue, complaint or area of concern. If

the form is not clear, it will be returned for further information. The grievance officer will meet with the resident, conduct an investigation and return a written decision to the resident within 5 business days of receipt of the grievance. If the resident disagrees with the grievance officer's decision, the officer will submit the grievance and decision to the Executive Director within 5 business days of issuing the decision on the resident. Prior to submission the resident must complete the section on the grievance form described as "State Reason(s) for Appeal" and return it to the grievance officer at that time, or by placing the completed form in the locked mailbox at the Resident Information Center marked "Grievance". The Executive Director will render a written decision on the appeal within 5 business days of receipt. Residents dissatisfied with the Executive Director's response to their grievance, may appeal the decision to the Resident Grievance Committee (RGC). The RGC will review the information, and the resident will be offered the opportunity to present their case to the committee. Within 5 business days of reaching a decision, the RGC will serve the resident with the written decision and basis of the decision. If the resident disagrees with the RGC decision, they may appeal to ICE by filling out an ICE communication form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "ICE".

EMERGENCY GRIEVANCE PROCEDURES

An emergency grievance is initiated when a resident verbally notifies staff that that they have a complaint which immediately affects their safety or welfare. The staff receiving the resident's report will bring the matter to the immediate attention of the Executive Director and ICE for action.

NON-GRIEVABLE MATTERS

The following matters are not grievable through the Center grievance procedure:

- State and Federal Court decisions;
- State and Federal laws and regulations;
- Final decisions on grievances;
- ICE policies, procedures, or decisions (i.e., institutional transfers, releases, removals etc.);
- Disciplinary hearing decisions. Disciplinary appeals may be submitted on the disciplinary form after the hearing.

Residents who demonstrate a pattern of filing nuisance complaints or otherwise abuse the grievance system may have those complaints returned unprocessed.

STAFF MISCONDUCT

Residents may report staff misconduct directly with the Department of Homeland Security, Office of Inspector General by calling directly dialing 1-800-323-8603, by using the free call system programmed into the telephones or writing to:

**Department of Homeland Security
Office of the Inspector General
245 Murray Drive, S.E., Building 410
Washington, D.C. 20538**

CONTRABAND

Contraband is any material prohibited by law or regulation or that can cause physical injury, is inherently dangerous as a weapon or tool of violence, affects the safety of the Center residents or staff, or creates dangerous or unsanitary conditions in the Center. Examples would be: knives, guns, flammable liquids, keys, intoxicants, prohibited currency, controlled substances, cigarettes, alcohol, scissors, pornography, any medications, food or drink brought to the Center, etc. Any item that is deemed contraband shall be seized by staff. If the contraband is not illegal under criminal statutes and would not otherwise pose a threat to security, the staff will inventory and receipt the property, and store with the resident's other stored personal property. Religious property will not be treated as contraband or seized without consultation with the Center Chaplain and the Executive Director. However, if a religious item is deemed contraband, it will be seized and disposed of in accordance with contraband disposal procedures. Staff will discard all food (including uneaten fast food, drinks, and opened baby food or formula) at the time of admission. When the ownership of a contraband item is in question, an investigation will be conducted to determine ownership. Staff shall inventory and store the item(s) pending verification of ownership. The resident shall have 7 days to verify ownership of the listed item(s). If a resident cannot establish ownership and/or ownership cannot be reasonably established, the property may be destroyed.

DISCIPLINARY PROCEDURES

Prohibited acts are divided into three categories: "Major," "Moderate," and "Low." The sanctions authorized for each category will be imposed only if the resident is found to have committed a prohibited act and no other method of behavioral modification has been found to be effective. Due to the family residential nature of the Center, sanctions are used as a last resort and only as a means to correct behavior that threatens the safety and welfare of residents, staff, and visitors. Action or attempted action by any resident which violates established Center rules or poses a threat to the safety and orderly operation of the center shall be dealt with through appropriate disciplinary action. Action or attempted action by any resident which violate the laws of the United States may also be actionable in a United States criminal court of law.

Staff will attempt to correct minor violations of Center rules informally through conversation and counseling whenever possible. This informal procedure may include consequences which are mutually acceptable by the resident and staff, such as temporary floor restrictions, privilege loss, and for children, time outs. Children will only be interviewed concerning violations in the presence of their parent (unless the allegation involved in incident between a parent and child). Discipline will never be of a nature or administered in a way that is degrading or humiliating to residents. Staff will never impose the following sanctions: corporal punishment; deviations from normal food services; denial of legal assistance; deprivation of correspondence, telephone, or visitation privileges; deprivation of physical exercise or access to recreation, deprivation of school or education. No punishment shall require confinement in any locked room or space. Only in mental health situations may deprivation of clothing, bedding, or items of personal hygiene occur and if so, these decisions will be made by the medical

department. In the event a staff member believes that a resident is committing an offense that cannot be handled through the informal procedure, the staff member will complete an incident report. A supervisor will begin an investigation of incident reports within 24 hours of receipt. Residents under investigation have the right to:

- Remain silent during every stage of the disciplinary process. Silence will not be used to support a finding against the resident;
- Receive the Incident Report / Notice of Charges at least 24 hours before the start of administrative proceedings;
- To have an initial hearing before a Management Review Committee (MRC) within 24 hours of receiving the Notice of Charges for low to moderate violations.

During hearings before the MRC, residents have the right to:

- Present evidence and statements on their own behalf;
- Attend the hearing (except deliberation), unless behavior poses a safety concern;
- Have an interpreter present if the hearing is in a language not understood by the resident;
- Appeal the committee's determination through the appeal process.

Incidents involving serious violations of Center rules, or unresolved cases will be referred to an Executive Review Panel (ERP). During hearings before the ERP, residents have the right to:

- Call witnesses and present evidence and statements on their own behalf;
- Attend the hearing (except deliberation), unless behavior poses a safety concern;
- Have an interpreter present if the hearing is in a language not understood by the resident;
- Request a staff representative to assist in the case;
- Waive the hearing and admit committing the offense in question;
- Appeal the committee's decision through the appeal process.

DISCIPLINE HEARING APPEALS

Residents may appeal disciplinary panel decisions following their hearing by giving their written appeal to one of the panel members. The panel will submit the appeal to the Executive Director who will provide an immediate written response.

DISCIPLINE PROCEEDING POSTPONEMENTS

Disciplinary proceedings may be postponed for reasons such as defense preparation, physical or mental illness, security concerns, escape, disciplinary transfer, pending criminal prosecution, etc.

CORRECTIVE SANCTIONS FOR CHILDREN

Sanctions 1 through 4 below may be imposed by the MRC. Sanctions 1 through 5 may be imposed by the ERP.

1. Referral to Counseling
2. Restriction to Housing Area, not to exceed 72 hours
 - a. When a child is restricted to housing, they must be afforded a minimum of one hour of outdoor activity time daily.
 - b. The child may be restricted to the dayroom area but may not be forced to remain in his/her room except during a time out period.
 - c. No sanction may restrict a child from attending required school classes or religious practices.
3. Children 12 years old and older may have their free movement privilege suspended for up to 14 days. Such a suspension would require that the parent supervise all activities for that time period.
4. Loss of extracurricular activity time such as movie night.
5. Loss of field trip privileges for up to 45 days.

Corrective action may not interfere with such daily functions as eating and sleeping. Disciplinary actions may not adversely impact a child's health, physical or psychological well-being or deny a child regular meals, sufficient sleep, exercise, medical care, the right to correspondence, or legal assistance.

CORRECTIVE SANCTIONS FOR ADULTS

Sanctions 1 through 4 below may be imposed by the MRC.

Sanctions 1 through 5 may be imposed by the ERP.

1. Referral to Counseling
2. Require attendance in Parenting Classes
3. Additional work details such as: General housekeeping
4. Loss of Commissary
5. Restriction to housing Area, not to exceed 72 hours.
 - a) Imposition of such a sanction must take into account the ages of children and the negative impact this sanction would have on minor's who were not involved in the charged offense.

DESCRIPTION OF OFFENSES

LOW OFFENSES

(101) Being in an Unauthorized Area - Being in an area that is designated through verbal, written, or posted orders as "off limits" to residents.

(102) Disorderly Conduct- Behavior such as loud talking, yelling, or pushing which disrupts the orderly running of the facility.

(103) Failure of Parent/Legal Guardian to Appropriately Manage Children's Behavior - For parents who allow their children to be unruly, disrespectful, or insubordinate while in their presence.

- (104) Failure to Follow Verbal or Posted Rules and/or Regulations- Not following specific rules and/or orders which have been designated for the clean, safe, orderly operation of the facility which residents have been told in advance through posting or have been given verbally by an employee of the facility or person who has charge of the resident at the time. This includes not following the procedures established by the facility for taking count.
- (105) Fighting - Exchange of words or body contact in anger wherein no injury requiring medical attention occurs, such as horseplay.
- (106) Gambling - Operate or act in any game of chance involving betting or wagering of goods or other valuables.
- (107) Possession of Gambling Paraphernalia- Having in one's control, items for use in operating or acting in any game of chance involving betting and wagering of goods or other valuables.
- (108) Self-Mutilation -Inflicting injury on one's self; such as cutting on one's own body or tattooing.
- (109) Smoking - Smoking tobacco of any form in any area of the facility.
- (110) Unauthorized Receipt or Possession of any Item of Value- Receiving or having in one's possession any item of value which has been obtained through false pretenses, threats, or stealing.
- (111) Unexcused Absence from Place of Assignment- Being away, without authorization from an appropriate supervisor, from the place of assignment such as housing area, recreation area, health services, etc.
- (112) Use of Vulgar, Abusive, or Obscene Phrases/Language
- (113) Failure to Maintain Personal Hygiene or Personal Hygiene of Child - Not having a clean body or clothes.
- (114) Unsanitary and Disorderly Housing Conditions- Not keeping a clean, neat living area. The area should be kept in a manner so that all possessions are stored in an organized manner in areas designated for such. The area should be free from dirt and clutter.
- (115) Possession of Non-Dangerous Contraband (Soft Contraband) - Possession of contraband items that are not allowed at the facility but are not capable of causing serious injury or harm to self or others, including tobacco products.
- (116) Unauthorized Use of Telephone- Using the telephone during unauthorized times.
- (201) Refusal to Submit to a Reasonable Suspicion Drug Test- Not providing a urine sample for use in reasonable suspicion drug testing.

MODERATE OFFENSES

- (202) Positive Reasonable Suspicion Drug Test-Testing positive for an illegal drug or un-prescribed controlled substance.
- (203) Theft - Unauthorized taking of something that belongs to someone else.
- (204) Destruction, Alteration, or Damage to Property (Under\$1,000.00) - Destroying, changing or hurting property of the facility or any other person.
- (205) Forgery or Unauthorized Reproductions of Documents or Articles (Excluding Money) - Counterfeiting, forging, or reproducing without approval, any document, article, identification, or security documents.

(206) Hindering an Employee in the Performance of Their Duties- Acting in such a way to interrupt an employee during their work time such as causing delays or giving false information.

(207) Refusal to Submit to a Reasonable Suspicion Search.

(208) Child Neglect- Failure to give care and proper attention to a child (Non-Injury)

(209) Verbal Sexual Harassment of a Resident. Acting in such a manner as to create a hostile residential environment for other residents regardless of age or gender.

MAJOR OFFENSES

(301) Arson - Starting or causing to be started a fire which could or does cause damage to person(s) or property.

(302) Assault/Battery-A non-sexually related attack upon the body of another person with the intention of harming or causing serious injury.

(303) Rape-Sexual contact of any person without his or her consent, or of a person who is unable to consent or refuse; and contact between the penis and the vagina or the penis and the anus including penetration, however slight; or contact between the mouth and the penis, vagina, or anus; or penetration of the anal or genital opening of another person by a hand, finger, or other object (i.e. penetration or oral sodomy).

(303) Sexual Assault- Abusive contact of any person without his or her consent for the purpose of sexual gratification or arousal or of a person who is unable to consent or refuse; and intentional touching, either directly or indirectly or through the clothing, of the genitalia, anus, groin, breast, inner thigh or buttocks of any person. Sexual assault excludes incidents involving penetration or oral sodomy.

(304) Attempt/Conspiracy to Commit a Major Offense-An offense for residents who do not actually commit the offense but participate in one (1) or more of the following ways:

(304a) Attempts to commit the major offense;

(304b) Solicits another or others to commit the major offense;

(304c) Conspires with another or others to commit the major offense; and/or

(304d) Facilitates the action of another or others in committing the major offense.

(305) Child Abuse - Treating a child cruelly, roughly, wrongly, improperly, or in an insulting manner.

(306) Child Neglect - Failure to give care and proper attention to a child resulting in endangerment or injury to a child.

(307) Confirmed STG Affiliation/Activity-Affiliated or participating in a gang-related activity.

(308) Counterfeiting, Forgery, or Unauthorized Reproduction of Money

(309) Death of Any Person - Any act of which the end result is the death of any person including employees, visitors/volunteers, and/or other residents.

(310) Destruction, Alteration, or Damage to Property (\$1,000 or more) - Destroying, changing or hurting property of the facility or any other person.

(311) Hostage Taking- Holding a person(s) against their will as a security for the fulfillment of certain terms.

(312) Escape-Leaving the grounds of the facility or from the custody of an employee outside of the facility without permission.

(313) Insurrection -Participation or encouraging another to participate in unauthorized activity such as protesting or rioting.

(314) Possession of Dangerous Contraband (Hard Contraband) - Possession of contraband items that are not allowed at the facility and are capable of causing serious injury or harm to self or others. This includes deadly weapons, items altered to be used as weapons, drugs and drug paraphernalia.

(315) Sexual Misconduct - This includes, but is not limited to, the following acts:

(315a) Exposing the genitals or buttocks to an employee, visitor/volunteer, or resident for the purpose of sexual gratification or arousal.

(315b) Masturbation where an employee, visitor/volunteer, or other resident can see the act

(316) Intimidating or Threatening Another with Harm - Telling someone, through actions or words, that harm will come to them.

(317) Possession of Drugs or Intoxicants-Possession of any drugs or intoxicants which have not been prescribed or approved by the health services department for use.

(318) Violation of any Federal, State, or Local Law-Any act, though not specifically listed in this policy, that would be considered either a felony or misdemeanor under federal laws or under the state laws in which the resident is housed.

EDUCATION

The Center operates an on-site school which is taught by the Berks County Intermediate Unit. Classrooms are located on the activity floor of the Center. The Center school provides educational services to all children who are at least 4 years old on September 1 of the current school year. Attendance in the educational program is mandatory and is provided in a structured classroom setting Monday through Friday. The basic academic areas include science, social studies, math, reading, writing, and physical education. Generally, children 4 to 5 years old will participate in a half day preschool program, and children 5 to 18 years old will participate in a full day academic program. All children 5 years old and over will be tested upon their admission to the Center and placed into the appropriate classroom. Parents are required to physically drop off their children in the proper Center classroom at 8:40am, Monday-Friday when school is in session. Parents must return to their children's classroom at 3:15pm each school day to pick up their children, unless otherwise told by staff of schedule changes. School holidays and breaks will be announced and posted.

SPECIAL NEEDS INFORMATION

Although each child is evaluated for special needs after admission, parents who believe their children may have educational deficiencies or learning disabilities, may also initiate a special needs evaluation request. Parents may request this evaluation by speaking with their child's teacher, a caseworker, an IHSC social worker or by completing a Program Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests". The educational unit will meet with the parent and test the child; if found to be eligible for special needs instruction, the child will receive an Individual Educational Plan (IEP). The child's educational program, and any necessary modifications, will be driven by their IEP.

MARRIAGES

You or your legal representative may request permission to have a marriage ceremony while at the Center from the Chief of the Juvenile and Family Residential Management Unit in writing. The request must specifically state:

- That the resident is legally eligible to be married;
- That he or she is mentally competent, as determined by a qualified medical practitioner;
- That the intended spouse wants to marry the resident, as attested by a written affirmation of intent to marry the resident by the intended spouse.

The affirmation must be included as part of the request. Failure to obtain approval from the Chief, JFRMU could result in a delay or cancellation of any ceremonies or approved visits for the purpose of marriage. (See ICE for more information.)

COMMISSARY

If you have funds on your Center account, you are allowed to purchase items from the Center commissary by completing a commissary order form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Commissary". Once your order has been confirmed and approved, your commissary package will be available for pickup. Please see the Resident Services information at the Resident Information Center for more commissary information and current order and delivery day.

COMMISSARY GUIDELINES

Only the head of household can submit a commissary order. Upon receipt, it is your responsibility to ensure that you have received the items that you ordered. Any problems with the order must be reported to a Supervisor immediately after receiving the order. All commissary transactions are final when completed. A transaction is complete when the resident checks his/her merchandise and signs his/her receipt. No exchanges are permitted. The commissary does not give credit. Residents must have sufficient funds on your Center account to pay for items ordered. A resident's commissary slip will not be changed after it is placed into the Commissary mailbox. There is a \$100.00 spending limit per family, per week (excluding special purchases). Any item bought from the commissary must be for use by the family making the purchase.

FINANCES

Residents are not allowed to have money or funds in their possession while at the Center. Upon admission, all U.S. currency was deposited into an account which you have access to during your stay here. Any non U.S. currency was placed into your stored property. You will receive a receipt for any funds processed during your stay at the Center. Residents may receive funds (cash or checks/money orders made out to the resident) from family and friends by having them mailed to the Center address located at the front of this handbook. (Cashier's checks are recommended). If you choose to participate in the work program, those payments will also be deposited into your account. You may also receive funds during visits. These funds must be turned over to staff prior to the visit

to be placed in your account. You may use these funds to purchase phone cards, commissary items and other items needed during your stay at the Center. Residents coming from another center will have their funds credited to their account within 24 hours of the arrival of those funds. Upon discharge, residents will receive the balance of any funds they have in their Center account in the form of a check.

VOLUNTARY WORK PROGRAM

Adult residents may participate in the Center's voluntary work program. Prior to starting the voluntary work program residents must obtain a medical clearance. Speak to the medical department concerning this clearance. Residents will receive any necessary training and are required to sign a voluntary work program statement prior to beginning to work. Residents participating in the voluntary work program will be paid \$1.00 per day for their participation. See your caseworker to sign up for the voluntary work program or complete a Program Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests". Residents may also volunteer for temporary work details that occasionally arise. Temporary work generally lasts from several hours to several days. Residents assigned to special work areas shall be provided appropriate protective clothing and instruction in accordance to the requirements of the job. Work assignments are strictly voluntary. Unsatisfactory work performance and or disciplinary cases could result in removal from the voluntary work program. The following is a list of some of the work assignments and temporary work available through the voluntary work program:

- Kitchen /Dining
- Area cleaning (inside center)
- Area cleaning (outside center)
- Laundry
- Living area cleaning
- Recreation
- Library
- Garden
- Sewing
- Paint detail
- Clothing Room

VISITATION

Residents are allowed social, legal and consular visits as outlined in those related sections in this handbook. All visitors must present US government issued photo identification upon arrival at the Center. At the supervisor's discretion, a minor without positive identification may be admitted if the accompanying adult visitor vouches for his/her identity. Minors will remain under the direct supervision of an adult visitor, so not to disturb other visitors. Disruptive conduct by visitors or residents may cause termination of the visit. Any property brought to the visit to be given to a resident must be turned over to staff for inventorying and receipting. No items may be given directly to a resident during a visit. Residents are not allowed to receive contraband or perishable food items. See the sections on allowable personal property and contraband for more information.

DIRECTIONS TO THE CENTER

From Route 222 (not business Route 222), exit onto 183 North. Travel to the first traffic light (CVS Pharmacy on corner) and turn left onto Leesport Road. At the first stop sign turn right onto County Road. Travel approximately 1 mile to Berks Road and turn left onto Berks Road. Travel to the first parking lot on the left. The Center visitor entrance is at the top of the ramp by the flag pole.

SOCIAL VISITATION

Social visitation is conducted seven days a week from 8:00am to 8:00pm. Residents may have an unlimited number of visits. Generally, visits will be a minimum of 60 minutes per visit. Visits are by appointment only. Appointments are made with the Caseworkers at extensions 2360 and 2361 Monday through Friday, from 9:00am to 3:00pm. The number of visitors per visit may be restricted due to the volume of visits scheduled at that time. Due to staffing, resident medical appointments and activity schedules, visitors will not be allowed to visit without prior approval unless authorized by the Program Director. Visitors may also request a special visitation accommodations if they are traveling significant distances or have other special circumstances. Family, friends and other associates may schedule social visits with residents.

LEGAL AID VISITATION

The Center permits legal visitation 7 days a week, including holidays. On Mondays through Fridays legal visitation hours are from 9:00am through 9:00pm and on Saturday, Sundays and holidays from 9:00am through 5:00pm. Legal visits are by appointment only. Appointments are made with the Caseworkers at extensions 2360 and 2361 Monday through Friday, from 9:00am to 3:00pm. Should a legal aid provider need to arrange an appointment at other than the times listed above, they may contact a supervisor for assistance. Legal visits may proceed through a scheduled meal period. In such cases, the resident shall receive a tray or sack meal after the visit, or may choose to eat during the visit. Attorneys must present a US state issued bar membership card.

Persons allowed during a legal visit:

- Attorneys and other legal representatives;
- Legal assistants;
- Upon presentation of a letter of authorization from the legal representative under whose supervision he/she is working, an unaccompanied legal assistant may meet with a resident during legal visitation hours. The letter shall state that the named legal assistant is working on behalf of the supervising legal representative for purposes of meeting with the ICE resident(s);
- Interpreters to aid the legal representatives or assistants.

CONSULAR VISITATION

The Center permits visits by consular officers at any time. Appointments are made with the Caseworkers at extensions 2360 and 2361 Monday through Friday, from 9:00am to 3:00pm. Should a consular officer need to arrange an appointment at other than the times listed above, they may contact a supervisor for assistance.

VISITOR DRESS CODE

Visitors Age 12 and Older:

- Must wear clothing which covers their shoulders, chest, stomach and all areas of the anatomy between the naval (belly button) and mid-thigh when seated;
- The top or neckline of clothing shall be no lower than the underarm in the front and in the back;
- Sheer (see-through) clothing is prohibited;
- Shoes shall be worn at all times;
- Shirts shall be worn at all times;
- “Gang colors” are prohibited.

LEGAL INFORMATION

LAW LIBRARY / ACCESS TO LEGAL MATERIALS

The law library is located on the Bedroom floor and is open 24 hours a day. No more than 5 residents will be allowed to use the library at any given time. If you cannot access the law library due to the resident limit, speak with a supervisor who will make arrangements for you to use the law library. Any residents not using the library for its intended purpose will be asked to leave. Typewriters and computers are available in the law library for preparation of legal documents and for legal research. The computers contain a “Lexus Nexus” application which has a variety of publications on immigration law and other related publications. There may also be non-governmental organization legal and immigration related research in the bookshelf in the law library. Residents may request off site law related materials by speaking to a caseworker or completing a Program Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled “Requests”. For instruction on accessing the Lexus Nexus application, to sign up for the orientation or for questions concerning using the law library equipment, speak with a caseworker or complete a Program Request form. See staff at the bedroom floor courtesy desk for paper, computer storage disks to store documents and to report malfunctioning of law library equipment.

MATERIALS PROVIDED BY LEGAL REPRESENTATIVES

Documents or other written material provided to a resident during a legal aid visit shall be inspected, but not read. Residents may keep legal materials in their bedrooms. Quantities of blank forms or self-help legal material in excess of that required for personal use may be held for the resident in their property. The resident will be permitted access to these documents by speaking with staff or by completing a Resident Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled “Requests”.

LEGAL ORIENTATION PRESENTATIONS

Legal Orientation Presentations (LOP) are conducted at the Center by volunteer legal aid organizations. They are open to all residents, regardless of the presenter's intended audience, except when a particular resident's attendance would pose a security risk. LOPs are generally held each month. See the LOP information and posted schedule at

the Resident Information Center, see a caseworker or complete a Resident Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests".

FREE LEGAL ASSISTANCE

Pro bono (free) legal assistance may be requested by contacting the pro bono legal assistance organizations listed at the Resident Information Center. The Executive Office for Immigration Review supplies this list. You may also request to speak with the Center's local legal aid assistance group. This signup sheet is located outside the caseworkers' office on the activity floor.

ROUTINE SANITATION AND SAFETY INSPECTIONS

Sanitation and fire safety inspections are conducted weekly in all program areas of the Center. During these inspections, staff inspects for proper sanitary conditions and compliance with other regulations. When inspecting bedrooms during these inspections, the residents living in the room will be requested to be present. Parents are requested to be present when staff are checking their child's bedrooms.

NON-ROUTINE SEARCHES

A non-routine search of housing or programing area is done when there is reasonable suspicion to believe contraband or a threat to resident or staff safety is present. A non-routine search of a resident's bedroom or personal items will only be done after the resident is notified and is present unless exigent circumstances exist (such as in a self-harm situation). In these cases, the resident will be notified after the search is conducted.

SEARCHES OF PERSONS:

- Visual Inspection: A visual search for contraband without physical contact.
- Pat Search: A physical inspection of a resident while clothed. It will only be conducted by a staff member of the same gender. The inspector uses their sense of touch when patting or running the hands over the resident's body. A pat search does not require the resident to remove clothing, although the inspection may include a search of the resident's clothing and personal effects. Pat searches will only be conducted on any resident if there is reasonable and articulable suspicion that they possess contraband. No children under 15 years of age will be the subject of a pat search without the explicit authorization of the Executive Director and JFRMU.

MAIL / CORRESPONDENCE

Residents may send and receive correspondence and a variety of other items through the mail including phone cards, money orders, books, clothing, and other "allowable" items. See those related sections for more information. Residents shall be permitted to receive and send at their own expense:

- An unlimited amount of general correspondence mail. The amount will only be limited when a public safety or Center security and order situation exists;
- An unlimited amount of special correspondence, including correspondence with a legal representative, potential legal representative, courts and other governmental agencies and news organizations. See the section on special correspondence for more information;
- Packages containing personal property. To send or receive packages, speak to a caseworker or complete a Program Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled “Requests”.

INDIGENT RESIDENT MAIL

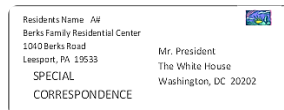
Residents who do not have adequate funds to purchase postage will be permitted to send at no cost:

- A reasonable amount “special correspondence” mail. Should the Center consider the related amount “unreasonable”, the ICE Office of Chief Counsel will be consulted prior to suspending mail postings;
- At least 5 general correspondence letters per week;
- Any packages that are deemed necessary by ICE/ERO, such as clothing, personal items, and items needed for return to country of origin;
- Packages containing personal property when it is determined that space is limited for the proper storage of the items.

SPECIAL CORRESPONDENCE

Special correspondence is written correspondence to or from attorneys and other legal representatives, judges, courts, embassies/consulates, the President and Vice President of the United States, members of Congress, the Department of Justice, the Department of Homeland Security, the U.S. Public Health Service, and representatives of the news media.

- Correspondence will only be treated as Special Correspondence if the title and office of the sender (for incoming mail) or addressee (for outgoing mail) are unambiguously identified on the envelope and the envelope is labeled “Special Correspondence.” Incoming special correspondence must also be marked as “Special Correspondence” on the envelope or package. Residents must instruct anyone sending Special Correspondence to the Center of the related rules and address requirements;



- Special Correspondence may only be opened in the presence of the resident, and may only be checked for contraband, not read;

- Special Correspondence packages may only be sent or received with advance arrangements. To send or receive such a package, speak with your Caseworker or complete a Program Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled “Requests”.

POSTAGE AND ENVELOPES

Postage can be purchased from the Center commissary. See the section on commissary procedures and indigent resident mail for more information. Envelopes will be provided to residents at no cost by speaking with a caseworker or completing a Program Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled “Requests”.

DISTRIBUTION OF INCOMING MAIL

Incoming flat mail will be distributed within 24 hours and packages within 48 hours of receipt when arriving during normal business hours. Incoming packages received on weekends and holidays will be distributed the next administrative business day. All incoming mail should list the resident’s name and A number and have an accurate return address. Incoming general mail will be opened and inspected for contraband only in the presence of the resident, unless waived by the resident or authorized by the Executive Director for security reasons. Incoming general mail may also be read when a specific documented security concern arises with respect to an individual resident. Mail may be rejected if it contains contraband, other items of a security threat or perishable items. Both sender and intended receiver shall be provided written notice with an explanation as to why the mail is rejected and that the mail will be disposed of in accordance with the contraband section in this handbook. The resident and Center Chaplain will be consulted before religious articles are confiscated. Identify documents mailed to the resident will be turned over to ICE for placement in the Resident’s A file. Residents should contact ICE for a certified copy of the document. See the section on contacting immigration for more information.

POSTING OF OUTGOING MAIL

Outgoing mail will not be opened, inspected, or censored unless it is addressed to another resident or alien in a detention facility, or there is reason to believe the item may pose a threat to the facility’s security or orderly operation, endanger the recipient or the public or facilitate criminal activity. Outgoing mail will be posted within 24 hours of the time the mail was turned over to the Center by the resident, excluding weekends and holidays: then it will be posted the next administrative business day. Outgoing mail (containing appropriate postage) may be placed into the “Mail” mailbox at the Resident Information Center. If mail is placed into the mailbox without proper postage, it will be returned to the resident, unless they are indigent. See the section on indigent mail for more information. Mail that does not fit into the slot may be handed to a caseworker or supervisor for processing. All outgoing mail should list the resident’s name, A number and Center address in the return address area. Residents may speak with a caseworker concerning postage requirements.

NOTARY PUBLIC

Notary public assistance may be obtained by filling out a Resident Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests".

PHOTOCOPIES

Photocopies may be obtained by speaking to a staff member, case worker or filling out a Resident Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests". Photocopying services for legal material is available free of charge.

MONEY ORDERS

Residents wishing to send money orders should speak with their case worker or complete a Resident Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests".

HAIR CARE SERVICES

Residents have the opportunity receive a haircut or other hair care service once a week. Hair care services information, including a price list, is located at the Resident Information Center. The signup sheet is located outside of the caseworkers' office on the activity floor. For information about the hair care services, see a caseworker or complete a Resident Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests".

RECREATIONAL PROGRAM

There are a variety of recreation activities offered to residents during their stay at the Center. Residents are expected to take care of supplies and equipment issued to them and to return the items after use. Residents will be held accountable for any recreational or leisure item until it has been returned. The staff schedules specific activities for pleasure and fitness and ask that you cooperate and participate in these activities; and encourage your children to participate. Some of the activities are off site field trips which are scheduled in advance, some are on site activities and are scheduled at particular days and times and others are available for use independently. For more information, see the recreation postings, information and schedules at the Resident Information Center.

RECREATIONAL OFFERINGS

- **Televisions**-There are several televisions placed around the Center for resident entertainment. The televisions allow for both English and Spanish programing and also play music. While there are no specific rules governing what programs will be viewed, residents are expected to be considerate of each other to avoid unnecessary problems regarding their usage. In the event an issue develops, staff will attempt to resolve the problem and may decide to discontinue usage until the

situation can be resolved. The volume of the televisions shall be kept at a reasonable level so as to not disturb other residents or Center operations. During quiet hours, volume should be kept to a minimum. Televisions are not to be removed from their locations or tampered with for any reason. Residents should report any television malfunctioning to the staff so it can be addressed.

- **Social Library**-The social library is located on the activity floor and is open seven days a week during free movement. Residents may read in the library or check out books by taking them to the activity floor courtesy desk. Early readers, young adult, teen, and adult books are available in English, Spanish and other languages. There are also computers available in the social library which are to be used solely for electronic reading. Utilizing these computers, residents may access reading material in their native language. See staff at the courtesy desk for information on using these computers, speak with a caseworker or complete a Program Request form. These forms are located at the Resident Information Center. Completed forms are to be placed in the mailbox labeled "Requests".
- **Toddler Activity Room**- The toddler activity room is located on the activity floor. Residents will find a wealth of toddler toys, games, movies, multilingual board books and educational activities which toddlers may play with in this room.
- **Electronic games** (Wii, Xbox etc.)- Generally staff offers electronic gaming as part of an organized activity, but units may be checked out if available. See staff at the courtesy desk on either floor for information on checking out the electronic games. See recreational postings at the Resident Information Center for information on organized electronic game activities. In the event a problem develops while residents are playing electronic games, staff will attempt to resolve the problem and may decide to discontinue usage until the situation can be resolved.
- **Music and listening equipment**- Music players may be checked out by speaking with staff at the courtesy desks on either floor.
- **Leisure Activities**- The Center provides leisure activities in the dayrooms of both floors. Leisure activities include arts and crafts, table games, board games, cards, educational flashcards etc. You are asked to handle these items with care and to be considerate of others who may wish to use them. These items may be checked out by speaking to staff at the courtesy desks on either floor. Residents should report any loss or breakage to staff so the items may be replaced. Residents must return the items prior to going on to another activity (i.e.: a meal, a visit, a medical appointment, end of free movement etc.)
- **Off-site fieldtrips**- Off site field trips are scheduled regularly to a variety of locations such as area parks, malls, book stores, pet stores, craft events, holiday activities. Look for postings at the Resident Information Center or speak to your caseworker for more information.
- **On site activities**- On site activities are scheduled regularly such as: Toddler activities, movie nights, table game tournaments, outdoor sports tournaments, and electronic gaming. Look for postings at the Resident Information Center or speak to your caseworker for more information.

- **Special Events-** The Center holds dances, carnivals, cookouts, celebrations and birthday parties throughout the year. Look for postings at the Resident Information Center or speak to your caseworker for more information.
- **Internet Café-** The internet bank is located in the lobby of the activity floor and is open during free movement. The internet bank allows for internet and email access and there are word processing, spreadsheet and database programs on the machines. In cases of high demand, residents may only use a machine for a limited period of time each day. See the internet rules posted at the Resident Information Center or your caseworker for more information.
- **Musical Instruments-** There is a piano in the programing space for staff and resident use. Parents are to monitor their children so as to not damage the piano. Other musical instruments may be checked out for use. See staff at either courtesy desk for more information.
- **Cooking Projects** -Adult residents may sign up for cooking projects as posted at the Resident Information Center. Staff regularly offers children the opportunity to participate in cooking projects (no sign up required).
- **Arts and Crafts-** In addition to residents being able to check out arts and craft supplies, staff regularly offers residents the opportunity to make a particular craft which is then put on display around the Center. See your caseworker for more information.
- **Crocheting-** The Center provides yarn, hooks and needles for crocheting. See a caseworker for further information.
- **Organized Classes-** The Center runs organized classes on a variety of topics, such as English as a Second Language and fitness classes. See postings at the Resident Information Center or speak with your caseworker to obtain more information.
- **Lectures-** On occasion, the Center hosts lectures on different topics such as nutrition, finances and lifestyle issues. See postings at the Resident Information Center or speak with your caseworker to obtain more information.

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This handbook has been reviewed and approved by:

Diane Edwards, Executive Director

Date

JFRMU Representative

Date

EXHIBIT 40



Berks County Residential Center Standard Operating Procedures and Policies

Chapter: Sexual Abuse and Assault, Prevention and Intervention **Policy #:** 28.010
Subject: Sexual Abuse and Assault, Prevention, and Intervention **Effective Date:** 7/1/2008
Program: Family Residential Program **Revised Date:** 12/1/2013
Approved: Signature on File
Diane Edwards, Executive Director

Policy

It is the policy of the Berks County Residential Center (BCRC) to adhere to a standard of zero tolerance for sexual abuse and assault of residents and staff. The Residential Center shall report all suspicions, incidents and allegations of sexual abuse and assault in accordance with applicable laws, the current ICE Residential Standard on Sexual Abuse and Assault Prevention and Intervention (SAAPI) and the Prison Rape Elimination Act of 2003. Residents and staff shall be informed of the Residential Center's sexual abuse and assault, prevention and intervention program and the zero tolerance policy. The Residential Center will contact appropriate law enforcement agencies (LEA), U.S. Immigration and Customs Enforcement (ICE) Office of Enforcement and Removal (ERO) representatives, and the ICE Division of Immigration Health Services Corps (IHSC) to provide immediate care of the alleged victim, and when known, custody of the alleged perpetrator. It is imperative that all suspicions, incidents and allegations of abuse and assault be handled with confidentiality and care. It is the Residential Center's responsibility to ensure that the safety and security of residents is maintained at all times, without prejudice. Any suspected, observed or reported activity which falls within the purview of this policy must be reported immediately to the onsite supervisor for further action.

Definitions

Child Abuse

Intentional or neglectful physical or emotional harm inflicted on a child, including sexual molestation, to include a parent or caregiver's act or failure to act that results in a child's exploitation, serious physical or emotional injury, sexual abuse or death, whether intentional or neglectful.

Resident-on-Resident Sexual Abuse/Assault:

Adult on adult non-consensual contact, adult on youth, and youth on youth* contact between the penis and the vagina or anus; contact between the mouth and the penis, vagina, or anus; penetration of the anal or genital opening of another person by a hand, finger or other object; deliberate touching of the genitalia, anus, groin, breast, inner thighs or buttocks, either directly or through the clothing that is intended to be sexual in nature. The use of threats, intimidation, inappropriate touching, or other actions and or communications by one or more residents aimed at coercing and or pressuring another resident to engage in a sexual act. Verbal statements or comments to another resident which are of a sexual nature. Such statements include demeaning references to gender or derogatory comments about body or clothing; or profane or obscene language or gestures.

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*Youth on youth consent status is determined as it relates to title 18, PA Crimes Code section 3100 (Sexual Offenses)

Staff, Volunteers, or Contract Personnel-on-Resident Sexual Abuse/Assault:

Consensual and non-consensual contact between the penis and the vagina or anus; contact between the mouth and the penis, vagina, or anus; penetration of the anal or genital opening of another person by a hand, finger or other object; touching of the genitalia, anus, groin, breast, inner thighs or buttocks, either directly or through the clothing. These contacts between staff, volunteers, or contract personnel (hereinafter collectively grouped as “staff”) and residents amount to sexual abuse regardless of consent. The use of threats, intimidation, inappropriate touching, or other actions and or communications by one or more staff aimed at coercing and or pressuring a resident to engage in a sexual act. Sexual behavior between a staff member and a resident which can include, but is not limited to, indecent, profane or abusive language or gestures, and inappropriate visual surveillance of residents. Verbal statements or comments to a resident which are of a sexual nature. Such statements include demeaning references to gender or derogatory comments about body or clothing; or profane or obscene language or gestures.

Sanctions

Sexual conduct between residents, **regardless of consensual status**, is prohibited and subject to administrative, disciplinary, and criminal sanctions. Care must be taken to not punish a sexual assault victim. Victimized residents should not be subject to disciplinary action for reporting sexual abuse or for participating in sexual activity as a result of force, coercion, threats, or fear of force.

Sexual conduct between residents and staff, **regardless of consensual status**, is prohibited. Staff who violate any provisions of this policy will be subject to administrative, disciplinary and criminal sanctions. Individuals suspected of perpetrating such abuse shall be removed from all duties requiring resident contact pending the outcome of an investigation. Should the investigation find staff is involved in acts described in this policy, they will be subject to disciplinary sanctions up to and including termination. The results of these investigations must be reported to ICE Chief of the Juvenile and Family Residential Management Unit (JFRMU).

Resident Notice of the Sexual Abuse or Assault, Prevention and Intervention (SAAPI) Policy and Related Information

Residents shall have access to the Residential Center’s sexual assault and abuse policy through the resident handbook, the facility’s orientation and postings on facility information boards. The ICE Sexual Assault Awareness notice and pamphlet will be posted on the information board. The notices shall be provided in English and Spanish. Oral interpretation or assistance shall be provided to any resident who speaks another language in which written material is not translated or any resident who is illiterate. The Office of the Inspector General Hotline poster shall also be posted on the information board.

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SAAPI Program Coordinator:

One of the on-site Supervisors will be assigned as the Residential Center's Sexual Abuse and Assault Prevention and Intervention (SAAPI) Program Coordinator. The SAAPI coordinator will:

1. Assist in the development of written policies and procedures for the Sexual Abuse and Assault Prevention and Intervention Program. The Program Coordinator shall also be responsible for keeping such policies and procedures current;
2. Assist with the development of initial and ongoing training protocols;
3. Serve as a liaison with other agencies;
4. Review the results of every investigation of sexual abuse and conduct an annual review of all investigations to assess and improve prevention and response efforts;
5. Review facility practices to ensure required levels of confidentiality are maintained;
6. Coordinate the collection of statistics and reports on sexual abuse or assault, as detailed in the ICE Residential Standard on SAAPI; and
7. Conduct an annual review of aggregate data (omitting personally identifying information) and present the findings to the Field Office Director and Chief JFRMU. The results of this review will determine whether changes to existing policies and practices are necessary to further eliminate sexual abuse.

Staff Training

All staff will be trained on recognition, procedures, prevention, and protocols related to physical and sexual abuse and assault. Training must include:

1. Definitions and examples of prohibited and illegal behavior;
2. DHS prohibitions on retaliation against residents and staff who report sexual abuse;
3. Instruction that sexual abuse and/or assault is never an acceptable consequence of detention;
4. Recognition of situations where sexual abuse and/or assault may occur;
5. Recognition of the physical, behavioral, and emotional signs of sexual abuse and/or assault and ways to prevent such occurrences;
6. The investigation process and how to protect evidence;
7. Prevention, recognition, and appropriate response to allegations or suspicions of sexual assault involving residents with special needs;
8. Instruction on reporting knowledge or suspicion of sexual abuse and/or assault and how to make intervention referrals to the facility's IHSC unit; and
9. Instruction on documentation and referral procedures of all allegations or suspicions of sexual abuse and/or assault.

After initial training, all staff will participate in recertification training on an annual basis.

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Tracking Incidents of Sexual Abuse and/or Assault

The Executive Director shall maintain 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 and/or counseling. These records shall be maintained in individual, confidential, incident files. The Executive Director will provide the SAAPI coordinator with a copy of each file. All such files will be retained in accordance with established schedules. The ICE Residential Standard on Medical Care and the requirements of the ICE Residential Standard on Detention files will be followed.

The Executive Director will keep two types of files. The two types of files will be kept separately.

1. General files shall include:
 - a. The name, A number, date of birth, and country of birth of the (alleged) victim(s), and (alleged) assailant(s) of a sexual assault;
 - b. Crime characteristics;
 - c. Detailed reporting timeline, including the name of the staff member receiving the report of sexual assault, date and time the report was received, and steps taken to communicate the report up the chain of command; and
 - d. All formal and/or informal action taken.
2. Investigative files shall include:
 - a. All reports;
 - b. Medical forms;
 - c. Supporting memos and videotapes, if any; and
 - d. Any other evidentiary materials pertaining to the allegation.

The Executive Director shall maintain these files chronologically in a secure location. He/she will maintain a listing of the names of sexual assault victim(s), suspected victim(s) and assailant(s) or alleged assailant(s), along with the dates and locations of all sexual assault incidents occurring within the center, on his/her computerized incident reporting system. Such information shall be maintained on a need-to-know basis in accordance with the Standards on Medical Care and Detention Files, which includes protection of electronic files from unauthorized access. The facility Administrator shall give assailant(s), alleged assailant(s), suspected victim(s) and victim(s) involved in a sexual assault incident a specific designator to add a layer of confidentiality to the reporting system. Access to the files and system identified above is limited to staff involved in the treatment of the victim(s) or suspected victim(s), the investigation of the incident and to those ICE personnel with a need to know.

Procedures for Staff Intervention and Investigation

Victim Identification

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Primarily, staff learns that sexual abuse or assault has occurred during confinement because:

1. Staff discover an assault in progress;
2. A resident reports he or she was abused and/or assaulted;
3. A resident reports abuse or an assault of another resident, or a resident is the subject of resident rumors;
4. Medical evidence indicates the probability of abuse or an assault; or
5. A resident presents with unexplained injuries, changes in physical behavior due to injuries, abrupt personality changes such as withdrawal or suicidal behavior, or other changes in behavior.

Staff shall conduct themselves with sensitivity toward residents who are victims or suspected victims of sexual abuse and/or assault. Staff shall take seriously all statements from residents claiming to be victims of sexual abuse and assaults, and shall respond supportively and non-judgmentally. Staff should be alert to signs of potential situations in which sexual assaults might occur, and for making reports and intervention referrals as appropriate.

Responding to a suspected victim:

1. If it is suspected that the resident was sexually assaulted, the resident shall be advised:
 - a. Of the importance of getting help to deal with the assault;
 - b. That he/she may be evaluated medically for sexually transmitted diseases and other injuries; and
 - c. That trained personnel are available to assist the resident in accessing additional medical and emotional support services.
2. If a suspected victim is fearful of being labeled an informer, he/she shall be advised that the identity of the assailant(s) need not be disclosed to receive assistance.
3. The staff member who first identifies or suspects that a resident has been abused or assaulted must immediately report their suspicions to the shift supervisor for further action.

Responding to a reported or known victim

1. In allegations or incidents NOT involving any form of penetration, the involved parties will be separated and sequestered and an initial inquiry will be conducted by the on duty shift supervisor.
2. Immediately following the inquiry, the supervisor will verbally inform the Executive Director, Program Director, IHSC, SAAPI coordinator, the highest ranking facility ICE representative, the Chief of JFRMU and Philadelphia Field Office of the allegation / incident and results of the inquiry. The supervisor will follow up the verbal notification with written electronic notification to the above individuals.

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3. IHSC will review the results of the inquiry and evaluate both parties to determine if a sexual assault /abuse violation as defined in this policy occurred and report their findings to the above individuals for further action.
4. In all allegations or incidents involving any form of penetration, or a sexual assault/abuse violation as determined above, the (alleged) victim shall be immediately taken to a IHSC medical professional for observation and care pending further examination, treatment and possible transportation to a local hospital as determined by IHSC and/or at the request of the victim. Escorting staff shall treat the (alleged) victim in a supportive and non-judgmental way. Information about the assault is confidential, and shall be given only to those directly involved in the investigation and/or in treatment of the (alleged) victim.
5. The (alleged) perpetrator, if known, will be isolated from the general population and detained under the supervision of a supervisor or if the supervisor is otherwise occupied, with line staff or an ICE officer until appropriate LEA arrive.
6. The on-site supervisor will verbally inform the Executive Director, Program Director, IHSC, SAAPI coordinator, the highest ranking Center ICE representative, the Chief of JFRMU and Philadelphia Field Office immediately. The on-site supervisor will follow up the verbal notification with written electronic notification to the above individuals.
7. The on duty shift supervisor will begin an initial inquiry and report the findings to the parties listed above.
8. The highest ranking on site supervisor will report the incident to the Bern Township Police Department, Pennsylvania Child Line and the Berks County Children and Youth Services as soon as the initial inquiry has concluded.

Administrative Investigation of the Incident

The Program Director or designee will initiate an internal administrative investigation of the incident as soon as the initial inquiry has concluded. No investigation will be conducted which could potentially impede or compromise a criminal investigation which may take place.

The Program Director and or designee will:

1. Assign staff to supervise and care for the (alleged) victim's child (ren) while the (alleged) victim is undergoing IHSC and / or hospital evaluation.
2. Cordon off the crime scene and assign staff to ensure it is not disturbed prior to LEA arrival.
3. To the greatest extent possible, ensure that residents are not loitering in the area.
4. Assign a staff member to liaison with LEA while they are on site.
5. Begin a review of facility logs to determine if any of the parties to the incident or allegation were off-site at the time of the incident.
6. Begin compiling staff statements as appropriate.
7. Review grievance logs, informational reports, incident reports and facility resident files to determine if any parties to the allegation have had previous complaints or issues while at the Residential Center.

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8. Begin compiling a potential witness listing to be turned over to LEA upon their arrival.
9. Immediately begin a review of the facility's closed circuit camera recordings for the location / time period indicated in the incident or allegation and prepare copies, regardless of whether any activity is observed.

Monitoring and Follow-up

1. The Residential Center, in consultation with IHSC will assess the risk of keeping the victim at the facility and report the determinations to the Philadelphia Field Office and Chief JFRMU.
2. The Residential Center and IHSC shall monitor the physical and mental health of the victim and coordinate the continuation of necessary services.

Berks 02649

A911

EXHIBIT 41



Berks County Residential Center Standard Operating Procedures and Policies

Chapter: Training
Subject: Personal Phones/Devices
Program: Family Residential Program

Policy #: 40.045
Effective Date: 12/10/2013
Revised Date: 12/10/2013

Approved: Signature on File
Diane Edwards, Executive Director

It is the policy of the Berks County Residential Center (BCRC) that all employees follow the procedures involving their personal phones/devices at work.

Procedures:

1. Personal phones/devices are strictly forbidden within the program space (including the outside resident area as well). This program space is to be defined as all active resident areas within the Berks County Residential Center.
2. If there is a need to have a personal phone/device in the building, they should be kept secured in the basement and nowhere within the program space.
3. Personal phones are not to be used on any trips or transports. A facility cell phone will be obtained from the Supervisor office and used for any trips/transport.
4. No cameras/video shall ever be around the residents unless it is approved through the Recreation Department or Management.
5. Personal devices are phones, cameras, e-readers, electronic tablets, electronic notebooks, I-pads, I-pods, portable DVD players, laptops, etc. If any item is questionable whether or not it would be allowed, a question should be directed to a member of Management before use or being brought within the program space.
6. Devices may be used in an approved area while on break, before or after a shift is completed. Any questions on where should be directed to Management.
7. Other items that should not be taken within the program space are but not limited to, anything that would be considered contraband (per policy 2.010 Contraband), personal keys, personal photos, etc.

Berks 02397

A913

EXHIBIT 42

County of Berks

POSITION DESCRIPTION FORM

Position Title: Shelter Care Counselor

Department: Berks County Residential Center **Reports To:** Shift Supervisor
(Title)

Wage Category: Exempt Non-Exempt

EEO-1 **Union**
Category: Protective Service Worker **Classification:** AFSCME-eligible

POSITION SUMMARY:

Provide the residents in the ICE/Family Shelter Program with ongoing care while attempting to understand their situation. Responsible for maintaining the atmosphere of security and safety, which will be accomplished through continued training and interaction with other social service agencies.

POSITION RESPONSIBILITIES:

Essential Functions

- Direct supervision of all aspects of resident's daily activities and scheduled programming. Oversight of resident's compliance with facility policies, procedures, and practices. Mentoring, coaching, and counseling residents.
- Planning for and conducting activities with residents.
- Compiling daily statistical logs and report writing.
- Training

Multi Task Functions:

Employee is responsible for the following at all times

- Provides care for dependent children and families within a minimum secure, residential environment.
- Maintains behavioral security of all residents at all times
- Supervises and interacts with the residents at all times
- Maintains a courteous, respectful, and professional demeanor and atmosphere at all times.
- Acts as a role model.

Effective Date 1/2004

Revision Date

Berks 02908

A915

MINIMUM EDUCATION AND EXPERIENCE:

- Associates degree or 60 credit hours from an accredited college or university with a preferred field of study in one of the following: Sociology, Social Welfare, Criminal Justice, Psychology or any other related social science field.

MINIMUM KNOWLEDGE, SKILLS, AND ABILITIES:

- Working knowledge of the Juvenile Act.
- Working knowledge of Title 55, Chapter 3800, Sections 1-257: Residential Childcare Facility: INS/Detention Standards for Adults, Children and Families: Flores vs. Reno Court Decision.
- Working knowledge of methods, materials, and equipment used in a residential facility.
- Working knowledge of the social and cultural factors that result in institutionalization and the attitudes and group habits of children and families in a residential placement.
- Working knowledge of Microsoft word and general use of computers.
- Ability to supervise all the activities of all residents.
- Ability to interact well with adults and children in normal and emotionally charged situations in a controlled professional manner.
- Ability to keep simple records, prepare progress reports and perform related clerical tasks.
- Must be 21 years of age
- Must pass a criminal history and child abuse clearance
- Must pass a physical and drug screen.

PHYSICAL DEMANDS:

- Ability to physically restrain residents of all ages.
- Ability to run, bend, lift (50lbs.) and carry (50lbs.)
- Ability to sit and stand for up to four (4) hours at a time.

WORKING ENVIRONMENT:

- Duties encompass indoor and outdoor activities, which leads to extremes in temperature, humidity, and precipitation.
- Due to emotional status of residents, the environment can become tense and there is always a possibility of dealing with suicidal behavior.
- Possibility of exposure to contagious diseases.

This position description serves as a guideline for communicating the essential functions and other information about the position to the applicant/employee. It is not intended to create a binding employment contract nor cover every detail of the position and may be changed where appropriate.

Effective Date 1/2004

Revision Date

Berks 02909

A916

EXHIBIT 43

DROIGSA-10-0003
INTERGOVERNMENTAL SERVICE AGREEMENT
BETWEEN THE
UNITED STATES DEPARTMENT OF HOMELAND SECURITY
U.S. IMMIGRATION AND CUSTOMS ENFORCEMENT
WASHINGTON, DC
AND
BERKS COUNTY, PENNSYLVANIA

This Intergovernmental Service Agreement (“Agreement”) is entered into between United States Department of Homeland Security Immigration and Customs Enforcement (“ICE”), and Berks County, Pennsylvania (“Service Provider”) for the Residential care of alien families (“residents”) or juvenile delinquents (“detainees”) while awaiting deportation. The term “Parties” is used in this Agreement to refer jointly to ICE and the Service Provider.

FACILITY LOCATION:

The Service Provider shall provide detention services for residents/detainees at the following institution(s):

**Berks County, Pa
1243 County Welfare Road
Leesport, PA 19533**

The following constitute the complete agreement:

- INTERGOVERNMENTAL SERVICE AGREEMENT (IGSA)
- PROPOSAL, DATED 4/21/08 as modified (Incorporated by reference)
- ATTACHMENT 1—RESIDENTIAL STATEMENT OF WORK
- ATTACHMENT 2—QUALITY CONTROL PLAN (to be inserted at time of award)
- ATTACHMENT 3—QUALITY ASSURANCE SURVEILLANCE PLAN (w/ PRS, CDR and PMT)
- ATTACHMENT 4—STAFFING PLAN (to be inserted at time of award)
- ATTACHMENT 5—LABOR STANDARDS
- ATTACHMENT 6—WAGE DETERMINATION Number 2007-0549, Rev 1 Dated 29 Oct 2007
- ATTACHMENT 7 – ICE/DRO RESIDENTIAL STANDARDS (Incorporated by Reference).

IN WITNESS WHEREOF, the undersigned, duly authorized officers, have subscribed their names on behalf of the Berks County and Department of Homeland Security, U.S. Immigration and Customs Enforcement.

ACCEPTED:
U.S. Immigration and Customs Enforcement

ACCEPTED:
County of Berks, PA

Contracting Officer
Matthew Marshman
Date: _____

[Title]
Print Name: _____
Date: _____

Article I. Purpose

- A. Purpose: The purpose of this Intergovernmental Service Agreement (IGSA) is to establish an Agreement between ICE and the Service Provider for the detention and care of persons detained under the authority of Immigration and Nationality Act, as amended. All persons in the custody of ICE are “Administrative Residents/Detainees”. This term recognizes that ICE residents/detainees are not charged with criminal violations and are only held in custody to assure their presence throughout the administrative hearing process and to assure their presence for removal from the United States pursuant to a lawful final order by the Immigration Court, the Board of Immigration Appeals or other Federal judicial body.
- B. Responsibilities: This Agreement sets forth the responsibilities of ICE and the Service Provider. The Agreement states the services the Service Provider shall perform satisfactorily to receive payment from ICE at the rate prescribed in Article I, C.
- C. Guidance: This is a fixed rate agreement, not a cost reimbursable agreement, with respect to the detainee day rate. The residential/detainee daily rate and fixed monthly costs are as follows:

Criminal Juvenile per day rate (Berks County Youth Center)	REDACTED
Monthly Fixed Costs (March – June 2010)	REDACTED
Monthly Fixed Costs (July 2010 and forward)	REDACTED
Per person/ per day rate	REDACTED

ICE shall be responsible for reviewing and approving the costs associated with this Agreement and subsequent modifications utilizing all applicable federal procurement laws, regulations and standards in arriving at the detainee day rate.

Article II. General

- A. Funding: The obligation of ICE to make payments to the Service Provider is contingent upon the availability of Federal funds. ICE will neither present residents/detainees to the Service Provider nor direct performance of any other services until ICE has the appropriate funding. Orders will be placed under this Agreement when specific requirements have been identified and funding obtained. Performance under this Agreement is not authorized until the Contracting Officer issues an order, in writing. The effective date of the Agreement will be negotiated and specified in an order to this Agreement by the Contracting Officer. This Agreement is neither binding nor effective unless signed by the Contracting Officer. Payments at the approved rate will be paid upon the return of the signed Agreement by the authorized Local Government official to ICE.
- B. Subcontractors: The Service Provider shall notify and obtain approval from the Contracting Officer if it intends to house residents/detainees in a facility other than the Facility named in this Agreement. If either that facility or any future facility is operated

by an entity other than the Service Provider, ICE shall treat the entity as a subcontractor to the Service Provider. The Service Provider shall obtain the Contracting Officer's approval before subcontracting the detention and care of residents/detainees to another entity. The Contracting Officer has the right to deny, withhold, or withdraw approval of the proposed subcontractor. Upon approval by the Contracting Officer, the Service Provider shall ensure that any subcontract includes all provisions of this Agreement, and shall provide ICE with copies of all subcontracts. All payments will be made to the Service Provider. ICE will not accept invoices from, or make payments to a subcontractor.

- C. Consistent with Law: This is a firm fixed rate agreement, not cost reimbursable agreement. This Agreement is permitted under applicable statutes, regulation, policies or judicial mandates. Any provision of this Agreement contrary to applicable statutes, regulation, policies or judicial mandates is null and void and shall not necessarily affect the balance of the Agreement.
- D. Use of Service Provider's Policies and Procedures: The Contracting Officer shall approve Service Provider's policies and procedures for use under this Agreement. Upon approval, the Service Provider can use its policies and procedures in conjunction with the residential/detention standards mandated under this Agreement.
- E. Notification and Public Disclosure: No public disclosures (i.e. press releases, press conferences) regarding this IGSA shall be made by the Service Provider or any of its contractors or subcontractors without the review and approval of such disclosure by ICE Public Affairs and express permission granted by the ICE Contracting Officer.

Article III. Covered Services

Below are the general requirements under this Agreement. Specific requirements for the services under this Agreement are stated in the attached Statement of Work. See Attachment 1.

- A. Bedspace: The Service Provider shall provide male/female beds on a space available basis. The Service Provider shall house all residents/detainees as determined within the Service Provider's classification system.
- B. Basic Needs: The Service Provider shall provide residents/detainees with safekeeping, housing, subsistence, medical services that are not provided for elsewhere and other services in accordance with this Agreement. In providing these services, the Service Provider shall ensure compliance with all applicable laws, regulations, fire and safety codes, policies and procedures. If the Service Provider determines that ICE has delivered a person for custody to reside in the residential facility who is under the age of eighteen (18) and unaccompanied by a parent or guardian, the Service Provider shall not house that person with adult residents/detainees and shall immediately notify the Contracting Officer's Technical Representative (COTR).

- C. Interpretive Services: The Service Provider shall make special provisions for non-English speaking, handicapped or illiterate residents/detainees. ICE will reimburse the Service Provider for the actual costs associated with providing commercial written or telephone language interpretive services. Upon request, ICE will assist the Service Provider in obtaining translation services. The Service Provider shall provide all instructions verbally either in English or the residents'/detainees' language, as appropriate, to residents/detainees who cannot read. The Service Provider shall include the actual costs that the Service Provider paid for such services on its monthly invoice. Except in emergency situations, the Service Provider shall not use residents/detainees for translation services. If the Service Provider uses a resident/detainee for translation service, it shall notify ICE within 24 hours of the translation service.
- D. Escort and Transportation Services: The Service Provider will provide, upon request and as scheduled by the Contracting Officer's Technical Representative (COTR) or Contracting Officer (CO), necessary escort and transportation services for residents/detainees to and from designated locations. Escort services will be required for escorting residents/detainees to court hearings; escorting witnesses to the courtroom and any escort services as requested by an ICE judge during proceedings. Escort and transportation services shall also include providing all such ground transportation services as may be required to transport residents/detainees securely and in a timely manner. Transportation and/or escort services may be required to transport residents/detainees from the Facility to and from a medical facility for outpatient care. During all transportation activities, at least one (1) transportation officer shall be of the same sex as the residents/detainees being transported. The Service Provider shall use a communications system that has direct and immediate contact with all transportation vehicles. Transportation and escort services shall be provided in the most economical and efficient manner. The Service Provider personnel provided for these services shall be of the same qualifications, receive training, complete the same security clearances, and wear the same uniforms as those personnel provided for in other areas of this Agreement. The Statement of Work shall provide specific escort and transportation services unique for this Agreement. Reimbursement will be in accordance with paragraph F below.
- E. Guard Services: The Service Provider agrees to provide stationary guard services on demand by the COTR or Contracting Officer and shall include, but is not limited to, escorting and guarding residents/detainees to medical or doctor's appointments, hearings, ICE interviews, and any other location requested by the COTR. Qualified personnel employed by the Service Provider will perform such services. The Service Provider agrees to augment such practices as may be requested by ICE to enhance specific requirements for security, resident/detainee monitoring, visitation, and contraband control. Public contact is prohibited unless authorized in advance by the COTR or Contracting Officer. The Service Provider shall be authorized to provide at least one (1) officer for each remote post, as directed by the COTR or Contracting Officer. Reimbursement will be in accordance with paragraph F below.

- F. Guard and transportation services performed under paragraphs D and E above shall be denoted as separate items on submitted invoices. ICE agrees to reimburse the Service Provider for stationary guard services provided at a negotiated rate of \$19.18 per hour. Any incurred overtime pay for such services will be reimbursed at the applicable overtime rate of \$28.77 per hour.
- G. Provided there is a separately funded line item in the task order, transportation mileage shall be reimbursed at the mileage rate established pursuant to the General Services Administration (GSA)/federal travel allowance rate in effect at the time the Contracting Officer signs the Agreement. The mileage rate for this Agreement is \$0.55/mile. Mileage shall be denoted as a separate item on submitted invoices. Any adjustments to this rate in accordance with GSA mileage rates will be identified in the task order. Adjustments are not retroactive.
- H. Medical/Mental Health Care – All medical and mental health needs will be provided for through the Division of Immigration Health Services (DIHS). The facility is responsible for the provision of appropriate space and offices to support a medical clinic operation.
- I. Dental Care – The Service Provider retains the right to use a medical provider proposed by the contractor or to use its own Medical Provider, the United States Public Health Service (USPHS), Division of Immigration Health Services (DIHS). As such, the cost component for health services should be shown as a line item.
- J. On-Site Dental Health Care including Pediatric Dental Care: The Service Provider shall provide on or off-site access to dental care for all residents 24 hours per day, 7 days per week. The Service Provider shall furnish the residents instructions in his or her native language for gaining access to full dental health services. DIHS is responsible for on-site health care services shall include arrival screening, sick call coverage, provision of over-the-counter medications, treatment of minor injuries (e.g. lacerations, sprains, contusions), treatment of special needs and mental health assessments. The Service Provider shall ensure that its employees solicit each resident for health complaints and deliver the complaints in writing to the DIHS health care staff. The Service Provider is responsible for transportation to and from all off-site appointments.

Article IV. Receiving and Discharging Residents/Detainees

- A. Required Activity: The Service Provider shall receive and discharge residents/detainees only to and from properly identified ICE personnel or other properly identified Federal law enforcement officials with prior authorization from DHS/ICE. Presentation of U.S. Government identification shall constitute “proper identification.” The Service Provider shall furnish receiving and discharging services twenty-four (24) hours per day, seven (7) days per week. ICE shall furnish the Service Provider with reasonable notice of receiving and discharging residents/detainees. The Service Provider shall ensure positive identification and recording of residents/detainees and ICE officers. The Service Provider shall not permit medical or emergency discharges except through coordination with on-duty ICE officers.

- B. Restricted Release of Residents/residents/detainees: The Service Provider shall not release residents/detainees from its physical custody to any persons other than those described in Paragraph A of Article IV for any reason, except for either medical, other emergency situations, or in response to a federal writ of habeas corpus. If a resident/detainee is sought for federal, state, or local proceedings, only ICE may authorize release of the resident/detainee for such purposes. The Service Provider shall contact the COTR immediately regarding any such requests.

- C. Service Provider Right of Refusal: The Service Provider retains the right to refuse acceptance or request removal of any resident/detainee exhibiting violent or disruptive behavior, or of any resident/detainee found to have a medical condition that requires medical care beyond the scope of the Service Provider's health care provider. In the case of a resident/detainee already in custody, the Service Provider shall notify ICE and request removal of the resident/detainee from the Facility. The Service Provider shall allow ICE reasonable time to make alternative arrangements for the resident/detainee.

- D. Emergency Evacuation: In the event of an emergency requiring evacuation of the Facility, the Service Provider shall evacuate residents/detainees in the same manner, and with the same safeguards, as it employs for persons detained under the Service Provider's authority. The Service Provider shall notify the Contracting Officer and COTR within two (2) hours of evacuation.

Article V. Residential Standards

- A. The Service Provider is required to house residents/detainee and perform related residential/detention services in accordance with the most current edition of the ICE/DRO Residential Standards. The links to the ICE/DRO Residential Standards can be found in Attachment 7. ICE Inspectors will conduct periodic inspections of the facility to assure compliance with the ICE/DRO Residential Standards.

- B. The Service Provider shall certify to the Contracting Officer and COTR that its personnel have completed all training as required by the ICE Residential Standards, the Service Provider's own manual (if it is approved for use by the Contracting Officer), and any additional training as required in any manuals or residential/detention standards referenced in this Agreement.

Article VI. No Employment of Unauthorized Aliens

Subject to existing laws, regulations, Executive Orders, and addenda to this Agreement, the Service Provider shall not employ aliens unauthorized to work in the United States. Except for maintaining personal living areas, residents/detainees shall not be required to perform manual labor.

Article VII. Period of Performance

This Agreement shall become effective upon the date of final signature by the ICE Contracting Officer and the authorized signatory of the Service Provider and will remain in effect for a period not to exceed sixty (60) months unless extended by bi-lateral modification or terminated in writing by either party. Either party must provide written notice of

intentions to terminate the Agreement, 60 days in advance of the effective date of formal termination, or the Parties may agree to a shorter period under the procedures prescribed in Article X.

Article VIII. Inspections

The Facility and Service Provider's services shall be inspected in accordance with the following procedures:

- A. Definitions. "Services," as used in this clause, includes services performed, workmanship, and material furnished or utilized in the performance of services.
- B. The Service Provider shall provide and maintain an inspection system acceptable to the Government covering the services under this Agreement. Complete records of all inspection work performed by the Service Provider shall be maintained and made available to the Government during performance and for as long afterwards as the Agreement requires.
- C. The Government has the right to inspect and test all services called for by the Agreement, to the extent practicable at all times and places during the term of the Agreement. The Government shall perform inspections and tests in a manner that will not unduly delay the work.
- D. If the Government performs inspections or tests on the premises of the Service Provider or its subcontractor, the Service Provider shall furnish, and shall require subcontractors to furnish, at no increase in the Agreement price, all reasonable facilities and assistance for the safe and convenient performance of these duties.
- E. If any of the services do not conform to the Agreement requirements, the Government may require the Service Provider to perform the services again in conformity with the Agreement requirements, at no increase in the Agreement amount. When the defects in services cannot be corrected by re-performance, the Government may (1) require the Service Provider to take necessary action to ensure that future performance conforms to the Agreement requirements and (2) reduce the Agreement price to reflect the reduced value of the services performed.
- F. If the Service Provider fails to promptly perform the services again or to take the necessary action to ensure future performance in conformity with Agreement requirements, the Government may (1) by contract or otherwise, perform the services and charge to the Service Provider any cost incurred by the Government that is directly related to the performance of such service or (2) terminate the Agreement for default.

Article IX. Inspection Reports

- A. Inspection Report: The Inspection Report stipulates minimum requirements for fire/safety code compliance, supervision, segregation, sleeping utensils, meals, medical care, confidential communication, telephone access, legal counsel, legal library, visitation, and recreation. The Service Provider shall allow ICE to conduct inspections of the facility, as required, to ensure an acceptable level of services and acceptable conditions of

confinement as determined by ICE. No notice to the Service Provider is required prior to an inspection. ICE will conduct such inspections in accordance with the Inspection Report. ICE will share findings of the inspection with the Service Provider's facility administrator. The Inspection Report will state any improvements to facility operation, conditions of confinement, and level of service that will be required by the Service Provider.

- B. Possible Termination: If the Service Provider fails to remedy deficient service ICE identifies through inspection, ICE may terminate this Agreement without regard to the provisions of Articles VII and X.
- C. Share Findings: The Service Provider shall provide ICE copies of facility inspections, reviews, examinations, and surveys performed by accreditation sources.
- D. Access to Resident/Detainee Records: The Service Provider shall, upon request, grant ICE access to any record in its possession, regardless of whether the Service Provider created the record, concerning any resident/detainee held pursuant to this Agreement. This right of access shall include, but is not limited to, incident reports, records relating to suicide attempts, and behavioral assessments and other records relating to the resident's/detainee's behavior while in the Service Provider's custody. Furthermore, the Service Provider shall retain all records where this right of access applies for a period of two (2) years from the date of the resident's/detainee's discharge from the Service Provider's custody.

Article X. Modifications and Disputes

- A. Modifications: Actions other than those designated in this Agreement will not bind or incur liability on behalf of either Party. Either Party may request a modification to this Agreement by submitting a written request to the other Party. A modification will become a part of this Agreement only after the ICE Contracting Officer and the authorized signatory of the Service Provider have approved the modification in writing.
- B. Disputes: The ICE Contracting Officer and the authorized signatory of the Service Provider will settle disputes, questions and concerns arising from this Agreement. Settlement of disputes shall be memorialized in a written modification between the ICE Contracting Officer and authorized signatory of the Service Provider. In the event a dispute is not able to be resolved between the Service Provider and the ICE Contracting Officer, the ICE Contracting Officer will make the final decision. If the Service Provider does not agree with the final decision, the matter may be appealed to the ICE Head of the Contracting Activity (HCA) for resolution. The ICE HCA may employ all methods available to resolve the dispute including alternative dispute resolution techniques. The Service Provider shall proceed diligently with performance of this Agreement pending final resolution of any dispute.
- C. ICE Unilateral Changes. ICE may unilaterally implement policy and/or procedural changes from time to time in order to meet changes in mission and/or the need to protect the residents/detainees under ICE's responsibility as they relate to services provided under this Agreement. The Service Provider has thirty (30) calendar days from the date

of the modification implementing the unilateral changes to submit any requests for cost impacts. Should the Service Provider determine that there is an impact to the bed day rate, the Service Provider must submit detailed cost information (including impacts to subcontracts) to support any requests for rate adjustments as a result of the unilateral change. Only those costs with supporting data will be considered.

Article XI. Enrollment, Invoicing, and Payment

- A. Enrollment in Electronic Funds Transfer: The Service Provider shall provide ICE with the information needed to make payments by electronic funds transfer (EFT). Since January 1, 1999, ICE makes all payments only by EFT. The Service Provider shall identify their financial institution and related information on Standard Form 3881, Automated Clearing House (ACH) Vendor Miscellaneous Payment Enrollment Form. The Service Provider shall submit a completed SF 3881 to ICE payment office prior to submitting its initial request for payment under this Agreement. If the EFT data changes, the Service Provider shall be responsible for providing updated information to the ICE payment office.
- B. Consolidated Invoicing – The Service Provider shall submit an original monthly itemized invoice within the first ten (10) working days of the month following the calendar month when it provided the services via one of the following three methods:
- a. **By mail:**
DHS, ICE
Burlington Finance Center
P.O. Box 1620
Williston, VT 05495-1620
Attn: ICE-DRO-FOD-FPA Invoice
 - b. **By facsimile (fax): (include a cover sheet with point of contact & # of pages)**
802-288-7658
 - c. **By e-mail:**
Invoice.Consolidation@dhs.gov

Invoices submitted by other than these three methods will be returned. The contractor's Taxpayer Identification Number (TIN) must be registered in the Central Contractor Registration (<http://www.ccr.gov>) prior to award and **shall** be notated on every invoice submitted to ICE to ensure prompt payment provisions are met. The ICE program office shall also be notated on every invoice.

Each invoice submitted shall contain the following information:

- a. the name and address of the facility;
- b. Invoice date and number;
- c. Agreement number, line item number and, if applicable, the Task order number;
- d. Terms of any discount for prompt payment offered;
- e. Name, title, and phone number of person to notify in event of defective invoice;

- f. Taxpayer Identification Number (TIN). The Contractor shall include its TIN on the invoice only if required elsewhere in this Agreement. (See paragraph 1 above.)
- g. the total number of residential/detainee days;
- h. the daily rate;
- i. the total residential/detainee days multiplied by the daily rate;
- j. the name of each ICE resident/detainee;
- k. resident's/detainee's A-number;
- l. specific dates of detention for each resident/detainee;
- m. an itemized listing of all other charges;
- n. For stationary guard services, the itemized monthly invoice shall state the number of hours being billed, the duration of the billing (times and dates) and the name of the resident(s)/detainee(s) that was guarded.

Items a. through i. above must be on the cover page of the invoice. Invoices without the above information may be returned for resubmission.

- C. Payment: ICE will transfer funds electronically through either an Automated Clearing House subject to the banking laws of the United States, or the Federal Reserve Wire Transfer System. The Prompt Payment Act applies to this Agreement. The Prompt Payment Act requires ICE to make payments under this Agreement the thirtieth (30th) calendar day after the ICE Deportation office/COTR receives a complete invoice. Either the date on the Government's check, or the date it executes an electronic transfer of funds, shall constitute the payment date. The Prompt Payment Act requires ICE to pay interest on overdue payments to the Service Provider. ICE will determine any interest due in accordance with the Prompt Payment Act.

Article XII. Government Furnished Property

- A. Federal Property Furnished to the Service Provider: ICE may furnish Federal Government property and equipment to the Service Provider. Accountable property remains titled to ICE and shall be returned to the custody of ICE upon termination of the Agreement. The suspension of use of bed space made available to ICE is agreed to be grounds for the recall and return of any or all government furnished property.
- B. Service Provider Responsibility: The Service Provider shall not remove ICE property from the facility without the prior written approval of ICE. The Service Provider shall report any loss or destruction of any Federal Government property immediately to ICE.

Article XIII. Hold Harmless and Indemnification Provisions

- A. Service Provider Held Harmless: ICE shall, subject to the availability of funds, save and hold the Service Provider harmless and indemnify the Service Provider against any and all liability claims and costs of whatever kind and nature, for injury to or death of any person(s), or loss or damage to any property, which occurs in connection with or is incident to performance of work under the terms of this Agreement, and which results from negligent acts or omissions of ICE officers or employees, to the extent that ICE would be liable for such negligent acts or omissions under the Federal Tort Claims Act, 28 USC 2691 *et seq.*

- B. Federal Government Held Harmless: The Service Provider shall save and hold harmless and indemnify federal government agencies to the extent allowed by law against any and all liability claims, and costs of whatsoever kind and nature for injury to or death of any person or persons and for loss or damage to any property occurring in connection with, or in any way incident to or arising out of the occupancy, use, service, operation or performance of work under the tenets of this Agreement, resulting from the negligent acts or omissions of the Service Provider, or any employee, or agent of the Service Provider. In so agreeing, the Service Provider does not waive any defenses, immunities or limits of liability available to it under state or federal law. The Service Provider agrees to hold harmless and indemnify DHS/ICE and its officials in their official and individual capacities from any liability, including third-party liability or worker's compensation, arising from the conduct of the Service Provider and its employees during the course of transporting residents/detainees on behalf of ICE.
- C. Defense of Suit: In the event a detainee files suit against the Service Provider contesting the legality of the resident's/detainee's incarceration and/or immigration/citizenship status, ICE shall request that the U.S. Attorney's Office, as appropriate, move either to have the Service Provider dismissed from such suit, to have ICE substituted as the proper party defendant; or to have the case removed to a court of proper jurisdiction. Regardless of the decision on any such motion, ICE shall request that the U.S. Attorney's Office be responsible for the defense of any suit on these grounds.
- D. ICE Recovery Right: The Service Provider shall do nothing to prejudice ICE's right to recover against third parties for any loss, destruction of, or damage to U.S. Government property. Upon request of the Contracting Officer, the Service Provider shall, at ICE's expense, furnish to ICE all reasonable assistance and cooperation, including assistance in the prosecution of suit and execution of the instruments of assignment in favor of ICE in obtaining recovery.

Article XIV. IGSA/Financial Records

- A. Retention of Records: All IGSA and financial records including, but not limited to, supporting documents, statistical records, and other records, pertinent contracts, or subordinate agreements under this Agreement shall be retained by the Service Provider for three (3) years after the expiration of the Agreement for purposes of federal examinations and audit. If any litigation, claim, negotiation, audit, or other action involving the records has been started before the expiration of the three (3) year period, the records must be retained until completion of the action and resolution of all issues which arise from it or until the end of the regular three (3) year period, whichever is later.
- B. Access to Records: ICE and the Comptroller General of the United States, or any of their authorized representatives, shall have the right of access to any pertinent books, documents, papers or other records of the Service Provider or its sub-contractors, which are pertinent to the award, in order to make audits, examinations, excerpts, and transcripts. The rights of access must not be limited to the required retention period, but shall last as long as the records are retained.

- C. Delinquent Debt Collection: ICE will hold the Service Provider accountable for any overpayment, or any breach of this Agreement that results in a debt owed to the Federal Government. ICE shall apply interest, penalties, and administrative costs to a delinquent debt owed to the Federal Government by the Service Provider pursuant to the Debt Collection Improvement Act of 1982, as amended.

Article XV. Maintain Institutional Emergency Readiness

- A. The Service Provider shall submit an institutional emergency plan that will be operational prior to start of the Agreement. The plan shall receive the concurrence of the Contracting Officer prior to implementation and shall not be modified without the further written concurrence of the Contracting Officer.
- B. The Service Provider shall have written agreements with appropriate state and local authorities that will allow the Service Provider to make requests for assistance in the event of any emergency incident that would adversely affect the community.
- C. Likewise, the Service Provider shall have in place, an internal corporate nation-wide staff contingency plan consisting of employees who possess the same expertise and skills required of staff working directly on this Agreement. At the discretion of ICE, these employees would be required to respond to an institutional emergency at the Facility, when necessary.
- D. The emergency plans shall include provisions for emergency response by law enforcement agencies. The Facility shall have a plan to provide actions to be taken to ensure an immediate response by the nearest law enforcement agency who can provide emergency services up to and including disturbance control.
- E. Any decision by ICE or other federal agencies to provide and/or direct emergency assistance will be at the discretion of the Government. The Service Provider shall reimburse the Government for any and all expenses incurred in providing such assistance.
- F. The Contracting Officer and COTR shall be notified immediately in the event of all serious incidents. Serious incidents include, but are not limited to the following: activation of disturbance control team(s); disturbances (including gang activities, group demonstrations, food boycotts, work strikes, work-place violence, civil disturbances/protests); staff use of force including use of lethal and less-lethal force (includes inmates in restraints more than eight hours); assaults on staff/residents/detainees resulting in injuries requiring medical attention (does not include routine medical evaluation after the incident); fights resulting in injuries requiring medical attention; fires; full or partial lock down of the facility; escape; weapons discharge; suicide attempts; deaths; declared or non-declared hunger strikes; adverse incidents that attract unusual interest or significant publicity; adverse weather (e.g., hurricanes, floods, ice/snow storms, heat waves, tornadoes); fence damage; power outages; bomb threats; central inmate monitoring cases admitted to a community hospital; witness security cases taken outside the facility; significant environmental

problems that impact the facility operations; transportation accidents (i.e. airlift, bus) resulting in injuries, death or property damage; and sexual assaults.

- G. Attempts to apprehend the escapee(s) shall be in accordance with the Emergency Plan, which should comply with ICE Detention Operations Manual regarding Emergency Plans.
- H. The Service Provider shall submit to the COTR a proposed inventory of intervention equipment (weapons, munitions, chemical agents, electronics/stun technology, etc.) intended for use during performance of this Agreement. Prior to the start of this Agreement, the Contracting Officer shall approve the intervention equipment. The approved intervention equipment inventory shall not be modified without prior written concurrence of the Contracting Officer.
- I. The Service Provider shall obtain the appropriate authority from state or local law enforcement agencies to use force as necessary to maintain the security of the Facility. The use of force by the Service Provider shall at all times be consistent with all applicable policies of ICE Residential Standards regarding Use of Force.

XVI. Security Requirements

A. GENERAL

The Department of Homeland Security (DHS), U.S. Immigration and Customs Enforcement (ICE), Office of Professional Responsibility, Personnel Security Unit (DHS-ICE-OPR-PSU, hereinafter OPR-PSU) has determined that performance of the tasks as described in IGSA (Agreement) DROIGSA-09-0027 requires that the Service Provider (Contractor, subcontractor(s), vendor(s), etc. (herein known as Service Provider) have access to ICE residents (Children, Adults and Families), and that the Service Provider will adhere to the following and shall expressly incorporate this provision into any and all Subcontracts or subordinate agreements issued in support of this Agreement .

B. SUITABILITY DETERMINATION

ICE-OPR-PSU shall have and exercise full control over granting, denying, withholding or terminating unescorted government facility and/or access to ICE detainees, as well as, when applicable, sensitive Government information access for Service Provider employees, based upon the results of a background investigation.

ICE-OPR-PSU may, as it deems appropriate, authorize and make a favorable entry on duty (EOD) decision based on preliminary security checks. The favorable EOD decision would allow the Service Provider employees to commence work temporarily prior to the completion of the full investigation. The granting of a favorable EOD decision shall not be considered as assurance that a full employment suitability authorization will follow as a result thereof.

The granting of a favorable EOD decision or a full employment suitability determination shall in no way prevent, preclude, or bar the withdrawal or termination of any such access by ICE-OPR-PSU, at any time during the term of the IGSA. No employee of the Service

Provider shall be allowed to EOD and/or access facilities or ICE detainees without a favorable EOD decision or suitability determination by OPR-PSU. No employee of the Service Provider shall be allowed unescorted access to a Government facility without a favorable EOD decision or suitability determination by OPR-PSU. Service Provider employees assigned to the IGSA not needing access to ICE detainees or recurring access to DHS-ICE facilities will not be subject to security suitability screening.

Suitability criteria as detailed in ICE Policy Directives that will exclude applicants from consideration to perform under this Agreement include, but not limited to:

Felony convictions, or a conviction for any crime that involves violence
Conviction of a sex crime
Offense/s involving a child victim
Pattern of arrests, without convictions, that brings into question a person's judgment and reliability to promote the efficiency and integrity of the ICE mission.
Intentional falsification and/or omission of pertinent personal information
Drug and/or Alcohol Abuse
Personal conduct to include failure to pay just debts

The process for suitability determination includes, but is not limited to, criminal, employment, citizenship, residential and financial records checks and reviews.

C. BACKGROUND INVESTIGATIONS

IGSA Service Provider employees (to include applicants, temporaries, part-time and replacement employees) under the Agreement, needing access to ICE detainees, shall undergo a position sensitivity analysis based on the duties each individual will perform on the contract. The results of the position sensitivity analysis shall identify the appropriate background investigation to be conducted. Background investigations will be processed, managed and conducted under direction of OPR-PSU.

In those cases where prospective IGSA Service Provider employees already have a security clearance issued by the Defense Industrial Security Clearance Office (DISCO), that was granted using an appropriate background investigation, reciprocity may apply in that those prospective employees may not be required to submit complete security packages, as the clearance issued by DISCO may be accepted.

Prospective Service Provider employees without adequate security clearances issued by DISCO shall submit the following completed forms to the Personnel Security Unit through the COTR, no less than 45 days before the starting date of the IGSA (contract), or 45 days prior to the expected entry on duty of any employees, whether a replacement, addition, subcontractor employee, or vendor:

Standard Form 85P, "Questionnaire for Public Trust Positions"
Form will be submitted via e-QIP (electronic Questionnaires for Investigation Processing)
FD Form 258, "Fingerprint Card" (**2 copies**)
Foreign National Relatives or Associates Statement

DHS 11000-9, "Disclosure and Authorization Pertaining to Consumer Reports Pursuant to the Fair Credit Reporting Act"

Drug Questionnaire

Alcohol Questionnaire

Details regarding the required forms will be provided by ICE-OPR. Only complete packages will be accepted by OPR-PSU. Specific instructions on submission of packages will be provided by OPR-PSU.

PLEASE NOTE: Unless an applicant has resided in the US for three of the past five years, with few exceptions such as military or other federal service overseas, the Government may not be able to complete a satisfactory background investigation. In such cases, OPR-PSU retains the right to deem an applicant as ineligible due to insufficient background information.

D. SUITABILITY – RETROACTIVE EFFECT

Employees of the Service Provider(s) who have not been previously investigated as described under the Background Investigations section, above, must be scheduled not later than six months after implementation of this IGSA. Employees of the Service Provider(s) may continue to work while the investigation is in progress.

E. CONTINUED ELIGIBILITY

If a prospective Service Provider employee is found to be ineligible for access to Government facilities or information, the COTR will advise the Service Provider that the employee shall not continue to work or to be assigned to work under the Agreement.

The OPR-PSU may require drug screening for probable cause at any time and/ or when the Service Provider independently identifies, circumstances where probable cause exists.

The OPR-PSU may require reinvestigations when derogatory information is received and/or every 10 years.

ICE-OPR reserves the right and prerogative to deny and/ or restrict the facility and information access of any Service Provider employee whose actions are in conflict with the standards of conduct as detailed in 5 CFR 2635 and 5 CFR 3801, or whom ICE-OPR-PSU determines to present a risk of compromising ICE standards and conduct, including sensitive Government information, to which he or she would have access under this contract.

The Service Provider shall implement a Self-Reporting requirement for its employees to immediately report one's own criminal arrests to superiors.

The Service Provider will report any adverse information coming to their attention concerning contract employees under the IGSA to OPR-PSU through the COTR. Reports based on rumor or innuendo should not be made. The subsequent termination of employment of an employee does not obviate the requirement to submit this report. The

report shall include the employees' name and social security number, along with the adverse information being reported.

OPR-PSU must be notified of all terminations/ resignations within five (5) days of occurrence.

If applicable, the Service Provider will return any expired ICE-DRO owned employee identification cards and/or building passes, or those of employees terminated and/or removed from the IGSA to the COTR within five (5) workdays. If an identification card or building pass is not available to be returned, a report must be submitted to the COTR, referencing the pass or card number, name of individual to whom issued, the last known location and disposition of the pass or card. The COTR will return the identification cards and building passes to the responsible ID Unit.

F. EMPLOYMENT ELIGIBILITY

The Service Provider must agree that each employee working on this IGSA will have a Social Security Card issued and approved by the Social Security Administration.

The Service Provider shall be responsible to the Government for acts and omissions of his own employees and for any Subcontractor(s) and their employees.

ICE-DRO has determined that employment on this IGSA (Contract) shall be limited to U.S. Citizens, Lawful Permanent Residents and Conditional Permanent Residents.

Subject to existing law, regulations and/ or other provisions of this IGSA, illegal or undocumented aliens will not be employed by the Service Provider, or with this IGSA. Service Provider will ensure that this provision is expressly incorporated into any and all Subcontracts or subordinate agreements issued in support of this IGSA.

G. SECURITY MANAGEMENT

The Service Provider shall appoint a senior official to act as the Corporate Security Officer. The individual will interface with the OPR-PSU through the COTR on all personnel security matters and if applicable, information security matters.

The COTR and OPR-PSU shall have the right to inspect the procedures, methods, and facilities utilized by the Service Provider in complying with the security requirements under this Agreement. Should the COTR determine that the Service Provider is not complying with the security requirements of this Agreement, the Service Provider will be informed in writing by the Contracting Officer of the proper action to be taken in order to effect compliance with such requirements. Copies of these communications by both the Contracting Officer and the Service Provider shall be provided to OPR-PSU.

H. INFORMATION TECHNOLOGY SECURITY

Should the scope of the work change to require IGSA Service Provider personnel to access DHS-ICE IT systems, DHS IT Management Directives preclude routine access to any DHS ICE IT systems, to include those utilized by ICE-DRO, by Non-U.S. citizens, including Lawful Permanent Residents (LPRs).

I. ICE-DRO SPECIFICATIONS TECHNICAL STANDARDS - EMPLOYMENT
ELIGIBILITY FOR CHILD CARE WORKERS

The Service Provider will:

1. Comply with, and provide evidence of current compliance with, any and all requirements required by the state in which the facility is located for child care workers, including but not limited to that required for a residential child care license or equivalent in that state; and
2. include on its employment application a question asking whether the individual has ever been arrested for or charged with a crime involving a child, and
3. require a listing of the applicant's residence(s) or other time period required for by the state for licensure of child care workers as referenced above. If no time period is referenced by the state, 5 years shall apply; and
4. re-certify its employees every 24 months, or a shorter time period if required by the state for licensure of child care workers as referenced above.

After the Service Provider employee receives favorable suitability adjudication results and the employee successfully completes the training and passes any required examination(s), the Service Provider shall submit the following information to the ICE COTR:

A certification, signed by the Facility Manager or his/her designee, that the employee has met all the requirements set forth and that all pertinent documents are on file at the Service Provider's facility.

2. Two color photographs, 1" x 1," no more than one year old, of the employee's head and upper shoulders.

No person shall be permitted to work under this IGSA without a valid identification card, unique to this IGSA, which shall be issued by the COTR. The identification card shall be worn on the outermost garment of the employee's uniform. At the end of the IGSA (Agreement) period, the Service Provider must return to the COTR all blank identification cards and all completed cards for any employee or subcontractor employees who will not continue to work under this Agreement.

The Service Provider is responsible for the employees having all required documents and/or certifications referred to above in their possession at all times while on the protected premises. This includes a valid CPR/First Aid card for all Service Provider staff having regular contact with facility residents/detainees.

The Contracting Officer shall have the express authority to demand return of the identification card for any Service Provider employee who does not maintain compliance with the Agreement standards. The Contracting Officer shall have the express authority

to prohibit that employee from performing under the Agreement until such time as s/he comes into full compliance with all performance criteria.

XVII. Quality Control (to be incorporated as Attachment 2 of the Agreement)

- A. The Service Provider shall establish and maintain a complete Quality Control Program (QCP) acceptable to the Contracting Officer (“CO”), in consultation with the COTR to assure the requirements of this Agreement are provided as specified in the Performance Requirement Summary (PRS)—Attachment 3.

The QCP shall:

1. Be implemented prior to the start of performance.
 2. Provide quality control services that cover the scope of the IGSA and implement proactive actions to prevent non-performance issues.
- B. A complete QCP addressing all areas of Agreement performance shall be submitted to the COTR no later than 30 days after the Agreement effective date. All proposed changes to the QCP must be approved by the Contracting Officer. The Service Provider shall submit a resume of the proposed individual(s) responsible for the QCP to the Contracting Officer for approval. The Service Provider shall not change the individual(s) responsible for the QCP without prior approval of the Contracting Officer.
- C. The QCP shall include, at a minimum:
1. Specific areas to be inspected on either a scheduled or unscheduled basis and the method of inspection.
 2. Procedures for written and verbal communication with the Government regarding the performance of the Agreement.
 3. Specific surveillance techniques for each service identified in the Agreement and each functional area identified in the PRS.
 4. The QCP shall contain procedures for investigation of complaints by the Service Provider and Government staff and feedback to the Government on the actions taken to resolve such complaints.
- D. A file of all inspections, inspection results, and any corrective action required, shall be maintained by the Service Provider during the term of this Agreement. The Service Provider shall provide copies of all inspections, inspection results, and any corrective action taken to the COTR and Contracting Officer.

E. Failure by the Service Provider to maintain adequate quality control can result in monetary deductions based upon the schedule of deductions incorporated herein.

XVIII. Contracting Officer’s Technical Representative

- A. The Contracting Officer’s Technical Representative (COTR) shall be designated by the Contracting Officer. When and if the COTR duties are reassigned, an administrative modification will be issued to reflect the changes. This designation does not include authority to sign contractual documents or to otherwise commit to, or issue changes, which could affect the price, quantity, or performance of this Agreement.
- B. Should the Service Provider believe they have received direction that is not within scope of the Agreement; the Service Provider shall not proceed with any portion that is not within the scope of the Agreement without first contacting the Contracting Officer. The Service Provider shall continue performance of efforts that are deemed within scope.

XIX. Labor Standards and Wage Determination

- A. The Service Contract Act, 41 U.S.C. 351 et seq., Title 29, Part 4 Labor Standards for Federal Service Contracts, is here by incorporated into this Agreement at Attachment 5. These standards and provisions are included in every contract over \$2,500, or in an indefinite amount, that is entered into by the United States, the principal purpose of which is to furnish services through the use of service employees.
- B. Wage Determination: Each service employee employed in the performance of this Agreement shall be paid not less than the minimum monetary wages and shall be furnished fringe benefits in accordance with the wages and fringe benefits determined by the Secretary of Labor or authorized representative, as specified in any wage determination attached to this Agreement at Attachment 6.

 END OF DOCUMENT

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**FAMILY RESIDENTIAL FACILITY
STATEMENT OF WORK**

1. Background

The U. S. Department of Homeland Security, Immigration and Customs Enforcement (ICE or Agency) provides funds through this agreement to both public and private sector entities to provide temporary residential shelter care and other related services to families in its custody.

2. Objectives

- a. The purpose of this contract is to facilitate the provisions for the necessary physical structure, equipment, facilities, personnel and services, to provide a program of temporary shelter care in a staff secure environment and other related services to alien family groups who are currently held in the legal custody of the ICE.
- b. The specific project goal is the provision of State licensed residential care and other related services twenty-four (24) hours per day, seven (7) days per week, to alien family groups who have been approved for such services by the ICE. These individuals, although released to the physical custody of the Service Provider, shall remain in the legal custody of the ICE. Service delivery is expected to be accomplished in a manner that is sensitive to the culture, the native language and the complex needs of this population. The alien population will consist of families with juveniles up to and including 17 years of age and related adults 18 years of age and older. Service Provider should expect aliens from any number of ethnic backgrounds and nationalities.
- c. A goal of the statement of work is to establish and implement Performance Criteria, as stated in Appendix A. The statement of work contains a wide range of performance requirements and references Federal laws, ICE Residential Standards and requires adherence to applicable state laws and requirements. The Performance Criteria in Appendix A cites those areas of performance that are deemed to be critically important and must be achieved to enable compliance with laws and to safeguard and support alien family groups' health, safety and well-being. The list of Performance Criteria includes the required outcomes; performance indicators and information on how each is measured. The establishment of these criteria serves to categorize this statement of work as a *Performance Work Statement (PWS)*.

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Notwithstanding the establishment of selected tasks and deliverables as formal Performance Criteria with corresponding outcomes, performance indicators and measurements, the Service Provider is obligated to perform and fulfill all requirements of this contract and statement of work.

3. Terms

- a. Admission: A procedure, which includes searching, photographing, health and safety assessment, and collecting personal history data. Admission also includes the inventory and storage of the individual's accompanying personal property.
- b. Alien Family Group: A group of closely related adults (parent, grandparent, brother, sister) and juveniles (son, daughter, grandchild, sibling) encountered within the United States.
- c. Alien Unaccompanied Juvenile: An alien unaccompanied juvenile is defined as a male or female foreign national under 18 years of age who has entered the United States unaccompanied by either parent, adult relatives or legal guardian, and who is in the custody of the ICE and is the subject of removal proceedings under the Immigration and Nationality Act, and may have an application for asylum pending with the Executive Office of Immigration Review (EOIR).
- d. Contraband: Any item possessed by residents or found within the facility which is declared illegal by law or which is expressly prohibited by facility policies and procedures which have been approved by ICE.
- e. Contracting Officer: An employee of the ICE responsible for the complete conduct and integrity of the contracting process, including administration after award. The only individual authorized to issue changes to this contract.
- f. Contracting Officer's Technical Representative: An employee of the ICE responsible for monitoring all technical aspects and assisting in administering the contract.
- g. Service Provider: The entity, which provides the services described in this statement of work.
- h. Family Reunification: Family Reunification is a case in which the ICE approves the release from custody of an unaccompanied juvenile to a parent(s) or adult relative(s) residing in the United States. The parent/relative must be willing and able to assume responsibility for the care, provide supervision, and ensure the juvenile's presence at EOIR proceedings.

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- i. Field Office: One of a number of ICE offices nationwide with responsibility over a specific area of operations for the office of Detention and Removal Operations.
- j. Family Residential Standards: A set of standards and policies governing the minimum requirements for care and treatment of aliens held in ICE family residential centers.
- k. Family Residential Shelter Care: For the purposes of this document, includes 24-hour supervised residential care in a setting for juveniles and adults that are related.
- l. Grievance: A written complaint filed by a resident concerning personal health/welfare or the operations and services of the facility.
- m. Headquarters, Office Detention and Removal Operations: For the purposes of this document, the division at ICE Headquarters making policy for the Family Residential Program.
- n. Health and Safety Assessment: A system of structured observation and/or initial health assessment to identify newly arrived residents who could pose a health or safety threat to themselves or others.
- o. Individualized Needs Assessment/Service Plan: Includes (a) various initial intake forms; (b) essential data relating to the identification and history of the resident and family; (c) identification of the residents' special needs including any specific problem(s) which appear to require immediate intervention; (d) an educational assessment and plan; (e) an assessment of family relationships and interaction with adults, peers and authority figures; (f) a statement of religious preference and practice; (g) an assessment of the resident's personal goals, strengths and weaknesses; and (h) identifying information regarding immediate family members, other relatives, godparents or friends who may be residing in the United States.
- p. Juvenile and Family Residential Management Unit (JFRMU): A designated unit within the Headquarters, Office of Detention and Removal Operations, with the primary responsibility for management and oversight of juvenile and family care, custody, and treatment.
- q. Medical Records: A separate set of records apart from the resident's social record that are maintained by the Service Provider. These records shall include at a minimum:
date and time of all medical examinations and copies of standing or direct medical orders to the facility staff. Although Medical Records may be

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created and/or maintained by the Service Provider, its sub-Provider, or any other third party are the property of ICE.

- r. Policy/Standard: A definite written course or method of action which guides and determines present and future decisions and action.
- s. Restraint Devices: This includes but is not limited to: handcuffs, belly chains, leg irons, straight jackets, flexi cuffs, soft (leather) cuffs, leg weights and chemical restraints.

4. Program Scope and Services

a. **Program Scope**

(1) The Service Provider shall provide shelter care and other services in a state licensed residential shelter care program. The design and administration of the program shall be in accordance with all applicable Federal, state and local licensing provisions, the requirements of the ICE Juvenile Detention and Shelter Care Program Guidelines and the ICE Family Residential Standards, as applicable. It is the Service Provider's responsibility to assume adequate and appropriate management oversight for the implementation and successful performance of this contract.

(2) The location of this facility shall be within the Continental United States. ICE reserves the right to award more than one contract for one or multiple facilities. The Service Provider must be able to admit and discharge family groups or any part of that group on a 24-hour per day, seven (7) days a week basis.

(3) Services shall be provided for the period beginning when the family group or any part of that group is placed in the Family Residential Program and ending when the ICE releases the family group or any part of the family group, transfers him/her to another facility, or removes him/her from the United States.

(4) These individuals, although **placed in the physical custody of the Service Provider, remain in the legal custody of the ICE.**

(5) The Service Provider shall ensure that the family group(s) and its individual members follow an integrated and structured daily routine which shall include, but not be limited to the following services: education, recreation, life skills and/or chores, study period, counseling, group interaction, free time and access to religious and legal services.

(6) The daily routine will enhance programmatic supervision and accountability as well as encourage the development of individual and

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social responsibility on the part of each individual. Program rules and disciplinary procedures shall be written and/or translated into a language understood by the residents and appropriate for their level of development. These rules shall be provided to the residents and fully understood by all program staff.

(7) Program content and plans must accommodate individuals of all ages, in various stages of personal adjustment amid ICE administrative processing. Because of the variables and uncertainties inherent in each case, the length of care per resident will vary. Therefore, the Service Provider will design the program to provide a combination of short-term (up to 90 days) and long-term (in excess of 90 days) care.

(8) Residents served by this contract are individuals who are alleged to have entered or attempted to enter the United States in violation of law. Some residents may have committed a violation of immigration law. Others may be referred to ICE by state or local law enforcement officials. These residents may be seeking some type of relief from removal from the United States through an administrative process. No alien who has a violent or criminal history and/or convictions shall be admitted to a family facility.

(9) The Service Provider shall implement and administer a case management system which tracks and monitors each resident's progress on a regular basis, at a minimum of weekly, to ensure that he/she receives the full range of program services in an integrated and comprehensive manner.

(10) Service Provider shall structure all programs and implement strategies designed to prevent escapes, prevent the unauthorized absence of individuals from the facility or programs provided by the facility, and protect against influences which may jeopardize the well-being of the resident.

(11) The ICE will work closely with the Service Provider in the administration of these programs in order to address the intricate and complex needs of these individuals in ICE custody for care and protection in a manner which meets the mandates of current United States law.

b. Program Services

The policy and procedure for all the services covered below shall be submitted and approved by ICE. The following is a description of program services the Service Provider is required to provide:

(1) Care and Maintenance – Proper physical care and maintenance,

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including suitable living accommodations, food, appropriate clothing, personal grooming items and hair care services, and personal allowance or remuneration for work shall be provided (outside of normal chores or responsibilities) as defined by applicable State statutes.

(2) Medical/Mental/Dental Care – ICE retains the right to use a medical provider proposed by the Service Provider or to use its own Medical Provider, the United States Public Health Service (USPHS), Division of Immigration Health Services (DIHS). As such, the cost component for health services should be shown as a line item.

(a) Level of Professionalism: The Service Provider shall ensure that all health care service providers utilized for residents hold current licenses, certifications, and/or registrations with the State and/or City where they are practicing. When not provided by the government, the Service Provider shall retain a registered nurse to provide health care and sick call coverage unless expressly stated otherwise in this contract.

(b) On-Site Health Care including pediatric well-care: When not provided by the Government, the Service Provider shall provide on-site medical and health care coverage and access to dental care for all residents 24 hours per day, 7 days per week. The Service Provider shall furnish the residents instructions in his or her native language for gaining access to health care services, to include access to full medical, mental and dental health services. On-site health care services shall include arrival screening, sick call coverage, provision of over-the-counter medications, treatment of minor injuries (e.g. lacerations, sprains, contusions), treatment of special needs and mental health assessments. The Service Provider shall ensure that its employees solicit each resident for health complaints and deliver the complaints in writing to the Service Provider's health care staff. Residents with chronic conditions shall receive prescribed treatment and follow-up care.

(c) Arrival Screening: When not provided by the government, the Service Provider shall screen each resident within six (6) hours of arrival at the facility. The screening shall include at a minimum, tuberculosis (TB) symptom screening, planting of the Tuberculin Skin Test (PPD), recording the history of past and present illnesses (including mental and physical) and suicide screening. Sample screening and exam forms are attached. (In lieu of PPD, ICE prefers that all residents receive a chest x-ray, where possible.)

(d) Emergency Medical Care: The Service Provider shall furnish 24-hour emergency medical care and emergency evacuation

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procedures. In an emergency, the Service Provider shall obtain the medical treatment required to preserve the resident's health. The Service Provider shall have access to an offsite emergency medical provider at all times. The Health Authority of the Service Provider shall call the United States Public Health Service (USPHS) Managed Care Coordinator (MCC) as soon as possible, and in no case more than seventy-two (72) hours after the resident's receipt of such care. The Health authority will obtain pre-authorization from the USPHS MCC for service(s) beyond the initial emergency situation.

(e) Immunizations: A written immunization policy and procedure which is in compliance with the USPHS, Centers for Disease Control, must be in place and implemented. These criteria will be provided through the ICE Division of Immigration Health Services Program.

(f) Policies and Procedures: The Service Provider shall develop and administer a comprehensive policy regarding the dispensing of over-the-counter and prescribed medication and special diets. The Service Provider shall have written policies and procedures in place to effectively address episodes involving mental health issues.

(g) Safety: The Service Provider shall ensure the safety of minors in family units from abuse by related and non-related adults. The Service Provider must abide by all State regulations pertaining to child health in residential facilities. These will apply to adults in the facility as well to prevent cross-contamination to prevent the spread of disease within the Facility.

(h) Medical Stipulations: The ICE, through DIHS, will authorize the service and payment for such service(s) of all non-emergency, offsite medical care and non-routine on-site medical services (e.g. offsite lab tests, eyeglasses, cosmetic dental prosthetics, dental care for cosmetic purposes – See attached DIHS Covered Services Plan).

1) DIHS acts through their agents, the MCC's, as the final health authority for ICE on all offsite and non-routine resident/detainee medical and health related matters. The relationship of the DIHS to the resident/detainee equals that of physician to patient. The Service Provider shall release any and all medical information for residents/detainee to the MCC upon request. The Service Provider shall solicit MCC approval before proceeding with non-emergency,

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offsite medical care (e.g. offsite lab tests, eyeglasses, and cosmetic dental services). The Service Provider shall submit supporting documentation with the request for authorization of services to the MCC. For medical care provided outside the facility, the MCC may determine that an alternative medical provider or institution is more cost-effective or more aptly meets the needs of ICE and the resident. The ICE may refuse to reimburse the Service Provider and/or outside health care provider for non-emergency medical costs incurred that were not prior approved by the MCC.

2) USPHS DIHS On-site Visits: The Service Provider shall allow the MCC reasonable access to its facility for the purpose of liaison activities with the Service Provider's Health Authority and associated staff and departments.

3) Bills for Services Requiring MCC Pre-authorization: The Service Provider and all other health care providers shall send bills/claims for care which require pre-authorization to:

United States Public Health Service
Division of Immigration Health Services
1220 L Street, NW, PMB 468
Washington, DC 20005-4018
Phone: (703) 541-2155
Fax: (202) 318-0080

(3) Orientation – Upon admission, all residents must receive a comprehensive orientation in their native language or in a language they understand regarding program content, services, rules (written and verbal), expectations and the availability of legal assistance. Residents shall be given a current list of pro bono legal service providers which will be made available by ICE.

(4) Individual Counseling – Programs shall schedule at least one (1) individual counseling session per week conducted by trained social work staff with the specific objectives of reviewing the resident's progress, establishing new short term objectives, and addressing both the developmental and crisis-related needs of each resident. Service Provider shall anticipate many "emergency" individual counseling sessions.

(5) Family Counseling – Programs shall include family group counseling sessions as needed, with the opportunity presented at least once a week.

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(6) Case Management

(a) The Service Provider shall ensure that comprehensive and realistic individual service plans are developed, implemented and closely coordinated for each resident through an operative case management system. Individual plans for the care of each resident must be developed in accordance with state requirements relating to individual service plans. Staff members responsible for specific case management activities must be identified and their responsibilities fully defined.

(b) The Service Provider shall have established policy and procedure in place to provide for shift briefings. The purpose of these structured briefings is to afford staff a pre-scheduled and structured opportunity to pass critical information from one shift to the next.

(7) Acculturation/Adaptation – Service Provider shall provide a program, which includes, but is not limited to, information regarding personal health and hygiene, human sexuality and the development of social and interpersonal skills, which contribute to those abilities necessary to live independently and responsibly.

(8) Juvenile Education

(a) Educational services appropriate to the level of development and communication skills are to be made available to all juveniles in accordance with existing appropriate State and federal regulations. Service Provider shall provide an education program in a structured classroom setting, Monday through Friday modeled after a year-round program in accordance with applicable State regulations. Daily lessons will include a minimum of one (1) hour of daily instruction in each of the following core subjects: Science, Social Studies, Math, Language Arts (Reading/Writing), and Physical Education. A secondary focus of the education program will be English as a Second Language (ESL). Teaching staff is required to be ESL certified, or enrolled in an ESL Certification program. As it is expected that Spanish and Chinese will be the predominant languages, the Service Provider shall provide Spanish and Chinese speaking teachers/aides to accommodate the student population as needed. Telephonic translation services shall be made available in each classroom to accommodate the diverse needs of the multi-lingual student population. The educational program shall meet or exceed respective State guidelines and

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requirements and shall meet all benchmarks as required by the U.S. Department of Education.

(b) All teachers shall be certified or licensed by the respective state Department of Education or equivalent government-licensing agency. The student/teacher ratio shall not exceed 20:1, or shall be in compliance with State policy and requirements.

(c) Students will be administered an individual education assessment in accordance with attached ICE Residential Standards.

(d) All children who are handicapped and/or in need of special education and related services will be identified, located, evaluated, and referred to an appropriate agency for intervention and services, in accordance with the Individuals with Disabilities Education Improvement Act of 2004, Title 20 U.S.C. § 1400, *et seq.*, and any subsequent amendments to the statute.

e) Upon transfer or discharge from the program, each juvenile shall be provided with proof of attendance, and copies of assessments and transcripts will be made available upon request.

(9) Recreation and Leisure Time – The Service Provider shall provide a separate space for indoor and outdoor recreation activities. Separate plans for juvenile and adult residents shall be in accordance with attached ICE policy and standards. The Service Provider shall develop a program allowing for off-site field trips by minors at least monthly.

(10) Library Services – The Service Provider shall make library services available to all residents. Reading material should reflect diverse interests and be appropriate for various levels of literacy. Residents shall have access to legal materials explaining United States immigration law and procedures in accordance with the attached ICE Family Residential Standard. ICE will supply all necessary legal materials on CD-ROM. The Service Provider shall develop policy and procedure and provide for access to these materials.

(11) Assignment of Individual Chores – The Service Provider shall develop written procedures regarding chores or vocational assignments and associated schedules. Consideration shall be given to the fact that residents are not required to participate in uncompensated work assignments unless the work involves light housekeeping of personal areas or personal hygiene needs. The Service Provider shall allow for an adult resident voluntary work program in accordance with the attached ICE Residential Standard. The Service Provider shall provide to the COTR

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weekly status of the volunteer work program.

(12) Visitation – Visitation shall be conducted in accordance with attached ICE Residential Standard and existing applicable State regulations relating to visitation.

(13) Legal Services

(a) The ICE will provide all residents with specific information regarding the availability of free legal assistance and advise each resident of the right to be represented by counsel at no expense to the Government and the right to a hearing before an immigration judge.

(b) The ICE will advise residents that they may apply for political asylum or request voluntary departure in lieu of removal.

(c) Service Provider shall establish policy and procedures to assist each resident in making confidential contact with attorneys or their authorized representatives in accordance with ICE Residential Standards on visitation.

(14) Religious Services – Whenever possible, residents shall be afforded access to religious services of their choice. A staff member shall be assigned to coordinate services and community resources to meet the religious needs of residents in accordance with ICE Residential Standards.

(15) Grievance Procedures

(a) Service Provider shall provide a written policy and procedure for the expression and resolution of residents' grievances.

(b) Service Provider shall provide a viable complaint procedure in accordance with ICE Residential Standards. All formal grievances shall be accessed first by the ICE local supervisor.

(16) Rules and Discipline Procedures

(a) The Service Provider shall provide written rules and discipline procedures for ICE approval. The rules shall specify acts prohibited within the program and penalties that may be imposed for various degrees of violation. The written rules are to be posted in a conspicuous place and reviewed annually and updated when necessary.

(b) Policy and procedures must be in accordance with State

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standards and ICE Residential Standards. Service Provider's policy shall be approved by ICE and shall address acceptable and non-acceptable physical contact among family members.

(c) The Service Provider shall provide all residents all rules for discipline and corrective action upon admission and such rules shall be posted in the facility. Service Provider shall ensure that the standards for rules and discipline shall be formulated with consideration for the range of ages and maturity found in a short-term care program and are culturally sensitive to the needs of the residents.

(17) Food Services – Meal programs shall incorporate a meal service that promotes family unity and needs. Consideration as to types of meals, manner of meal presentation, and access to salad bars and drink service should consider self-service opportunities. Menus should also consider palatability and variety with consideration given to both family and child friendly meals that promote healthy eating while allowing parental responsibility in selection and delivery.

(a) All meals served shall be in accordance with state licensing standards and shall take into account cultural, religious, or health concerns of the residents. Service Provider shall submit a 35-day cycle menu certified by a licensed dietitian for ICE approval. Meals shall be palatable, served at the appropriate temperature, and shall comply with the approved menu.

(b) The Service Provider shall provide, taking into consideration the above paragraph, a sack lunch for residents who are or will be absent for any meal. Sack meals shall consist of the following:

- 1) One (1) Sandwich — 2 oz. of protein, i.e., beef, chicken, turkey, ham, tuna fish, peanut butter
- 2) One (1) Set Condiments (mustard/mayonnaise- when applicable)
- 3) One (1) Medium Fresh Fruit
- 4) One (1) Carton Milk/Juice/Punch (8 oz.)
- 5) One (1) Napkin

Sack meals shall be individually wrapped to protect against deterioration as well as to promote sanitation.

(18) Translators – The Service Provider is responsible for providing necessary translators or bi-lingual personnel for necessary communication with residents who do not speak or comprehend the English language. Other than in emergency situations, residents shall not be used for interpretation or translation services. The Service Provider may utilize

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commercial phone language interpretive services to fulfill this requirement.

(19) Clothing, Linens and Bedding

(a) The Service Provider shall allow residents to retain up to ten (10) sets of personal clothing, including undergarments, at any given time for use while at the facility. Clothing is required to be appropriate and meet general modesty requirements.

(b) The Service Provider shall distribute adequate clothing, including undergarments, footwear and pajamas, weather appropriate, to any resident who does not have clothing. Clothing shall not be institutional in nature and shall meet community standards. Service Provider is responsible for issuing policy and procedures to ensure residents have adequate clean clothing at all times, which at a minimum will be two (2) sets of clothing per person per day.

(c) All linens, bedding and mattresses shall be provided and cleaned by the Service Provider in accordance with state standard and approved facility policy. The material of these items shall be fire-retardant.

(20) Mail and Baggage Inspections – The Service Provider shall provide written policies and procedures governing packages, baggage, or any correspondence which shall be available to the residents. These policies and procedures shall be in accordance with ICE Residential Standards for juveniles and adults.

(21) Daily Program Activity Schedule – The Service Provider shall develop a weekly schedule of all program activities. The schedule shall show on a daily basis (Sunday-Saturday) the activity, location, supervisor, and any limitation on the number of participants. The facility Program Director shall review the activity schedule and forward to ICE for JFRMU approval.

(22) Admissions Procedures – The Service Provider shall have uniform admission procedures for residents which shall ensure, at a minimum, that the Service Provider

(a) Verifies that all official documents, which accompany each resident, are complete and accurate so that they accurately identify the resident.

(b) Conducts a comprehensive verbal orientation regarding the program and services for all residents in a language they

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understand, and documents completion of this orientation by having both the resident and the intake staff person sign and date a statement to that effect, or if resident is a juvenile the family member shall co-sign with the juvenile, or if the resident is too young and unable to sign, the intake staff person will document the reason why the juvenile's signature is not on the document. This orientation shall include the program's basic rules, regulations, and procedures, and any actions, which could result in disciplinary sanctions.

(c) Issues a receipt for all cash and other property taken from the resident upon admission, and prepares an inventory of that property which the resident signs and retains, in accordance with the attached ICE Residential Standard. This record shall be supplemented for any additional property the resident receives during his or her stay at the facility. The Service Provider shall provide a secured space for the property.

(d) Ensures that all residents shower upon admission, at which time a body chart is prepared to reflect any tattoos, birth marks, injuries, bruises, or evidence of contraband, etc., and receive clean clothing (if needed), bedding, and personal hygiene items.

(e) Ensures that all residents receive a complete health and safety assessment (including lice screening) upon admission and a complete medical examination by a licensed physician or physician's assistant within 48 hours of admission or the first workday after admission (unless the alien received a medical examination from the transferring ICE facility, and documentation of such is provided), and a psychological evaluation, if indicated by a counselor, psychologist or psychiatrist within 14 days of admission, or sooner if necessary.

(f) An admission packet shall be done and include all items required by the Family Residential Standard for Admissions.

(23) Individual Resident Case Records- Any records created and/or maintained by the Service Provider, its subProvider(s), and/or any third party are the sole property of ICE and shall be accessed or released upon request by ICE.

(a) The Service Provider shall develop, maintain and safeguard individual resident case records. The Service Provider shall develop a system of accountability, which preserves the confidentiality of resident information and protects the records from unauthorized use or disclosure.

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(b) At a minimum, individual resident case records must include the following information:

- 1) Name and alien registration number;
- 2) initial screening and intake forms;
- 3) case information from the referral source;
- 4) comprehensive assessment;
- 5) medical/dental files (must be maintained separately);
- 6) medical consent form;
- 7) individual service plans and case notes;
- 8) progress reports;
- 9) program rules and disciplinary policies;
- 10) copies of disciplinary actions;
- 11) referrals to other service agencies;
- 12) receipt and inventory of cash and personal property;
- 13) any other relevant information; and
- 14) any additional requirements by the State.

(24) Cash Procedures - The following procedures shall be followed to maintain accountability of residents' cash and other valuables. All procedures shall be in accordance with the attached Family Residential Standard.

(a) A Log shall be maintained showing all deposit and withdrawal activity (cash, jewelry, etc.). The Log shall include cash amount or item, date, resident's signature, preparing staffs signature, as well as a running balance of all cash transactions.

(b) A receipt voucher/request system shall be used for each cash transaction. The receipt voucher shall be signed by the person preparing the transaction, the resident, and the supervising staff person on duty. A copy shall be given to the resident and one shall be maintained in the resident's case file.

(c) Checks shall be maintained in the property bin

(d) All valuables shall be maintained in a secured safe and all funds shall be maintained in a non-interest bearing bank account.

(25) Remote Custody and Transportation Services - The Service Provider shall provide policy and procedures on remote custody and transportation services for approval by the Contracting Officer.

(a) Remote Custody Services

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1) The Service Provider shall provide, at the direction of the COTR, remote custody services as may be required. The Service Provider shall be reimbursed for these services only when such services are directed by the COTR. The Service Provider shall not abandon any facility assignment to perform remote custody services.

2) Duties and responsibilities of this function shall be to remain with residents at medical appointments, medical facilities where the resident has been admitted, or at other locations as directed in writing by the COTR.

3) The Service Provider shall be authorized one facility staff person of the same gender as the resident for each such remote custody service, unless at the direction of the COTR, additional facility staff persons are required.

(b) Transportation Services

1) The Service Provider shall provide transportation services as may be required to transport residents securely, in a timely manner, to locations as directed by the COTR.

2) The Service Provider shall perform medical transportation as needed, weekly, using two (2) staff persons per run, one (1) of which must be the same gender as the resident being transported.

3) The Service Provider shall furnish sufficient vehicles in good repair and suitable, as approved by the ICE, to safely provide the required transportation service. The Service Provider shall not allow employees to use their privately owned vehicles to transport residents.

4) Transportation routes and scheduling shall be accomplished in the most economical manner as approved by the COTR.

(c) The Service Provider personnel provided for the above transportation services shall be of the same qualifications, receive the same training, and complete the same security clearances as those Service Provider personnel provided for in the other areas of the Agreement.

(d) The Service Provider shall, upon order of the COTR, or upon his/her own decision in an urgent medical situation, transport a

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resident to a hospital location. The Service provider employee person shall keep the resident under constant supervision 24 hours per day until the resident is ordered released from the hospital, or at the order of the COTR. The Service Provider shall then transport the resident to the facility.

(e) When the COTR provides documents to the Service Provider concerning the resident(s) to be transported and/or escorted, the Service Provider shall deliver these documents only to the named authorized recipients. The Service Provider shall ensure the material is kept confidential and not viewed by any person other than the authorized recipient.

(f) The Service Provider shall establish a communications system that has direct and immediate contact with all vehicles and remote custody assignments. Upon demand, ICE will be provided with current status of all vehicles and remote custody assignment employees.

c. Rights of Residents

(1) Each resident is to enjoy a reasonable right to privacy, which shall include the right to:

- (a) Wear his or her own clothes, when available and appropriate;
- (b) Retain a private space in the residential facility for the storage of personal belongings;
- (c) Talk privately on the phone, as permitted by the Family Residential Standards and State regulations;
- (d) Visit privately with legal counsel as permitted by the Family Residential Standards;
- (e) Other visits as approved by ICE and monitored by facility staff;
- (f) Receive and send mail in accordance with Family Residential Standards; and
- (g) Attend religious services whenever possible.

(2) The Service Provider shall establish a policy and procedure that shall provide each resident freedom from discrimination based on race, religion, national origin, sex, handicap, or political beliefs, and ensures equal access to various services and work assignments, as appropriate.

(3) The Service Provider shall ensure that all residents have equal opportunities to participate in activities and receive services offered by the Service Provider.

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5. Program Management

a. Organizational Structure and Coordination

(1) The Service Provider shall prepare and submit all policies, plans and procedures required by this statement of work to ICE for review and approval in accordance with Section F, Deliverables, of this contract prior to implementation. The Service Provider shall provide a system that ensures all written policies, plans and procedures are reviewed at least annually and updated as necessary. The Service Provider shall provide written certification that the review has been conducted. No policy, plan, procedure, or any changes under this Agreement shall be implemented prior to the written approval of the Contracting Officer.

(2) Service Provider shall have operative plans that identify organizational structures, lines of authority and lines of responsibility. Service Provider shall also maintain and administer comprehensive plans that facilitate and enhance intra-program and intra-organizational (if appropriate) communication. At a minimum, the Service Provider must ensure weekly staff meetings to discuss individual service plans, progress and daily schedules. Service Provider shall maintain working relationships and liaison with appropriate community organizations and the ICE.

(3) The Service Provider shall provide an overall Quality Assurance Plan (QAP), for approval, that addresses critical and measurable operational performance standards for the services required under this contract. The Service Provider shall incorporate in the QAP a periodic system that reviews and updates the changes to all policies, plans and procedures. The QAP shall include a monthly audit, or as directed by ICE which shall include the performance review of the facility operations for compliance with the QAP and compliance with the requirements of this contract. The Service Provider shall notify the Government 24 hours in advance of the audit to ensure the COTR is available to participate. The Service Provider's QAP shall be capable of identifying deficiencies, appropriate corrective action(s) and timely implementation plan(s) to the Contracting Officer.

(4) Service Provider shall identify measures they will take or have taken to assure and maintain community receptivity and support and/or reduce community opposition to the program.

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b. Media and Organizational Inquiries –

The Service Provider shall refer all media inquiries to the ICE JFRMU. The Service Provider shall not provide any information to the press concerning this contract without prior approval from the ICE JFRMU. The Service Provider shall immediately notify the local ICE site supervisor of any media or other organizational inquiries.

c. Personnel/Staffing

(1) The Service Provider shall obtain prior written concurrence from the ICE Contracting Officer Prior to the hire of any key personnel, the Service Provider shall submit to the Juvenile and Family Residential Management Unit (JFRMU) Project Manager (PM) and the Contracting Officer a request for the review and approval of the job description, resume, cover letter, application, and any other applicable documents.

The following is a list of Key Personnel: Program Director, Assistant Program Director (if applicable), Clinicians/Lead Clinician, and Lead Case Manager.

(2) Prior to any employee performing duties under this contract, the Service Provider shall compile all documents and certifications which demonstrate the employees' compliance with the terms and conditions for employment as required by this contract and provide them to the COTR. The Service Provider shall obtain written approval from the COTR, for each employee, prior to assignment of duties.

(3) Programs shall ensure:

- (a) One person identifiably responsible for the entire program and its outcomes;
- (b) Staff person(s) identifiably responsible for the overall coordination of services including the individual service plans and the case management activities;
- (c) Clear lines of authority and responsibility;
- (d) Professional staff available to provide program services according to State standards;
- (e) Staff available to provide structure and to coordinate and deliver all services required of the program;
- (f) All staff responsible for the direct supervision of residents shall

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comply with the employee educational and/or experience levels that are commensurate with State standards;

(g) Staffing ratio is to be at most stringent state licensing requirement level, specifically, at a ratio at the lowest age group in the facility;

(h) All movement and activity of residents throughout the facility must be supervised by staff who are responsible for the direct supervision of residents;

(i) Staffing ratios must be maintained anywhere in the facility, e.g., when in recreation or dining (one staff person cannot take ten people down the hall). At no time shall there be all male or all female staff on duty. Staffing shall consist of appropriate male/female staff in accordance with the population to allow the accomplishment of the facility's goal;

(j) Staff training shall be in accordance with State standards and shall meet minimum requirements of the ICE Residential Standards for hiring and training. The Service Provider shall submit a training policy and procedure including the standards. Certification of employee training/refresher training shall be provided to ICE annually. Staff is prohibited from providing any legal advice or counsel to residents in care, and is expressly prohibited from hindering or interfering with a resident's custody arrangements or in the execution of final immigration court orders.

(k) Service Provider Employee Conduct. The Service Provider shall develop for his/her employees' standards of employee conduct and specific disciplinary actions which are consistent with the Federal Employee Responsibilities and Conduct, 5 CFR Part 735. The Service Provider shall hold his/her employees accountable for their conduct based on these standards, which are not restricted to, but must include:

1) Service Provider staff shall not display favoritism or preferential treatment to one resident, or group of residents, over another.

2) No Service Provider employee may deal with any resident except in a relationship that will support the approved goals of the facility. Specifically, staff members must never accept for themselves or any members of their family, any personal (tangible or intangible) gift, favor or service, from any resident or from any resident's family or

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close associate, no matter how trivial the gift or service may seem, for themselves or any members of their family. All staff members are required to report to the facility director any violation or attempted violation of these restrictions. In addition, no staff shall give any gift, favors, or service to residents, their family or close associates.

3) No Service Provider employee shall enter into any business relationship with residents or their families (selling, buying or trading personal property).

4) No employee shall have any outside or social contact (other than incidental contact) with any resident, his/her family, or close associates.

5) The Service Provider shall report all violations or attempted violations of the Standards of Conduct or any criminal activity to the COTR. Violations may result in employee dismissal by the Service Provider or at the discretion of ICE. Failure on the part of the Service Provider to report a known violation or to take appropriate disciplinary action against offending employee or employees shall subject the Service Provider to appropriate action up to and including termination of the contract for default.

6) The Service Provider shall provide all employees with a copy of the Service Provider's Standards of Conduct. All employees must certify in writing that they have read and understood the Service Provider's Standards of Conduct. A record of this certificate must be provided to the COIR prior to the employee's beginning work under this contract.

(1) EDUCATION AND BACKGROUND REQUIREMENTS

Education and Experience - at minimum, Service Provider employees shall possess a high school diploma or GED certificate and have at least two (2) years of experience that demonstrates the following:

- 1) The ability to greet and deal tactfully with the general public.
- 2) A clear capability of understanding and applying written and verbal orders, rules and regulations. All personnel shall be literate to the extent of being able to read and interpret printed rules and regulations, detailed written orders, training

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instructions and materials, and must be able to compose reports which contain the informational value required by such directives.

- 3) Each employee shall possess good judgment, courage, alertness, an even temperament, and render satisfactory performance by conscientiously acquiring a good working knowledge of his/her position responsibilities.
- 4) The ability to maintain poise and self-control during situations that involve mental stress; this entails being able to withstand the accompanying excitement of fires, explosions, civil disturbances, and building evacuations.
- 5) The Service Provider is responsible for reviewing the standard for hiring and training and for meeting the criteria set under that standard for the various positions identified.

(m) Removal from Duty

1) The Service Provider shall immediately notify the COTR in writing when learning of any adverse or disqualifying information on any employee. If the Contracting Officer or COTR receives disqualifying information on a Service Provider employee, he/she shall direct that the Service Provider immediately remove the employee from performing duties under this contract or any other ICE contract. The Service Provider must comply with all such directions. Disqualifying information includes but is not limited to:

- a) Conviction of a felony, a crime of violence, or a serious misdemeanor;
- b) Possessing a record of arrests for continuing offenses;
- c) Falsification of information entered on suitability forms.

2) ICE may direct that the Service Provider immediately remove from assignment to this Agreement any employee(s) who has/have been disqualified for either security reasons or for being unfit to perform their required duties as determined by the COTR or Contracting Officer. The Service Provider shall immediately notify the COTR in writing when the employee is removed from duty. The Service Provider shall comply with this direction. A determination of being unfit for duty may be made from, but is not limited to, incidents involving the most immediately identifiable types of misconduct or delinquency as set forth below:

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- a) Neglect of duty, including sleeping while on duty, loafing, and unreasonable delays of failures to carry out assigned tasks, conducting personal affairs during official time, and refusing to render assistance or cooperate in upholding the integrity of the security program at the work sites.
- b) Falsification or unlawful concealment, removal, mutilation, or destruction of any official documents or records, or concealment of material facts by willful omissions from official documents or records.
- c) Theft, vandalism, immoral conduct, or any other criminal actions.
- d) Selling, consuming, or being under the influence of intoxicants, drugs, or substances which produce similar effects.
- e) Unethical or improper use of official authority or credentials.
- f) Unauthorized use of communication equipment or Government property.
- g) Violations *of* security procedures or regulations.
- h) Recurring tardiness.
- i) Possession of alcohol or illegal substances while on duty.
- j) Undue fraternization with residents as determined by the COTR.
- k) Repeated failure to comply with visitor procedures as determined by the COTR.
- l) Performance, as determined by investigation by the Contracting Officer, involving acquiescence, negligence, misconduct, lack of diligence, good judgment, and/or common sense resulting in, or contributing to, a resident escape.
- m) Failure to maintain acceptable levels of proficiency or fulfill training requirements.

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(n) The Service Provider shall not assign nor permit any employee to work under this contract more than a total of 12 hours of any 24-hour period. This shall include time employed not within the scope of this contract. All employees shall have a continuous eight (8) hour rest period within each twenty-four (24) hour period. Should situations arise where an employee is required for more than 12 hours, the Service Provider shall obtain prior approval from the COTR. Exceptions shall only be granted on a case by case basis dependent upon the situation.

(o) The Service Provider shall immediately notify the COTR in writing of any employee(s) terminations, suspensions, resignations, or any other adverse personnel actions taken for any reason.

(p) The Service Provider is responsible for his/her employees having identification credentials in their possession at all times while performing under this contract. The Service Provider credential required by ICE under this contract must contain the following for each employee:

- 1) A photograph of the employee that is at least one inch square. The photograph will show as a maximum, the head and shoulders of the employee and will be no more than one year old at the time the credential is issued.
- 2) A printed personal description consisting of the employee's name, sex, birth date, height, weight, hair color, and eye color.
- 3) Date of issuance.
- 4) Signature of the employee.
- 5) Identification of and validation by the issuing authority.

No credential shall be more than three years old. The Service Provider must void and immediately make the appropriate disposition of all identification credentials upon completion of assignments which result in his/her employees no longer performing under this contract.

e. Physical Facility Plant

(1) Program services shall be provided in the least restrictive environment appropriate to the population and administered in a culturally sensitive

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manner. Service Provider shall affirmatively demonstrate through appropriate documentation that all facilities meet all applicable State licensing requirements for residential child care facilities and adult shelter care facilities, where applicable.

(2) The Service Provider shall provide regular and effective monitoring and shall ensure that all residents are provided housing which meets or exceeds the minimum design standards described in this document. State licensing guidelines provide ample instruction on space, privacy, fire, safety, and sanitation requirements. State licensing standards shall be made part of the record submitted by the Service Provider to ICE. The Service Provider shall provide a copy of all State issued reports on the facility to the ICE Contracting Officer.

(3) The Service Provider shall have a daily housekeeping plan for the facility's physical plant. The Service Provider shall make arrangements and be responsible for periodic scheduled cleaning of floors, windows, furnishings, fixtures, and grounds necessary to conform to the applicable health and sanitary requirements. All facility maintenance, including janitorial service, is the responsibility of the Service Provider. Service Provider shall supply the COTR with a copy of the housekeeping plan.

(4) The Service Provider shall provide space and accommodations as described in the attached Design Standard for "Family Residential Facility".

(5) The Service Provider shall not change or modify any drawings, schedules, specifications, or documentation provided under the solicitation/contract, without prior written direction or approval of the Contracting Officer. The Service Provider shall provide a complete set of construction drawings, schedules, and cut sheets at the 35% and 100% design stages for review and concurrence by the Contracting Officer. The 100% design shall be provided to the Contracting Officer at least 60 days prior to commencement of construction.

f. Emergency and Safety Requirements

(1) The facility shall comply with all applicable federal, state and municipal sanitation, safety and health codes. The Service Provider shall provide copies of the certificate(s) which document the compliance with these codes to the COTR prior to occupancy.

(2) The Service Provider shall provide written policy and procedure to the COTR which specify the facility's locally approved fire prevention plan and procedures to ensure the safety of staff, residents and visitors. The Service Provider shall provide documentation to the COTR of a fire and

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safety inspection of the facility. ICE may perform inspections as deemed necessary to assure compliance with all health, safety and emergency procedures.

(3) The Service Provider shall assure that the facility is a tobacco free environment.

(4) The Service Provider shall prepare a written evacuation and alternate staging plan for use in event of fire, major emergency or should the facility become unfit for its intended use. The Service Provider shall obtain written certification from a fire department inspector that the evacuation plan meets national fire safety codes. The Service Provider shall review the plan annually, update as necessary, and reissue to the local fire jurisdiction and the COTR, as well as ensuring awareness of the plan and procedures by the staff and the residents.

(5) The Service Provider shall ensure that the facility has the fully functional equipment necessary to ensure automatic transfer of services for essential lights, power and communications in an emergency.

(6) The Service Provider shall ensure that the interior finishing materials in living areas, exit areas and places of public assembly conform to recognized national safety codes.

(7) Children under 10 years of age shall not be permitted in upper bunks of any bunk beds.

(8) All electrical receptacle outlets shall be turned **off** in all bedrooms or protected by electrical safety devices such as surge protection switches or covers. All areas off-limits to residents must be locked when not in use.

g. Program Reporting Requirements

(1) Monthly Program Progress Reports are due the fifth workday after the end of each month. These reports shall, at a minimum, provide information regarding adjustments, and progress made toward meeting the specific goals and objectives of the contract. The Monthly Program Progress Report shall include, but is not limited to, information describing a chronological listing of all residents, which includes name, alien control number, date of admission, end of month status, and date of discharge.

(2) The Service Provider, upon discovery, shall immediately notify the applicable local ICE supervisor in charge of the facility verbally and follow up in writing within 24 hours with a complete written report of any change in the status or condition of any resident in care including the

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following:

- (a) Any unauthorized absence of the resident;
- (b) Contacts or threats by individuals believed to represent alien smuggling syndicates or organized crime;
- (c) Pregnancy of the resident;
- (d) Child-birth by the resident;
- (e) Hospitalization of, serious illness of, or serious injury to the resident;
- (f) Suicide or attempted suicide by the resident;
- (g) Escape or attempted escape by the resident;
- (h) Death of the resident;
- (i) Hunger strike by the resident(s);
- (j) Arrest and/or incarceration of the resident;
- (k) Commission of a major program offense;
- (l) Any abuse or neglect incident dealing with a resident; and
- (m) Unauthorized correspondence and/or contact with a resident.

(3) Procedures for reporting escapes or other unauthorized absences are as follows:

- (a) Report to local law enforcement authorities; and
- (b) Report to local ICE supervisor in charge of the facility;
- (c) Report to ICE/local law enforcement:
 - 1) Name and alien registration number of resident(s);
 - 2) Physical description of individual(s)
 - 3) Time of incident;
 - 4) What occurred;
 - 5) Any known calls or contacts made by resident prior to escape;
 - 6) Name, address, phone number of family;
 - 7) Information regarding unusual behavior;
 - 8) Any reasons to believe that escape was involuntary;
 - 9) Other law agencies notified and point(s) of contact.

h. Record Retention

(1) The Service Provider shall provide written plans, policies and procedures that describe the format and reporting criteria for all records and reports. The Service Provider shall maintain all logs and records required to operate and document both the operational and personnel aspects of the facility and to comply with the requirements of this contract. All logs and records shall be maintained at the facility in locked cabinets located within a properly secured and controlled room. The room shall be located within the administrative area of the facility. ICE officials shall have the right to inspect any and all records,

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upon demand, at any time during the term of the contract or thereafter as specified below. All reporting requirements contained within this contract shall comply with this paragraph.

(2) The Service Provider shall not destroy or alter with intent to deceive any logs/records pertaining to this contract. At the completion of termination of this contract, the Service Provider shall turn over all logs and records as directed by the Contracting Officer.

6. ICE Coordination

(1) ICE will be involved in the programmatic development and on-going activities proposed and agreed upon in this contract. ICE will monitor and evaluate the provision of services; establish mechanisms to facilitate the referral and assignment of juveniles and family groups to the Service Provider for purposes of shelter care and other related services and provide consultation regarding programmatic issues or concerns, as needed.

(2) At time of placement in facility, ICE will provide the Service Provider with appropriate available alien documentation.

7. Operating Constraints

The following constraints are the statutory, regulatory, policy and operational considerations that will or may impact the Service Provider. The Service Provider is expected to become familiar with all constraints affecting the work to be performed. These constraints may change over time; the Service Provider is expected to be aware of any changes to the constraints and perform in accordance with the most current version of the constraints. Constraints include, but are not limited to:

- a) Memoranda of Understanding between ICE and individual state and local law enforcement jurisdictions may vary.
- b) ICE resource constraints and funding may influence the activities and breadth of the Family Residential Management program.
- c) Department of Homeland Security Management Directive (MD) 11042.1 - Safeguarding Sensitive but Unclassified (For Official Use Only) Information.
- d) Department of Homeland Security Management Directive (MD) 11050.2 - Personnel Security and Suitability Program
- e) Other applicable Executive Orders and Management Directives
- f) Computer Security Act of 2002
- g) The Patriot Act of 2001

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- h) The Illegal Immigration Reform and Immigrant Responsibility Act (IIAIRA), P. L. 104-208
- i) Immigration and Nationality Act of 1952, as amended (P.L. 82-414)
- j) The Privacy Act of 1974, as amended (P. L. 5 U. S. C. 552a)
- k) Health Insurance Portability and Accountability Act of 1996 (P. L. 104-191)
- l) Federal Acquisition Regulations (FAR) and Department of Homeland Security Acquisition Regulations (HSAR)
- m) Applicable facility codes, rules, regulations and policies.
- n) Applicable Federal, state and local labor laws and codes.
- o) Pre-clearance approvals are required for access to ICE field staff, facilities and information
- p) All applicable environmental requirements, including Executive Orders and Management Directives
- q) Existing lease agreements.
- r) DHS Non-Disclosure Agreement Requirement

Statement of Work Performance Criteria

The COTR will monitor and evaluate the Service Provider’s progress and performance, including communications throughout the performance period, completeness and quality of performance requirements and the timeliness and quality of deliverables and services. All records, documents, programs and activities that the Service Provider provides on behalf of alien family groups shall comply with the applicable Federal and state requirements, including those areas pertaining to medical, education, admission processing, law enforcement, counseling, and legal services. (Note: The listing of tasks/deliverables in the chart below is not all-inclusive. It signifies those tasks/deliverables that are deemed critically important and have discreet performance indicators and measures. The Service Provider is obligated to perform all tasks/deliverables contained in the contract.)

Task/Deliverable	Required Outcomes	Performance Indicators	How Measured
Ref. 4a. Program Scope			
(1) Provide residential care and other services in a state licensed residential care program.	Facility(ies) will become operational by the approved start-up date(s) in the Service Provider’s approved Program Management Plan (or proposal).	Facility opens on time. Living quarters accommodate alien family members as prescribed by the SOW and standards. State and local health and	COTR surveillance to ensure timeliness in facility opening and start-up. Overall resident living quarters meet contract requirements. Processing, release, transfer and

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Task/Deliverable	Required Outcomes	Performance Indicators	How Measured
	<p>Each facility is a safe and clean living environment in which all the required tasks and services are timely and accurately delivered.</p>	<p>safety codes and standards are met.</p>	<p>removal actions are timely executed.</p> <p>The facility does not violate state or local building, health or safety codes. <u>No more than 3 minor violations/year</u> are permitted. Each violation is resolved within the prescribed allotted time frame. <u>No more than 1 major violation/year</u> is permitted. A major violation is one in which there is an imminent danger to staff and/or residents that requires immediate rectification.</p>
<p>(5) The Service Provider shall ensure that the family group(s) and its individual members follow an integrated and structured daily routine which shall include, but not be limited to the following services: education, recreation, life skills and/or chores, study period, counseling, group interaction, free time and access to religious and legal services.</p>	<p>Family members' daily routines include a well-rounded and productive educational and activity curriculum.</p>	<p>The daily curriculum for family members includes children's educational programs, recreation, life skills, counseling (if needed) and access to religious and legal services, if desired.</p>	<p>COTR inspections of programs and resident activities.</p> <p>Resident surveys to validate the availability, use and quality of services.</p>
<p>(9) The Service Provider shall implement and administer a case management system which tracks and monitors each resident's progress on a regular basis to ensure that he/she receives the full range of program services in an integrated and comprehensive manner.</p>	<p>Case files contain each resident's enrollments in activities, their progress and achievements, health care services and other relevant information.</p>	<p>All entries are accurate and current. Law enforcement, Privacy Act and HIPAA-related information are properly safeguarded.</p> <p>Records are secured in accordance with computer security and physical security standards.</p>	<p>COTR inspections of case files.</p>

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Task/Deliverable	Required Outcomes	Performance Indicators	How Measured
Ref. 4b Program Services			
(1) Care and Maintenance - Proper physical care and maintenance, including suitable living accommodations, food, appropriate clothing, personal grooming items and hair care services, and personal allowance or remuneration for work shall be provided (outside of normal chores or responsibilities) as defined by applicable State statutes.	Living quarters, meals, clothing and personal care services are in place and available to all residents.	Each resident has his/her own sleeping quarters, meals, essential clothing and is remunerated for work outside normal chores, when applicable.	COTR inspections of facilities and services to residents. Resident surveys to validate the availability, use and quality of services
(2) Medical/Mental/Dental Care (see Statement of Work for full text).	Arrival screenings are performed within the prescribed 6 hour upon arrival time frame. On-site health care is available 24 hours/day, 7 days per week. Instructions are in the resident's native language. Access to an off-site emergency medical care service is arranged and in place. Policies and procedures for dispensing over-the-counter and Rx drugs and special diets are in place.	Prompt screenings and processing of new arrivals. On-site health care is accessible and available to residents. Instructions are available and clearly understood by residents. Emergency care is provided when required. Policies and procedures are reviewed and approved by the COTR	COTR inspections. Information is validated through resident surveys.
(6) Case Management (see Statement of Work for full text).	Individual service plans are developed, implemented and coordinated. Staff members are qualified	Case files are maintained and current. Residents' safety, social and cultural needs are monitored and addressed.	COTR inspections.

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Task/Deliverable	Required Outcomes	Performance Indicators	How Measured
	social workers or case workers having the necessary education and training.	Staff members' credentials are available for review.	
(8) Juvenile Education (see Statement of Work for full text).	<p>Education programs are held in structured and grade level appropriate classroom settings.</p> <p>Instructions in core subjects are provided.</p> <p>Student/teacher ratio does not exceed 20:1.</p> <p>Students with handicaps and/or special needs are identified and referred to appropriate agencies for intervention and services.</p>	<p>Classrooms are provided. Desks/tables are classroom materials are appropriate for each grade level.</p> <p>Teachers are qualified and conduct lessons in the appropriate native language (Spanish and Chinese), as needed.</p> <p>No more than 20 students are in each class.</p> <p>Students with special needs are provided services to facilitate their learning.</p>	<p>COTR inspections.</p> <p>Information is validated through resident surveys.</p>
5. Program Management			
a Organization Structure and Coordination	Policies, plans and procedures are timely developed. They are submitted for COTR review annually.	Policies, plans and procedures encompass all program services and program management requirements	<p>Documents are on file with the Service Provider and available for COTR's inspection.</p> <p>Documents are submitted annually as prescribed by the Contract, Section F.</p>
c. Personnel/Staffing	Key personnel qualifications are provided and meet the criteria for the personnel's position(s).	The qualifications are presented to the COTR for review and approval prior to placement.	Key personnel qualifications meet the criteria for the personnel's position(s).



Berks County Youth Center Standard Operating Procedures and Policies

Chapter: Quality Assurance Plan - Draft

Policy #: 38.010

Subject:

Effective Date: 10/15/09

Program: Immigration Family Program

Revised Date: 10/15/09

Approved: Signature on File

Kenneth C. Borkey, Jr., Executive Director

Policy

It is the policy of the Berks County Youth Center to implement and maintain a Quality Assurance Plan (QAP) with a Performance Monitoring Tool to ensure and demonstrate this facility's compliance with the U.S. Immigration and Custom Enforcement Immigration Family Standards.

Procedure

1. The Berks County Immigration Family Shelter shall use The U.S. Immigration and Customs Enforcement Detention and Removal Operations Performance Monitoring Tool to document the frequency that each standard is reviewed; the rating used to access the overall performance; the corrective action required and/or comments and the due date the corrective action required is to be completed by.
2. The U.S. Immigration and Customs Enforcement Detention and Removal Operations Performance Monitoring Tool uses the following ratings to access overall performance during the review:

Rating	Description
Acceptable (A)	Based on the measures, the performance standard is demonstrated.
Deficient (D)	Based on the measures, compliance with most of the attributes of the performance standard is demonstrated/observed with some area(s) needing improvement. There are no critical areas of unacceptable performance.

3. The following is a sample of the many existing monitoring tools that shall be used during reviews to verify and document this facility's compliance with the U.S. Immigration and Custom Enforcement Immigration Family Standards :
 - Written policies and procedures and logs developed to monitor each policy and procedure
 - Employee Policy Sign-Off Sheets for new policies and/or procedures
 - LOCKDOWN Software used for resident funds accountability
 - Medical logs retained by the Medical Department
 - Written Emergency Plans and Quarterly Table Top Drills
 - Kitchen Monitoring Forms
 - Maintenance Forms
 - Training files retained by the Training Department

- Resident File Review
 - Facility Logbook and all facility reports.
 - Internal Security Checks between shifts
 - Facility Logbook and Report Forms
 - Monthly Safety Committee Meetings
 - Resident Handbook
 - Life Health Safety Checks
4. The Deputy Director shall assign the Daily and Weekly compliance reviews as indicated by the U.S. Immigration and Customs Enforcement Detention and Removal Operations Performance Monitoring Tool to ensure that the overall operational requirements of the standards are being met.
 5. A Compliance Review Report shall be completed during the review and returned to the Deputy Director within the established required time frame.
 6. When it is determined that a corrective action is required to bring the facility into compliance, the Deputy Director or their designee shall determine the deadline for the required corrective action.
 7. The Deputy Director shall conduct the Monthly and Quarterly compliance reviews as indicated by the U.S. Immigration and Customs Enforcement Detention and Removal Operations Performance Monitoring Tool to ensure that the total operational requirements of the standards are being met.
 8. The Deputy Director shall maintain the facility's master copy of the U.S. Immigration and Customs Enforcement Detention and Removal Operations Performance Monitoring Tool.

Immigration and Customs Enforcement
Office of Detention and Removal Operations



Family and Residential Centers
Quality Assurance Surveillance Plan

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QUALITY ASSURANCE SURVEILLANCE PLAN
for the
FAMILY AND RESIDENTIAL CENTERS
IMMIGRATION AND CUSTOMS ENFORCEMENT (ICE)
OFFICE OF DETENTION AND REMOVAL (DRO)

1. INTRODUCTION

The Government's Quality Assurance Surveillance Plan (QASP) is based on the premise that the contractor/service provider, and not the Government, is responsible for the day-to-day operation of the facility, the delivery of educational, medical and social services, and all the management and quality control actions required to meet the terms of the contract. The role of the Government in quality assurance is to ensure performance standards are achieved and maintained. The service provider is required to develop a comprehensive program of inspections and monitoring actions and to document its approach in a Quality Control Plan (QCP). The service provider's QCP, upon approval by the Government, will be made a part of the resultant agreement.

This QASP is designed to provide an effective surveillance method to monitor the service provider's performance relative to the requirements listed in the agreement. The QASP illustrates the systematic method the Government (or its designated on-site representative) will use to evaluate the services the service provider is required to furnish.

This QASP is based on the principle that the Government must validate that the contractor/service provider is complying with DRO-mandated quality standards in operating, maintaining, and repairing detention facilities. Performance standards address all facets of resident handling, including safety, health, legal rights, facility and records management, etc. Good management by the service provider and use of an approved QCP will ensure that the facility is operating within acceptable quality levels.

2. DEFINITIONS

Performance Requirements Summary (Attachment 1): The Performance Requirements Summary (PRS) communicates what the Government intends to qualitatively inspect. The PRS is based on ICE DRO Residential Standard. The PRS identifies performance standards grouped into ten functional areas, and quality levels essential for successful performance of each requirement. The PRS is used by the Government (or its designated representative) when conducting quality assurance surveillance to guide them through the inspection and review processes for assessing compliance in meeting Government standards.

Functional Area: A logical grouping of performance standards.

Contracting Officer's Technical Representative (COTR): The COTR interacts with the service provider to inspect and accept services/work performed in accordance with the technical standards prescribed in the agreement. The Contracting Officer issues a

written memorandum that appoints the COTR. Other individuals may be designated to assist in the inspection and quality assurance surveillance activities.

Performance Standards: The performance standards are established in the DRO Residential Standards. Other standards may also be defined in the agreement.

Measures: The method for evaluating compliance with the standards.

Acceptable Quality Level: The minimum level of quality that will be accepted by the Government in order to meet the performance standard.

Withholding: Amount of monthly invoice payment withheld pending correction of a deficiency. See Attachment 1 for information on percentage of invoice amount that may be withheld for each functional area. Funds withheld from payment are recoverable (See Sections 7 and 8) if the COTR and Contracting Officer confirm resolution/correction, and should be included in the next month's invoice.

Deduction: Funds may be deducted from a monthly invoice for an egregious act or event, or if the same deficiency continues to occur. The service provider will be notified immediately if such a situation arises. The Contracting Officer in consultation with the Program Office will determine the amount of the deduction. Amounts deducted are not recoverable. The assessment of deductions does not preclude the Contracting Officer from initiating other applicable contract actions and remedies, if applicable.

3. QUALITY CONTROL PLAN

As a part of its agreement with the Government, the service provider is required to develop, implement, and maintain a Quality Control Plan (QCP) that describes the methods it will use to review its performance to ensure it conforms to the performance requirements. (See Attachment 1 for a summary list of performance requirements.) Such reviews are performed by the service provider in order to validate its operations, and assure the Government that the services meet the performance standards.

The service provider's QCP should include monitoring methods that ensure and demonstrate its compliance with the performance standards. This includes inspection methods and schedules that are consistent with the regular reviews conducted by DRO. The reports and other results generated by the service provider's QCP activities should be provided to the COTR as requested.

The frequency and type of the service provider's reviews should be consistent with what is necessary in order to ensure compliance with the performance standards, but no less frequent than what is described in the Government's monitoring instrument/worksheets (See Attachment 3).

The contractor/service provider is encouraged not to limit its inspection to only the processes outlined in the Government's standard; however, certain key documents must be produced by the provider to assure the Government that the services meet the

performance standards. Some of the documentation that must be generated and made available to the COTR for inspection is listed below. The list is intended as illustrative and is not all-inclusive. The service provider must develop and implement a program that addresses the specific requirement of each standard and the means it will use to document compliance.

- Written policies and procedures to implement and assess operational requirements of the standard
- Documentation and record keeping ensuring ongoing operational compliance with the standards (e.g.; inventories, logbooks, register of receipts, reports, etc.)
- Staff training records
- Contract discrepancy reports (CDRs)
- Investigative reports
- Medical records
- Education curricula (in accordance with state education criteria and standards) and child development records
- Records of legal and counseling services (with consideration of attorney-client confidentiality)
- Records of investigative actions taken
- Equipment inspections
- System tests and evaluation

4. METHODS OF SURVEILLANCE

The Government will inspect the service provider's facility and operations using worksheets it developed for this purpose. All facilities will be subject to an annual full facility review using the procedures outlined in the ICE DRO Residential Standard. The Government's annual full facility reviews will use the monitoring instruments embedded in the standards.

All Family Residential Facilities will have an on-site COTR and/or designees who will perform regular and more frequent inspections using the worksheet in Attachment 3. This worksheet will help the COTR or designee assess overall performance, by reviewing specific items within the functional areas on a daily, weekly, monthly, and/or quarterly basis. Both annual and routine inspections will include a review of the service provider's QCP activities including the reports and results generated by them.

The COTR or designee will evaluate the service provider's performance by (a) conducting site visits to assess the facility and residential health and welfare conditions, (b) reviewing documentation, and (c) interviewing the service provider's personnel and/or residents. NOTE: For day-to-day activities, the Government will conduct its surveillance using the worksheets created for this purpose, along with the Contract Deficiency Reports (CDRs; See Attachment 2) and the "Contract Performance Monitoring Tool" set forth in Attachment 3. Where ICE/DRO standards are referenced

for annual review purposes, the “Monitoring Instruments” and “Verification Sources” identified in the DRO standard will be used.

4.1 Site Visits: Site visits are used to observe actual performance and to conduct interviews to determine the extent of compliance with performance standards, and to ensure any noted defects are effectively addressed and corrected as quickly as possible. All Family Residential sites will have an on-site COTR designee. Routine reviews may involve direct observation of the service provider personnel performing tasks, interacting with residents and other staff members, and/or reviewing documentation that demonstrates compliance with the DRO standards. On-site inspections may be performed by the ICE COTR or by other parties designated as representatives of ICE. Inspections may be planned or ad-hoc.

4.2 Ad-Hoc: These inspections are unscheduled and will be conducted as a result of special interests arising from routine monitoring of the service provider’s QCP, an unusual occurrence pertaining to the agreement or other ICE concerns. These inspections may also be used as a follow-up to a previous inspection. Inspection findings will be provided to the service provider as appropriate.

When visiting a site, either the COTR or a designated third party may conduct their own inspections of service provider performance activities, or accompany the service provider’s designated Quality Control Inspector (QCI) on scheduled inspections. The COTR may also immediately inspect the same area as soon as the QCI has completed the quality control inspection to determine if any surveillance areas were overlooked. The COTR may also inspect an area prior to the QCI and compare results. The COTR will record all findings; certain deficiencies noted will be provided in writing and must be corrected within a reasonable amount of time (See Attachment 2).

4.3 Review of Documentation: The service provider must develop and maintain all documentation as prescribed in the performance standards (e.g., post logs, policies, and records of corrective actions). In addition to the documentation prescribed by the standards, the service provider must also develop and maintain documentation that demonstrates the results of its own inspections as prescribed in its QCP. The COTR will review both forms of documentation to affirm that the facility conditions, policies/procedures, and handling of residents all conform to the performance standards stated herein. When reviewing the service provider’s documentation, the Government may review 100% of the documents, or a representative sample. Documentation may be reviewed during a site visit, or at periodic points throughout the period of performance.

4.4 Interviews and Other Feedback: The COTR will interview key members of the service provider’s staff, residents and other Government personnel to ascertain current practices and the extent of compliance with the performance standards.

5. FUNCTIONAL PERFORMANCE AREAS AND STANDARDS

To facilitate the performance review process, the required performance standards are organized into nine functional areas. Each functional area represents a proportionate share (i.e., weight) of the monthly invoice amount payable to the service provider based on meeting the performance standards. Payment withholdings will be based on these percentages and weights applied to the overall monthly invoice.

ICE may, consistent with the scope the agreement, unilaterally change the functional areas and associated standards affiliated with a specific functional area. The Contracting Officer will notify the service provider at least 30 calendar days in advance of implementation of the new standard(s). If the service provider is not provided with the notification, adjustment to the new standard must be made within 30 calendar days after notification. If any change affects pricing, the service provider may submit a request for equitable price adjustment in accordance with the "Changes" clause. ICE reserves the right to develop and implement new inspection techniques and instructions at any time during performance without notice to the service provider, so long as the standards are not more stringent than those being replaced.

6. FAILURE TO MEET PERFORMANCE STANDARDS

Performance of services in conformance with the PRS standards is essential for the service provider to receive full payment as identified in the agreement. The Contracting Officer may take deductions against the monthly invoices for unsatisfactory performance documented through surveillance of the service provider's activities gained through site inspections, reviews of documentation (including monthly QCP reports), interviews and other feedback. As a result of its surveillance, the service provider will be assigned the following rating relative to each performance standard:

Rating	Description
Acceptable	Based on the measures, the performance standard is demonstrated.
Deficient	Based on the measures, compliance with most of the attributes of the performance standard is demonstrated/observed with some area(s) needing improvement. There are no critical areas of unacceptable performance
At-Risk	Based on the performance measures, the majority of a performance standard's attributes are not met.

Using the above standards as a guide, the Contracting Officer will implement adjustments to the service provider's monthly invoice as prescribed in Attachment 1

Rather than withholding funds until a deficiency is corrected, there may be times when an event or a deficiency is so egregious that the Government *deducts* (vs. "withholds") amounts from the service provider's monthly invoice. This may happen when an event occurs, such as sexual abuse, when a particular deficiency is noted 3 or more times without correction, or when the service provider has failed to take timely action on a deficiency about which he/she was properly and timely notified. The amount deducted will be consistent with the relative weight of the functional performance area where the deficiency was noted. The deduction may be a one-time event, or may continue until the service provider has either corrected the deficiency, or made substantial progress in the correction.

Further, a deficiency found in one functional area may tie into another. If a resident escaped, for example, a deficiency would be noted in "Security and Control," but may also relate to a deficiency in the area of "Administration and Management."

7. NOTIFICATIONS

- (a) Based on the inspection of the service provider's performance, the COTR will document instances of deficient or at-risk performance (e.g., noncompliance with the standard) using the CDR located at Attachment 2. To the extent practicable, issues should be resolved informally, with the COTR and service provider working together. When documentation of an issue or deficiency is required, the procedures set forth in this section will be followed.
- (b) When a CDR is required to document performance issues, it will be submitted to the service provider with a date when a response is due. Upon receipt of a CDR, the service provider must immediately assess the situation and either correct the deficiency as quickly as possible or prepare a corrective action plan. In either event, the service provider must return the CDR with the action planned or taken noted. After the COTR reviews the service provider's response to the CDR including its plan/remedy, the COTR will either accept plan or correction or reject the

correction/plan for revision and provide an explanation. This process should take no more than one week. The CDR should not be used as a substitute for quality control by the service provider.

- (c) The COTR and CO, in addition to any other designated ICE official, shall be notified immediately in the event of all emergencies. Emergencies include, but are not limited to the following: activation of disturbance control team(s); disturbances (including gang activities, group demonstrations, food boycotts, work strikes, work-place violence, civil disturbances/ protests); staff use of force including use of lethal and less-lethal force (includes inmates in restraints more than eight hours); assaults on staff/inmates resulting in injuries requiring medical attention (does not include routine medical evaluation after the incident); fights resulting in injuries requiring medical attention; fires; full or partial lock down of the facility; escape; weapons discharge; suicide attempts; deaths; declared or non-declared hunger strikes; adverse incidents that attract unusual interest or significant publicity; adverse weather (e.g., hurricanes, floods, ice/snow storms, heat waves, tornadoes); fence damage; power outages; bomb threats; Resident cases admitted to a community hospital; significant environmental problems that impact the facility operations; transportation accidents (airlift, bus, etc.) resulting in injuries, death or property damage; and sexual assaults. Note that in an emergency situation, a CDR may not be issued until an investigation has been completed.
- (d) If the COTR concludes that the deficient or at-risk performance warrants a withholding or deduction, the COTR must include the CDR in its monthly report to DRO Headquarters, with a copy to the Contracting Officer. The CDR must be accompanied by the COTR's investigation report and written recommendation for any withholding. If contractual action including a withholding or deduction is appropriate, DRO headquarters will forward the CDR and supporting information to the Contracting Officer for action. The Contracting Officer will consider the COTR's recommendation and forward the CDR along with any relevant supporting information to the service provider in order to confirm or further discuss the prospective cure, including the Government's proposed course of action. As described in Section 6 above, portions of the monthly invoice amount may be withheld until such time as the corrective action is completed, *or* a deduction may be taken
- (e) Following receipt of the service provider's notification that the correction has been made, the COTR may re-inspect the facility. Based upon the COTR's findings, he/she will recommend that the Contracting Officer continue to withhold a proportionate share of the payment until the correction is made, or accept the correction as final and release the full amount withheld for that issue.
- (f) If funds have been withheld and either the Government or the service provider terminates the agreement, those funds will not be released. The service provider may only receive withheld payments upon successful correction of an instance of non-compliance. Further, the service provider is not relieved of full performance of the

required services hereunder; the agreement may be terminated upon adequate notice from the Government based upon any once instance, or failure to remedy deficient performance, even if a deduction was previously taken for any inadequate performance.

(g) The COTR will maintain a record of all open and resolved CDRs.

8. RESIDENT/MEMBER OF PUBLIC COMPLAINTS

The resident and the public are the ultimate recipients of the services identified in this agreement. Any complaints made known to the COTR will be logged and forwarded to the service provider for remedy. Upon notification, the service provider will be given a pre-specified number of hours after verbal notification from the COTR to address the issue. The service provider will submit documentation to the COTR regarding the actions taken to remedy the situation. If the complaint is found to be invalid, the service provider will document its findings and notify the COTR.

9. ATTACHMENTS

- 1 Performance Requirements Summary
- 2 Contract Discrepancy Report
- 3 Performance Monitoring Tool
- 4 Staffing Plan

Attachment 1- Performance Requirements Summary

FUNCTIONAL AREA/ WEIGHT	PERFORMANCE STANDARD	PERFORMANCE MEASURE	METHOD OF SURVEILLANCE	ACCEPTABLE QUALITY LEVEL	WITHHOLDING CRITERIA
<p>Administration and Management (10 %) (Addresses facility policy development, internal inspection and reviews, resident records, administration and orientation, personal property and monies, release and accommodations for the disabled)</p>	<p>ICE DRO Residential Management Standard (INSERT URL HERE) Accommodations for the Disabled, 4-ALDF-6B-04, 4-ALDF-6B-07 Contractor Quality Control/ Assurance Program (Contract) 4-ALDF-7D-02 Admission and Release/Orientation (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/admiss.pdf) Detainee Records/ Detention Files (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/DetentFiles.pdf) Detainee Handbook (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/handbk.pdf) Internal Inspections and/or Reviews/ Detention Management & Control Program (ICE Standard) Funds & Personal Property (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/fundprop.pdf)</p>	<p>Performance measures are reflected in the monitoring instrument that accompanies each standard or in the supplemental performance monitoring tool issued by the COTR</p>	<ul style="list-style-type: none"> Annual review of facility using Detention Management Control Program (DCMP) procedures and based upon the performance standard Periodic reviews in accordance with the contract performance monitoring tool (see attached) Monthly review of corrective action plan results. Ad-hoc reviews as needed Review of service provider's quality control program monitoring reports CDRs 	<p>Performance fully complies with all elements of standard at a level no less than acceptable (see Section 6 of the QASP)</p>	<p>A rating of Deficient on any three of the standards will result in a 10% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p> <p>A rating of At-Risk on any of the standards will result in a 10% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p>

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FUNCTIONAL AREA/ WEIGHT	PERFORMANCE STANDARD	PERFORMANCE MEASURE	METHOD OF SURVEILLANCE	ACCEPTABLE QUALITY LEVEL	WITHHOLDING CRITERIA
	Policy Development and Monitoring 4-ALDF-7D-06				
	ICE DRO Residential Management Standard (INSERT URL HERE)	Performance measures are reflected in the monitoring instrument that accompanies each standard or in the supplemental performance monitoring tool issued by the COTR	<ul style="list-style-type: none"> Annual review of facility using Detention Management Control Program (DCMP) procedures and based upon the performance standard Periodic reviews in accordance with the attached performance monitoring tool Monthly review of corrective action plan results. Ad-hoc reviews as needed CDRs 	Performance fully complies with all elements of standard at a level no less than acceptable (see Section 6 of the QASP)	<p>A rating of Deficient on any two of the standards will result in a 15% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p> <p>A rating of At-Risk on any of the standards will result in a 15% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p>
<p>Health Care (15%) (Addresses overall access to routine, chronic health care, mental health, emergency health pharmaceuticals, and dental services provided by the institution)</p>	<p>Communicable Disease 4-ALDF-4C-14</p> <p>Detainee Hunger Strikes (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/hunger.pdf)</p> <p>Experimental Research 4-ALDF-4D-18</p> <p>Medical, Dental, and Mental Health Appraisals/Medical Care (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/medical.pdf)</p> <p>Suicide Prevention (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/suciprev.pdf)</p> <p>Terminal Illness, Advanced Directives and Death (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/terminal.pdf)</p>				

FUNCTIONAL AREA/ WEIGHT	PERFORMANCE STANDARD	PERFORMANCE MEASURE	METHOD OF SURVEILLANCE	ACCEPTABLE QUALITY LEVEL	WITHHOLDING CRITERIA
<p align="center">Security and Control (25%) (Addresses post orders, permanent logs, security features, security inspections, control of contraband, resident searches, resident accountability, use of force, non-routine use of restraints, tool and equipment control, resident discipline, supervision for special housing, contingency and emergency plans.)</p>	<p>Detainee Searches 4-ALDF-2C-01-06 Detainee Accountability & Supervision/Population Counts (ICE Standard) http://www.ice.gov/doclib/partners/dro/opsman/ual/popula.pdf Use of Force (ICE Standard) http://www.ice.gov/doclib/partners/dro/opsman/ual/usooffor.pdf Detainee Transfers (ICE Standard) http://www.ice.gov/doclib/partners/dro/opsman/ual/defTransStd/final.pdf Tool and Equipment Control (ICE Standard) http://www.ice.gov/doclib/partners/dro/opsman/ual/tooleqt.pdf Weapon Control 4-ALDF-2B-04, 4-ALDF-2B-08, 4-ALDF-7B-14 Detainee Discipline (ICE Standard) http://www.ice.gov/doclib/partners/dro/opsman/ual/discip.pdf Special Management Unit- Administrative Segregation (ICE Standard) http://www.ice.gov/doclib/partners/dro/opsman/ual/smu_admin.pdf</p>	<p>Performance measures are reflected in the monitoring instrument that accompanies each standard or in the supplemental performance monitoring tool issued by the COTR</p> <ul style="list-style-type: none"> Annual review of facility using Detention Management Control Program (DCMP) procedures and based upon the performance standard Periodic reviews in accordance with the contract performance monitoring tool (see attached) 	<p>Monthly review of corrective action plan results.</p> <ul style="list-style-type: none"> Ad-hoc reviews as needed CDRs Review of service provider's quality control program monitoring reports and output data 	<p>Performance fully complies with all elements of standard at a level no less than acceptable (see Section 6 of the QASP)</p> <p>A rating of Deficient on any three of the standards will result in a 25% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p>	<p>A rating of Deficient on any two of the standards will result in a 15% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p> <p>A rating of At-Risk on any of the standards will result in a 25% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p>

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FUNCTIONAL AREA/ WEIGHT	PERFORMANCE STANDARD	PERFORMANCE MEASURE	METHOD OF SURVEILLANCE	ACCEPTABLE QUALITY LEVEL	WITHHOLDING CRITERIA
	<p>Special Management Unit-Disciplinary Segregation (ICE Standard) http://www.ice.gov/doclib/partners/dro/opsmanual/smu_dfs.pdf</p> <p>Contingency/Emergency Plan (ICE Standard) http://www.ice.gov/doclib/partners/dro/opsmanual/emergege.pdf</p> <p>Hold Rooms in Detention Facilities (ICE Standard) http://www.ice.gov/doclib/partners/dro/opsmanual/holdrm.pdf</p> <p>Control of Contraband (ICE Standard) http://www.ice.gov/doclib/partners/dro/opsmanual/contra.pdf</p> <p>Post Orders (ICE Standard) http://www.ice.gov/doclib/partners/dro/opsmanual/postord.pdf</p> <p>Permanent Logs 4-ALDF-2A-11</p> <p>Security Features (ICE Standard) http://www.ice.gov/doclib/partners/dro/opsmanual/keylock.pdf</p> <p>Security Inspections and/or Reviews (ICE Standard) http://www.ice.gov/doclib/partners/dro/opsmanual/secuinsp.pdf</p> <p>Sexual Assault 4-ALDF-4D-22-8</p>				

A984

FUNCTIONAL AREA/ WEIGHT	PERFORMANCE STANDARD	PERFORMANCE MEASURE	METHOD OF SURVEILLANCE	ACCEPTABLE QUALITY LEVEL	WITHHOLDING CRITERIA
<p>Food Service (10%) (Addresses basic sanitation and adequacy of varied meals and special diets provided to residents)</p>	<p>Transportation (Land Transportation) (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/transp.pdf)</p> <p>Weapons Control 4-ALDF-2B-04, 4-ALDF-2B-08, 4-ALDF-7B-14</p>	<p>Performance measures are reflected in the monitoring instrument that accompanies each standard or in the supplemental performance monitoring tool issued by the COTR</p>	<ul style="list-style-type: none"> Annual review of facility using Detention Management Control Program (DCMP) procedures and based upon the performance standard Periodic review in accordance with the attached performance monitoring tool Monthly review of corrective action plan results. Ad-hoc reviews as needed CDRs 	<p>Performance fully complies with all elements of standard at a level no less than acceptable (see Section 6 of the QASP)</p>	<p>A rating of Deficient on any of the standards will result in a 10% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p>
	<p>ICE DRO Residential Management Standard (INSERT URL HERE) Environmental Health & Safety (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/envirom.pdf)</p>				<p>A rating of At-Risk on any of the standards will result in a 10% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p>
	<p>Food Service Standards (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/FoodService.pdf)</p>				

A985

FUNCTIONAL AREA/ WEIGHT	PERFORMANCE STANDARD	PERFORMANCE MEASURE	METHOD OF SURVEILLANCE	ACCEPTABLE QUALITY LEVEL	WITHHOLDING CRITERIA
<p>Staff and Resident Communications and Information Dissemination (2.5%) (Addresses methods of communicating with residents, detention/correctional staff training in diversity, and the resident grievance process)</p>	<p>Detainee Grievances (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/griev.pdf)</p> <p>Diversity Training 4-ALDF-6A-08, 4-ALDF-7B-10</p> <p>Staff Detainee Communication (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/Staff.Detainee.Communication.pdf)</p>	<p>Performance measures are reflected in the monitoring instrument that accompanies each standard or in the supplemental performance monitoring tool issued by the COTR</p>	<ul style="list-style-type: none"> Annual review of facility using Detention Management Control Program (DCMP) procedures and based upon the performance standard Periodic reviews in accordance with the attached performance monitoring tool Monthly review of corrective action plan results. Ad-hoc reviews as needed CDRs 	<p>Performance fully complies with all elements of standard at a level no less than acceptable (see Section 6 of the QASP)</p>	<p>A rating of Deficient on any two of the standards will result in a 2.5% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p> <p>A rating of At-Risk on any of the standards will result in a 2.5% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p>
<p>Safety and Sanitation (10%) (Addresses the adequacy of fire safety programs, the control of dangerous materials, the general facility environment (including air quality, noise levels, and sanitation and hygiene programs), the adequacy of clothing and bedding, and from infectious diseases)</p>	<p>Environmental Health & Safety (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/envirom.pdf)</p> <p>Clothing and Bedding (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/cloth.pdf)</p>	<p>Performance measures are reflected in the monitoring instrument that accompanies each standard or in the supplemental performance monitoring tool issued by the COTR</p>	<ul style="list-style-type: none"> Annual review of facility using Detention Management Control Program (DCMP) procedures and based upon the performance standard Periodic reviews in accordance with the attached performance monitoring tool Monthly review of corrective action plan results. Ad-hoc reviews as needed CDRs 	<p>Performance fully complies with all elements of standard at a level no less than acceptable (see Section 6 of the QASP)</p>	<p>A rating of Deficient on any two of the standards will result in a 10% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p> <p>A rating of At-Risk on any of the standards will result in a 10% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p>

FUNCTIONAL AREA/ WEIGHT	PERFORMANCE STANDARD	PERFORMANCE MEASURE	METHOD OF SURVEILLANCE	ACCEPTABLE QUALITY LEVEL	WITHHOLDING CRITERIA	
<p>Services and Programs (5%) (Addresses resident security classification, religious practices, work assignments, availability of exercise programs, access to legal materials, access to legal representation, access to a telephone, the handling of resident mail and other correspondence, and visitation privileges)</p>	ICE DRO Residential Management Standard (INSERT URL HERE) Access to Legal Material (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/legal.pdf)	Performance measures are reflected in the monitoring instrument that accompanies each standard or in the supplemental performance monitoring tool issued by the COFR	<ul style="list-style-type: none"> Annual review of facility using Detention Management Control Program (DCMP) procedures and based upon the performance standard Periodic reviews in accordance with the attached performance monitoring tool Monthly review of corrective action plan results. Ad-hoc reviews as needed CDRs 	Performance fully complies with all elements of standard at a level no less than acceptable (See Section 6 of the QASP)	<p>A rating of Deficient on any two of the standards will result in a 10% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p> <p>A rating of At-Risk on any of the standards will result in a 10% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p>	
	Classification, Review, and Housing (ICE Standard)					
	Detainee Mail & Correspondence (ICE Standard)					
	Group Legal Representation (ICE Standard)					
	Marriage Requests (ICE Standard)					
	Non-Medical Emergency Escorted Trips (ICE Standard)					
	Recreation (ICE Standard)					

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FUNCTIONAL AREA/ WEIGHT	PERFORMANCE STANDARD	PERFORMANCE MEASURE	METHOD OF SURVEILLANCE	ACCEPTABLE QUALITY LEVEL	WITHHOLDING CRITERIA
	<p><u>Religious Practices</u> (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/eoth.pdf)</p> <p><u>Telephone Access (ICE Standard)</u> (http://www.ice.gov/doclib/partners/dro/opsmanual/teleacc.pdf)</p> <p><u>Voluntary Work Program (ICE Standard)</u> (http://www.ice.gov/doclib/partners/dro/opsmanual/work.pdf)</p> <p><u>Visitation Privileges</u> (ICE Standard) (http://www.ice.gov/doclib/partners/dro/opsmanual/visit.pdf)</p>				

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FUNCTIONAL AREA/ WEIGHT	PERFORMANCE STANDARD	PERFORMANCE MEASURE	METHOD OF SURVEILLANCE	ACCEPTABLE QUALITY LEVEL	WITHHOLDING CRITERIA
<p>Juvenile Education (15%) (Addresses the adequacy of the juvenile education program, student-teacher ratio, curricula, and compliance with Federal, state and county education requirements)</p>	<p>ICE DRO Residential Management Standard INSERT URL HERE</p>	<p>Performance measures are reflected in the monitoring instrument that accompanies each standard or in the supplemental performance monitoring tool issued by the COTR</p>	<ul style="list-style-type: none"> Weekly review of classroom set-up, facilities, testing, materials and lesson plans. Weekly review of lesson subjects per grade level, scheduling by student for age and grade appropriateness, and full subject coverage, as prescribed by Federal, state and county education standards. Includes Department of Education benchmarks. Periodic review of teachers' ESL certifications and credentials. Periodic reviews of referrals for counseling and special education services. State and county assessment reports. Ad-hoc reviews as needed CDRs 	<p>Performance fully complies with all elements of standard at a level no less than acceptable (See Section 6 of the QASP)</p>	<p>A rating of Deficient on any two of the standards will result in a 2.5% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p> <p>A rating of At-Risk on any of the standards will result in a 2.5% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established</p>
<p>Workforce Integrity (10%) (Addresses the adequacy of the detention/correctional officer hiring process, staff training and licensing/certification and adequacy of systems to report and address staff misconduct)</p>	<p>Staff Background and Reference Checks (Contract) 4-ALDF-7B-03 Staff Misconduct 4-ALDF-7B-01 Staffing Pattern Compliance within 10% of required (Contract) 4-ALDF-2A-14</p>	<p>Performance measures are reflected in the monitoring instrument that accompanies each standard or in the supplemental performance monitoring tool issued by the COTR</p>	<ul style="list-style-type: none"> Annual review of facility using Detention Management Control Program (DCMP) procedures and based upon the performance standard Periodic reviews in accordance with the attached contract performance monitoring tool Monthly review of corrective action plan results. 	<p>Performance fully complies with all elements of standard at a level no less than acceptable (See Section 6 of the QASP)</p>	<p>A rating of Deficient on any three of the standards will result in a 15% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p> <p>A rating of At-Risk on any of the standards will result in a 15% withholding in the</p>

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	Staff Training, Licensing, and Credentialing (Contract 4-ALDF-4D-05, 4-ALDF-7B-05, 4-ALDF-7B-08)		• Ad-hoc reviews as needed • CDRs		monthly invoiced per-diem day rate until compliance with the standard is established.
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A990

FUNCTIONAL AREA/ WEIGHT	PERFORMANCE STANDARD	PERFORMANCE MEASURE	METHOD OF SURVEILLANCE	ACCEPTABLE QUALITY LEVEL	WITHHOLDING CRITERIA
<p>Discrimination Prevention (2.5%) (Addresses the adequacy of policies and procedures to prevent discrimination against residents based on their gender, race, religion, national origin, or disability)</p>	<p>Discrimination Prevention 4-ALDF-6B-02-03</p>	<p>Performance measures are reflected in the monitoring instrument that accompanies each standard or in the supplemental performance monitoring tool issued by the COTR</p>	<ul style="list-style-type: none"> • Annual review of facility using Detention Management Control Program (DCMP) procedures and based upon the performance standard • Periodic reviews in accordance with the attached performance monitoring tool (see attached) • Monthly review of corrective action plan results. • Ad-hoc reviews as needed • CDRs 	<p>Performance fully complies with all elements of standard at a level no less than acceptable (see Section 6 of the QASP)</p>	<p>A rating of Deficient on the standards will result in a 2.5% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p> <p>A rating of At-Risk on any of the standards will result in a 2.5% withholding in the monthly invoiced per-diem day rate until compliance with the standard is established.</p>

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Attachment 2 - Contract Discrepancy Report

CONTRACT DISCREPANCY REPORT			1. CONTRACT NUMBER
Report Number:		Date:	
2. TO: (Contractor and Manager Name)		3. FROM: (Name of COTR)	
DATES			
CONTRACTOR NOTIFICATION	CONTRACTOR RESPONSE DUE BY	RETURNED BY CONTRACTOR	ACTION COMPLETE
4. DISCREPANCY OR PROBLEM <i>(Describe in Detail: Include reference in PWS / Directive: Attach continuation sheet if necessary.)</i>			
5. SIGNATURE OF CONTRACTING OFFICER'S TECHNICAL REPRESENTATIVE (COTR)			
6. TO: (COTR)		7. FROM: (Contractor)	
8. CONTRACTOR RESPONSE AS TO CAUSE, CORRECTIVE ACTION AND ACTIONS TO PREVENT RECURRENCE. ATTACH CONTINUATION SHEET IF NECESSARY. <i>(Cite applicable Q.A. program procedures or new A.W. procedures.)</i>			
9. SIGNATURE OF CONTRACTOR REPRESENTATIVE			10. DATE
11. GOVERNMENT EVALUATION OF CONTRACTOR RESPONSE/RESOLUTION PLAN: <i>(Acceptable response/plan, partial acceptance of response/plan, rejection: attach continuation sheet if necessary)</i>			
12. GOVERNMENT ACTIONS <i>(Payment withholding, cure notice, show cause, other.)</i>			
CLOSE OUT			
CONTRACTOR NOTIFIED	NAME AND TITLE	SIGNATURE	DATE
COTR			
CONTRACTING OFFICER			

Attachment 3 – Performance Monitoring Tool



Detention and Removal Operations

Performance Monitoring Tool

Facility Name: _____ Month/Year: _____

Frequency		DETECTION STANDARD	Rating A/D/R	Corrective Action Required / Comments	Due Date
D	W M Q				
		1. Admission and Release			
		A. ICE information is available for initial classification			
		B. Medical screening taking place within timeframes			
		C. Inventory resident personal effects			
		D. Resident funds accountability in place for admin/release			
		E. All visual searches documented and are not routine in procedure			
		F. Appropriate clothing and bedding issued			
		G. Orientation material in English, Spanish or most prevalent second language			
		2. Resident Classification System			
		A. All residents classified appropriately upon arrival			
		B. Reassessment and reclassification process in place			
		C. Housing assignments are based upon classification			
		D. Work assignments are based upon classification system			
		E. Residents are assigned color coded uniforms/wrist bands to reflect classification level			
		3. Contraband			
		A. Policy in place for handling contraband			
		B. Contraband disposed of properly and documented			
		C. Facility staff make a concerted effort to control contraband			

A993

D	W	M	Q	DETECTION STANDARD	Rating A/D/R	Corrective Action Required/ Comments	Due Date
				4. Correspondence and Other Mail			
			A.	Incoming mail screened and delivered daily			
			B.	Outgoing mail screened for contraband			
			C.	Legal mail opened in front of resident			
			D.	Incoming funds processed properly			
			E.	Rules for correspondence and other mail posted in housing unit or common areas, and resident handbook			
			F.	Facility has a system for residents to purchase stamps			
			G.	SMU has same correspondence privileges as general population			
				5. Resident Handbook			
			A.	Staff aware of handbook contents and follow procedures			
			B.	Available in both English and Spanish and/or second most prevalent language			
			C.	Handbook is updated as necessary			
			D.	Orientation material available to illiterate residents			
				6. Detention Files			
			A.	Detention file created for each new arrival			
			B.	Detention files contain documents generated during custody			
			C.	Detention files maintained in a secure area			
				7. Disciplinary Policy			
			A.	Rules of conduct/sanctions provided in writing			
			B.	Incident reports investigated within 24 hours			
			C.	Disciplinary panel adjudicate infractions			
			D.	Disciplinary sanctions are in accordance with standards			
			E.	Staff representation available			

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D	W	M	Q	DETECTION STANDARD	Rating A/D/R	Corrective Action Required / Comments	Due Date
				8. Emergency Plans			
			A.	Staff trained			
			B.	Written plans			
			C.	Evacuation routes primary and secondary			
			D.	A complete set of emergency plans is available			
			E.	Staff work stoppage plan is available			
				9. Environmental Health and Safety			
				System for storing/issuing/maintaining hazardous materials			
			A.				
			B.	Complete inventories of hazardous materials maintained			
			C.	A complete list of MSDS readily accessible to staff and residents			
			D.	Fire prevention/control/evacuation plan			
			E.	Conduct fire/evacuation drills according to schedule/standard			
			F.	Staff trained to prevent contact with blood and bodily fluids			
			G.	Emergency generators are tested bi-weekly			
			H.	Every employee and resident using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal			
			I.	Safety Office (or officer) maintains files of inspection reports; Including corrective actions taken			
			J.	Facility appears clean and well maintained			
			K.	All flammable and combustible materials (liquid and aerosol) are stored and used according to label recommendations			

A995

D	W	M	Q	DETENTION STANDARDS	Rating A/D/R	Corrective Action Required / Comments	Due Date
				10. Non-Medical Emergency Escorted Trips			
				The Field Office Director considers and approves, on a case-by-case basis, trips to visit an immediate family member in accordance with standards			
			A.				
				11. Security Inspections			
				Staff are required to conduct security check of assigned areas			
			A.				
			B.	All visitors officially recorded in a visitor log book			
				Front entrance staff inspect ID of everyone entering/exiting			
			C.				
			D.	Maintain a log of all incoming and departing vehicles			
			E.	Housing unit searches occur at irregular times			
			F.	Area searches documented in log book			
			G.	Daily/Monthly fence checks completed and logged			
				Facility administrator or designee and department heads visit housing units and activity areas weekly			
			H.				
			I.	Officers monitor all vehicular traffic entering and leaving the facility			
				The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components			
			J.				
				Security officer posts located in or immediately adjacent to resident living areas to permit officers to see or hear and respond promptly to emergency situations. Personal contact and interaction between staff and residents is required and facilitated			
			K.				
				Daily procedures include: perimeter alarm system tests; physical checks of the perimeter fence; documenting the results			
			L.				

A996

D	W	M	Q	DETENTION STANDARDS	Rating A/D/R	Corrective Action Required/ Comments	Due Date
			M.	Tools being taken into the secure area of the facility are inspected and inventoried			
				12. Food Service			
			A.	Appropriate security measures for sharps are in place			
			B.	Appropriate food temperatures are maintained for both hot and cold food			
			C.	Food Service department maintained at a high level of sanitation			
			D.	Residents receive safety and appropriate equipment training prior to beginning work in department			
			E.	A minimum of two hot meals served daily			
			F.	Facility has a standard 35 day cycle menu			
			G.	A registered dietician conducts nutritional analysis			
			H.	All menu changes documented			
			I.	Common fare menu for authorized residents			
			J.	Weekly inspections conducted and documented			
				13. Funds and Personal Property			
			A.	Inventory personal property/funds is maintained			
			B.	Funds/valuables documented on receipt			
			C.	Residents property searched for contraband			
			D.	Staff forward arriving residents medication to medical staff			
			E.	Resident funds are deposited into the cash box			
			F.	Staff secure every container used to store property with a tamper-proof numbered strap			
			G.	Quarterly audits of resident baggage & luggage are conducted, verified, and logged			

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D	W	M	Q	DETENTION STANDARDS	RATING A/D/R	Corrective Action Required/ Comments	Due Date
				14. Resident Grievance Procedures			
			A.	Grievance procedures in place			
			B.	Staff awareness of procedures for emergency grievances			
			C.	Grievance log is utilized			
			D.	Staff forward any grievances alleging staff misconduct to ICE			
			E.	Informal resolution to a resident grievance documented in detention file			
				15. Hold Rooms in Detention Facilities			
			A.	Residents are not held in hold rooms longer than 12 hours			
			B.	All residents pat searched prior to placement in hold room			
			C.	Maintain detention log for each resident in hold room			
			D.	Written evacuation plan posted for each hold room			
			E.	Hold rooms contain sufficient seating for the number of residents held			
			F.	No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside hold rooms			
			G.	Male and females are segregated from each other at all times			
			H.	Residents are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes			
			I.	Officers closely supervise the detention hold rooms. Hold rooms are irregularly monitored every 15 minutes			
				16. Hunger Strikes			
			A.	Procedures for referring resident to medical if verbally refused or observed refusing to eat beyond 72 hours			

A998

D	W	M	Q	DETENTION STANDARDS	Rating A/D/R	Corrective Action Required / Comments	Due Date
			B.	Staff receive training in identification of hunger strike			
			C.	Process for determining reason for hunger strike			
				17. Key and Lock Control			
			A.	Maintain inventories of all keys/locks/locking devices			
			B.	Emergency keys are available for all areas of the facility			
			C.	Chit system used to issue security equip./keys/radios			
			D.	Policy regarding restricted keys present and followed by staff			
			E.	Facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily			
			F.	Locks and locking devices are continually inspected, maintained, and inventoried			
				18. Access to Legal Material			
			A.	Adequate equipment is available for residents			
			B.	Legal materials/law library current and available for residents			
			C.	Resident access provided to include SMU			
			D.	Denials documented			
			E.	Schedule for use implemented 5 hours weekly per resident			
			F.	Access to legal material within 24 hours of written request			
			G.	Indigent residents provided free stamps/envelopes for legal matters			
				19. Group Presentations on Legal Rights			
			H.	ICE/DRO approved videos played for all incoming residents			
			I.	Posters announcing presentation appear in common areas at least 48 hours prior to presentation			

A999

D	W	M	Q	DETENTION STANDARDS	Rating A/D/R	Corrective Action Required / Comments	Due Date
			J.	Residents in SMU receive separate presentation			
			K.	Facility ensures adequate presentations so all residents wanting to attend have the opportunity			
				20. Marriage Requests			
			A.	Marriage written requests approved by FOD			
				21. Medical Care			
			A.	Intake process includes medical and mental health screening			
			B.	Sick call procedures established			
			C.	Adequate medical staff available proportionate to population			
			D.	Pharmaceuticals stored in a secure area			
			E.	All residents receive physical examination/assessment within 14 days of arrival			
			F.	Sick call slips available in English, Spanish and/or most prevalent second language			
			G.	The facility has a written plan for 24 hour emergency health care when no medical staff are on-duty or when immediate outside medical attention is required			
			H.	Medical records are available and transferred with the resident			
			I.	Records are maintained of medication distribution			
			J.	All sharps are under strict control and accountability			
			K.	A sharps container is used to dispose of used sharps			
			L.	The medical department is maintained at a high level of sanitation			

D	W	M	Q	DETENTION STANDARDS	Rating A/D/R	Corrective Action Required / Comments	Due Date
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A1000

D	W	M	Q	DETENTION STANDARDS	Rating A/D/R	Corrective Action Required / Comments	Due Date
				25. Recreation			
			A.	Outdoor/indoor recreation is provided			
			B.	Access to recreation activities 1 hour x 5 days			
			C.	Staff conduct daily searches of recreation areas			
			D.	In unit sedentary activities are available			
				26. Religious Practices			
			A.	Residents are allowed to engage in religious services			
			B.	Authorized religious items are allowed in resident possession			
				27. Special Management Unit (Administrative Segregation)			
			A.	Written order accompany resident placed in SMU			
			B.	SMU reviews are conducted in a timely manner (3,7,14,30,60)			
			C.	Residents in SMU have access to legal materials			
			D.	Residents in SMU retain visiting privileges			
			E.	Maintain a permanent log regarding resident related activities			
			F.	SMU phone access same as general pop unless exception is made			
			G.	Residents in SMUs may shave and shower three times weekly and receive other basic services (laundry, hair care, barbering, clothing, bedding, linen) on the same basis as the general population			
			H.	The facility administrator (or designee) visits each SMU daily			
			I.	A health care provider visits every resident in a SMU at least 3x week, and residents are provided any medications prescribed for them			

A1002

D	W	M	Q	DETENTION STANDARDS	Rating A/D/R	Corrective Action Required / Comments	Due Date
				Residents in the SMU are offered at least one hour of recreation per day, scheduled at a reasonable time, at least five days per week. Where cover is not provided to mitigate inclement weather, residents are provided weather-appropriate equipment and attire			
			J.	When a resident has been held in Admin Segregation for more than 30 days, the facility administrator notifies the Field Office Director, who notifies the ICE/DRO Deputy Assistant Director, Detention Management Division			
			K.				
				28. Special Management Unit (Disciplinary Segregation)			
			A.	Written order accompany resident placed in SMU			
			B.	SMU reviews are conducted in a timely manner (3,7,14,30,60)			
			C.	Admin SMU residents enjoy same privileges as gen pop			
			D.	Residents in SMU have access to legal materials			
			E.	Residents in SMU retain visiting privileges			
			F.	Maintain a permanent log regarding resident related activities			
			G.	Written order accompany resident placed in disciplinary SMU			
			H.	Residents in disciplinary SMU have access to legal materials			
			I.	Residents in disciplinary SMU retain visiting privileges			
			J.	Disciplinary SMU phone access limited to legal/consular calls			
			K.	Residents in SMUs may shave and shower three times weekly and receive other basic services (laundry, hair care, barbering, clothing, bedding, linen) on the same basis as the general population			

A1003

D	W	M	Q	DETECTION STANDARDS	Rating A/D/R	Corrective Action Required / Comments	Due Date
				L. The facility administrator (or designee) visits each SMU daily			
				M. A health care provider visits every resident in a SMU at least 3x week, and residents are provided any medications prescribed for them			
				N. Residents in the SMU are offered at least one hour of recreation per day, scheduled at a reasonable time, at least five days per week. Where cover is not provided to mitigate inclement weather, residents are provided weather-appropriate equipment and attire			
				29. Staff-Resident Communication			
				A. Housing unit rounds conducted daily by security staff			
				B. Housing unit rounds conducted daily by Deportation Staff			
				C. Resident requests answered within 72 hours			
				D. ICE SDC visit schedules are posted in housing unit			
				E. Request forms are available to residents			
				F. There is a secure box available for residents to place requests in for ICE staff that is checked on a daily basis			
				G. Unannounced ICE staff housing unit visits occur weekly			
				H. Visiting staff observe, document and communicate current climate and conditions of confinement			
				30. Suicide Prevention and Intervention			
				A. The facility has a written suicide prevention and intervention program approved and signed by the health authority and facility administrator which is reviewed annually			
				B. Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program and annually thereafter			
				C. The facility has a designated and approved isolation room for evaluation and treatment			

A1004

D	W	M	Q	DETENTION STANDARDS	Rating A/D/R	Corrective Action Required / Comments	Due Date
				Staff observes and documents the status of a suicide-watch resident at least once every 15 minutes			
			D.				
				31. Telephone Access			
			A.	Upon intake, residents are made aware of phone policies			
			B.	Out of order phones reported to service provider			
			C.	Telephones inspected regularly by staff			
			D.	Telephone access rules posted in each housing unit			
			E.	The number for the ICE OIG is posted in housing units			
			F.	The pro bono list is posted in housing units			
			G.	Emergency phone call messages delivered to residents			
			H.	Special access calls are available to residents			
			I.	Notification of telephone monitoring posted by unit phones			
				32. Terminal Illness, Advanced Directives, and Death			
			A.	Residents who are chronically or terminally ill are transferred to an appropriate off-site facility			
			B.	The facility has written plans for addressing organ donations			
			C.	There is a policy addressing Do Not Resuscitate Orders			
			D.	The facility has written procedures detailing the proper notifications			
				33. Tool Control			
			A.	Tool inventories conducted as specified			
			B.	Tools marked and readily identifiable			
			C.	Procedures for issuance of tools to staff and residents			
			D.	Inventory made of all tools by contractors prior to enter and exit			

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D	W	M	Q	DETENTION STANDARDS	Rating A/D/R	Corrective Action Required / Comments	Due Date
				There is an individual who is responsible for developing a tool control procedure and an inspection system to ensure accountability			
			E.	A metal or plastic chit is taken in exchange for all tools issued, and when a tool is issued from a shadow board the receipt chit shall be visible on the shadow board			
			F.	Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner			
			G.	Department heads are responsible for implementing proper tool control procedures as described in the standard			
			H.				
				34. Resident Transfer			
			A.	Resident provided with resident transfer notification form			
			B.	Health records/transfer summary accompany resident			
			C.	Funds and personal property accompany resident			
			D.	A-File/work folder accompany resident			
				35. Transportation (Land Transportation)			
				Documentation indicating safety repairs are completed immediately and vehicles are not used until they have been repaired and inspected, is available for review			
			A.				
			B.	Officers use a checklist during every vehicle inspection			
			C.	Transporting officers limit driving time to 10 hours in any 15 hour period when transporting residents			
			D.	Two officers with valid Commercial Drivers Licenses, (CDL's) required in any bus transporting residents			
			E.	Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles			

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D	W	M	Q	DETECTION STANDARDS	Rating A/D/R	Corrective Action Required / Comments	Due Date
				Vehicles have 2 way radios, cellular telephones, equipment boxes in accordance with the Use of Force standard			
			F.	Vehicles have written contingency plans on board			
			G.	36. Use of Force			
			A.	Policy governing immediate/calculated use of force			
			B.	All use of force incidents documented and reviewed			
			C.	Video tapes of incidents preserved/catalogued for 2 1/2 yrs			
			D.	Resident is seen by medical immediately after incident			
			E.	Facility subscribes to prescribed confrontation avoidance procedures			
			F.	Staff trained in use of force techniques			
			G.	Appropriate procedures in place for using 4 point restraints			
			H.	Medical staff consulted prior to deploying OC spray in calculated use of force situations			
			I.	All electronic stun devices inventoried and used by facility must be approved by ICE National Firearms and Tactical Training Unit			
				37. Visitation			
			A.	Written visitation schedule posted and accessible to the public			
			B.	General visitation log book maintained			
			C.	Visitor dress code enforced			
			D.	Legal visitation available 7 days a week			
			E.	Facility complies with visitation schedule			
			F.	Visitors are searched and identified per standards			
			G.	Current list of Pro Bono services posted in resident housing			

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D	W	M	Q	DETENTION STANDARDS	Rating A/D/R	Corrective Action Required / Comments	Due Date
				38. Voluntary Work Program			
			A.	Facility has a voluntary work program			
			B.	Maintain a written chart with work assignments/classification level			
			C.	Facility complies with work hour and pay requirements for residents			
			D.	Residents are medically screened to participate			
			E.	Residents receive proper training and safety equipment			
			F.	Resident housekeeping meets standards for neatness, cleanliness and sanitation			
				39. Juvenile Education			
			A.	Classrooms are equipped, including desks, chairs, grade-appropriate text books, activity supplies, chalk boards and audio/visual equipment.			
			B.	Lesson plans are in place and have clearly stated objectives and measures for student performance.			
			C.	Curricula and materials meet US Dept. of Education, state and county requirements.			
			D.	At least one hour of daily grade-appropriate instruction is provided in the following core subjects: Science, Social Studies, Math, Language Arts (Reading/Writing), and Physical Education.			
			E.	Teacher credentials meet state English as a Second Language (ESL) requirements.			
			F.	Teachers identify, address and refer counseling and special needs of students.			

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DROIGSA-09-0027		USDHS/USICE and BERKS COUNTY, PA						
ATTACHMENT 4 - STAFFING PLAN								
County Position Titles	1st shift	2nd shift	3rd shift	Relief Fctr	Days Cvr'd	Total		
Administrative Staff								
Executive Director	1	0	0	1	5	1		
Deputy Director	1	0	0	1	5	1		
Program Manager	1	0	0	1	5	1		
Medical Manager	1	0	0	1	5	1		
Direct Care Staff								
Shift Supervisor	2	2	1	1.4	7	7		
Recreation Supervisor	1	0	0	1	5	1		
Caseworker	3	0	0	1	5	3		
Shelter Care Counselor	11	11	4	1.4	7	37		
Program Support Staff								
Chaplain	1	0	0	1	5	1		
Teacher	2	0	0	1	5	2		
Teacher Aide	3	0	0	1	5	3		
Office Support Staff								
Office Manager	1	0	0	1	5	1		
Fiscal Manager	1	0	0	1	5	1		
HR Analyst	1	0	0	1	5	1		
Payroll/Budget Analyst	1	0	0	1	5	1		
Account Clerk II	1	0	0	1	5	1		
Office Support IV	1	0	0	1	5	1		
Operations Support Staff								
Operations Manager	1	0	0	1	5	1		
Training Manager	1	0	0	1	5	1		
Training Coordinator	1	0	0	1	5	1		
Maintenance Worker	2	0	0	1	5	2		
Food Service Staff								
Food Service Worker	2	2	0	1.4	7	6		
Nutrition Coordinator	1	0	0	1	5	1		

TITLE 29--LABOR

PART 4 LABOR STANDARDS FOR FEDERAL SERVICE CONTRACTS--Table of Contents

Subpart A Service Contract Labor Standards Provisions and Procedures

Sec. 4.6 Labor standards clauses for Federal service contracts exceeding \$2,500.

The clauses set forth in the following paragraphs shall be included in full by the contracting agency in every contract/Inter-Governmental Service Agreement (IGSA) entered into by the United States or the District of Columbia, in excess of \$2,500, or in an indefinite amount, the principal purpose of which is to furnish services through the use of service employees:

(a) Service Contract Act of 1965, as amended: This contract/IGSA is subject to the Service Contract Act of 1965 as amended (41 U.S.C. 351 et seq.) and is subject to the following provisions and to all other applicable provisions of the Act and regulations of the Secretary of Labor issued there under (29 CFR part 4).

(b)(1) Each service employee employed in the performance of this Contract/IGSA by the contractor or any subcontractor shall be paid not less than the minimum monetary wages and shall be furnished fringe benefits in accordance with the wages and fringe benefits determined by the Secretary of Labor or authorized representative, as specified in any wage determination attached to this contract.

(2)(i) If there is such a wage determination attached to this Contract/IGSA, the contracting officer shall require that any class of service employee which is not listed therein and which is to be employed under the Contract/IGSA (i.e., the work to be performed is not performed by any classification listed in the wage determination), be classified by the contractor so as to provide a reasonable relationship (i.e., appropriate level of skill comparison) between such unlisted classifications and the classifications listed in the wage determination. Such conformed class of employees shall be paid the monetary wages and furnished the fringe benefits as are determined pursuant to the procedures in this section.

(ii) Such conforming procedure shall be initiated by the contractor prior to the performance of contract/IGSA work by such unlisted class of employee. A written report of the proposed conforming action, including information regarding the agreement or disagreement of the authorized representative of the employees involved or, where there is no authorized representative, the employees themselves, shall be submitted by the contractor to the contracting officer no later than 30 days after such unlisted class of employees performs any Contract/IGSA work. The contracting officer shall review the proposed action and promptly submit a report of the action, together with the agency's recommendation and all pertinent information including the position of the contractor and the employees, to the Wage and Hour Division, Employment Standards Administration, U.S. Department of Labor, for review. The Wage and Hour Division will approve, modify, or disapprove the action or render a final determination in the event of disagreement

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within 30 days of receipt or will notify the contracting officer within 30 days of receipt that additional time is necessary.

(iii) The final determination of the conformance action by the Wage and Hour Division shall be transmitted to the contracting officer who shall promptly notify the contractor of the action taken. Each affected employee shall be furnished by the contractor with a written copy of such determination or it shall be posted as a part of the wage determination.

(iv)(A) The process of establishing wage and fringe benefit rates that bears a reasonable relationship to those listed in a wage determination cannot be [[Page 41]] reduced to any single formula. The approach used may vary from wage determination to wage determination depending on the circumstances. Standard wage and salary administration practices, which rank various job classifications by pay grade pursuant to point schemes or other job factors may, for example, be relied upon. Guidance may also be obtained from the way different jobs are rated under Federal pay systems (Federal Wage Board Pay System and the General Schedule) or from other wage determinations issued in the same locality. Basic to the establishment of any conformable wage rate(s) is the concept that a pay relationship should be maintained between job classifications based on the skill required and the duties performed.

(B) In the case of a Contract/IGSA modification, an exercise of an option or extension of an existing contract, or in any other case where a contractor succeeds a Contract/IGSA under which the classification in question was previously conformed pursuant to this section, a new conformed wage rate and fringe benefits may be assigned to such conformed classification by indexing (i.e., adjusting) the previous conformed rate and fringe benefits by an amount equal to the average (mean) percentage increase (or decrease, where appropriate) between the wages and fringe benefits specified for all classifications to be used on the Contract/IGSA which are listed in the current wage determination, and those specified for the corresponding classifications in the previously applicable wage determination. Where conforming actions are accomplished in accordance with this paragraph prior to the performance of Contract/IGSA work by the unlisted class of employees, the contractor shall advise the contracting officer of the action taken but the other procedures in paragraph (b) (2) (ii) of this section need not be followed.

(C) No employee engaged in performing work on this Contract/IGSA shall in any event be paid less than the currently applicable minimum wage specified under section 6(a) (1) of the Fair Labor Standards Act of 1938, as amended. (v) The wage rate and fringe benefits finally determined pursuant to paragraphs (b)(2)(i) and (ii) of this section shall be paid to all employees performing in the classification from the first day on which Contract/IGSA work is performed by them in the classification. Failure to pay such unlisted employees the compensation agreed upon by the interested parties and/or finally determined by the Wage and Hour Division retroactive to the date such class of employees commenced Contract/IGSA work shall be a violation of the Act and this contract. (vi) Upon discovery of failure to comply with paragraphs (b)(2)(i) through (v) of this section, the Wage and Hour Division shall make a final determination of conformed classification, wage rate,

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and/or fringe benefits which shall be retroactive to the date such class of employees commenced Contract/IGSA work.

(3) If, as authorized pursuant to section 4(d) of the Service Contract Act of 1965 as amended, the term of this Contract/IGSA is more than 1 year, the minimum monetary wages and fringe benefits required to be paid or furnished there under to service employees shall be subject to adjustment after 1 year and not less often than once every 2 years, pursuant to wage determinations to be issued by the Wage and Hour Division, Employment Standards Administration of the Department of Labor as provided in such Act.

(c) The contractor or subcontractor may discharge the obligation to furnish fringe benefits specified in the attachment or determined conformably thereto by furnishing any equivalent combinations of bona fide fringe benefits, or by making equivalent or differential payments in cash in accordance with the applicable rules set forth in subpart D of 29 CFR part 4, and not otherwise.

(d)(1) In the absence of a minimum wage attachment for this contract, neither the contractor nor any subcontractor under this Contract/IGSA shall pay any person performing work under the Contract/IGSA (regardless of whether they are service employees) less than the minimum wage specified by section 6(a)(1) of the Fair Labor Standards Act of 1938. Nothing in this provision shall relieve the contractor or any subcontractor of any other obligation under [[Page 42]] law or Contract/IGSA for the payment of a higher wage to any employee.

(2) If this Contract/IGSA succeeds a contract, subject to the Service Contract Act of 1965 as amended, under which substantially the same services were furnished in the same locality and service employees were paid wages and fringe benefits provided for in a collective bargaining agreement, in the absence of the minimum wage attachment for this Contract/IGSA setting forth such collectively bargained wage rates and fringe benefits, neither the contractor nor any subcontractor under this Contract/IGSA shall pay any service employee performing any of the Contract/IGSA work (regardless of whether or not such employee was employed under the predecessor contract), less than the wages and fringe benefits provided for in such collective bargaining agreements, to which such employee would have been entitled if employed under the predecessor contract, including accrued wages and fringe benefits and any prospective increases in wages and fringe benefits provided for under such agreement. No contractor or subcontractor under this Contract/IGSA may be relieved of the foregoing obligation unless the limitations of Sec. 4.1b(b) of 29 CFR part 4 apply or unless the Secretary of Labor or his authorized representative finds, after a hearing as provided in Sec. 4.10 of 29 CFR part 4 that the wages and/or fringe benefits provided for in such agreement are substantially at variance with those which prevail for services of a character similar in the locality, or determines, as provided in Sec. 4.11 of 29 CFR part 4, that the collective bargaining agreement applicable to service employees employed under the predecessor Contract/IGSA was not entered into as a result of arm's-length negotiations. Where it is found in accordance with the review procedures provided in 29 CFR 4.10 and/or 4.11 and parts 6 and 8 that some or all of the wages and/or fringe benefits contained in a predecessor contractor's collective bargaining

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agreement are substantially at variance with those which prevail for services of a character similar in the locality, and/or that the collective bargaining agreement applicable to service employees employed under the predecessor Contract/IGSA was not entered into as a result of arm's-length negotiations, the Department will issue a new or revised wage determination setting forth the applicable wage rates and fringe benefits. Such determination shall be made part of the Contract/IGSA or subcontract, in accordance with the decision of the Administrator, the Administrative Law Judge, or the Administrative Review Board, as the case may be, irrespective of whether such issuance occurs prior to or after the award of a Contract/IGSA or subcontract. 53 Comp. Gen. 401 (1973). In the case of a wage determination issued solely as a result of a finding of substantial variance, such determination shall be effective as of the date of the final administrative decision.

(e) The contractor and any subcontractor under this Contract/IGSA shall notify each service employee commencing work on this Contract/IGSA of the minimum monetary wage and any fringe benefits required to be paid pursuant to this contract, or shall post the wage determination attached to this contract. The poster provided by the Department of Labor (Publication WH 1313) shall be posted in a prominent and accessible place at the worksite. Failure to comply with this requirement is a violation of section 2(a) (4) of the Act and of this contract.

(f) The contractor or subcontractor shall not permit any part of the services called for by this Contract/IGSA to be performed in buildings or surroundings or under working conditions provided by or under the control or supervision of the contractor or subcontractor which are unsanitary or hazardous or dangerous to the health or safety of service employees engaged to furnish these services, and the contractor or subcontractor shall comply with the safety and health standards applied under 29 CFR part 1925.

(g)(1) The contractor and each subcontractor performing work subject to the Act shall make and maintain for 3 years from the completion of the work records containing the information specified in paragraphs (g)(1) (i) through (vi) of this section for each employee subject to the Act and shall make them available for inspection [[Page 43]] and transcription by authorized representatives of the Wage and Hour Division, Employment Standards Administration of the U.S. Department of Labor:

(i) Name and address and social security number of each employee.

(ii) The correct work classification or classifications, rate or rates of monetary wages paid and fringe benefits provided, rate or rates of fringe benefit payments in lieu thereof, and total daily and weekly compensation of each employee.

(iii) The number of daily and weekly hours so worked by each employee.

(iv) Any deductions, rebates, or refunds from the total daily or weekly compensation of each employee.

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(v) A list of monetary wages and fringe benefits for those classes of service employees not included in the wage determination attached to this Contract/IGSA but for which such wage rates or fringe benefits have been determined by the interested parties or by the Administrator or authorized representative pursuant to the labor standards clause in paragraph (b) of this section. A copy of the report required by the clause in Paragraph (b) (2) (ii) of this section shall be deemed to be such a list.

(vi) Any list of the predecessor contractor's employees which had been furnished to the contractor pursuant to Sec. 4.6(1)(2).

(2) The contractor shall also make available a copy of this Contract/IGSA for inspection or transcription by authorized representatives of the Wage and Hour Division.

(3) Failure to make and maintain or to make available such records for inspection and transcription shall be a violation of the regulations and this contract, and in the case of failure to produce such records, the contracting officer, upon direction of the Department of Labor and notification of the contractor, shall take action to cause suspension of any further payment or advance of funds until such violation ceases.

(4) The contractor shall permit authorized representatives of the Wage and Hour Division to conduct interviews with employees at the worksite during normal working hours.

(h) The contractor shall unconditionally pay to each employee subject to the Act all wages due free and clear and without subsequent deduction (except as otherwise provided by law or Regulations, 29 CFR part 4), rebate, or kickback on any account. Such payments shall be made no later than one pay period following the end of the regular pay period in which such wages were earned or accrued. A pay period under this Act may not be of any duration longer than semi-monthly.

(i) The contracting officer shall withhold or cause to be withheld from the Government prime contractor under this or any other Government Contract/IGSA with the prime contractor such sums as an appropriate official of the Department of Labor requests or such sums as the contracting officer decides may be necessary to pay underpaid employees employed by the contractor or subcontractor. In the event of failure to pay any employees subject to the Act all or part of the wages or fringe benefits due under the Act, the agency may, after authorization or by direction of the Department of Labor and written notification to the contractor, take action to cause suspension of any further payment or advance of funds until such violations have ceased. Additionally, any failure to comply with the requirements of these clauses relating to the Service Contract Act of 1965, may be grounds for termination of the right to proceed with the Contract/IGSA work. In such event, the Government may enter into other contracts or arrangements for completion of the work, charging the contractor in default with any additional cost.

(j) The contractor agrees to insert these clauses in this section relating to the Service Contract Act of 1965 in all Subcontracts subject to the Act. The term contractor as used in these clauses in any

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subcontract shall be deemed to refer to the subcontractor, except in the term Government prime contractor.

(k)(1) As used in these clauses, the term service employee means any person engaged in the performance of this Contract/IGSA other than any person employed in a bona fide executive, administrative, or professional capacity, as those terms are defined in part 541 of title 29, Code of Federal Regulations, as of July [[Page44)) 30, 1976, and any subsequent revision of those regulations. The term service employee includes all such persons regardless of any contractual relationship that may be alleged to exist between a contractor or subcontractor and such persons.

(2) The following statement is included in contracts pursuant to section 2(a) (5) of the Act and is for informational purposes only:

The following classes of service employees expected to be employed under the Contract/IGSA with the Government would be subject, if employed by the contracting agency, to the provisions of 5 U.S.C. 5341 or 5 U.S.C. 5332 and would, if so employed, be paid not less than the following rates of wages and fringe benefits:

Employee class	wage-fringe benefit
GS-05	\$14.76 (As of Jan 08)
GS-07	\$18.29 (As of Jan 08)

Search current rates at <http://www.opm.gov/oca/08tables/>

(1)(1) If wages to be paid or fringe benefits to be furnished any service employees employed by the Government prime contractor or any subcontractor under the Contract/IGSA are provided for in a collective bargaining agreement which is or will be effective during any period in which the Contract/IGSA is being performed, the Government prime contractor shall report such fact to the contracting officer, together with full information as to the application and accrual of such wages and fringe benefits, including any prospective increases, to service employees engaged in work on the contract, and a copy of the collective bargaining agreement. Such report shall be made upon commencing performance of the contract, in the case of collective bargaining agreements effective at such time, and in the case of such agreements or provisions or amendments thereof effective at a later time during the period of Contract/IGSA performance, such agreements shall be reported promptly after negotiation thereof.

(2) Not less than 10 days prior to completion of any Contract/IGSA being performed at a Federal facility where service employees may be retained in the performance of the succeeding Contract/IGSA and subject to a wage determination which contains vacation or other benefit provisions based upon length of service with a contractor (predecessor) or successor (Sec. 4.173 of Regulations, 29 CFR part 4), the incumbent prime contractor shall furnish to the contracting officer a certified list of the names of all service employees on the contractor's or subcontractor's payroll during the last month of Contract/IGSA performance. Such list shall also contain anniversary dates of employment on the Contract/IGSA either with the current or predecessor

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contractors of each such service employee. The contracting officer shall turn over such list to the successor contractor at the commencement of the succeeding contract.

(m) Rulings and interpretations of the Service Contract Act of 1965, as amended, are contained in Regulations, 29 CFR part 4.

(n)(1) By entering into this contract, the contractor (and officials thereof) certifies that neither it (nor he or she) nor any person or firm who has a substantial interest in the contractor's firm is a person or firm ineligible to be awarded Government contracts by virtue of the sanctions imposed pursuant to section 5 of the Act.

(2) No part of this Contract/IGSA shall be subcontracted to any person or firm ineligible for award of a Government Contract/IGSA pursuant to section 5 of the Act.

(3) The penalty for making false statements is prescribed in the U.S. Criminal Code, 18 U.S.C. 1001.

(o) Notwithstanding any of the clauses in paragraphs (b) through (m) of this section relating to the Service Contract Act of 1965, the following employees may be employed in accordance with the following variations, tolerances, and exemptions, which the Secretary of Labor, pursuant to section 4(b) of the Act prior to its amendment by Public Law 92-473, found to be necessary and proper in the public interest or to avoid serious impairment of the conduct of Government business:

(1) Apprentices, student-learners, and workers whose earning capacity is impaired by age, physical, or mental deficiency or injury may be employed at wages lower than the minimum wages otherwise required by section 2(a) (1) or ([Page 45])

(2)(b)(1) of the Service Contract Act without diminishing any fringe benefits or cash payments in lieu thereof required under section 2(a) (2) of that Act, in accordance with the conditions and procedures prescribed for the employment of apprentices, student-learners, handicapped persons, and handicapped clients of sheltered workshops under section 14 of the Fair Labor Standards Act of 1938, in the regulations issued by the Administrator (29 CFR parts 520, 521, 524, and 525).

(3) The Administrator will issue certificates under the Service Contract Act for the employment of apprentices, student-learners, handicapped persons, or handicapped clients of sheltered workshops not subject to the Fair Labor Standards Act of 1938, or subject to different minimum rates of pay under the two acts, authorizing appropriate rates of minimum wages (but without changing requirements concerning fringe benefits or supplementary cash payments in lieu thereof), applying procedures prescribed by the applicable regulations issued under the Fair Labor Standards Act of 1938 (29 CFR parts 520, 521, 524, and 525).

(4) The Administrator will also withdraw, annul, or cancel such certificates in accordance with the regulations in parts 525 and 528 of title 29 of the Code of Federal Regulations.

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(p) Apprentices will be permitted to work at less than the predetermined rate for the work they perform when they are employed and individually registered in a bona fide apprenticeship program registered with a State Apprenticeship Agency which is recognized by the U.S. Department of Labor, or if no such recognized agency exists in a State, under a program registered with the Bureau of Apprenticeship and Training, Employment and Training Administration, U.S. Department of Labor. Any employee who is not registered as an apprentice in an approved program shall be paid the wage rate and fringe benefits contained in the applicable wage determination for the journeyman classification of work actually performed. The wage rates paid apprentices shall not be less than the wage rate for their level of progress set forth in the registered program, expressed as the appropriate percentage of the journeyman's rate contained in the applicable wage determination. The allowable ratio of apprentices to journeymen employed on the Contract/IGSA work in any craft classification shall not be greater than the ratio permitted to the contractor as to his entire work force under the registered program.

(q) Where an employee engaged in an occupation in which he or she customarily and regularly receives more than \$30 a month in tips, the amount of tips received by the employee may be credited by the employer against the minimum wage required by Section 2(a)(1) or 2(b)(1) of the Act to the extent permitted by section 3(m) of the Fair Labor Standards Act and Regulations, 29 CFR Part 531. To utilize this provision:

(1)The employer must inform tipped employees about this tip credit allowance before the credit is utilized;

(2)The employees must be allowed to retain all tips (individually or through a pooling arrangement and regardless of whether the employer elects to take a credit for tips received);

(3) The employer must be able to show by records that the employee receives at least the applicable Service Contract Act minimum wage through the combination of direct wages and tip credit;

(4) The use of such tip credit must have been permitted under any predecessor collective bargaining agreement applicable by virtue of section 4(c) of the Act.

(r) Disputes concerning labor standards. Disputes arising out of the labor standards provisions of this Contract/IGSA shall not be subject to the general disputes clause of this contract. Such disputes shall be resolved in accordance with the procedures of the Department of Labor set forth in 29 CFR parts 4, 6, and 8. Disputes within the meaning of this clause include disputes between the contractor (or any of its subcontractors) and the contracting agency, the U.S. Department of Labor, or the employees or their representatives.(The information collection, recordkeeping, and reporting requirements contained in this section have been approved by the Office of Management and Budget under the following numbers:

[[Page 46]]

- Paragraph

OMB control number

Attachment 5
Page 8 of 9

(b)(2) (i)--(iv).....	1215-0150
(e).....	1215-0150
(g)(1) (i)--(iv).....	1215-0017
(g)(1) (v), (vi).....	1215-0150
(l) (1), (2).....	1215-0150
(q)(3).....	1215-0017

[48 FR 49762, Oct. 27, 1983; 48 FR 50529, Nov. 2, 1983, as amended at 61 FR 68663, Dec. 30, 1996]

<p>REGISTER OF WAGE DETERMINATIONS UNDER THE SERVICE CONTRACT ACT By direction of the Secretary of Labor</p> <p>Shirley F. Ebbesen Division of Wage Director Determinations</p>	<p>U.S. DEPARTMENT OF LABOR EMPLOYMENT STANDARDS ADMINISTRATION WAGE AND HOUR DIVISION WASHINGTON, D.C. 20210</p> <p>Wage Determination No.: 2007-0549 Revision No.: 2 Date of Last Revision: 03/26/2009</p>
---	--

State: Pennsylvania

Area: Pennsylvania County of Berks

Employed on U.S. Department of Homeland Security contract agreement (IGA) for prisoner detention services between

United States Immigration and Customs Enforcement and Prisoner Operations Division and Berks County Prison, PA.

The wage rates and fringe benefits paid by above company are hereby adopted as prevailing.

NOTE: Under Section 2(b)(1) of the Service Contract Act no employees shall be paid less than the minimum wage specified by Section 6(a)(1) of the Fair Labor Standards Act; \$6.55 per hour, effective July 24, 2008.

**** UNIFORM ALLOWANCE ****

If employees are required to wear uniforms in the performance of this contract (either by the terms of the Government contract, by the employer, by the state or local law, etc.), the cost of furnishing such uniforms and maintaining (by laundering or dry cleaning) such uniforms is an expense that may not be borne by an employee where such cost reduces the hourly rate below that required by the wage determination. The Department of Labor will accept payment in accordance with the following standards as compliance:

The contractor or subcontractor is required to furnish all employees with an adequate number of uniforms without cost or to reimburse employees for the actual cost of the uniforms. In addition, where uniform cleaning and maintenance is made the responsibility of the employee, all contractors and subcontractors subject to this wage determination shall (in the absence of a bona fide collective bargaining agreement providing for a different amount, or the furnishing of contrary affirmative proof as to the actual cost), reimburse all employees for such cleaning and maintenance at a rate of \$3.35 per week (or \$.67 cents per day). However, in those instances where the uniforms furnished are made of "wash and wear" materials, may be routinely washed and dried with other personal garments, and do not require any special treatment such as dry cleaning, daily washing, or commercial laundering in order to meet the cleanliness or

appearance standards set by the terms of the Government contract, by the contractor, by law, or by the nature of the work, there is no requirement that employees be reimbursed for uniform maintenance costs.

ATTACHMENT 7 – RESIDENTIAL STANDARDS LISTING

http://www.ice.gov/doclib/pi/familyresidential/admission_and_release.pdf

<http://www.ice.gov/doclib/pi/familyresidential/residentialfile.pdf>

http://www.ice.gov/doclib/pi/familyresidential/funds_and_personal.pdf

<http://www.ice.gov/doclib/pi/familyresidential/hungerstrikes.pdf>

<http://www.ice.gov/doclib/pi/familyresidential/medicalcare.pdf>

http://www.ice.gov/doclib/pi/familyresidential/suicide_prevention.pdf

http://www.ice.gov/doclib/pi/familyresidential/terminal_illness.pdf

http://www.ice.gov/doclib/pi/familyresidential/searches_of_residents.pdf

<http://www.ice.gov/doclib/pi/familyresidential/residentcensus.pdf>

http://www.ice.gov/doclib/pi/familyresidential/use_of_physical_force_and_restraints.pdf

http://www.ice.gov/doclib/pi/familyresidential/transfer_of_residence.pdf

http://www.ice.gov/doclib/pi/familyresidential/tool_control.pdf

http://www.ice.gov/doclib/pi/familyresidential/discipline_and_behaviormanagement.pdf

<http://www.ice.gov/doclib/pi/familyresidential/contraband.pdf>

<http://www.ice.gov/doclib/pi/familyresidential/postorders.pdf>

http://www.ice.gov/doclib/pi/familyresidential/key_and_lockcontrol.pdf

http://www.ice.gov/doclib/pi/familyresidential/sexual_abuse.pdf

http://www.ice.gov/doclib/pi/familyresidential/transportation_by_land.pdf

http://www.ice.gov/doclib/pi/familyresidential/environmentalhealth_and_safety.pdf

<http://www.ice.gov/doclib/pi/familyresidential/emergencyplans.pdf>

<http://www.ice.gov/doclib/pi/familyresidential/foodservice.pdf>

<http://www.ice.gov/doclib/pi/familyresidential/grievancesystem.pdf>

http://www.ice.gov/doclib/pi/familyresidential/resident_staff_communication.pdf

<http://www.ice.gov/doclib/pi/familyresidential/personalhygiene.pdf>

<http://www.ice.gov/doclib/partners/dro/opsmanual/legal.pdf>

<http://www.ice.gov/doclib/partners/dro/opsmanual/classif.pdf>

<http://www.ice.gov/doclib/partners/dro/opsmanual/corresp.pdf>

<http://www.ice.gov/doclib/partners/dro/opsmanual/grplegal.pdf>

<http://www.ice.gov/doclib/partners/dro/opsmanual/marreq.pdf>

<http://www.ice.gov/doclib/partners/dro/opsmanual/escort.pdf>

<http://www.ice.gov/doclib/partners/dro/opsmanual/recreat.pdf>

<http://www.ice.gov/doclib/partners/dro/opsmanual/cloth.pdf>

<http://www.ice.gov/doclib/partners/dro/opsmanual/teleacc.pdf>

<http://www.ice.gov/doclib/partners/dro/opsmanual/work.pdf>

<http://www.ice.gov/doclib/partners/dro/opsmanual/visit.pdf>

<http://www.ice.gov/doclib/pi/familyresidential/educationstandard.pdf>

http://www.ice.gov/doclib/pi/familyresidential/staff_hiring.pdf

<http://www.ice.gov/doclib/pi/familyresidential/religiouspractices.pdf>

http://www.ice.gov/doclib/pi/familyresidential/housekeeping_and_voluntarywork.pdf

EXHIBIT 44

A1023

Berks Family Residential Center

Bi - Annual Compliance Review Report

Prepared for:



Department of Homeland Security (DHS)
Immigration Customs and Enforcement (ICE)
Office of Detention and Removal (DRO)
Juvenile and Family Residential Management Unit (JFRMU)

By:

A handwritten signature in black ink, appearing to be "E.D. V. Sharkey".

The Nakamoto Group, Inc.

E.D. V. Sharkey
000182

A1024

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BACKGROUND:

Berks Family Residential Facility

U.S. Immigration and Customs Enforcement (“ICE”) established the Berks Family Residential Facility (“Berks”) in March 2001. Designed as a non-secure residential facility to accommodate the unique needs of undocumented children and their families, Berks became the first of its kind in the U.S. dedicated to keeping families and children together while undergoing immigration proceedings.

Located in Leesport, PA, the eighty-five (85) bed facility that was once a nursing home is nestled in a quiet, small-town community. Berks, along with the 512 bed T. Don Hutto Family Residential Facility (“Hutto”) in Taylor, Texas (established in May 2006), provides non-violent, non-criminal families with a variety of supportive services throughout their stay. Some of these services include:

- Access to on-site, routine medical, dental and mental health care provided by the Division of Immigration Health Services (“DIHS”);
- Educational courses for school age children 5 days per week;
- English as a second language (ESL) classes for adults;
- Age and culturally and linguistically appropriate recreational activities for residents;
- On-site spiritual support ; and
- On-going access to case management services which ensures each resident has access to legal services and social supports.

In addition, each facility is staffed with professionals, paraprofessionals, and officers who undergo training in areas related to the Family Residential Standards (“Standards”) to ensure the provision of safe and humane care to residents.

Compliance Support

Since September 25, 2007, the Nakamoto Group has provided contractor and compliance support services to the Juvenile and Family Residential Management Unit (“JFRMU”) of the Office of Detention and Removal Operations (“DRO”). Created in March 2007, JFRMU serves to optimize DRO’s ability to manage ICE’s immigration policy as it pertains to undocumented and unaccompanied children and their families. To fulfill part of this mission and to ensure the highest level of care and treatment for residents within ICE custody, the JFRMU contracted the services of the Nakamoto Group to assist with providing support and consultation in the areas of family services, education, primary and mental health care, youth and adolescent care and development, and facility development and compliance.

Presently, the Nakamoto Group continues to provide compliance support services to the JFRMU which is inclusive of routine facility inspections, annual compliance reviews, consultation services, and specialized compliance support services. In April 2008, for instance, for eight (8) weeks, the Nakamoto Group's Juvenile and Corrections Subject Matter Experts ("SMEs") provided on-site and telecommuting guidance in several areas, to include: policy and procedure development; fire safety and inspections; resident intake and orientation procedures; and recruitment and training needs. The SME worked closely with Berks facility administrators and staff providing recommendations for facility and service enhancement. Most recently, the JFRMU requested and obtained the assistance of a full-time Compliance Reviewer to provide additional specialized support services, including monthly inspections of each Family Residential Facility. In addition to reviewing areas of the facility each month for compliance, a monthly report of findings is also submitted to the JFRMU to aid facilities in their on-going efforts to achieve 100% compliance with the Family Residential Standards. Finally, as it is JFRMU's personal mission to have each facility achieve 100% compliance, a bi-annual compliance review process was implemented. Hence, approximately every six (6) months, the Nakamoto Group conducts a full review of each Family Residential Facility and provides a report of findings to the JFRMU. This report follows the second review of the Berks Family Residential Facility and includes a summary of findings.

Summary of Previous Findings

During the week of July 14th - 17th 2008, six (6) members of the Nakamoto Group's Compliance Review Team ("Team") completed the first compliance review of the Berks Family Residential Facility. The Team was impressed with the strides Berks made in incorporating recommendations from the specialized compliance support services provided in April 2008, as well as additional enhancements and revisions to the facility. Utilizing an older rating system, Berks achieved 78% compliance by obtaining a rating of "Exceptional" or "Standard" (translating as "Compliant" with the current rating system¹) on 29 of the 37 Family Residential Standards. Eight (8) of those Standards were rated as "Inadequate" (translating as "Not Compliant" with current rating system) during the baseline review. (Reference *Matrix A* for an overview of rated Standards).

Recommendations for enhancements were provided by the Compliance Review Team and both Berks and ICE administrators worked to incorporate recommendations. Following is an overview of the second and most recent review of the facility. It is the hope of the Nakamoto Compliance Review Team that ICE/JFRMU staff and Berks administrators find the information presented in this report to be beneficial to the ongoing development and compliance attainment of the facility, as well as the continued care of its residents.

¹The older rating system included a four (4) item compliance scale consisting of "Exceptional", "Standard", "Minimal", and "Inadequate" ratings. These ratings indicated the facility's level of compliance as compared to the requirements outlined in the Family Residential Standards ("Standards") established on December 21, 2007.

OVERVIEW**Bi-Annual Compliance Review**

During the week of February 17th – 20th, 2009 five (5) members of the Nakamoto Group's Compliance Review Team ("Team") conducted a bi-annual review of the Berks Family Residential Facility. Members of the Team included the following Subject Matter Experts ("SMEs"):

- [REDACTED] **Program Manager/ Team Leader**
Certified Financial Planner (C.F.O.)
- [REDACTED] **Program Analyst/Mental Health SME**
Doctor of Education, Candidate (Ed.D.(c))
Master of Social Work (MSW)
Licensed Independent Clinical Social Worker (LICSW)
- [REDACTED] **Juvenile Correction SME**
Master of Education in Psychology (M.Ed.)
Bachelor of Arts in Psychology (B.A.)
Certified Alcohol and Substance Abuse Counselor
- [REDACTED] **Medical SME**
Medical Doctor (M.D.)
Doctor of Philosophy in Environmental Biology (Ph.D.)
Master of Public Health (M.P.H.)
- [REDACTED] **Education & Development SME**
Early Childhood Education- All But Dissertation (ABD)
Master of Arts Early Childhood Education (M.A.)
Bachelor of Arts Public Administration (B.A.)

Compliance Ratings

As indicated previously, to conduct the review, the Team utilized a revised version of the Facility Compliance Monitoring Tool ("Monitoring Tool"). The revised Monitoring Tool was modified to include a two (2) item response scale consisting of "Compliant" and "Not Compliant" ratings. In addition, where the previous Monitoring Tool utilized a quantitative scoring system to determine degree of compliance, the revised version omitted quantitative indicators as it is the goal of the JFRMU that facilities achieve compliance for 100% of items. Hence, the following operational definitions were developed:

- **Compliant** –Facility is operating as required for this Standard and is found to be compliant in the majority of target component areas for this Standard. Minimal, if any, suggestions are indicated and are not vital to effective operation of the facility.
- **Not Compliant** - Facility is not operating as required for this Standard and has less than majority compliance in target component areas for this Standard. Facility is recommended to

implement suggestions within 90 days of site visit report. Documentation of implementation to be received by ICE/DRO within 90 days. Revisit of facility may be warranted.

Further, the revised version of the Monitoring Tool also includes a “Life Health Safety” or “LHS” component document. Developed as a succinct way to review the most critical operational areas of the facility, the LHS document is compiled of component items derived from select ICE/DRO Family Residential Standards (Reference “LHS Components” attached) and replaces the quantitatively scored “Critical Components” section utilized in previous versions of the Monitoring Tool. In general, LHS components are considered to be those by which non-compliance may *significantly*:

- Impair the health and safety of residents and/or staff;
- Diminish the basic quality of life afforded to residents; and
- Undermine the mission and mandate of JFRMU to appropriately manage ICE’s immigration policy as it pertains to undocumented families with children and protecting their safety and dignity.

Rating of the LHS document followed the “Compliant” and “Not Compliant” format with a preponderance of “Not Compliant” ratings resulting in an overall rating of “Not Compliant” for LHS. Per the JFRMU, such a rating warrants a 15-30 day plan of action response by the facility following receipt of report.

Organization of the Report

This report provides outcomes and recommendations regarding the Berks review based upon the assessment of the thirty-seven (37) Family Residential Standards in accordance with the aforementioned rating scale. Included in this report are (in-order):

1. Areas of Best Practice
2. Summary of findings
3. Recommendations for Improvement

AREAS OF BEST PRACTICE

Review and observation of the facility’s operation revealed that Berks administrators, along with ICE officials, continue to strive to implement recommendations as well as maintain previous levels of best or standard practices. As found previously, several areas of facility operations were found to be well above Standard requirements by way of implementation and practice. These areas are cited as “Best Practices” for a juvenile and family care facility and include the following:

Recreation

Recreation continues to be a strong program within the facility and a model program for a children and family residential center. The program is well organized, services are tailored for specific age groups, and all services are appropriately and thoroughly documented. The program has also involved the community in previous endeavors and has established plans to continue encouragement of community involvement.

Religious Practices

The Religious Services program at the Berks facility is one that is of significant importance to residents. As such, the facility contracted a full-time chaplain to provide services for residents and to ensure spiritual needs are addressed. Since his beginning with the facility approximate seven (7) months ago, current residents reference the Chaplain, and the ability to freely engage in religious practices, as being significant sources of support. Volunteers are also in place to provide additional spiritual support services (e.g., Mass services); making the Religious Services program a strong and vital component within the facility.

SUMMARY OF FINDINGS

Overall, Berks continues efforts to incorporate recommendations as well as feedback from consultants and ICE/DRO/JFRMU to enhance facility operation and services. Such implementation has led to Berks rating as "Compliant" in 30, or 81%, of the 37 assessed domains (not including the LHS items; reference Matrix B for performance summary). A complete outline of findings is as follows (in alphabetical order):

COMPLIANT: *The following 30 Standards were rated as "COMPLIANT":*

1. Contraband
2. Correspondence and Other Mail
3. Discipline and Behavior Management
4. Environmental Health and Safety
5. Escorted Trips for Non-Medical Emergencies
6. Funds and Personal Property
7. Grievance System
8. Hunger Strikes
9. Key and Lock Control
10. Law Libraries and Legal Materials
11. Legal Rights Group Presentations

12. Marriage Requests
13. Medical Services
14. News Media Interview and Tours
15. Personal Hygiene
16. Post Orders
17. Recreation
18. Religious Practices
19. Resident Census
20. Resident's Files
21. Searches of Residents
22. Staff Hiring and Training
23. Staff-Resident Communication
24. Telephone Access
25. Terminal Illness and Advanced Directives
26. Tool Control
27. Transfer of Residents
28. Transportation (Land)
29. Use of Physical Force and Restraints
30. Visitation

NOT-COMPLIANT: *The following 8 items were rated as "NOT COMPLIANT" (7 of the Standard items plus Life, Health and Safety)*

1. Admissions and Release
2. Educational Policy
3. Emergency Plans
4. Food Service
5. Housekeeping and Voluntary Work Program
6. Life, Health and Safety (LHS) Critical Components

7. Sexual Abuse and Assault Prevention and Intervention

8. Suicide Prevention and Intervention

RECOMMENDATIONS FOR IMPROVEMENT

The following section provides recommendations to improve facility operations based upon the Family Residential Standards. Designed to accompany the completed Monitoring Tool (attached), and therefore not exhaustive of items found to be non-compliant, this section highlights components that are suggested as priority when developing a corrective plan of action. Section A provides compliance recommendations for those Standards rated as “Not-Compliant”, to include areas deemed by the Team as *critical* areas of focus. Section B provides compliance recommendations for those Standards rated as “Compliant”. While not necessarily considered critical, these recommendations support guidelines as indicated in the Standards and will serve to enhance facility operations.

SECTION A:

Not Compliant Ratings

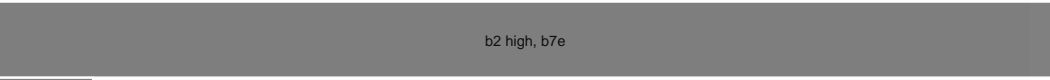
Life, Health and Safety (LHS) (CRITICAL)²

Areas of non-compliance:

- One of the washbasins and showers in the men’s restroom was found to have only cold water. Another shower area found the temperature to be 87 degrees Fahrenheit (below the required 100-120 degrees Fahrenheit). Although staff indicated they had received complaints about water being too hot in the facility and adjusted temperatures accordingly, the work order had not been resolved to allow for corrected water temperatures and the availability of hot water at the time of the review (Reference: Personal Hygiene, p. 3; #5).
- Arriving residents do not receive a handbook that details the facility rules in a language the resident understands. Although handbooks exist within the facility, they are only provided in English and residents are not provided with individual copies. Instead, one copy is provided for each residential wing within the facility. The present handbook is being translated in Spanish. However, due to the length of time (7 month) that the handbook has been out for translation, some of the information contained will require updating. In addition, residents are not provided with a formal orientation of the facility operations. Although forms are provided for residents to sign, a full overview regarding

² Due to the critical nature of the overall LHS components, it is listed first in order of Non-Compliance.

facility operations, rules, guidelines, tour of facility, introduction to staff, etc...is not provided (Reference: Admissions and Release, p. 7; #6; p. 7, #5.).

- Arriving residents receive a medical screening upon intake; however, in accordance with the Standards and the facility's policy, residents are not screened with any "immediacy" or within the one hour time period outlined within the facility's policy. In addition, intake mental health screenings are not conducted by an appropriately trained staff person or licensed health care provider (Reference: Admissions and Release, p. 6, section h; Medical, p. 13, section 9c).
- The facility does not have an emergency plan that is in line with Standard requirements. Although the facility has developed a policy and is in the process of implementing a plan, at the time of the review, effective practices and procedures, to include training and annual drills, were not in place (Reference: Emergency Plans, p. 1, Section II.2; p. 10, Section n).
- Environmental Health policy and practices do not include fire prevention control and evacuation plan and a chemical control plan (Reference: Environmental Health and Safety, p. 1, Section II, #2).
- Non-inventoried chemicals were located on the facility's premise. (Reference: Environmental Health and Safety, p. 11; Section II, #2).
-  (Reference: Key Control, Section V.6.).
- Health areas do not have their own designated perimeter with restricted access. Due to current facility logistics, medical exam areas are not isolated. Instead, exam areas are along a main corridor of the facility permitting easy viewing in rooms when doors open. In addition, waiting areas for medical services are also located along a main corridor of the facility. (Reference: Medical Care, p. 8, Section 4a).

Recommendations:

- Prioritize completion of the work order to ensure hot water is available and at a temperature comfortable for residents.
- Provide individual copies of resident handbooks to residents upon entry and ensure copies are available in a language the resident understands.
- Develop a formalized orientation/intake process to include, *at a minimum*: screening of residents for mental health concerns by appropriately trained or licensed health care provider; tour of facility for new residents; full overview of facility operation and

guidelines; introduction of new residents to staff members; and training of all staff on intake procedures, to include cultural awareness and sensitivity issues.

- Implement and provide training on Emergency Plans.
- Update Environmental Health policy and ensure practices include fire prevention control and evacuation plan and a chemical control plan.
- [REDACTED] b2 high, b7e
- Per discussions with staff, revisions continue to be underway at the facility to allow for a private health care area for medical staff and residents. To ensure resident privacy and minimize health concerns, priority of this task is recommended.

Admissions and Release

Areas of non-compliance:

- **CRITICAL:** The Admissions and Release policy does not include a reference indicating searches of children without a parent are not permitted (Reference: Admissions and Release, Section V.C.)
- **CRITICAL:** [REDACTED] b2 high, b7e
[REDACTED] b2 high, b7e (Reference: Admissions and Release, Section V.C.).
- For lost property claims, the facility provides residents with a staff request form and requests are responded to by ICE staff; however,, staff do not document lost property claims by residents in files (Reference: Admissions and Release, Section V.f.).

Recommendations:

- Update facility policy to ensure all staff are aware of and practice dictates that [REDACTED] b2 high, b7e
[REDACTED] b2 high, b7e
- Discontinue practice of [REDACTED] b2 high, b7e
[REDACTED] b2 high, b7e
- Update practices to ensure appropriate documentation of lost property claims by residents.

Educational Policy

Areas of non-compliance:

- **CRITICAL:** Pre-kindergarten instruction is not provided to eligible four-year-old children. A resource room is available for children five years of age and for children in need of English as a Second Language (ESL) services and/or more academic preparation (Reference: Educational Policy, p. 2; Section 1h).
- Documentation of educational staff training was not available at time of review. Documentation is maintained in educator files off site (Reference: Educational Policy, p. 5, Section 6f; p. 7, Section 11a).
- Special needs educational assessments are not administered to each student upon arrival (Reference: Educational Policy, p. 2; Section 1g).
- Library holdings are not sufficient in quantity or language diversity for resident's use (Reference: Educational Policy, p. 6, Section 8a).
- A bookmobile is used in lieu of an on-site residential library. The Standards mandate an on-site library be available and an offsite system is not used as an alternate (Reference: Educational Policy, p. 6; 8b).

Recommendations:

- Adapt educational program to provide pre-kindergarten and kindergarten services as required for eligible children four-year olds and up.
- Obtain copies of staff training and other relevant documents and maintain on-site in staff files.
- Develop a formalized system to conduct special educational needs assessments for all school-age residents.
- Collaborate with community resources to enhance diversity and availability of books for resident's use on-site.

Emergency Plans

Areas of non-compliance:

- **CRITICAL:** The facility has developed an emergency plan *policy* and made contacts with local responders. However, the policy does not take the place of a well written, well rehearsed, and well critique emergency plan (Reference: Emergency Plans: Section V.3.a.2).

- Documentation of once a month emergency list call-down procedure is not available (Reference: Emergency Plans: p. 7; Section C).
- Although a policy has been developed, several specified areas of security and other planning components are not included (Reference: Emergency Plans: p. p. 5; p. 6; p. 6; Section V.B; Section V.J., Section V.M.).

Recommendation:

- The facility has not developed a local emergency plan but has been part of a county wide emergency system. While this serves to support the facility, it does not provide the level of preparedness required in the facility as required by the Standards. Priority in the development of a facility-specific Emergency Plan and training on such plan is warranted.

Food Service

Areas of non-compliance:

- **CRITICAL:** Timelines from the evening meal to breakfast exceed the timelines as established by the Standard (no more than 14 hours) (Reference: Food Service, p. 6; Section 4a).
- **CRITICAL:** Maintenance of information regarding resident's medical diets does not meet Standard requirements. For instance, facility staff receive notification from residents regarding special dietary needs. Food Service staff (who are located in another facility) obtain resident dietary information from facility staff. Due to lack of effective communication, food service staff do not maintain updated information regarding residents' dietary needs. (Reference: Food Service, p. 16; Section 7a)
- **CRITICAL:** Menus at the facility are changed without consideration of two hot meals per day and with no documentation provided to show changes – resulting in meal selections that are not being appropriately reviewed for nutritional needs/content as required by the Standards. (Reference: Food Service, p. 17, Section 8b).
- A kosher meal system is not in place to meet the needs of participating residents (Reference: Food Service, p. 12; p.15, #2).
- Residents working in the food service area (sanitation) are not provided with training and a supervisor is not assigned to the dining area (Reference: Food Service, p. 4, Section c; p. 7, Section b).

Recommendations:

- Establish a timeline for meals that minimizes the 14 hour gap between the evening and breakfast meals. Presently, serving dinner at 4:30 P.M. should be reviewed to consider later evening feeding.
- Establish a system of communication and accountability that ensures resident's medial and religious meal needs are met.
- Work with licensed nutritionist to develop menu items and ensure a system of accountability whereby menu changes must be reviewed and signed off on by the Facility Administrator with notification to ICE as to when and why menu was changed.
- Provide training to residents working in food service and other areas of the facility and ensure documentation of training is maintained. In addition, assign a supervisor to oversee the dining area during meals.

Housekeeping and Voluntary Work Program

Area of non-compliance

- **CRITICAL:** Appropriate training is not available for all residents. For instance, the facility has a limited number of residents that are assigned mainly to the kitchen area sanitation employees. Resident's files did not include required training, job descriptions, and agreements required by the Standards. The facility also has a house keeping plan that requires all adult residents to clean various areas of the facility on a rotating basis, however, training on chemicals was not provided in areas such as "Right to Know" as required by OSHA and the State laws (Reference: Housekeeping and Voluntary Work Program, Section V. 11).

Recommendation:

- In accordance with the Standard, ensure all residents are provided appropriate training in areas of work. Include documentation of training in residents' files.

Sexual Abuse and Assault Prevention and Intervention

Areas of non-compliance:

- **CRITICAL:** The training coordinator has been assigned as the Sexual Abuse Coordinator. However, the training coordinator is not on-site to ensure ongoing availability to residents (currently located at Juvenile Facility). Additionally, residents are not aware of policies or information regarding sexual abuse and sexual harassment. Documentation is provided on a laminated board near the phone areas in each wing and documents are signed during intake, however verbal discussion regarding resident rights and behavioral expectations while at the facility is not provided to residents. (Reference: Sexual Abuse and Assault Prevention and Intervention, page, 3; paragraph 3; C).

- The facility follows both its own and DIHS national policy. However, the policies are not clear regarding the provision of prevention (e.g., discussion of residents' rights) or discipline/prosecution of assailants. (Reference: Sexual Abuse and Assault Prevention and Intervention, page, 2; Section B).
- Facility policy does not include ICE/DRO and JFRMU as contacts in the event of allegations of sexual misconduct (Reference: Sexual Abuse and Assault Prevention and Intervention, page, 6; #2).

Recommendations:

- Officially appoint a coordinator for the Sexual Abuse and Assault Prevention program who, *at a minimum*: is on-site and available for residents and staff; has appropriate background/training/credentials in topic area; is in charge of ensuring resident's awareness of rights and responsibilities; and who collaborates with staff in the development and review of site specific policies, orientation programs, and trainings.
- Facility staff and DIHS collaborate to develop a clear, site specific policy that addresses requirements indicated in the Standards.

Suicide Prevention and Intervention

Areas of non-compliance:

- **CRITICAL:** A suicide/homicide screening is currently conducted at resident intake; however, this screening is not a standardized screening tool/assessment and is not conducted by specially trained staff or a licensed health care provider.
- The date of the last policy revision was 2005. The Standard requires an annual review (Reference: Suicide Prevention and Intervention, page 1; Section V1).
- The suicide and prevention training program did not include requisite components such as guidelines for returning a previously suicidal resident to the general population (Reference: Suicide and Prevention Intervention, pages 1-2).

Recommendations:

- Include DIHS staff members in the intake screening process and/or provide specific, ongoing training for designated intake staff in the area of Suicide Prevention and Intervention to include, at a minimum: practice, observation, and cultural and linguistic sensitivity. Additionally, incorporate the use of standardized screening/assessment tools.
- DIHS and ICE/JFRMU collaborate to develop an institutionally-based Suicide Prevention and Intervention policy that meets the requirements outlined in the Standard, to include an annual review.

SECTION B:

General Compliance Recommendations (in alphabetical order)

Contraband

Area of non-compliance:

- A review of contraband definition and policies and procedures are not provided to residents at intake (Reference: Contraband, Section II.4).

Recommendation:

- Develop a formalized orientation process to include review of specific topics, such as contraband, as required by the Standards.

Discipline and Behavior Management

Areas of non-compliance:

- Current rules established for facility residents do not distinguish between age appropriate behaviors for children and adults (Reference: Discipline and Behavior Management, p. 3, paragraph 5).
- The behavior management program does not include systemic feedback from staff to each resident as required by the Standard. (Reference: Discipline and Behavior Management, p. 3, paragraph 4).
- Although a policy is in place, low level rule infractions are not investigated (Reference: Discipline and Behavior Management, p. 8, MRC)

Recommendations:

- Develop rules/codes of conduct that account for and distinguish between age appropriate behaviors. Ensure rules/codes of conduct are reviewed verbally with staff and residents and ample opportunities are provided for residents to seek clarification. Also, ensure rules/codes of conduct are posted conspicuously in languages residents understand.
- In accordance with the Standards, incorporate a systemic feedback system from staff to residents as part of the behavior management program.
- Develop practice that follows policy guidelines with regard to investigation of infractions. Ensure full documentation of practice in residents' file and develop practice that ensures residents understand of processes and outcomes.

Environmental Health and Safety

Area of non-compliance:

- **CRITICAL:** During the review, chemicals were found in the food service area that did not have accompanying Material Safety Data Sheets (MSDSs) as required by the Standard and the Occupational Health and Safety Administration.(OSHA) (Reference: Environmental Health and Safety, Section V.3a).

Recommendation:

- Ensure all chemicals are appropriately recorded in accordance with Standard and OSHA law. Conduct mandatory staff training to review importance of adherence to policy and following Standard and OHSA guidelines.

Resident Census

Area of non-compliance:

- During the e review, records found the facility to be in compliance with the Standard requirement of [REDACTED] b2 high, b7e However, residents' doors were opened at 6:00 a.m. to begin census, although breakfast did not begin until 7:30 a.m. and school later. While adhering to the Standard, this domain was found non-compliant as practice was not in line with the intention of establishing an "orderly" census for residents (Reference: Resident Census, Section V.1).

Recommendation:

- Staff were made aware of this issue at the time of the review and have made plans to take corrective action. Follow up on actions taken and documentation to ICE/JFRMU is recommended.

Staff Hiring and Training

Area of non-compliance:

- The cultural and linguistic competency and cultural diversity training programs warrant additional development (Reference: Staff Hiring and Training p. 8; Section B).

Recommendation:

- Utilize community resources (e.g., local cultural diversity groups/programs), facility staff and resources (e.g., DIHS Mental Health providers), and other sources of support to strengthen and implement on-going cultural and linguistic competency training for staff.

Transportation

Area of non-compliance:

- Transportation post order and emergency plan does not include all information as required by the Standard (Reference: Transportation [Land Transportation], pp. 11-13).

Recommendation:

- Update post order and emergency plan accordingly.

SUMMARY

The Bi-Annual Compliance Review of the Berks Family Residential Center revealed that facility administrators and ICE/JFRMU staff continue efforts toward achieving 100% compliance. ICE/JFRMU's diligence of instituting a full-time compliance reviewer to assist the facility by having monthly inspections will serve to aid the facility compliance efforts. In addition, the care and compassion displayed by staff for residents, the ongoing interaction between staff and residents, and the consistent communication between ICE/JFRMU and Executive facility staff all contribute to the structural and procedural enhancements that are evident since the first review.

Overall, Berks' greatest asset continues to be its staff. With the addition of DIHS personnel for medical and mental health services and the religious staff to address the on-going spiritual needs of residents, the facility is beginning to branch out in the provision of more comprehensive and innovative services. Combining this with the implementation of recommendations provided in the report could aid the facility in achieving its goal of 100% compliance in the future.

MATRIX B: Performance Matrix Summary of Findings from Bi-Annual Review

Berks Family Residential Facility
Bi-Annual Compliance Review Performance Matrix
 February 2009

Standard	Compliant	Not Compliant
Admissions and Release		X
Contraband	X	
Correspondance	X	
Discipline and Behavior Management	X	
Educational Policy		X
Emergency Plans		X
Enviornmental Health	X	
Escorted Trips	X	
Food Service		X
Funds and Personal Property	X	
Grievance	X	
Housekeeping/Volunteer Work		X
Hunger Strikes	X	
Key and Lock Control	X	
Law Libraries	X	
Legal Rights Group	X	
Life, Health and Safety (LHS)		X
Marriage Requests	X	
Medical Care	X	
News Media and Tours	X	
Personal Hygiene	X	
Post Orders	X	
Recreation	X	
Religious Practices	X	
Resident Census	X	
Resident's Files	X	
Searches of Residents	X	
Sexual Abuse and Assault Prevention		X
Staff Hiring and Trainig	X	
Staff-Resident Communication	X	
Suicide Prevention		X
Telephone Access	X	
Terminal Illness	X	
Tool Control	X	
Transfer of Residents	X	
Transporation (Land)	X	
Use of Physical Force and Restraints	X	
Visitation	X	

MATRIX A: Summary of Findings from Baseline Review

**Berks Family Residential Facility
Baseline Compliance Review Report**

Performance Summary Matrix

Standard	Exceptional	Standard	Minimal	Inadequate
Admissions and Release	X			
Contraband	X			
Correspondance	X			
Discipline and Behavior Management				X
Educational Policy	X			
Emergency Plans				X
Enviornmental Health				X
Escorted Trips	X			
Food Service	X			
Funds and Personal Property	X			
Grievance	X			
Housekeeping/Volunteer Work		X		
Hunger Strikes	X			
Key and Lock Control				X
Law Libraries	X			
Legal Rights Group		X		
Marriage Requests	X			
Medical Care		X		
News Media and Tours	X			
Personal Hygiene	X			
Post Orders		X		
Recreation	X			
Religious Practices	X			
Resident Census	X			
Resident's Files		X		
Searches of Residents	X			
Sexual Abuse and Assault Prevention				X
Staff Hiring and Trainig				X
Staff-Resident Communication	X			
Suicide Prevention				X
Telephone Access	X			
Terminal Illness	X			
Tool Control				X
Transfer of Residents	X			
Transporation (Land)		X		
Use of Physical Force and Restraints	X			
Visitation		X		

The Nakamoto Group, Inc.

E.D. v. Sharkey
000202

A1044

OFFICE OF DETENTION AND REMOVAL
FAMILY AND RESIDENTIAL STANDARDS

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION

PURPOSE AND SCOPE: This Residential Standard requires that facilities that house ICE/DRO residents/residents in residential facilities affirmatively act to prevent sexual abuse and assaults on residents, 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.

EXPECTED OUTCOMES: The expected outcomes of this Residential Standard are as follows:

1. Sexual abuse and assault of residents will be prevented.
2. Residents will be informed about the facility's sexual abuse or assault prevention and intervention program.
3. Residents will be screened to identify those likely to be sexual aggressors or sexual victims and will be housed to prevent sexual abuse or assault.
4. All allegations of sexual abuse or assault will be promptly and effectively reported and investigated.
5. If sexual abuse or assault of any resident occurs, the medical, psychological, safety, and social needs of the victim will be promptly and effectively met.
6. Where possible and feasible, a victim of sexual assault will be referred under appropriate security provisions to a specialized community facility for treatment and gathering of evidence.
7. Assaultants will be controlled, disciplined, and/or prosecuted.
8. Sexual conduct between staff and residents, volunteers, or contract personnel and residents, regardless of consensual status, will be prohibited and subject to administrative, disciplinary, and criminal sanctions.
9. All case records associated with claims of sexual abuse, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendation for post-release treatment and/or counseling will be retained in accordance with an established schedule.
10. Each facility will separately track incidents of sexual abuse and assault.

OFFICE OF DETENTION AND REMOVAL
FAMILY AND RESIDENTIAL STANDARDS

11. Where required, residents have regular access to translation services and/or are provided information in a language that they understand.
12. The standard complies with federal laws and with DHS regulations regarding residents with special needs.

REFERENCES: The First National Residential Standards were written using a variety of methodologies including previous and current practices, review and comment from various subject matter experts, review and comment from various government and non-government organizations, and review of current state codes in Pennsylvania and Texas. Each standard is written in a manner that affords each resident admission and continuous housing to a family residential facility in a dignified and respectful manner. There are no specific codes, certifications, or accreditations that deal specifically with unique management requirements of families awaiting the outcome of their immigration proceeding in a non-secure custodial environment.

4-ALDF-4D-22, 4D-22-1, 4D-22-2, 4D-22-3, 4D-22-4, 4D-22-5, 4D-22-6, 4D-22-7, 4D-22-8, 2A-29.

Prison Rape Elimination Act of 2003 (PREA)

To determine this rating the reviewer will:

- Review policy and procedure guidelines
- Interview staff and residents to validate knowledge of policy
- Review resident orientation handbook.
- Review resident files.
- Review housing unit bulletin boards for information.

OFFICE OF DETENTION AND REMOVAL
FAMILY AND RESIDENTIAL STANDARDS

PERFORMANCE STANDARDS

Policy and Procedures

Components	Compliant	Not Compliant	Remarks
1. Policies and procedures address: Ref: p. 2; B			
a. Prevention	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Not clearly outlined in policy
b. Prompt and effective intervention procedures that address the safety and treatment needs of resident victims in case of assault	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Investigation, discipline, and prosecution of assailants	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Not clearly outlined in policy(discipline/prosecution)
2. Policy identifies specific site staff resources as well as specialized community based services such as rape crisis/trauma units, clinics and hospitals. Ref: p. 3; para 1; bullet 2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Policy indicates that any staff, contractor or volunteer as alleged perpetrators are to be reported to the facility administrator, highest ranking ICE/DRO representative, JFRMU Chief and the respective Field Office Director. Ref: p. 6; #2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	JFRMU Chief not mentioned in policy. Although contact with ICE/DRO representative is noted (presume appropriate line of communication is from ICE/DRO to JFRMU Chief).
4. Policy and procedure provides guidance on investigation of sexual assault to include treatment and gathering of evidence. Ref: p. 7; para 1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Staffing

Components	Compliant	Not compliant	Remarks
5. A coordinator has been designated to oversee the Sexual Abuse and Assault Prevention and Intervention Program Ref: p. 3; C	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Policy indicates training coordinator oversees SAAP Program. However, the training coordinator is not on-site and, therefore, not fully accessible to residents.
6. An ICE staff member is designated to conduct investigations of sexual abuse or assault incidents. Ref: p. 6; j; JFRMU Req.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Policy and procedure manual indicates program manger is responsible for conducting investigations. JFRMU requirement is that ICE staff conduct investigations.

OFFICE OF DETENTION AND REMOVAL
FAMILY AND RESIDENTIAL STANDARDS

Files

Components	Compliant	Not Compliant	Remarks
7. Both General Files and Investigative Files are maintained within the facility for Sexual Abuse/Assault cases. Ref: p. 7; M	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Facility indicates there have been no incidents of sexual assault/abuse/harassment cases reported by or on behalf of residents. There were no files to review in this regard. Policy does not provide information on development of file system.
8. General Files include victims and assailants of a sexual assault, crime characteristics and formal and/or informal action taken. Ref: p. 7; M	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Investigative files include all reports, medical forms, supporting memos and videotapes, and any other evidentiary materials pertaining to the allegation. Ref: pp. 7&8; M	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

OFFICE OF DETENTION AND REMOVAL
FAMILY AND RESIDENTIAL STANDARDS

Standard: Sexual Abuse/Assault

Facility: Berks

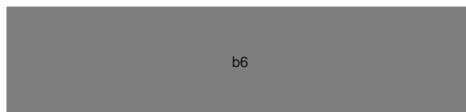
Reviewer's Notes:

The facility aims to be in compliance with Standard and has made positive stides. However, lack of resident's awareness regarding rights, limited availability of information regarding behavioral guidelines and expectations, and failure to assign an on-site program coordinator for residents warrants a non compliant rating.

Compliance Rating:

- Compliant
 Not Compliant

Reviewer's Signature



Date: 02/18/2009

COMPLIANCE RATING DEFINITIONS:

Compliant - Facility is operating as required and is found compliant in the majority of general component areas. Facility recommended for passing of the standard with adoption of suggested recommendations, if any. Implementation of suggestions should be documented and available for review.

Non Compliant - Facility fails to meet the minimal requirements for effective operation. Facility is recommended to implement suggestions within 90 days of site visit report. Documentation of implementation must be received by ICE/DRO within 90days. Revisit of facility may be warranted.

EXHIBITS 45-48

FILED UNDER SEAL

CERTIFICATE OF FILING AND SERVICE

I, Elissa Diaz, hereby certify pursuant to Fed. R. App. P. 25(d) that, on August 6, 2018, the foregoing Joint Appendix Volume II and IV for Defendants-Appellants was filed through the CM/ECF system and served electronically, as well as Express mail those not ECF registered.

Via Express Mail

Daniel Sharkey
223 S. 7th Avenue
Reading, PA 19611

Via ECF Notification

Su Ming Yeh, Esquire
Angus R. Love, Esquire
Pennsylvania Institutional Law Project
718 Arch Street, Suite 304S
Philadelphia, PA 19106
Attorneys for Plaintiff
Matthew Archambeault, Esquire
1420 Walnut Street
Suite 1188
Philadelphia, PA 19102

Unless otherwise noted, copies have been sent to the court on the same date as above for filing via Express Mail.

/s/ Elissa Diaz

Elissa Diaz